

## THE EFFECT OF SIDDHA INTERNAL MEDICINE WITH ASANAM AND VARMAM ON SINAIPAINEEKATTI (PCOS)-A CASE SERIES

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### ABSTRACT

**Objective:** To verify the efficacy of integrated approach in treating Sinaipaineerkatti (PCOS) and the rate of conception or fertilization.

**Method:** The study was conducted at the Ayothidoss Pandithar hospital, National institute of Siddha, Tambaram sanatorium, Chennai-47. Ten patients were recruited in the study, who met with the inclusion and exclusion criteria. They were administered internal medicines along with yoga, varma, diet for 90 days. All the patients were taken ultrasonogram pelvis before and after treatment. Clinical assessment was recorded, and these were estimated on day 0 and

repeated on day 90 of the trial period. **Result:** Among the 10 patients had correction of menstrual irregularity problem and reduced duration of flow of blood and remains static in subsequent cycles during treatment as well as after treatment, Patients had considerable reduction in size of both the ovaries and reduction in their BMI and the outcome of this study was that out of 10 patients 1 of them got their first child during this treatment period.

**Conclusion:** Siddha internal medicine along with Asanam, Varma for 90 days has shown considerable effectiveness in the treatment of Sinaipaineerkatti (PCOS) and did not cause any adverse reaction to any of the patients. Response to treatment was recorded by certain subjective and objective parameters. Results revealed that PCOS can be managed successfully by using this integrated approach.

**KEYWORDS:** Siddha Medicine, Asanam, Varmam, Sinaipaineerkatti, (PCOS).

## 1. INTRODUCTION

PCOS affects 5% to 10% of women in their reproductive years and is the most common endocrinopathy affecting women.<sup>[1,2,3]</sup> Stein and Leventhal<sup>[4]</sup> first described PCOS in 1935. PCOS is a chronic hyperandrogenic state that has many significant short-term and long-term implications for patients such as oligomenorrhea, amenorrhea, infertility, diabetes mellitus, cardiovascular disease, increased risk of endometrial cancer, and excessive body hair (hirsutism).

PCOS is characterized by the following: (1) a menstrual cycle that ranges from > 35 days or < 8 cycles/year to complete absence of menses (amenorrhea) (2) evidence of androgen excess, such as acne, hirsutism, alopecia, acanthosis nigricans, or increased androgen levels on laboratory testing; (3) all other causes of hyperandrogenism and anovulation have been excluded.<sup>[1]</sup> It is not essential that a woman having polycystic ovaries to have this syndrome. Therefore, polycystic ovaries, observed on ultrasound, are a sign of PCOS and not by themselves diagnostic of the disease. Polycystic ovaries are seen 67% to 86% of the time in patients who have PCOS.<sup>[1,3,5,6]</sup> In Siddha this condition has not been explained as a single disease entity, it can be constructed under the headings Garpavayu, Andavayu, Soothagakatti. Garpavayu mentioned Agathyamamunivar Ayurvedham 1200 can be correlated to polycystic ovarian syndrome. In classical Siddha literature Pararasasekaram<sup>[7]</sup> also cites that any imbalance in three humours may inhibit the release of ovum from the ovaries. This may be related to the infertility due to ovulatory factors.

PCOS is characterized by fluid filled sac like structures in the ovary and is termed as Sinaipaineerkatti. The clinical features of PCOS have already been described in the Siddha literatures such as “Yugi muni vaithiyakaaviyam” and “Thirumoolarkarukidaivaithiyam” etc. This paper deals with the contemporary and Siddha perspectives of PCOS and propounds adoption of a holistic treatment in the form of good stress-free lifestyle, balanced diet, asanam and varmam along with Siddha drugs. Over all, the goal of treatment of PCOS according to Siddha is, 1. To reduce the Kapham 2. To reduce the Vaatham 3. To balance the Pitham 4. To stabilize the Agni inside ovaries.

Asanam not only addresses the problems of PCOS but is likely to prevent the long-term complications such as Cardio-vascular diseases, diabetes etc. Further, Asanam, being holistic in its approach, is potentially more cost-effective and enduring. Hence, Asanam may be recommended as both a primary intervention and/or as adjunct to standard medical care for

management of PCOS.<sup>[8,9]</sup> The treatment was conducted for a duration of 3 months. Response to treatment was recorded by subjective and objective parameters. Results revealed that PCOS can be managed successfully by using this Integrated approach.

## 2. MATERIALS AND METHODS

### 2.1 Internal Medication<sup>[10]</sup>

**Table 1**

Sl. No	Medicine	Dose
1	Agasthiyar kulambu	100mg-200mg with karkam of tender pupil leaves + milk. for 3 consecutive days
2	Kalarchi chooranam	1 tea spoon with honey twice a day
3	TabAnnabethi chendhram	2 tabs with honey twice a day
4	Tab Silasathu parpam	2 tabs with ghee twice a day
5	Malaivembathi thylam	15 - 30ml with nisi water morning empty stomach during menstrual cycle.
7	Chukku thylam	Head bath weekly two times

### 2.2. Varmam for Sinaipaineerkatti

Kodaikolli, Pallavarmam, Kudugai, Kumbagamudichi, Komberikalam<sup>(11)</sup>.Varma stimulations were given weekly two times to improve the flow of vital life energy.

### 2.3. Asanam for Sinaipaineerkatti

Badhakonasana, Bharadvajasana, Dhanurasana, Makarasana, Padhmasana, Suriyanamaskar, Pranayama<sup>[8,9]</sup> different Asanas were advised to PCOS patients.

### 2.5 Subjects and method

10 females who were attending the OPD of Sool and Mahalir maruthuvam (Gynecology OPD) for the treatment of Sinaipaineerkatti (PCOS) were the subjects for this study. All the 10 patients were screened as per the screening proforma and those meeting the inclusion criteria were included in this study. The patients were treated with Siddha internal medicine along with Varma and Asanam for 90 days and followed for 12 months including the treatment period. All the 10 patients were subjected to do USG (Pelvis and abdomen) after 90 days of treatment and Clinical assessment was recorded on 0<sup>th</sup> day and followed by 90th day by using assessment Scales.

### 2.5 Selection Criteria of patients

#### 2.5.1 Inclusion criteria

1. Patients in the age group of 18-35 years, both married and unmarried

2. Oligo/menorrhoea
3. Amenorrhoea
4. Obesity
5. Polycystic ovaries in ultrasound

### 2.5.2 Exclusion criteria

1. Pregnant and lactating women
2. Patients who had thyroid dysfunction,
3. Other systemic illnesses.

## 2.6 Subjective parameters

### 2.6.1 Duration of Bleeding

**Table 1**

Duration	Grade	Score
3-5 days	Nil	0
1/6-7 days	Mild	1
1/8 days	Moderate	2
Spotting >9days	Severe	3

### 2.6.2 Irregular Menstruation

**Table. 2.**

IMP days	Grade	Score
28 days	Nil	0
28-45 days	Mild	1
45-60 days	Moderate	2
Above 60 days	Severe	3

### 2.6.3 Obesity

**Table 3**

BMI	Grade	Score
18-25	Normal	0
25-30	Over weight	1
Above 30	Obese	2

### 2.6.4 Objective parameter

USG (pelvic and abdomen)

### 2.6.5 Clinical Outcome measures

- 1 Menstrual regulation in subsequent cycles of treatment.
- 2 Reduction in weight

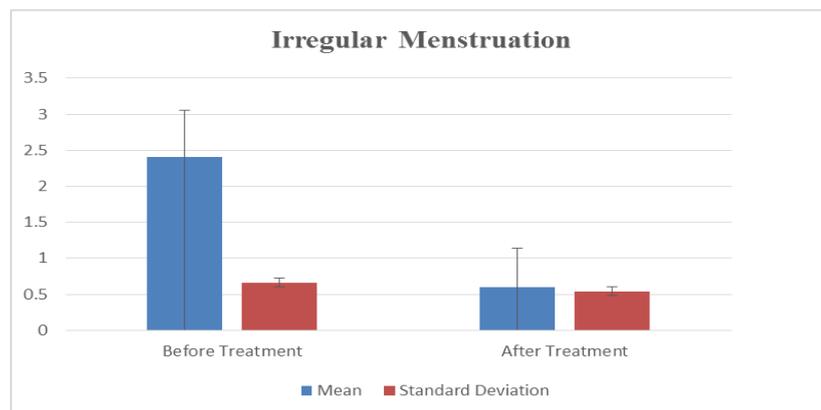
3 Any pregnancy positive.

### 3. OBSERVATIONS AND RESULTS

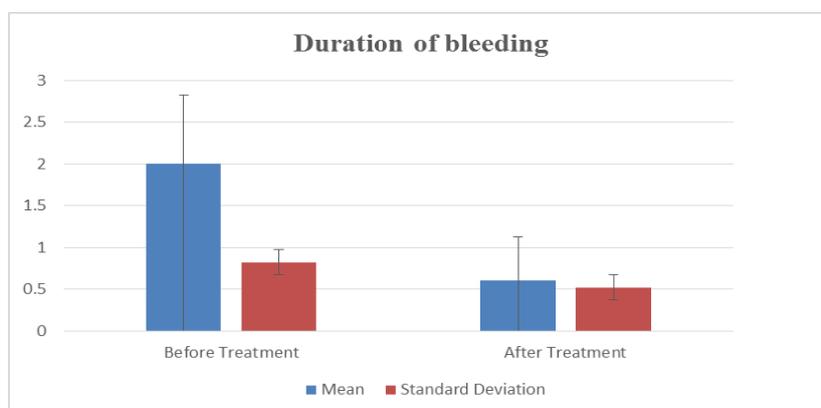
Among the 10 patients had correction of menstrual irregularity problem and reduction in the duration of flow of blood and remained static in subsequent cycles during the treatment as well as after the treatment. Patients had considerable reduction in the size of both the ovaries and reduction in their BMI and the outcome of this study was out of 10 patients 1 of them got their first child during this treatment period.

**Table 4: The p value is highly significant ( $p < 0.001$ ). Since the p value is significant in all symptoms of Sinaipaineerkatti (PCOS).**

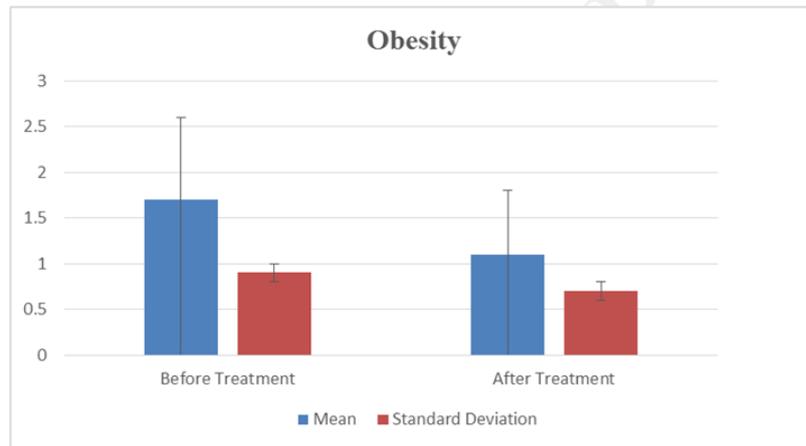
Scales	Irregular Menstruation	Duration of Bleeding	Obesity
	Mean $\pm$ SD	Mean $\pm$ SD	Mean $\pm$ SD
Before Treatment	2.40 $\pm$ 0.66	2.0 $\pm$ 0.082	1.7 $\pm$ 0.90
After Treatment	0.6 $\pm$ 0.54	0.6 $\pm$ 0.52	1.10 $\pm$ 0.70



**Fig. 1: This scale for Irregular Menstruation has shown highly significant ( $p < 0.001$ ).**



**Fig. 2: This scale for Duration of bleeding has shown highly significant ( $p < 0.001$ ).**



**Fig. 3: This scale for Obesity has shown highly significant ( $p < 0.001$ ).**

#### 4. DISCUSSION

According to Siddha, Sinaipaineerkatti can be correlated to polycystic ovarian syndrome. PCOS is a disorder involving, kapham, vatham, pitham imbalance. The given treatment works to improve hormone utilization & regulates overall hormone balance. The Siddha internal medicine along with Varma, Aasanam, was also quite beneficial in curbing the three aggravated doshas and brings balance & strength to the menstrual system. Varma stimulations were given weekly two times to improve the flow of vital life energy.

Weight loss is the most essential part of treatment, Several Yoga postures aid in weight loss, relieve stress and improve the ovarian blood supply, thereby assisting treatment of PCOS. 10 patients were recruited for this study. All patients were treated with Siddha internal medicine along with Asanam, Varma for 90 days. All patients were advised for dietary regimen as per Siddha philosophy. All the 10 patients were subjected to do USG (Pelvis and abdomen) after 90 days of treatment and Clinical assessment was recorded on 0<sup>th</sup> day and followed by 90th day by using assessment Scales.

The three Assessment Scale was used to assess the efficacy of results. The ultrasound after 3 months showed reduction in the size of ovaries. The symptoms of PCOS are significantly reduced and BMI was reduced. The most troublesome problem of PCOD is infertility. This integrated approach corrects the defects in follicular formation which in turn corrects infertility, since this regimen acted on the hormonal axis, significant weight reduction was observed, and menstrual irregularities were corrected. The outcome of this study was out of 10 patients 1 of them got their first child during this treatment period.

The p value is highly significant ( $p < 0.001$ ). Since the p value is highly significant in all symptoms, there is a highly significant reduction of symptoms among the patients for the treatment of Sinaipaineerkatti (PCOS). During this study, no adverse reactions were reported throughout this entire study period. Hence it is concluded that the treatment was effective.

## 5. CONCLUSION

Poly-Cystic Ovarian Syndrome (PCOS) is gaining much more importance because of its increasing occurrence and the physical and psychological morbidity. The objectives include identifying the causative factors, suggesting ways of preventing and disease management through holistic approach. Importance has been given to find better ways of avoiding the risk of surgeries and other invasive therapies. From this clinical study it is observed that Siddha internal medicine along with Aasanam, Varma is having good efficacy in the treatment of Sinaipaineerkatti (PCOS). The Noteworthy outcome of this 90 days study was one patient was had their first child during this treatment. Hence the author recommended that to conduct further studies involving larger samples, with increased duration and follow up is needed to establish the fact that integrated approach works well in managing Sinaipaineerkatti (PCOS) effectively.

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