



AYURVEDIC MANAGEMENT OF PCOS WITH THE HELP OF UTTARBASTI

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ABSTRACT

Secondary Infertility is defined as the inability of a couple to conceive who had at least one prior conception. Ovarian factor is the most frequent cause of secondary infertility in women. Polycystic Ovarian Syndrome is one of the main leading cause of Secondary infertility. Polycystic Ovarian Syndrome is a common endocrinological disorder characterized by menstrual irregularities and anovulation in this article a single case study of A 31 Years Old Female Patient, Housewife by Occupation. With Polycystic Ovarian Syndrome Was Arrived to OPD of Prasuti Tantra and Stri Rog for Ayurvedic Treatment, treated with uttarbasti chikitsa .

KEYWORDS PCOS, *Ayurveda*, *Uttarabasti* , Infertility

INTRODUCTION

Infertility is one of the predominant health issues faced by the married couple nowadays. Infertility is defined as the inability to conceive after 1 year of uninterrupted intercourse of reasonable frequency [1]. It is common in 10–15% of couples [2]. As per the current statistics male infertility problems constitutes 30–40% and Female infertility problems constitutes 40–55% and both are responsible in about 10% cases. Remaining 10% unexplained [3]. A critical evaluation on female infertility shows that ovulatory factors contribute almost 30–40% of the case. Among anovulatory causes of infertility, Poly Cystic Ovarian Syndrome (PCOS) plays a major role [4]. Diagnosis of PCOS is based on anovulation, elevated androgen levels and presence of multiple ovarian cysts on USG findings [5]. Most of the time these conditions are presented with signs and symptoms such as obesity, amenorrhea and hirsutism [6]. A direct description of Poly Cystic Ovarian Syndrome in classical *Ayurveda* Texts is not available. After considering clinical features, *Dosha* involvement management principles of *Vandhya*, [*Nashtartava*, *Sthaulya* (obesity) [7], [8], [9], [10], [11], [12] were adopted.

Hetu (Aetiology)[13]

Mithyachara Mithya Ahara - it includes Unhealthy lifestyle, altered food habits excess use of Madhur, Amla, Lavana Rasa Ahara, Snigdha, Guru, Abhishyandi, Sheeta, Snighdha Guna Ahara, Eating habits like Adhyasana (Taking food before digesting previous food), Vishmasana (Taking food in irregular quantity and at irregular time), Atyashanam (Taking excessive amount of diet without knowing their Agni), Samasana (wholesome and unwholesome diet together) causes the vitiation of *Dosha*, Pramitabhojana (Less quantity of food irrespective of need). Mithya Vihara (abnormal mode of living) - It includes faulty modes of Dincharya, Ratricharya, Divaswapna, Ratrijagarana, Vegadharana, Avyayama, Shoka (grief), Chinta (worry), Bhaya (fear). ▪

Pradushtartava - Hormonal imbalance, endometrium and ovarian pathology ▪ Beejadoshā - X linked, autosomal genes, genetic tendency ▪ Deva - Idiopathic Rasavaha Srotas Dushti Hetu - “Gurusheetam Atisnigdham Atimatram Samashnataam, Rasavahini Dushyanti Chintyanaamapi Chintanaat.” - excessive intake of heavy diet like cheese, fast food, Chinese, bakery products, excessive intake of cold food or products, eating too oily, unctuous food, taking wholesome and unwholesome diet together, Chinta (stress/worry).[14] Medovaha Srotas Dushti Hetu - “Avayayama Diwaswapanama Medhyanacha Atibhakshanata Medovahani Dushyanti Varunyashchatisivanata” - lack of exercise, day sleeping, eating fatty foods, excess intake of alcohol.

Purvarupa and Rupa

- Menstrual irregularities have been described under Artava Vyapads[15] or Yonirogas[16] (uterine disorders).
- Anovulation is included under Vandhya[17] (infertility).
- Obesity is the condition described as Sthoulya,[18] a Santanpanajanya Vikara.
- Acne and Baldness have been described as Mukhadooshika[19] and Khalitya, the two independent pathogenesis.
- Hyperinsulinemia leads to type 2 Diabetes mellitus, and is described under Prameha. It is also manifested as a complication of Sthoulya.

Different references in Ayurvedic Classics Anartava –

amenorrhoea; Yonivyapad - physiological and anatomical disorder of the reproductive system; Arjaska-Anartava due to vitiation of Pitta and Rakta Dosha; Lohitakshaya - Anartava due to vitiation of Vata-Pitta Dosha; Pushpaghni[20] - anovulatory menstruation, hirsutism and obesity; Vandhya - Infertility; Viphalumbeeja / Abeejata / Akarmya Artava- anovulation; Ashtartava Dushti- menstrual disorder due to vitiation of Dosha; Granthibhut Artava - due to Vata-Kapha cystic accumulation at periphery of ovary; Ashtanindniya[21] - Atiloma (excessive hairs on body); Atisthula (obesity). Samprapti Ghataka of Pushpaghni

- Dosha: Kapha & Vata (Kapha-Vridhi, VataVaigunya) ▪ Dushya: Rasa, Rakta, Mamsa, Meda Lakshan of Dushya Dushti - Rasa - Aruchi, Gouravam, Tandraagninasa, Angamarda, Srotorodha, Klaibya; Rakta - Kushta, Pidaka, Asrigdar; Mamsa - Granthi; Meda - Prameha, Poorvaroopā; Asthi - Keshaloma; Majja - Gaurava; Shukra - Klaibya, Garbhasrava. ▪ Upadhatu: Artava (Rasa) ▪ Agni: Jatharangi, Dhatvagni ▪ Srotas: Rasavaha, Raktavaha, Mamsavaha, Medovaha, Swedvaha, Artavavaha. Rasa & Meda involvement as Insulin Resistance & Obesity, Avarana of Vata for Faulty Negative Feedback Mechanism of hormones or Improper functioning of HPO axis & Hyper Androgenism, Artavadushti as Irregular Cycles / Anovulatory Cycles, Beeja-Upaghata for Hereditary factor ▪ Srotodushti: Sanga, Atipravarti, Granthi o Sanga - Amenorrhoea, oligomenorrhoea, Kaphaavaranam to Vata & Pitta Kashaya o Atipravarthi - Abnormal uterine bleeding - Pitta Vridhi o Granthi - PCOD Samprapti Kapha Vriddhikara Nidana Sevan causes: 1. Jatharagni Mandhya ▪ It increases Snehansha of body which affect Agneya property of Pitta. Diminish Pitta causes Prabha and Varna Nasha Karshyam (acanthosis nigricans) ▪ Due to this Dhatu diminishes and Mala increases. It results in Kesha (Asthi Mala) overproduction (hirsutism), Sweda (Majja Mala), increased sebum production and Mukha Dushika (acne) ▪ Jatharagni Mandhya causes accumulation of Ama Dosha. It does Vata-Vaigunya. Vitiated Vata-Kapha Avruta Artavaha-Srotas Causes Artava Nasha (oligo-amenorrhea) 2. Sthula ▪ Medovaha Sroto Moola (Kati) Dushti and Sthan Samsrya at Kati Pradesh causing Apana Vaigunya. It impairs Artava Nirgaman. 3. Vitiated Kapha ▪ Affect Medodhatu and cause Santarpana Janya Vyadhi Prameha (hyperinsulinemia)

CASE STUDY A 31 Years Old Female Patient, Housewife by Occupation. With Polycystic Ovarian Syndrome Was Arrived to OPD of Prasuti Tantra and Stri Rog for Ayurvedic Treatment. Chief Complaint Was Irregular Menses, Scanty Menses with infertility, Backache, Hair falls and Constipation in the last 4 Years. Physical Examination Revealed Pulse, Blood Pressure, Temperature Within Normal Limits. No History of Any Chronic Disease or Any Other Medical or Surgical History.

Menstrual History – Age Of Menarche -13year LMP:13-06-2021Interval-30 Days Duration-2days Pain-Mild Clots-Nil History of past illness-NIL Obstetric History-G2P1L1A1\Personal History Diet-Vegetarian Appetite-Normal Bowel Habits – Constipated Bladder-Normal Sleep-Normal> Clinical findings: General examinations: Built –Normal, Weight –48 kg, height –159 cm, pulse rate-70/min, B.P. -110 /70 mm of hg, respiration rate-18/min, temp.-98.6FO/E-P/S-Cervix-thick white discharge Nabothian cyst on both cervical lips Cervix slightly eroded and inflamed P/V –Not done> Investigations -Uterus -Anteverted, Anteflexed in Size Measuring

71×36×45 mm With Homogenous Echotexture Endometrial Thickness-9.9mm Ovaries-Both Ovaries Are Normal in Size and Show Peripheral Arranged Multiple Small Sized Follicles. Right Ovary Vol. 8.8cc left ovary vol. 8.2cc A dominant follicle measuring 23 × 18 mm is seen in the right ovary. The impression is of the normal size of bilateral ovaries with a polycystic component. Serum prolactin is normal •Serum LH-9.69 mIU/ml •Serum FSH-7.91 mU/ml •Serum TSH -4.27 µm/ml •A Pap smear shows an acute inflammatory smear.

➤ Physical examination—Ashtavidhpariksha Nadi(pulse)—VK, Mutra(urine) —Samyak mutrapravriti, Mala(stool)—Sama, Jihwa(tongue)—Sama, Shabda—Samyak ,Sparsha(touch)-Ushna, Drika(eye)—Samanya, Aakriti(physical appearance)—Samanya Dashvidh apariksha —Prakriti(nature)-Vatakaphaja, Sara(Purest body tissue) -Madhyama(medium), Samhanana (Body compact) – Madhyam(medium), Pramana (Body proportion)-Madhyam(medium),Satmya(homologation)—Madhyam(medium) ,Satva(mental strength) – Madhyam(medium), Vaya(age)-31years

TRATMENT GIVEN

Satapushpa, Shatavari taila Uttara Basti for 3 seting

SHODHAN CHIKITSA

Uttarbasti—According to Acharyas, Uttarbasti should be given after cleansing her body by use of two or three Shodhana Basti .So in three consecutive cycles after three Lekhana basti, Uttarbasti were given. Due to normalization of Vata by the use of Uttarbasti , the yoni retains the Garbha quickly or the woman conceive immediately , so it means Uttarbasti prepare the kshetra for Garbha dharana i.e, (kshetra factor) .

OBSERVATION

After completion of 3 months of treatment, patient missed her menses, UPT was done and shows positive result. After 2 weeks USG was done which shows single intrauterine early pregnancy with gestational age 7 weeks 2 day

DISCUSSION

Yoni, or the female reproductive system, remains unaffected unless there is an imbalance in the Vata Dosha. Vata possesses the ability to facilitate cell division, which plays a critical role in the formation of Beeja. Thus, any disturbance in the balance of Vata can disrupt the proper development of Beeja and Beejotsarga (reproductive process). Regulating Vata through a procedure called Uttar Basti is essential, as it leads to swift achievement of conception in women. When the administration is directed through the intrauterine route, taila activates the normal functioning of Vata and triggers the activity of ovarian hormones. This activation occurs through the uterine route, where the uterine arteries make lateral turns upon entering the uterine tubes. These arteries then establish connections with the ovarian arteries, ultimately reaching the ovaries. This stimulation has a direct impact on the ovarian receptors and their hormone-related functions. According to Ayurveda Shodhana Chikitsa (Purification procedure) remove the toxic elements developed in body system and improve the health by maintaining the equilibrium of Tridosha and proper nourishment of Uttarottara dhatu (succeeding tissues). It also corrects any dearrangement in hormonal system. Uttarabasti helps in expelling vitiated Dosha from female reproductive tract and highly beneficial in nourishing uterus.

Anovulatory cycle: Anovulatory cycle happens when an egg (ovum) doesn't release from the ovary during the menstrual cycle. Many causes of the anovulatory cycle are there but the most common cause is PCOS. In ayurveda, this condition can be corelated with Puspaghni, Nashtartawa, etc. In Puspaghni jataharani, inspite of regular menses, the woman fails to conceive due to a useless ovum, and her cheeks are corpulent and hairy[22]. (Ka. Ka.6/33). Acharya Susruta mentions that the channels of artawavaha srotas are obstructed leading to the destruction of artawa. Dalhana mentioned that dosha involved are vata and kapha[23]. (Su.Sa.2/21, Dal tika). In treatment, acharya vaghbata said that it is a basti sadhya vyadhi[24]. (As.Hr.Su.19/1-3). Satapushpa, Shatavari taila Uttara vasti in Anovulatory cycle. As described in the literature review anovulation is a vatakapha pradhana vyadhi. In this acharya, vaghbata said it as basti sadhya vyadhi. The drugs having vatakapha shamaka, ushna, and tikshna properties are beneficial in this condition. Acharya kashyapa has described the effect of

shatapushpa in beejotsarga. The rasa and virya of Satapushpa are katu and ushna which mainly effects vata and kapha and it also has artawajanana property. Chemically it contains phytoestrogen activity. Due to all the above effect, it clears the Artavadusti and maintains the normalcy of the HPO axis, and cause ovulation. Similarly- Shatavari taila which has vatakapahara properties and is indicated in menstrual disorders, Infertility, etc. helps in regulating ovulatory disorders.

CONCLUSION

Ayurveda offers a wide array of treatments, such as Basti (medicated enema) and various drug combinations, which have minimal side effects and are cost-effective, making them suitable as first-line treatment options. Specifically, Uttar Basti plays a central role in treating Vandhyatva or infertility, as it helps strengthen the Garbhashya (uterus) by administering appropriate medications through the uterine route. Additionally, it has been observed that combined therapy, involving multiple Ayurvedic treatments, demonstrates a beneficial anabolic effect on the entire body and the reproductive tract system, contributing to overall health and fertility improvement

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