

Role of *Kuberaksha Vati* on Polycystic Ovarian Syndrome

Sampada Sandeep Sant^{1*} and Shilpa Kantilal Ingle²

^{1,2}Kriya Sharir, Government Ayurved College, Nanded, Maharashtra, India

Abstract

Polycystic Ovarian Syndrome is a disease in which women struggle with imbalanced hormones. The endocrine system works very closely with nervous system. As the nervous system is primarily related to the *Vata dosha*- the humour of movement- much of the hormonal function relates to *Vata*. PCOS is the most common endocrinopathy in reproductive age resulting severe irregularity in menses, hair loss, acne, weight gain, hirsutism, diabetic tendencies, depression, mood swings and subfertility also. *Ayurveda* classifies PCOS as a *Kapha* disorder, *Kapha* having first affects in *Jatharagni* to affect the metabolic aspect of the seven tissues called *Dhatu agni*. Each *Dhatu agni* is responsible for the nourishment and formation of that particular tissue that it resides in. In case of PCOS, *Rasa dhatu* (lymph and plasma), *Meda dhatu* (adipose tissue) and *Aartava- Upadhatu* of *Rasa. Aam* entering the cells of *Aartava*, begins to affect the cellular intelligence of the cell, causing error in cellular function and intelligence. Mistake of cellular intelligence is also expressed in the inhibiting of apoptosis means death of defective cells. Though it is very challenging disorder, *ayurveda* has a wide range of phytosterols to strengthen ovarian functions. *Kuberaksha vati* is one of them, giving very encouraging results on PCOS.

Keywords

PCOS, Kuberaksha vati, Vatakapha dosha, Artavaahsrotas



Greentree Group

Received 18/08/16 Accepted 07/09/16 Published 10/09/16

INTRODUCTION

Women are always more concerned about their face, figure and fertility and now a days menstrual irregularities, acne, obesity are the most common health problems that adolescent girls and young women face. The most worrying disorder is Polycystic Ovarian Syndrome. It affects not only the reproductive endocrinopathy but also involves the metabolic disturbances. Initially PCOS was related to infertility only but now it is clearly established that in many women, it starts with puberty and ends with menopause. PCOS not only affects the fertility of women but also associated with endocrine and metabolic effects like increased risk of type II Diabetes Mellitus, Chronic Heart Diseases, Dyslipidemia, Hypertension, Hyperinsulinemia and Obesity. So PCOS at any age should be treated not only for the fertility reason but also for the above mentioned risks. PCOS sometimes, is associated with menstrual irregularities which includes oligomenorrhea, amenorrhea and also menorrhagia due to unopposed estrogenic stimulation. It is also associated with acne and hirsutism due to hyperandrogenism. In Polycystic Ovarian Syndrome, women are with high Body Mass Index which may be

greater than 25 which means they are overweight or obese. Weight gain and inability to reduce weight is a major feature of PCOS. *Ayurveda* classifies PCOS as a *kapha* disorder. *Kapha* having first affected in *jatharagni* to affect the metabolic aspect of the seven tissues called *dhatu agni*. Each *dhatu agni* nourishes and forms particular tissue that it resides in. According to ayurveda PCOS can be correlated with *Vandhya* type of *yonivyapada* which is mentioned by *Acharya Sushruta (Shushrut Uttarsthan 38/10)* whose symptoms are amenorrhoea or oligomenorrhoea and also with *arajaska* type of *yonivyapada* which is mentioned by *Acharya Charaka (Chara Chikitsasthan 30/17)* indicating amenorrhoea.

Prevalence –

It's prevalence in India is about 70% and throughout world 1 out of 10 women suffers from PCOS. The disorder accounts for 30% of all infertility cases with 73% of women suffering from PCOS experiencing infertility due to anovulation.

REVIEW OF LITERATURE

Causes of PCOS

No one is quite sure what causes PCOS, although women with PCOS often have a mother or a sister with the condition. There

is not enough scientific evidence to prove that the condition may be inherited.

- All the factors responsible for *aamnirmiti*, *rasa dhatu dushti*, *kaphavruddhi* and *medovruddhi* are the basic causes of PCOS.
- Quantitatively and qualitatively heavy diet, too much cool and fatty diet in spite of impaired digestive fire.
- Lack of exercise and deep sleep immediately after meals specially during day.
- Prolonged and excess stress which is the major cause of majority of disorders along with diseases of endocrine system. According to *ayurveda* these are some of the causes of *vata vruddhi* and *rasavahsrotodushti*.

Pathophysiology of PCOS-

Though *ayurveda* classifies PCOS as a *kapha* disorder, imbalance between *tridoshas* is there. Aggravated *kapha dosha* blocks *vata* and *pitta*, so the movement is obstructed and the transformation process is suppressed. In PCOS, *rasa dhatu* which can be correlated with lymph and plasma; *meda dhatu* which can be correlated with adipose tissue and *artava* which is the *updhatu* of *rasa dhatu*.

CASE REPORT

A 23 years old young female patient of *kaphavatanubandhi prakruti* with pallor visited OPD of Government *Ayurved* College, Nanded, Maharashtra, with complaining of irregular menstrual cycles with more delayed tendency and with severe abdominal pain, weight gain with inability to reduce it and general weakness also specially dyspnea on exertion.

AIM

To evaluate the role of *Kuberaksha Vati* on PCOS.

OBJECTIVES

1. To study the pathophysiology of PCOS according to both *ayurvedic* and modern aspects.
2. To understand the role of each content of *Kuberaksha Vati* on *doshas* and *dhatu*s.
3. To evaluate the action of the contents of the *Kuberaksha Vati* on PCOS.

MATERIALS

1. Detail case history of the patient.
2. All necessary and Supportive laboratory investigations.
3. All related classical texts available in the library of Government *Ayurved* College,

Nanded has been reviewed. Database available after net surfing was also reviewed as per the title.

4. Contents of *Kuberaksha Vati*-

As *Kuberaksha Vati* contains *Latakaranj* (caesalpinia Crista / Fever Nut) 4 parts and *Rason* (*Allium Sativum* / Garlic), *Hingu* (*Ferula Narthex Bioss* / Asafoetida), *Shunthi* (*Zingiber Officinale* / Dry Ginger) 1 part each.

METHODOLOGY

A single case study of PCOS is reported here. In which vitiation of *tridoshas* was observed and to pacify these *doshas* *Rukshan*, *Deepan*, *Virechan* was given along with planned diet, regular exercise with specific *yogasanas*.

The treatment of PCOS needs a holistic approach, not only to treat menstrual irregularities but also the correction of endocrine and metabolic disturbances. So this case is also managed by the following steps.

a. **Lifestyle Modification**- with (1) regular exercise - like brisk walk, *Yogasana* specially *Pashchimottanasan*, *marjarasan* and *matsyasan* which helps in reducing the weight. This also helps in regulates *vata-dosha* particularly *apaan vayu*. (2) Diet

control- As the present patient is of *vatakaphanubandhi prakruti*, diet is planned such a way that *vata-dosha* should be regulated first. *Ushna*, *guru*, *snigdha aahar* with rich fibre, rich protein and rich fat specially Omega – 3 fatty acids was advised which reduce the insulin and triglycerides levels and regulate the hormones also.

b. **Pacification of GIT by *Shaman* and *Shodhan Chikitsa*** – As patient was presented with *aam lakshanas*, they were first relieved with *Rukshan*. *Rukshan* therapy was given with *c triphala*, *sunthi* and *musta* powder 4 gram each with warm water before meals for 5 days. Then *aampachak vati* was given 1 b.d. before meals for next 30 days for *aampachan* and *deepan*. After this *Virechan* was given with *Abhayadi modak* following proper oleation with *abhyantar snehapan*.

c. **Regularization of Menstrual Cycle** - For this *Kuberakshavati* was given in 2 BD dose with luke warm water after meals for 2 months.

PROBABLE ACTION OF THE DRUG

Role of *Latakaranj* (caesalpinia Crista / Fever Nut) - *Latakaranj* has *tikta -kashaya rasa* , *laghu - ruksha guna* , *ushna virya* and *katu vipak* which acts as *tridoshshamak*

(pacifying tridosha), *vedanasthapak* (analgesic), *raktashodhak* (blood purifier) and *pramehghna* (antidiabetic). It also contains Bonducin – Glycoside having antitumor, analgesic and anti-inflammatory action¹. It has *tikshna rasa* and *kaphaghna* (reducing kapha dosha) action² which may act to dissolve the cysts.

Role of *Rason* (*Allium Sativum* / Garlic)-

Rason has *Madhur, lavan, katu, tikta, kashay rasa* and *snigdha, tikshna, pichhil, guru, sar guna*. It has *katu vipak and ushna virya*, all these characteristics of *Rason* are *kaphashamak* (pacifying kapha dosha), *vatahamak* (pacifying vata dosha) and *raktapittavrudhikar* (aggravation of rakta and pitta). On *shukravah srotas* it acts as *shukrajanan* (increasing seminal production) and *artavjanan* (emmenagogue) due to its *pichhil* and *snigdha guna*. It is specially indicated on *kaphavatavikar*. Along with this actions it also acts as *deepan* (appetizer), *pachan* (digestive), *anuloman* (carminative), and *shulprashaman* (intestinal antispasmodic)³ which may help to regulate *tridoshas* specially *vata* and *kapha dosha* involved in PCOS. *Acharya Charak* elaborates *Rason* as *Vrishya* (aphrodisiac)⁴. *Rason* contains several active constituents like sulfur –containing compounds that are

rapidly absorbed, transformed and metabolized. *Rason* contains volatile oils, Allyl- propyl sulphide, Diallyl disulphide⁵. Volatile oils of *Rason* can correct hyperglycemia. The exact mode of action was not fully understood, but several modes of action have been proposed. It is not clear that how *Rason* actually works in alleviating hyperglycemia. The hypoglycemic action of *Rason* could possibly due to an increase in pancreatic secretion of insulin from beta cells, release of bound insulin or enhancement of insulin sensitivity. It also has antioxidant property and tumor growth inhibition.

Role of *Hingu* (*Ferula Nartex* Bioss / *Asafoetida*) –

Hingu has *katu rasa, laghu-snigdha-tikshna guna*, *katu vipak* and *ushna virya*. It has *kaphavatshamak* and *pittavardhak* properties and relieves the *udaraanah* (flatulence) and thus helps to regulate the *adhogati* (downward direction) of *apaan vayu*. Due to its *ushna* and *tikshna guna* it acts as *vajikaran* (aphrodisiac) and *artavjanan* (emmenagogue)⁶. *Hingu* has *vatahar* (reducing vata dosha) and *stripushpajanan* (emmenagogue) properties which help to relieve the irregularity in menses. It acts like *garbhashay shudhikar* (uterine purifier) in *rajkruchhata*

(dysmenorrhea). It contains volatile oils and Asaresinotannol separately or with combination with ferulic acid.⁷

Role of *Shunthi* (*Zingiber officinale* / Dry Zinger) - *Shunthi* has *katu rasa*, *laghu-snidha guna*, *madhur vipak* and *ushna virya*. It has *kaphavatshamak*, *rochak*, *deepan*, *pachan*, *shulprashaman*, *Vrushya* and *uttejak* (stimulator) properties. It also contains Gingerin as oleo resin along with volatile oil and Gingerol, Shagaol,

Zingerone⁸. According to *Acharya Sushruta Shunthi* is *Vrushya* due to its *ushna virya* and *snigdha guna*, it also have the *Rochan* (stomachic) and *Deepan* (appetizer) properties⁹. According to modern science Gingerols are widely known to naturally improve diabetes and enhances insulin sensitivity and this property of *Shunthi* may affect on hyperinsulinemia, sometimes observed in PCOS.

OBSERVATION AND RESULTS

INVESTIGATIONS	BEFORE TREATMENT	AFTER TREATMENT	REFERENCE RANGE
USG – Abdomen and Pelvis	Right Ovary- 43 ×20×23 mm, 11ml Left Ovary – 43×26× 22 mm, 13ml With MSF in both Ovaries	Right Ovary- 41 ×20×21 mm, 10.8 ml Left Ovary – 39×30× 20 mm,12.ml With MSF in both Ovaries	Right Ovary- 40 ×30×20 mm, Left Ovary – 40×30× 20 mm, With MSF in both Ovaries
ENDOCRINE SCREENING –			
T ₃	143 ng/dl	150 ng/dl	60 – 200 ng/dl
T ₄	10.3ug/dl	8.5ug/dl	4.5 – 12 ug/dl
TSH	6.66 uIU/ml	2.47 uIU/ml	0.30 – 5.5 uIU/ml
HAEMOGRAM			
Iron	29.42 ug/dl	63.12 ug/dl	60 – 180 ug/dl
% Transferrin Saturation	7.02 %	13.09 %	13 – 45 %
Total RBC	5.21 millions/cumm	4.74 millions/cumm	3.9 – 4.8 millions/cumm
MCH	24pq	27.3pq	27 – 32pq
MCHC	28.7 g/dl	32 g/dl	31.5 - 34.5g/dl
RDW-SD			39 – 46 fL

	57.1Fl	41fl	
RDW-CV	19.3 %	12.5%	11.6 – 14%
Plateletcrit (PCT)	0.43%	0.30%	0.19 -0.39 %
WEIGHT	60 kg	55 kg	45 – 55 kg
BMI	26.66kg/m ²	24.44 kg/m ²	18.50– 24.99 kg/m ²

DISCUSSION

Latakaranj has *tikshna*, *ushna virya* and *katu vipak*, it regulates *vatakapha dosha*. It acts as *shothahar*, *deepan*, *tridoshashamak*.

Rason is *tikshna*, *sar*, *kaphavatshamak* and it acts on *srotorodh* (obstruction of channels) caused by *kapha* and *vata*. It has *deepan*, *pachan*, *anuloman* properties, which is useful in *vatakapha* predominant *anartava* cases resembling insulin resistance PCOD cases.

Hingu, due to its *ushna*, *tikshna guna* acts on *aartavvah srotas* as *artavjanan*. It has properties as *chedan* (cutting action), *anuloman*, *shulprashaman* and relieve the *rajkruchta*. *Shunthi* is *vrushya* and *uttejak* acts to normalize menstrual cycle. It also has *kaphavatashamak*, *deepan*, *pachan*, *rochan*, *anuloman*, *shulprashaman* properties and help to maintain balance of *vata* and *kapha dosha*.

CONCLUSION

The contents of *kuberaksha vati* are *kapha vata shamak*. They are having *rochan*, *deepan*, *pachan*, *anulomak* properties. Some of them are with *ushna*, *tikshna*, *sara guna*. These together act to normalize *vata dosha* specially the *apana vayu* and once the *apana vayu* is regulated the functions of organs in the *apana kshetra* are also normalized. *Artavjanan*, *uttejaka* and *vrushya* properties of the contents works on *artava vaha strotas* & helps in regularization of menstrual cycle. Due to this, PCO like picture in both ovaries may be normalized after treatment. *Katu*, *tikta*, *kashaya rasa* and *laghu*, *ruksha guna* of some of contents of *kuberaksha vati* helps to reduce the *kapha dosha* and *vikruta meda dhatu*. So finally it helps in reducing the increased weight. All the contents act upon GIT to normalize the digestive fire, once digestion is normalize, *prakrut ahar rasa* is produced and further *rasa dhatu* and its *upadhatu* are produced in pure form. *Rakta dhatu* is formed from the previous

pure *rasa dhatu* and also the next *dhatu*s up to the *shukra dhatu* are also produced with purity. *Shunthi* and *Latakaranj* has *raktashodhak* properties , so *Kuberaksha vati* may have action on *rakta dhatu* , the changes in Hb,MCH,MCHC values may be observed due to this. The dhatawagni can be correlated with the endocrinal secretions, so T3, T4 especially TSH levels are observed within normal limit after treatment.

REFERENCES

1. Acharya Priyavat Sharma, Dravyagunavidnyan, Choukhambha Bharti Academy, Varanasi, 2013, page no. 706,707.
2. Vd. V. M. Gogate, Dravyagunavidnyan, Vaidyamitra Prakashan, 2014, page no. 603.
3. Acharya Priyavat Sharma, Dravyagunavidnyan, Choukhambha Bharti Academy, Varanasi, 2013, page no. 72,73,74,75.
4. Kashinath Pandey, Gorakshanath Chaturvedi, Charak Samhita, Sutra sthan 27/176, Annapanavidhi adhyaay, Vidyotini Vyakhya, Choukhambha Bharti Academy, Varanasi, 2005, page no. 586.
5. Acharya Priyavat Sharma, Dravyagunavidnyan, Choukhambha Bharti Academy, Varanasi, 2013, page no. 72,73,74,75.
6. Acharya Priyavat Sharma, Dravyagunavidnyan, Choukhambha Bharti Academy, Varanasi, 2013, page no. 350,351,352,353,354.
7. Bhishkratna Shri Brahma Shankar Shastri (Mishra) , Bhavprakash Nighantu, Savivran Vidyotini Hindi Vyakhya, Choukhambha Sanskrut Sansthan, 1993, Haritkyadi Varga, page no. 40, 41.
8. Acharya Priyavat Sharma, Dravyagunavidnyan, Choukhambha Bharti Academy, Varanasi, 2013, page no. 331,332,333,334,335.
9. Kaviraj Dr. Ambikadattashashtri, Sushrut Samhita, Ayurved Sandeepika – Hindi Vyakhya, Sutra Sthan 46/226, Choukhambha Sanskrut Sansthan, Varanasi, 2007, page no. 203.