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Case Study

ROLE *LATAKARANJA VATI* IN THE MANAGEMENT OF POLYCYSTIC OVARIAN SYNDROME: A CASE STUDY

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ABSTRACT

This is a case study of *Latakaranja* in PCOS. PCOS (Polycystic Ovarion Syndrome) is heterogeneous disorder of unknown etiology affecting 5 to 10% women of reproductive age group. It is the disorder that affect the reproductive, endocrine and metabolic system. Also it is most common cause of infertility. Ayurvedic treatment of PCOS is specific to the individual. In majority of women with PCOS, there is a strong *Kapha* component. They often struggle with mysterious weight gain i.e., hard to lose even while maintaining light diet, healthy lifestyle and regular exercise. According to *Ayurveda* *Latakaranja* is *Laghu*, *Ruksha*, *Ushna* *veeryatmaka* and *Kaphavatghna*. A female pt of 23 years old was diagnosed with PCOS on the basis of clinical features and USG findings. This study was carried out on O.P.D. basis. *Latakaranja vati* of 500 mg. twice daily after meal with *Koshna jala* for 6 months. After three months complaints of pt like irregular, scanty menstrual bleeding, lower abdominal pain got reduced. It can be concluded that *Latakaranja* can be used for regulation of menstrual cycles and other complaints in PCOS.

INTRODUCTION

Polycystic ovarian syndrome, also known as polycystic ovarian disease or PCOD is a very common female health complaint with unknown etiology. The word "Syndrome" is used to describe the PCOD because, it is a complex manifestation involving many factors and organs. Symptoms of PCOD include amenorrhoea or infrequent menstruation, irregular bleeding, infrequent or no ovulation, multiple immature follicles, increased levels of hormones, excess facial and body hair growth, acne, oily skin or dandruff, dark coloured patches of skin specially on neck, groin, underarms, chronic pelvic pain, increased weight or obesity⁽¹⁾. PCOS is a common female endocrine disorder affecting approximately 5- 10% of women. Polycystic ovarian disease (PCOD) is a condition that has cysts on the ovaries that prevent the ovaries from performing normally. It causes worry as it is commonly found in reproductive age, also it

is thought to be one of the leading cause of female infertility.

PCOD/PCOS was not directly mentioned in *Ayurveda* because, as we seen above it is syndrome. But we can correlate it with *Kaphaja beejagranthidushti* ⁽²⁾. For *Garbhadharana* *Rutu*, *Kshetra*, *Ambu* & *Beeja* these four factors are necessary⁽³⁾. When there is any *Dushti* in *Beeja* it can said as *Beejagranthi dosha*. PCOS is due to *Kapha* blocking *Vaat* and *Pitta*, hence movement is obstructed and the transformation process is suppressed. *Kapha* first affects the *Jathara agni*, it start to affect metabolic aspect of seven tissues called *Dhatwagni*. Each *Dhatu agni* is responsible for formation of that particular tissue that it resides in. In the case of PCOS affected *Dhatus* are *Rasa dhatu*-lymph and plasma, *Meda dhatu*-adipose tissue and *Artava dhatu*-female reproductive system.

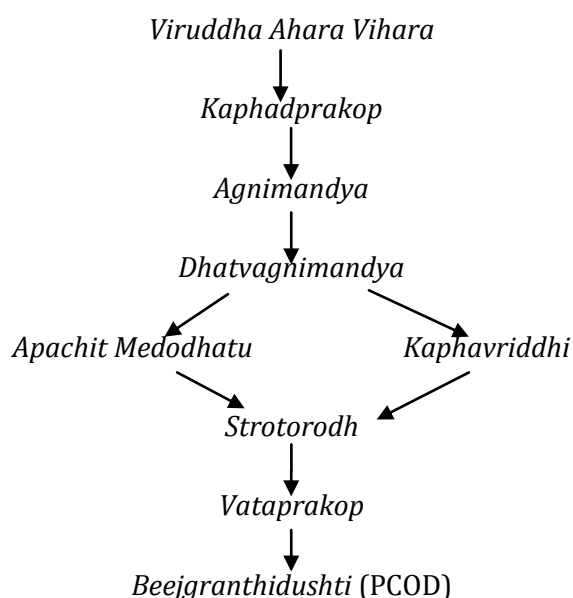
After *Rasadushti* next *Dhatu dushti* occur one by one and shows symptoms i. e.

Rasadushti- *Artavkshaya*, *Kashtartava* (Dysmenorrhea)

Raktadushti – *Mukhdooshika* (Acne)

Mansmedodushti- *Sthaulya* (Obesity) etc.

Probable Pathophysiology of PCOS/ *Beejgranthi-dushti*



According to Allopathic System, laparoscopic Ovarian drilling is the treatment of choice in case of PCOS⁽⁴⁾. So, there is definite need to explore more efficacious cure to this illness. With this background, present study was undertaken to evaluate the effect of Ayurvedic formulations with good, safety and efficacy profile.

AIM AND OBJECTIVES

Aim – The study of role of *Latakaranja* in PCOS

Objectives

To study about PCOS.

- 1) To study *Latakaranja*
- 2) To study the role of *Latakaranja* in PCOS

Materials and methods

Ayurvedic and modern literature and contemporary texts including websites about the disease reviewed. So many preparations have been available for treatment of such symptoms. All these medications have certain common fundamental principles.

These are:

- 1) *Kapha-vata shamaka*
- 2) *Raktadushti shodhak*

Latakaranja (Ayurvedic Properties)

Latakaranja⁽⁵⁾ is one of the herbs mentioned in all Ayurvedic texts and has been freely used all over India since centuries. Traditionally, it is used in

post partum period, as it is a uterine stimulant, to cleanse the uterus. Also *Latakaranja* shown Antispasmodic, Anti-diabetic, Anti-oxident, Anti-inflammatory activities and helpful in menstrual problems.

▶ Latin Name	:	<i>Caesalpinia Crista</i>
▶ Family	:	<i>Leguminosae</i>
▶ Rasa	:	<i>Katu, Tikta, Kashay</i>
▶ Vipak	:	<i>Katu</i>
▶ Virya	:	<i>Ushna</i>
▶ Guna	:	<i>Laghu, Ruksh</i>
▶ Doshaghnata	:	<i>Vata-kaphashamak</i>
▶ Upayuktanga	:	<i>Phal/Beej</i>

Case Study

23 years old married female patient having infertility came with,

C/O- Irregular menstrual cycle (after 2~3 months) since last 2-3 years.

Scanty bleeding (1~2 days only)- since last 2-3 years.

Lower abdominal pain (During menstruation) since last 1 year.

In addition to these symptoms, sign of hirsutism, dark coloured patches on neck seen. She had visited Allopathic Hospital for treatment. Lower abdominal USG was done and she was diagnosed with polycystic changes in ovaries, and was advised laparoscopic ovarian drilling. But patient was not willing for operative intervention, so she came for Ayurvedic management.

Drug History

H/o Allopathic medicine taken by her for 6 months before 1 year during that time menstrual periods were regular after discontinuation of treatment again same problem occurred. Patient was advised to stop all medicine before starting *Ayurvedic* treatment.

Marital status: Married before 3 years.

Menstrual History

Cycle = Irregular (After 2~3 months)

Duration= 1-2 days

Amount= 1 pad/day

Colour = Blackish Red,

Pain = moderate.

Investigation

USG of Lower abdomen on 13.5.2016

Bilateral bulky ovaries with multiple small follicles arranged peripherally with central echogenic stroma. Ovarian volume > 11cc.

Diagnosis

Based on Clinical features and USG findings, diagnosis was confirmed as PCOS.

Treatment

Treatment started on 20.05.2016.

Latakaranja 500 mg were given twice daily after meal with *Koshna jal*.

Patient advised following diet during the therapy:

Pathya & Apathya**Pathya of the patient**

Laghu Ahaar, *Langhan*, *Snehan*, *Swedan*, *Koshna jal*.

Vihar - *vyayam*, walking for half an hour.

Apathya of the patient

Viruddha Ahaar, *Visthambhi* *Guru Snigdha Ahaar*, *Sheetal Jal*, Bakery products and fast foods.

Vihar - *Deevaswap*, *Vegadharan*, *Ratri-Jagaran*, *AtiShrama*.

1st Follow Up

On 10.07.2016. Complains of irregular menstrual period along with lower abdominal pain were still present and bleeding increases 1-2 pads/day for three days.

Treatment: *Latakaranja* 500 mg was given twice daily after meal *Koshna jal*. Patient was also advised for *Pathya apathya* and come after menstrual cycle.

2nd Follow Up

Patient came for follow up on 19.08.2016. She got much better relief from her complaints of pain in abdomen during menses, scanty menstrual bleeding.

Treatment: Patient was advised to take same medication for 3 months again and advised for USG of lower abdomen.

3rd Follow Up: Patient came to OPD on 20.11.16 and was free from all sign and

Symptoms. USG done on 05.11.16 revealed that both ovaries appears normal. Left ovary shows 16mm dominant follicle. Ovarian volume about 7.5cc.

RESULT

Last three menstrual cycles was regular up to 30 to 35 days and normal bleeding.

DISCUSSION

According to Ayurveda, the pathogenesis of *Beejgranthidushti* (PCOS) involves *Vata*, *Kapha* *Dosha* & *Rakta*. So, *Kaphavatashamak* and *Raktashodhak* treatment is necessary. Hence in this

present clinical study *Latakaranja* was selected. As *Latakaranja* has *Katu*, *Tikt*, *Kashaya rasa* and *Laghu ruksha guna* it reduces *Kapha* and due to *Ushna veerya* it is *Vatashamak*⁽⁶⁾. By this action on *Kapha* and *Vata* it reduces *Jatharagni* and *Dhatvagnimandya*. So *Strotorodh* cleared and *Beejgranthidushti* reduced.

By *Deepan*, *Panchan*, *Kaphavatashamak*, *Raktashodhak*, Anti-spasmodic, Anti-oxidants, Anti-inflammatory activities *Latakaranja* also helps to resolve the menstrual problem like irregularities of menstrual cycles, low blood flow, abdominal pain and vomiting etc.

CONCLUSION

It can be concluded from current case study that:

- 1) Polycystic ovarian changes can be efficiently and effectively managed by *Latakaranja*.
- 2) *Latakaranja* can be used for regulation of menstrual cycles in scanty bleeding.
- 3) The complication of this disease can be prevented by *Latakaranja*.
- 4) Study has not shown any side effects.

REFERENCES

- 1) D.C. Dutta's, Text book of Gynaecology, edited by Konar Hiralal, 6th edition, New Central Book Agency Ltd. Kolkata, Page No. 440.
- 2) Ayurvediya Prasutitantra Avum Strirog, second part, Prof. Premvati Tiwari, 2nd edition reprint 2014, Chaukhambha Orientalia Varanasi, Page No. 417.
- 3) Ayurvediya Prasutitantra Avum Strirog, first part, Prof. Premvati Tiwari, 2nd edition reprint 2014, Chaukhambha Orientalia Varanasi, Page No. 86.
- 4) D.C. Dutta's, Text book of Gynaecology, edited by Konar Hiralal, 6th edition, New Central Book Agency Ltd. Kolkata, Page No. 451.
- 5) Dravyagun Vidnyan, Prof. Dr. A. P. Deshpande, 5th edition reprint 2002, Anmol Prakashan Pune 2, Page No. 428.
- 6) Dravyagun Vidnyan, Prof. Dr. A. P. Deshpande, 5th edition reprint 2002, Anmol Prakashan Pune 2, Page No. 112.

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