

Review Article

Pulsatilla in PCOD an Evidence Based Study

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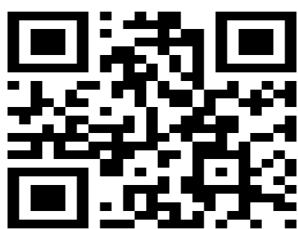
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ABSTRACT

PCOD is a condition that affects women's ovaries, the reproductive organs that generate progesterone and oestrogen hormones that help regulate the monthly cycle, as well as minor amounts of hormones like inhibin, relaxin, and androgens. PCOD affects nearly ten percent of all women on the planet. The women who are diagnosed with PCOD have more male hormones (testosterone level) than women without the condition. This imbalance in their hormonal level causes them irregular periods, making it difficult for them to conceive. This condition can cause, in addition to unexpected hormonal behaviour Diabetes, Infertility, Excessive hair growth.

Homoeopathic treatment for PCOD is extremely effective and is undoubtedly the greatest alternative treatment. In this article, homoeopathic medicine pulsatilla is used to cure a young female suffering from PCOD and her reports of USG before and after homoeopathic treatment are presented as evidence of the study.

Keywords: PCOD, Homoeopathy, Pulsatilla



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INTRODUCTION

Polycystic Ovarian Disease (PCOD), also known as Polycystic Ovary syndrome (PCOS) is a very common conditions in 5% to 10% of women in the age group 12–45 years. It can cause problems with menstrual periods and make it difficult for her to conceive. Despite years of research, PCOS remains a complex disorder. The pathophysiology is complicated, and it is thought to be caused by interactions between genetics, epigenetics, ovarian dysfunction, endocrine, neuroendocrine, and metabolic abnormalities, among other things.

Females may skip menstrual periods, have irregular ovulation, making it difficult to become pregnant, and experience abnormal hair growth on the body and face, all of which can contribute to heart disease and diabetes in the long run. PCOS is a significant medical disorder that necessitates

medical therapy or surgical intervention. Many women are unaware that they have PCOD or PCOS. The following is a list of symptoms that impact ovulation and the ovaries:

Cysts in the ovaries

Escalated male hormone in female

Periods that have been skipped or are irregular

Prevalence of pcod in india

Only a few academics took part in the study, which looked at the frequency of PCOS in different parts of India. According to the scant data available, the prevalence of PCOS in India ranges from 3.7 percent to 22.5 percent. It is difficult to determine the prevalence of PCOS in India due to a lack of statistics and diverse locations.

Common signs and symptoms seen in PCOD

Some women notice symptoms around the time of their first period, while others don't until they've gained a lot of weight or are having problems getting pregnant. The following are the most prevalent indications and symptoms of PCOD or PCOS in women:
Menstruation that is irregular (Oligomenorrhea)

Menstruation has been skipped or there has been no menstruation (Amenorrhea)

Menstrual bleeding is really heavy (Menorrhagia)

Excessive The development of hair (face, body - including on back, belly, and chest)

Acne is a skin condition that occurs when the skin (face, chest, and upper back)

gaining weight

Hair loss is a common problem (hair on the scalp gets thinner and fall out)

Darkening of the skin (Neck, in the groin, and under the breasts)

What Leads to PCOD?

Although the exact cause of PCOS in women is unknown, the following are some major factors:

Excess insulin production: high insulin levels in the body can lead to an increase in androgen production (a male hormone that is very low in females), which can make ovulation difficult.

Excessive androgen hormone production: The ovaries produce unusually high levels of androgen hormones, which can cause acne and hirsutism (hair growth on the face and body)

Low-grade inflammation: According to a new study, women with PCOS have low-grade inflammation, which leads to an increase in androgen production, which might cause blood vessels or cardiac problems.

Women with PCOS have a genetic link that can be traced back to their ancestors.

Complication of PCOD

When a woman has PCOD or PCOS, she will wonder what happens to her body.

Having higher-than-normal androgen levels can have negative consequences for your health. These are the PCOS or PCOD problems that necessitate medical attention:

Uterine haemorrhage that isn't normal

Hypertension or infertility Infertility

Diabetes type 2

Premature birth and preterm labour

Metabolic syndrome is a condition in which the body's metabolism (risk for high blood sugar, high blood pressure, heart disease, diabetes, and stroke)

Depression is a mental illness that affects (Many women end up experiencing depression and anxiety due to unwanted hair growth and other symptoms)

Apnea (sleep deprivation) (More common in women who are overweight, causes repeated pauses in breathing during the night, which interrupt sleep)

Endometrial cancer is a type of cancer that affects the lining (Due to thickened uterine lining)

Miscarriage is a common occurrence in women (spontaneous loss of a pregnancy)

Females who have been diagnosed with PCOD or PCOS should keep track of their health on a frequent basis to avoid future concerns. PCOD can lead to type 2 diabetes, obesity, and other mental difficulties if left untreated, while PCOS can lead to major complications such as hypertension, hyperglycemia, endometrial cancer, and pregnancy complications (premature birth / preeclampsia / miscarriage) if left untreated.

PCOD VS PCOS

Some women may be confused about whether PCOD and PCOS are the same thing or not. Both medical diseases are linked to ovaries and hormonal imbalance in women of reproductive age (between the ages of 12 and 51) and have similar symptoms. Here are some key distinctions between PCOD and PCOS that every woman should be aware of:

PCOD	PCOS
PCOD is a prevalent condition that affects 10-15% of the world's female population.	PCOS is a significant medical disorder that affects 0.2 - 2.5 % of the world's female population.
PCOD is a condition in which the ovaries generate a large number of immature or partially mature eggs as a result of poor lifestyle choices, obesity, stress, or hormonal imbalance.	PCOS is a metabolic disease that can cause anovulation, which is when the ovaries cease producing eggs.
PCOD has no effect on a woman's fertility; she can still ovulate and become pregnant with little assistance, and with the right medicine, she can finish the pregnancy.	PCOS has a significant impact on women's fertility. Women with PCOS are unable to ovulate on a regular basis, making pregnancy difficult. If they become pregnant, they have the risk of miscarriage, early birth, or pregnancy problems.
PCOD does not have any adverse complications.	In its latter stages, PCOS can lead to major consequences such as type 2 diabetes, heart disease, high blood pressure, and endometrial cancer.

Weight loss, a nutritious diet, avoiding junk foods and processed foods, and regular exercise have demonstrated to be useful in both PCOD and PCOS. Early detection of the disease will aid in the treatment of the symptoms. Consider a homoeopathic treatment or gynaecologist if you are experiencing missed or irregular periods, acne, or hair growth on your back or face.

Treatment for PCOD/PCOS

The treatment for PCOD / PCOS focuses on addressing your specific issues, such as irregular periods, obesity, infertility, acne, or hirsutism. Weight loss, nutrition, and exercise are usually the first steps in treatment. Losing merely 5 to 10% of your body weight will help you get your menstrual cycle under control.

Hair growth, acne, and metabolic issues will all require different treatments. This includes the following:

To address hormonal imbalance and insulin resistance, medication might be used to regulate the menstrual cycle.

Oral medications and injections are used to induce ovulation (the quality and amount of ovulation).

Fertility medications are used to treat infertility.

Getting rid of excessive hair growth

Acne and pigmentation skin treatments

In the event of PCOS patients who have not responded to hormonal treatment, ovarian drilling is a laparoscopic operation that destroys androgen-producing tissue in the ovaries.

Any diet that aids in weight loss can aid in the treatment of your disease. Some diets, on the other hand, may have advantages over others. Weight loss can also lower cholesterol, lower insulin, and lower the risk of heart disease and diabetes.

Women can reduce weight by doing 20 minutes of moderate-intensity exercise five days a week. Exercise-induced weight loss enhances ovulation and insulin levels.

The best treatment for PCOD and PCOS is early diagnosis, followed by the use of appropriate therapeutic modalities to alleviate symptoms. Maintaining a healthy lifestyle is just as important as treating hormone imbalances and the illnesses that go along with them.

What homoeopathy offers in PCOD/PCOS

Homoeopathy for PCOS, on the other hand, focuses on a woman's general health. It aids women in maintaining uterine health and regulating their ovulation cycle.

Homoeopathic remedies, according to study, restore hormonal equilibrium without tipping the scales too far. The ultimate goal of homoeopathy is to heal the condition's fundamental cause rather than just masking the symptoms. As a result, homoeopathic medicines for PCOD might be an excellent complement to standard medications. They ensure that you receive a safe and healthy treatment that does not significantly alter your body.

Homoeopathic treatment works by treating the whole person, and it needs patience. The normal PCOS treatment length in homoeopathy is three to six months if you take your medication as advised by your homoeopathic professional. This will depend on a woman's specific symptoms and the severity of her ailment.

Instead of treating the disorder itself, the homoeopathic approach concentrates on controlling the symptoms of PCOS. This is why they demand patience. The duration of homoeopathy PCOS treatment varies based on the severity of your problem. PCOS can undoubtedly be handled if you follow your homoeopathic specialist's recommendations and exercise constancy in your therapy.

What is expected from the patient with homoeopathic treatment?

PCOD / PCOS primarily affects females' hormone balance. The steps below will assist females in lowering their androgen levels in the body:

Maintaining a healthy body weight: For females, a BMI of 18.5 to 24.9 is regarded optimum and healthy, whereas a BMI of more than 30 is deemed obese and unhealthy. Maintaining a healthy body weight or losing weight aids in decreasing overall cholesterol levels, lowering the risk of high blood pressure, heart disease, and diabetes, and restoring ovulation phase in the menstrual cycle by maintaining optimum insulin and androgen levels. To achieve a healthy BMI, consult a dietician for a weight-loss programme.

Limiting carbohydrate intake: If you have PCOD or PCOS, stick to a low-carb or complex carbohydrate diet to keep your

insulin levels in check.

Avoid sugar and starchy meals while eating fish, meat, eggs, above-ground veggies, and natural fats (such as sunflower seeds, pumpkin seeds, sesame seeds, and butter) (like potatoes, bread, rice, pasta, and beans)

Exercise and stay active on a regular basis: Regular exercise and becoming active will help you regulate your blood sugar levels and keep your weight under control if you have PCOD or PCOS.

Lets see a case cured with homoeopathy in PCOD

CASE

A 24 years old female, self employed Came with the complaint of

Amenorrhoea since 2 months

Was on OC pills from last 6 months

Previously diagnosed as PCOD and was taking treatment for the same

O: Gradual

P: Gradual

D: 9- 10 months

FMP: 14 years of age

LMP: 28/6 /2020

Initial periods

D: 5-6 days

Quantity: Moderate

Quality: Bright red, clot

S: Pain in abdomen, back, thighs

Staining: No

Odour: No

Leucorrhoea: moderate, no odour and stain, no itching, white, watery, thin liquid

Periods of last 1 years

D: 1-2 days

Quantity: Scanty to Spotting to Nil

Quality: dark red, large clot

S: Cramp in abdomen, back, thighs, heaviness in breast, pimples,

Staining: No

Odour: No

Leucorrhoea: increased than before, no odour and stain, itching, white, thick liquid

ASSOCIATED COMPLAINTS

Weight gain

8-9 kg in last 8-9 months

Current weight is 66kg

Increased abdominal fat

Due to increase in weight feels tired very

easily while climbing stairs
Tried exercise at home could not maintain the schedule as she is running the business the herself
Patient as a person
Appearance: Moderate built, black hair, visceral fat
Appetite: Good, cannot tolerate hunger
Has a very bad eating habit, skip morning breakfast every day, does not add fruits, eats junk food when ever gets time to eat
Stools: N/S
Urine: N/S
Perspiration: moderate, profused on upper lip, no odour, no staining
Sleep: 6-7 hrs refreshing, no habits, no side preference
Dreams: vivid, does not remember
Child development
Fifth child in the family
She is staying with the family in Mumbai since childhood
Had a good childhood with lots of good memories with friends and family
Mind
She is a young adult with middle adulthood problems, like having emotional tensions.
She has just started a new business in partnership
She is facing a lot of emotional problem with family and friends
She is bold person willing to take risk and being confident about herself and with her work
She never cries in front of people, tries to control her tears in front of people and cries when alone
Does not want people to know about her soft soft side, thinks people will take advantage of her
When angry she shouts, used abusive language or hits them and leaves the place
Once she releases her anger, she feels good
Does not like people pointing finger at her not even family members
Does not like share her problems with family feels they will judge her
She is a kind person who can help people with money and support her friends when in necessary

Addresses her thoughts in front of people
Likes to talk and travel and have fun time with friends
Her relationship with family is not in good terms
Thinks about her problems at night and cries
She cares for her family and friends but does not express it
She has been in few affairs which made her more vulnerable emotionally she eventually broke up with them
Lately the increasing weight and irregular menses is making her irritated and get angry even more
Worried that she might not get pregnant if she has PCOD
Observation
Wept while narrating her complaint and her family issues
Diagnosis
PCOD + Obesity
Based on the history and selecting characteristic symptom remedy was prescribed
Remedy given
PULSATILLA 1M (2p) X one per day in the afternoon
To start taking medicine 2 days before the menses date
Auxiliary mode of treatment
The patient was asked to eat healthy proper meals every day
The patient was asked to do regular physical exercise for 30 min per day
FOLLOW UP
1st F/U
On the 3d day after taking the homoeopathic treatment she got her menses after 4 months on 28/7 /2020
Flow was moderate
Pain was more than usual
Stopped after 4 days as per her regular cycle
Was asked to take PULS 1M (2p) next month 2 days before her cycle starts
No other complaint
2nd F/U
On her 3rd day after taking the homoeopathic treatment she got her menses after taking pulsatilla for the second month on 29/8/2020

Flow was moderate
 Pain was bearable
 Stopped after 4 days as per her regular cycle
 Was asked to take PULS 1M (2p) next month 2 days before her cycle starts
 No new complaint
 3rd F/U

On her 3rd day of she got her menses after taking pulsatilla for the second month
 Flow was moderate
 Pain was bearable
 Stopped after 4 days as per her regular cycle
 Was asked to stop PULS 1M (2p) next month and wait for regular cycle
 Mentally she was feeling better than before
 The patient was asked to stop medicine and expect for the menses in a natural way
 4th F/U

She got her menses WITHOUT taking pulsatilla in the following month for the 1st time in 2 yrs

Flow was moderate
 Pain was bearable
 Stopped after 4 days as per her regular cycle
 Was asked to discontinue PULS 1M (2p) and wait for regular cycle

Figure 1 before treatment

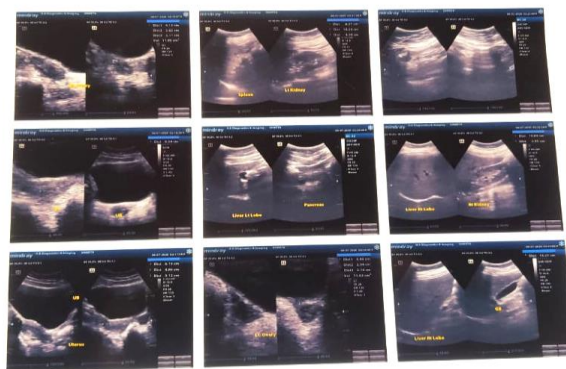
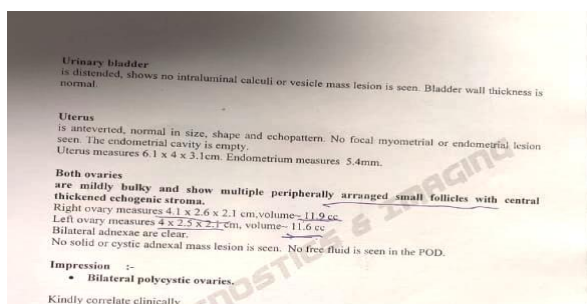
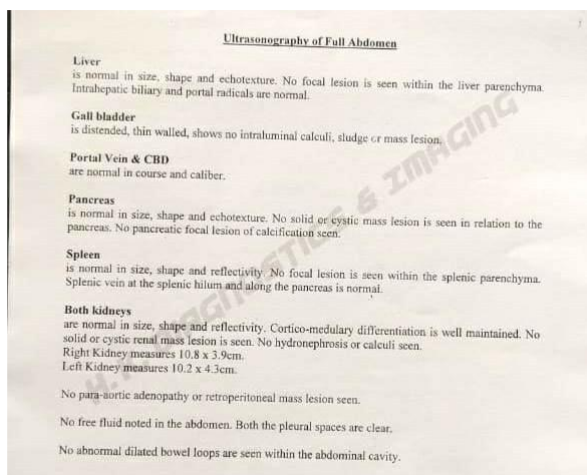
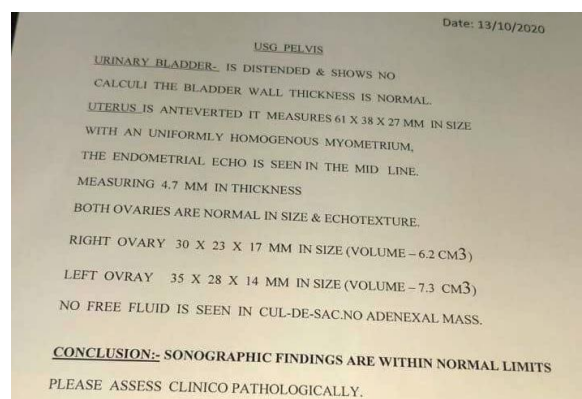


Figure 2 After treatment



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