

MANAGEMENT OF *STRI* – *VANDHYATAVA* DUE TO PCOD WITH SARCOIDOSIS – A CASE REPORT

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ABSTRACT

PCOD/ PCOS/ SteinLeventhal-syndrome / functional ovarian hyperandrogenism / ovarian hyperthecosis/ sclerocystic ovary syndrome is a heterogeneous disorder not merely dysfunction of ovaries; but it's a systemic, endocrine & also a metabolic disorder. Symptoms like menstrual irregularities, hirsutism, acne, hair loss, skin problems, obesity and fertility are only the tip of the iceberg. It is the more serious health problems like Infertility, DM, cancer, cardiovascular diseases that are the actual worries.

Sarcoidosis is also known as *Besnier-Boeck-Schaumann* disease. It is a disease which involves abnormal collections of inflammatory cells. These inflammatory cells form lumps which are known as granulomata. Most commonly this disease begins in the lungs, skin, or lymph nodes. Less commonly it affects the eyes, liver, heart, and brain. Any organ, however, can be affected.

Ayurveda, mainly aims at the treatment of diseases as well as maintenance of health. Ayurveda mainly emphasizes on the *Doshas* and *Dushyas* involved, in understanding the manifestation of the disease rather than its nomenclature.

Any type of disease or *Vikara* is generated when the vitiated *Dosha* resides in *Dhatu* or in *Mala* or in both. When the vitiated *Doshas* are attached to a particular *Dhatu* and produce any kind of malformation in the production or even alter the functions of the related *Dhatu*, then it is termed as *Dhatu Pradosaja Vikara*. Sarcoidosis is one such condition.

Keywords: PCOD, PCOS, Sarcoidosis, Ayurveda, *Dhatu Pradoshaja Vikara*

INTRODUCTION: The importance of a child in a woman gives her love, strength, happiness, and professional excellence, widespread influence, fame, utility to the world and getting happiness at later stages, says *Caraka Samhita*. PCOS is a heterogeneous disorder not merely dysfunction of ovaries; but it's a systemic, endocrine & also a metabolic disorder^[1]. Women with PCOS are at high risk of developing infertility, endometrial hyperplasia, endometrial cancer, Insulin resistance, hypertension, cardio vascular diseases, weight gain and miscarriage.

Sarcoidosis is also known as *Besnier-Boeck-Schaumann* disease. It is a disease which involves abnormal collections of

inflammatory cells. These inflammatory cells form lumps which are known as granulomata^[2]. This condition can be understood as *Dhatu Pradosaja Vikara*.

Background: *Vamana* has a definite role in the management of PCOD and sarcoidosis as it can be performed irrespective of *Kaphakala* in both these disease conditions. When a patient comes in contact with the different types of etiological factors, vitiation of *Kapha Dosha* takes place, leading to the obstruction of the *Srotas*. It has been mentioned that the obstruction is produced due to dominance of *Kapha Dosha*.^[3] Due to this obstruction *Vata* is vitiated. *Vimarga Gati* of *Vata* is produced because

of the blockage of *Kapha*, *Pranavaha* and *Udakavaha Srotas* are involved sarcoidosis. The treatment for Sarcoidosis in Ayurveda can be considered that it is a 'Dhatu Pradosaja Vikara' (disease at cellular level) and therefore *Shodhana* procedures are preferred.

Artavaha Srotas was also involved due to *Kapha Vata Dushti* with *Medo Dushyasamoorchana* causing PCOD.

Taking all these points into consideration the patient was treated with *Vamana Karma* repeatedly and with *Shamana Chikitsa*.

Study Centre:

Narayan's Ayurveda Centre, BTM Layout, Bangalore

Presentation of the case:

Patient aged 35 years, female, c/o of irregular cycles since menarche and anxious to conceive.

Ledger No. 54 / 17

Associated complaint:

Her associated complaints were breathlessness even on mild exertion, fatigue, lack of strength and sinus drainage.

History of the present illness:

The patient had a normal menstrual cycle since menarche. Gradually she experienced irregular cycles from the past 6 months. She had no H/O any thyroid dysfunction, diabetes mellitus and hypertension. The ovaries were normal in size but showed multiple follicles esp. in the periphery indicating mild bilateral PCOS. HSG was normal indicating normal bilateral tubes. Follicular study done 6months back did not show a dominant follicle in two consecutive cycles. Follicular study done in the previous month (before starting Ayurveda treatment) showed a dominant follicle.

She was diagnosed with sarcoidosis 3 years back. She had taken high doses of steroids at that time. Her chest X- ray showed opacities. As a result of old sarcoid, 1.25 Vit D levels were elevated at 58 as expected in a case of sarcoidosis.

She had taken allopathic treatment for about 7 to 8 months but later she wanted to take Ayurveda treatment and approached our hospital for treatment. Her husband was absolutely healthy.

Menstrual history:

LMP: 4 months back

Interval before 6 months: 28 – 30 days

Duration of flow during cycles: 3 days with normal vaginal bleeding

Examination:

P/S: cervix normal in position, healthy and no abnormal discharges found.

P/V: uterus normal in size & position – anteverted, ante flexed fornices free and no tenderness was present.

Weight: 64.3 Kgs

BP: 130/80 mmHg

Investigations:

UPT was advised and found to be negative
Pregnancy was ruled out on USG also and it was suggestive Poly cystic ovaries

Occupation:

She is a software engineer by profession.

Husband's medical history:

Her husband was absolutely healthy and did not have any disorders before treatment and during the course of treatment.

Marital history:

They had a married life of 9 years.

Contraception history:

Couple had not used any form of contraception after marriage. It was not a consanguineous marriage.

Family history:

All family members were said to be healthy.

Aims and objectives of the treatment:

To treat PCOD and manage sarcoidosis and aid in natural method of conception

MATERIALS AND METHODS

Treatment plan: Present study was a single case study. *Shodhana* followed by *Shamana Chikitsa* was administered.

Shodhana Chikitsa was done in the following manner.

Deepana – Pachana was done for five days as the patient had *Ama*.

- Tab. *Agnitundi Vati*: 1-1-1
- Tab. *Chitrakadi Vati*: 1-1-1 both administered 15min. before food.

Pravicharana Snehapana was done from the sixth day onwards with *Pancha Tiktaka Ghrita*. After *Samyak Snigdha Lakshanas* were found, the patient was given *Sarvanga Abhaynaga* and *Bashpa sweda* for 1 day. Next day she was given *Vamanopagas*. The patient had about 8 *vegas* and had *Pravara shuddhi*. The patient was advised by *Samsarjana Krama* accordingly.

After the completion of *Samsarjana Krama*, she was given oral medications as follows:

Medications for ovulation and treatment for reducing the symptoms of sarcoidosis:-

1. Tab. *Septilin* 2-0-2 for two months
2. Tab. *R compound* 1-1-1 for two months
3. Tab. *Rajapravartini Vati* 2-2-2 for 1 week
4. Syp. *Amritarishta* 10ml-10ml-10ml for two months

Next follow up the patient visited after completion of her menstrual cycles, she was advised with the following medications for ovulation:

1. Tab. *Rajapravartini* 1-1-1 for 1 week
2. Syp. *Dashamoolarishta* 10ml-10ml-10ml for 1 month
3. Syp. *Kumaryasava* 10ml-10ml-10ml for 1 month

4. Tab. *Dhanvantaram gutika* 1-1-1 for 1 month

Patient had started getting her cycles regularly after 3 months of medications.

Later the patient was administered with the following medications for *Aama Pachana*, ovulation and reducing the symptoms of sarcoidosis.

1. Tab. *Rajapravartini Vati* 1-1-1 for 1 week
2. Tab. *Chandraprabha Vati* 1-1-1
3. *Trikatu Taila* 10drops-10-10 for 21 days
4. Tab. *Chitrakadi Ghrita* 0-1/4-0 tsp for 1 week
5. *Jeerakadi Lehya* ½-0-½ tsp.
6. *Jeeraka Kumari Kashaya* 3- 3- 3 tsp.

After six months, she was again administered with *Guggulu Tiktaka Ghrita* and she underwent *Vamana Karma*.

Thereafter she was prescribed with the following for sarcoidosis:-

1. *Pancha Tikta Kashaya* 10ml -10-10ml
2. Tab. *Kaishora guggulu* 1-1-1 for 1 month

Her condition day by day improved a lot. Problems of breathlessness also decreased. These medications were given for 2 months.

Thereafter she underwent *Sarvanga Abhaynaga* with *Pinda Taila* and *Sarvanga Nadi Sweda* with *Dashamoola* and *Nimba Kashaya*.

Then she c/o of a missed period. But UPT was found to be negative. USG was also negative for pregnancy.

Thereafter she was prescribed with the following medications for ovulation:-

1. Tab. *Rajapravartini Vati* 2-2-2 for 15 days
2. Tab. *Chitrakadi Vati* 1-0-1 for 3 weeks
3. *Chitraka Ghrita* 20ml-20ml-0 for 1 month

By the completion of this treatment, it was 1 ½ years. Again the symptoms of sarcoidosis were slowly reverting back.

She was again administered with *Vamana Karma*. For *Snehapana*, *Panchatiktaka Ghrita* was prescribed.

Then she was given the following treatment for ovulation and as immunity booster

1. *Phala Ghrita* 10ml + 2gms of *Moolika Kshara* – for 2 months once in the morning and evening on empty stomach
2. *Ashwagandha Lehya* ½ - 0 – ½ tsp. For 2 months.

Then for 75 days she was administered medications for ovulation with:-

1. *Dhanvantari Gutika* 1-1-1
2. *Mishrasneha* (*Shatavari Ghrita* 80%, *Bilva Taila* 10% and *Mahanarayana Taila* 10%)

20 ml – 0 – 20 ml, on an empty stomach in the morning and evening.

After this she complained of a missed period and her UPT was positive. She had conceived naturally.

Patient was under regular ANC and she delivered a healthy female baby weighing 2.9 kgs in September 2020 at a hospital at her native place.

Probable mode of action of *Shodhana* and *Shamana Chikitsa*:-

The patient was administered a total four times of *Vamana Karma* in an interval of every six months once. This helped the *Kapha Dosha* to come back to normalcy. Both PCOD and Sarcoidosis are *Kapha Pradhana Vyadhis*, *Vamana Karma* helped in treating the disorder.

DISCUSSION AND CONCLUSION:

When *Rasa Dhatu* is affected, various diseases like *Hrilaasa*, *Gaurava*, *Anga marda*, *Pandu Roga*, *Jwara*, *Karshyam*, *Akala vali*, *Palita*, *Tandra*, *Klaibya* etc. are produced. *Acharya Sushruta* has added

disorders like *Arochaka*, *Avipaka*, *Hridroga*, *Atripiti* etc [4], [5]. *Vyanga*, *Tilkalaka* and other diseases like *Gulma*, *Vidradhi*, *Raktapitta*, *Asrigdara* etc [6], [7] can also occur. In conditions of sarcoidosis and PCOD *Rasa Dhatu* is affected.

***Tatra Dosha Haranam Urdhva bhagam Vamana Sangyakam.* [8]**

Charaka defines “*Vamana*” as a “A process in which the *Dosha* are eliminated through the upper channels that is, mouth.

Vamana Karma is a method of treatment by which the *Kapha Dosha* is expelled out forcefully through the upper route.

Properties and mode of action of *Vamana* drugs:

Vamana drugs are *Panchabautik* in their constitution; *Agni* and *Vayu Mahabhuta* are dominant in their constitution [9]. *Urdhva Gati*, i.e. upward movement caused by *Vamana* drugs is due to the dominance of *Vayu Mahabhuta* and the *Agneya* property of the drugs. [10]

Charaka and *Sushruta* have mentioned many diseases in which a particular *Dhatu* is majorly affected. *Charaka* has described the line of treatment for *Dhatu Pradoshaja Vikara*. In this case, *Vamana Karma* helped in bringing the *Doshas* to normalcy thereby reducing sarcoidosis and achieving pregnancy.

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