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Effect of Trimad Churn in PCOD

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Abstract:

Polycystic ovarian syndrome/disease is a systemic endocrine and metabolic disorder. It was originally considered a gynecological disorder. Hyperinsulinemia and hyperandrogenemia are the chief signs responsible for oligo or amenorrhoea, hirsutism, obesity and enlarged ovaries with multiple small cysts and thick tunica results in anovulation. In Ayurveda few diseases in group of yoni vyapad and jatiharini have some similarities with this entity but pushpaghni,jatiharini described by AcharyaKashyap has got much resemblance. Early recognition and intervention such as the development of further complications, medical and surgical treatment are advised according to need and severity of disease. Ayurveda advocate prevention of disease by following dincharya and ritucharya, by use of pathyaahaar, vihar, aushadh and also by avoiding apathyaaahar, vihar, prajnaparadha, mandagni, eating excessive sweet and kaphvardhakaahar and lack of love and other etiological factors. Therefore kaphareducing, insulin rebalancing, obstruction clearing aushadhaahar and vihar can helps to prevent / treat PCOS. This disorder involves pitta, kapha, medas with ambuvahasrotasandartavdhatu, these should be considered during treatment.

Key words: Polycystic ovarian syndrome (PCOS), Yoni vyapad, Serum hormone binding globulin, Ritucharya, Dincharya, Infertility.

Introduction:

Polycystic ovary syndrome (Stein-Leventhal syndrome), widely known as PCOS, is an endocrine system disorder affecting women in their reproductive years.PCOS is also associated with peripheral *insulin resistance* and *hyperinsulinemia*, and *obesity* amplifies the degree of both abnormalities.Hyperinsulinemia may also result in suppression of hepatic generation of sex hormone-binding globulin (SHBG), which in turn may increase androgenicity.Symptoms of PCOS

Symptoms of PCOS

- Irregular menses
- Excess androgen levels (male hormone)
- Weight management difficulties including weight gain or difficulty losing weight
- Excessive facial and body hair growth known as [hirsutism](#)
- Sleep apnea
- High cholesterol and triglycerides
- Acanthosisnigricans - dark patches of skin
- Polycystic ovaries
- High-stress levels
- Skin tags
- Infertility
- Acne, oily skin,
- Male pattern balding

- Insulin resistance
- Type 2 diabetes
- Pelvic pain
- Depression and anxiety
- Decreased libido.

Signs and symptoms : The major features of PCOS include menstrual dysfunction, anovulation, and signs of hyperandrogenism. Other signs and symptoms of PCOS may include the following:

- Hirsutism
- Infertility
- Obesity and metabolic syndrome
- Diabetes
- Obstructive sleep apnea
- oophorectomy

Treatments for PCOS

While there is no cure for PCOS, treatment is based on the management of a woman's individual symptoms with the goal of treatment based on pregnancy desire and decreasing the risk of secondary medical conditions such as heart disease, diabetes, etc.

There are several recommended treatment options for women with PCOS and include

1. Hypothalamic – pituitary compartment abnormality: Stimulation of GnRH leads to increased LH. (Leutinizing Hormone). Leading to increased secretion of LH and decrease of FSH (Follicle stimulating Hormone) This way, Hormonal imbalance is triggered in PCOD.

2. Androgen excess – in some patients the excessive production of Androgen by ovaries and adrenal glands. Excessive androgen production is partially influenced by excessive LH. Increased insulin levels also results in androgen excess.

3. Anovulation (absence of ovum production): Because of low levels of Follicle stimulating hormone, follicle growth inside the ovary is arrested leading to absence of ovum production (anovulation) further leading to infertility.

4. Relationship between obesity, insulin production and PCOD:- Obesity is recognized as an important contributory factor. It also induces insulin resistance and increased levels of insulin in blood, which in turn increases the androgen production.

Insulin resistance : means that the body cells will not respond to the effect of insulin. So, though the body is trying to compensate by producing more and more insulin, leading to high levels of insulin, but thus produced insulin will be inefficient to metabolize the glucose in the body. So, the body becomes resistant to insulin, means the body will not respond to insulin.

Long term consequences in a patient suffering from PCOD –

- Excess androgens (predominantly androstenedione) leads to thickening (hyperplasia) of the inner layer of the uterus (endometrium).
- Risk of developing diabetes mellitus due to insulin resistance.
- Risk of hypertension and abnormally high lipid profile

Biochemical abnormalities to be corrected –

- Hyper- androgenism,
- Hyper secretion of LH (correction of hormonal balance),

- High levels of insulin & Low Follicle stimulating hormone (again related to hormone imbalance management.)
- Weight reduction in obese patients is the first line of treatment. Body mass index (BMI) < 25 improves the menstrual abnormalities, hirsutism and infertility.

Management acc to Modern Treatment

Lifestyle modifications are considered first-line treatment for women with PCOS. Such changes include the following

- Diet
- Exercise
- Weight loss

Pharmacotherapy

Pharmacologic treatments are reserved for so-called metabolic derangements, such as anovulation, hirsutism, and menstrual irregularities.

First-line medical therapy usually consists of an oral contraceptive to induce regular menses.

If symptoms such as hirsutism are not sufficiently alleviated, an androgen-blocking agent may be added. First-line treatment for ovulation induction when fertility is desired are letrozole or clomiphene citrate.

- Medications used in the management of PCOS include the following:
- Oral contraceptive agents (eg, ethinyl estradiol, medroxyprogesterone)
- Antiandrogens (eg, spironolactone, leuprolide, finasteride)
- Hypoglycemic agents (eg, metformin, insulin)
- Selective estrogen receptor modulators (eg, clomiphene citrate)
- Topical hair-removal agents (eg, eflornithine)
- Topical acne agents (eg, benzoyl peroxide, tretinoin topical cream (0.02–0.1%)/gel (0.01–0.1%)/solution (0.05%), adapalene topical cream (0.1%)/gel (0.1%, 0.3%)/solution (0.1%), erythromycin topical 2%, clindamycin topical 1%, sodium sulfacetamide topical 10%)

Surgery

Surgical management of PCOS is aimed mainly at restoring ovulation. Various laparoscopic methods include the following:

- Electrocautery
- Ovarian drilling
- Wedge resection
- oophorectomy

Ayurvedic herbal remedy for PCOD –

Ayurvedic treatment is by applying a multi-pronged approach towards –

- correcting the hormonal imbalance,
- treatment to obesity and avoiding high cholesterol levels,
- treatment to insulin resistance.

1. Correcting hormonal imbalance:

There are many herbs useful in correcting the hormonal imbalance. Ashoka (saracaasoca),

Dashamoola (a group of ten herbal roots) a group of herbs useful in preparation of SukumaraKashaya like Ashwagandha, Eranda, Shatavari etc. are useful in correcting the hormonal imbalance.

2. Treatment to obesity:

Treatment to obesity and specifically against cholesterol can be achieved by using Ayurvedic herbal remedy plus diet and lifestyle changes.

3. Treatment insulin resistance:

Treatment for insulin resistance involves a time-consuming approach with effective Ayurvedic treatment and diet and lifestyle changes including exercise.

PCOD According to Ayurvedic explanation:

In Ayurveda this condition is not explained as a single disease entity; but it can be considered under the heading of Yoni Vyapat(utero vaginal disorders like Arajaska,). Also, Anartava, Nashtartav, VandhyatvaPushpaghniRewati ,mentioned by AcharyaKashyapa bears some similarity with the symptoms of PCOS.

Ayurvedic perspective of PCOS:

- In Ayurveda, the balance state of *doshasis* mainly responsible for health and any derangement to this will lead to disease.
- This *dosha-vaishamyais* directly connected to symptoms and the relation between *doshasand lakshanas* are permanent.
- By the outlook of the symptoms of PCOS as per modern description, it becomes clear that even though they are not compiled as a syndrome in Ayurveda most of them have been described as features of separate diseases or conditions.

The symptoms commonly found in these conditions can be summarized as below-

1. Menstrual irregularities have been described under *artavavyapadsor Yonirogas*(uterine disorders).
2. Anovulation is included under *Vandhya*(infertility).
3. Obesity is the condition described as *Sthoulya*, a *santanpanajanyavikara*.
4. Acne and Baldness have been described as *Mukhadooshika*and *Khalitya*, two independent pathogenesis.
5. Hyperinsulinemia leads to type 2 Diabetes mellitus, and is described under *prameha*. It is also manifested as a complication of *sthoulya*.
6. Since menstrual irregularities including anovulation and obesity are the commonly seen symptoms these two has to be taken care with due attention.

Pathology or origin of diseased condition:

When the deranged *vata*etc. vitiates the *mamsa*, *shonita*and *meda*mixed up with *Kapha*; thus they produce circular, raised and knotted inflammatory swelling called '*Granthi*'. This type of glandular swelling has been compared with the modern terminology 'cyst' which means an abnormal closed epithelium- lined cavity in the body, containing liquid or semisolid material.

In PCOS, development of follicles has been arrested at one or any level and remained as it is. The cysts are follicles at varying stages of maturation and atresia. So, these cysts are not destined to ovum. Thus, this pathology is compared with *granthibhutaartavadushti* i.e. cyst, as in PCOS, the follicles becomes cysts instead of developing up to mature ovum.

Line of treatment of PCOS:

- As PCOS is primarily concerned with *Rajah* and *Stribeeja* formation and to some extent *medodhatu* much attention should be given to these while treating the conditions.
- Treatment modalities mainly aim at providing comprehensive care by correcting the *amadosha*, achieving *koshtashuddhi* and regularizing *tridoshas*.

The management approach to PCOS should concentrate on:

1. Treating *agnimandya* at *jataragni* and *dhatwagnilevel* (Deepana-carminatives and Pachana-digestives)
2. Alleviating *sroto avarodha*-Samshodhana9purificatory therapies based upon the grade of doshic vitiation and site of affliction) followed with (free radical scavenging agents-*rasayanadrugs*)
3. Regularization of *apanavata(vatakaphahara* madicaments) *Nidanparivarjana*:Avoidance of *kaphkaraahara* and *vihara*.

1. Yogas – Asanas – Lifestyle:
2. Pranayama, Kapalabhati etc
3. Shavasana, Sarvangasana, Matyasna etc

Compatible and timely intake of balanced diet, regular physical exercises and healthy lifestyle will build up therapeutic measures to curb PCOS.

Ayurvedic Treatment for PCOS management:

TRIMAD CHURN IS VERY EFFECTIVE TREATMENT ON PCOS

The constituents are-Chitrak, Vidang, Musta

Chitrak : Chitrak is one of the powerful digestive and carminative herbs of Ayurveda. It is used in most of Ayurvedic medicines for indigestion

Botanical Name– Plumbagozeylanica Linn.

Family – PLUMBAGINACEAE

Major chemical constituents– Chitrone, Plumbagin, 3- Chloroplumbagin, droserone, Elliptinone, Zeylanone and Zeylinone, Maritone, Plumbagicacid, Dihydrosterone, B- Sitosterol etc.

Medicinal Qualities

Rasa (taste) – Katu (pungent)

Guna (qualities) – Laghu (lightness), Rooksha (dryness) Teekshna (piercing, strong)

Veerya– Ushna (hot potency)

Vipaka– Katu – undergoes pungent taste conversion after digestion.

Effect on Tridosha – Because of its hotness, it balances Vata and KaphaDoshas.

Part used- Root Bark

Dosage– Powder 1-2 grams in divided dose per day, is the maximum prescribed dose.

Vidang-

Botanical Name– EmbeliaribesBurm. F

Family– MYRSINACEAE – Vidanga Kula

Major chemical constituents– Embelin, Christembine, Homoembelin, Vilangine, Quercitol

Medicinal Qualities

Rasa (taste) – Katu (pungent), Kashaya (Astringent)

Guna (qualities)– Laghu (lightness), Ruksha (dryness), Teekshna (piercing, strong)

Virya– Ushna – hot potency

Vipaka– Katu – Undergoes pungent taste conversion after digestion.

Prabhava – Special effect – Krumighna – relieves worm infestation.

Effect on Tridosha – Because of hot potency, it balances Kapha and VataDoshas.

Part used– Fruits, root

Dosage– Powder 3-5 g per day, in divided dose is the usual prescribed dose.

To relieve worm infestation it is given in a dose of 5 – 10 grams

Musta:

Botanical Name- Cyperusrotundus Linn.

Family – CYPERACEAE Cineol

Medicinal Properties

Rasa (taste) – Tikta (bitter), Katu (pungent), Kashaya (astringent)

Guna (qualities) – Laghu (lightness), Rooksha (dryness)

Vipaka- Katu – Undergoes pungent taste conversion after digestion

Veerya- Sheeta – Cold potency

Effect on Tridosha – Balances Kapha and Pitta

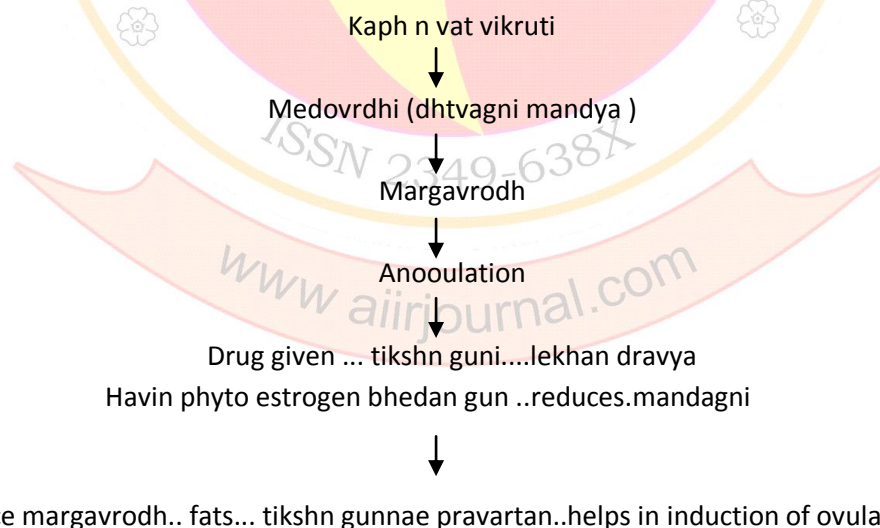
Mode of action

... "aartavm aagneyam "...

As we know ...in pcod according to ayu. There is dhatwagni mandya ...responsible for obstruction .. that is responsible fr anovulation ..

We used this churn as lekhan ..those three r having good..lekhan dravya ... having phyto estrogenic properties. ... having ergotic derivatives they reduces the dhatwagni mandya ... reduces obesity ...increases the aagneytwam .. that helps in ovulation processs ... as major problem in pcod is dhatu that is formation n breaking up of follicle to.release ovum ...

So effective in the tt ...Dhatwagnimandya



Action

Deepana – improves digestion strength

Pachana – Digestive, relieves AmaDosha

Part Use- Tuber

Dosages- powder 3-6 g: decoction 50-100 ml in divided doses per day.

Results

An automatic correction of life style with change in food habits along with yogic practices resulted in significant improvement in number of follicles after ovulation induction, decreased serum

Triglyceride levels, decrease in LH/FSH ratio, decreased Se insulin levels along with a rise in Se SHGB levels, improvement in psychological depression scores.

Conclusion

A lot of new invasive options like laparoscopic PCO drilling are undertaken to treat patients with PCOS for infertility. But PCOS is an excellent example where implementing holistic yogic intervention and lifestyle modifications and ayurvedic remedies can be definitely thought of as it is more physiologic, non-invasive, non pharmacologic ayurvedic treatment, and without any side effects.

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