

Evaluation of the effectiveness of Homoeopathic medicine in the management of polycystic ovarian syndrome: A prospective observational study

**Dr. R. Kundu, Dr. Suhail Sheikh, Dr. Vishal Nimbhore, Dr. Varsha Dharne, Dr. Shweta Patil,
Dr. Sonali Rohom, Ms. Ketki Chaudhari, Ms. Taba Ansari, Ms. Fouzia Siddiqui**

Abstract

Objectives:-

1. To evaluate the effectiveness of Homoeopathic medicine in the management of PCOS.
2. To measure changes in quality of life of patient with PCOSQ scale in cases of PCOS.

Method:-

We collected 45 cases according to our inclusion criteria from Motiwala (National) Homoeopathic Medical College & Hospital & peripheral OPDs. Case taking was done on case recording format and was then repertorized using RADAR. Health related quality of life of the patient was assessed using PCOSQ scale.

Results:-

Our study showed that 40 cases showed improvement whereas 5 cases did not show any improvement. In our study the mean PCOSQ score before study was 92.24 and after study increased to 112.6. On PCOSQ questionnaire 88.88% of patients showed improvement in health-related quality of life and 11.11% of patients did not show any improvement in health-related quality of life. **Conclusion:-** Hence we conclude that homoeopathic medicines are effective in management of PCOS and in improving the quality of life of PCOS cases.

Introduction:-

Polycystic ovarian disease also known as Stein Leventhal Syndrome described in 1935, it is a heterogeneous endocrine disorder with primary ovarian morphological changes.¹²

Polycystic ovary syndrome (PCOS) is a complex metabolic, endocrine and reproductive disorder.²⁶

In this the patient typically complains of amenorrhea, is sub fertile and has slightly enlarged and polycystic ovaries which have a smooth pearly colored and thickened capsule. The syndrome is seen in the second and third decades of life and, is about 50% of cases, includes slight hypertension, obesity and a suggestion of virilism as manifested by a heavy build and hirsutism. Irrespective of the microscopic appearances, however, it is clearly established that there is no defect in the hypothalamic, pituitary- ovarian axis. Normal function is, however, masked by inhibition of ovarian follicular development and inappropriate feedback to the pituitary. The high oestrogen production is largely due to conversion of androgens to oestrogen in the ovary and peripheral. This causes an increase in LH and a decrease in FSH. A vicious circle is established, for the increase in LH and induces thecal hyperplasia and increased androgen synthesis in the ovary. High levels of androgen results in an increase in the peripheral production of oestrogen and a reduction in the sex hormone binding globulin. This leads to an increase the level of free androgens to produce hirsutism and to be converted to oestrogen. There is anovulation as a result of the effect of the androgens on follicular maturation.

Another consequence of the raised oestrogen levels is the target organ of effect on adipose tissue formation and endometrial hyperplasia.¹³

In conventional medical system, metformin, oral contraceptives, antiandrogens, clomiphene citrate and thiazolidinediones are used for symptomatic management. Metformin is commonly used either alone or in combination with other medicines.^{23 28} It reportedly reduced hyperinsulinemia and hyperandrogenemia independently of changes in body weight. In a large number of cases these changes were associated with striking, sustained improvements in menstrual abnormalities and resumption of ovulation,^{24 29} but it causes gastrointestinal intolerance in 30% (nausea, abdominal pain and/ or diarrhoea) of patients. It is contraindicated in liver disease and certain other clinical conditions.²⁷

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A cross-sectional study among adolescent and young girls in Mumbai, India, indicate the prevalence of 22.5% by Rotterdam and 10.7% Androgen Excess Society criteria.^{22 27}

Screening many women with PCOS demonstrates challenges to feminine identity and body image due to obesity, acne, and excess of unwanted hair, also, infertility and long-term health related concerns that compromise the quality of life and adversely affect mood and psychological wellbeing. Some authors have shown that women who have PCOS are more prone to depression and anxiety come along self-esteem common negative body image and sexual dysfunction.¹

A pilot cross-sectional study conducted in Tamil Nadu assessed young adolescent Females and found a prevalence of 18% for PCOS. They also conducted that the proportion of PCOS was higher in urban women in comparison to the rural woman. A similar study conducted in Mumbai, which was an urban community-based study, found that the prevalence of PCOS was 22.5%.²

Homoeopathic prescription being holistic might help in these aspects, hence polycystic ovarian syndrome questionnaire [PCOSQ], which evaluates emotional aspects along with body, hair, weight, infertility and menstrual problems for the assessment of quality of life. PCOS, however, seems to be related to an imbalance in girl's hormones; is the most common or moral reproductive problem in women of childbearing age. The most important step is to diagnose the condition in time and provide proper treatment for PCOS, so that it will help to reduce the girl's or young woman's chances of having serious side effects which give rise to psychological distress and poor health related quality of life later on that. The conventional medical management of PCOS is its symptomatic treatment and lifestyle modification with weight reduction, Metformin, oral contraceptives, Anti-androgens, clomiphene citrate and thiazolidinediones are used for the management of different presentations of PCOS.

Moggetti et al. concluded after study that Metformin treatment reduces the hyperinsulinaemia and hyperandrogenaemia, independently of changes in body weight. In large number of patients these changes were associated with striking, sustained improvements in menstrual abnormalities and resumption of ovulation.

The most common side-effects of Metformin are nausea, and vomiting or diarrhoea. Oral contraceptive pills reduce hyperandrogenism as oestrogen suppresses androgen and adrenal production. Glucocorticoid such as dexamethasone 0.5MG or prednisolone 5mg at bed time also reduces androgen production. Cyproterone acetate has been effective in the treatment of hirsutism.⁷ Homoeopathic

treatment has no side-effects and holistically treat individuals. Homoeopathic medicine can modify general tendencies, thus causing cure of conditions. These medicines give safe and gentle treatment in a cost-effective way, whereas in vitro fertilization and surgical resection and metformin cost a lot. Ciner et al .Concluded after study, mentioned in CCRH protocol for PCOS, that psychological distress due to depression and anxiety is more common in patients with PCOS as compared with healthy women. Depression in PCOS might be associated with obesity and metabolic abnormalities including insulin resistance and dyslipidemia. In another study the author concluded that overall depression, anxiety mean scores and depression rates did not show a significant change in cases of PCOS after treatment with OCP's.⁸ Dr Hahnemann once said “there are no diseases, but sick people”. PCOS is considered as the illness of the suffering woman but not as the disease of ovaries, according to homeopathy. In this chapter 1 (the sick) of lectures of homoeopathic philosophy Dr Kent says that “it is the sole duty of the physician to heal the sick. It is not his sole duty to heal the result of the sickness, but the sickness itself. When the man himself has been restored to health, there will be restored harmony in the tissues and the activities”.¹⁴

A fundamental and clear understanding of underlying pathophysiology with multifactorial evaluation impose treatment success and overall management of patients the patient is treated as a whole by taking into contemplation all the symptoms she suffers from. If erroneously she is treated for any particular symptoms like acne or hirsutism or hair loss or irregular menses or infertility or any other symptoms, then her disease condition will be unending, never true healing results in homoeopathy acts dynamically on the medium of the sentient faculty of the nerves (Aphorism 16) and induces our own body to regulate the hormone imbalance and brings perfect equilibrium of health¹⁷. In a PCOS woman a dynamic homoeopathic remedy corrects hormonal imbalance, regularizes ovulation, restore the menstrual normalcy, reduces obesity, and manages infertility and thereby decreasing the psychological distress and improving the quality of life of the patient. According to Hahnemannian classification of disease, PCOS falls under dynamic chronic disease with fully developed symptoms of complex miasmatic origin. PCOS is predominantly the combination of Psora- Sycoitic Miasm. Initially when there are functional changes at the level of neuro hormonal axis it belongs to PSORA and then moved to SYCOTIC with the proliferation of development of cysts. PCOSQ, a validated questionnaire will be using for evaluation of quality of life of the patient.⁹ About Janosia Asoka in the book of CCRH Homoeopathic materia medica of Indian drugs it has given that it is one of the sacred plants of the Hindus where married Hindu female worship this tree during the spring when the tree is in bloom. It is also known as Saraca Indica. This drug is mainly used for female problems like menorrhagia, metrorrhagia, leucorrhoea from delayed menses or in place of menses, infantile leucorrhoea, and emaciation in women suffering from long-lasting uterine elements.¹⁶

About Janosia Asoka in Handbook of Homoeopathic mother tincture by Dr Kamal Kansal has written that we have found to be an excellent medicine for the complaints occurring at the climacteric period. For sterility it is generally used with success.¹⁷ As well William Boericke has written about Janosia Asoka in his book of new manual of Homoeopathic materia medica and repertory, he says that it has an extensive sphere of action on female organs. Amenorrhoea and metrorrhagia as well delayed

and irregular menses, menstrual colic, amenorrhea. Pain in the ovaries before flow, menorrhagia, and irritable bladder as well leucorrhoea.¹⁸

In a British Homoeopathic journal they had written about Folliculinum is a natural hormone secreted by the ovaries it is also known as oestrone, Folliculinum benefit to the patient even if not dramatically curative.²⁰ As newsletter says Folliculinum stimulates the continuing natural production of oestrogen by the ovaries and by the other organs. Folliculinum is made from ovarian follicle which is Folliculin. This is a natural hormone secreted by ovaries and also known as oestrone. Basically Folliculinum is a nosode. They had also given about dosing of Folliculinum remedy. According to them Folliculinum 3x or 4C stimulates and can bring on menstruation.²¹ As after going through all these literatures now we have to see which medicine is having more effect and result in the cases of PCOS, it is Homoeopathic medicine with Janosia Asoka mother tincture or it is Homoeopathic medicine with Folliculinum 3x. In German new medicine which is introduced by doctor hammer he has written about PCOS cause, it is related to biological conflict to the ovaries is the loss conflict concerning the loss of a loved one the fear of losing a beloved person can already triggered the conflict.¹⁹

Methodology:-

This is a prospective observational study where 45 cases were collected from college and peripheral OPDs. Detailed case taking was done according to the case recording format. Information was collected using PCOSQ questionnaire to assess quality of life of patient. The cases were repertorized using computer repertory RADAR. Measurement of PCOSQ was done at first case taking and the last follow up. Duration of the study was 6 months.

Inclusion Criteria:-

- Females between age group 15 to 35 years.
- Cases diagnosed with PCOD according to Rotterdam criteria 2003.
 1. Oligomenorrhea and/or amenorrhea patients.
 2. Hyperandrogenism.
 3. Polycystic ovarian is in ultrasonography. (any of the above two criteria)
 - Any type of cyst diagnosed by USG or any patient having USG report with poly ovarian cyst.

Exclusion Criteria:-

1. Patients having clinical history of severe illness like cancer or HIV.
2. Patients with congenital adrenal hyperplasia, adrenal secreting tumour.

Instruments Specification:-

PCOSQ – it is a 26-item questionnaire, developed in the United States and is the Most popular QoL (Quality Of Life) measure used in research involving women with PCOS.^{9 11} We are doing slight modification by grading a symptom severity from 1 to 7 in 26 Item questionnaire in PCOSQ scale. Rotterdam criteria for diagnosis of polycystic ovary syndrome will be used where as two out of three criteria should be present.^{7 10}

Sample size – 45

Sampling technique - Simple random sampling.

Results:-

SR.NO	OBJECTIVES	RESULT
1.	Primary objective – To evaluate the effectiveness of Homoeopathic medicine in the management of PCOS.	Our study showed that 40 cases showed improvement whereas 5 cases did not show any improvement.
2.	Secondary objective – To measure changes in quality of life of patient with PCOSQ scale in cases of PCOS.	In our study the mean PCOSQ score before study was 92.24 and after study increased to 112.6. On PCOSQ questionnaire 88.88% of patients showed improvement in health-related quality of life and 11.11% of patients did not show any improvement in health-related quality of life.

Statistics: -

1. Demographic Data:

Graph showing commonly affected age groups.

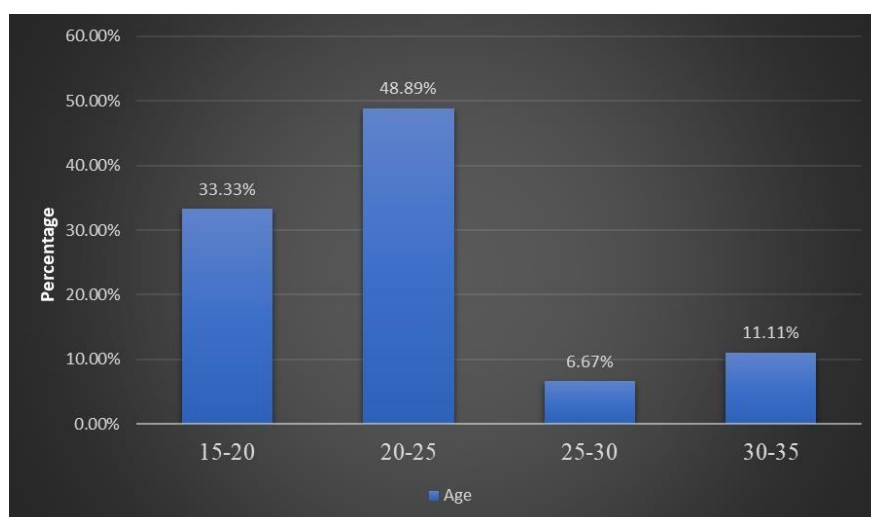


Figure 1

2. Total change in the mean PCOSQOL before and after study

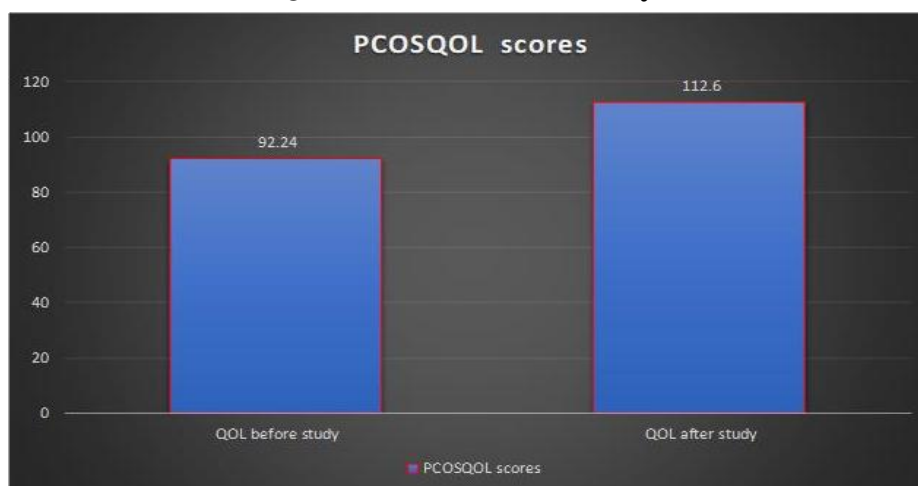


Figure 2

3. Frequently indicated homeopathic medicine in our study

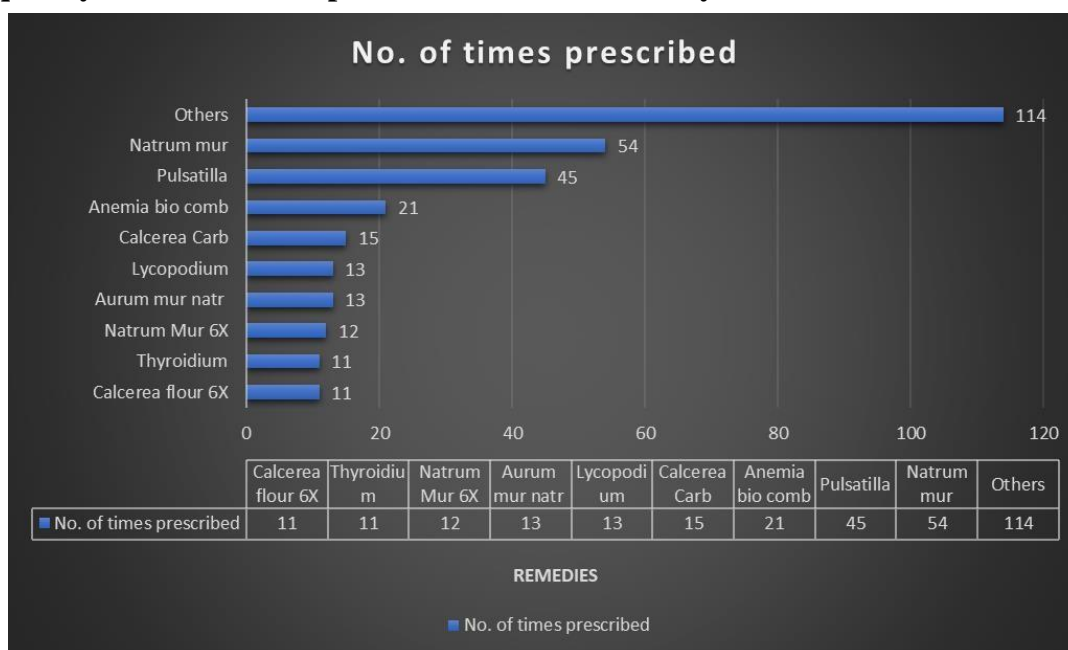


Figure 3

4. Percentage improvement in PCOSQOL

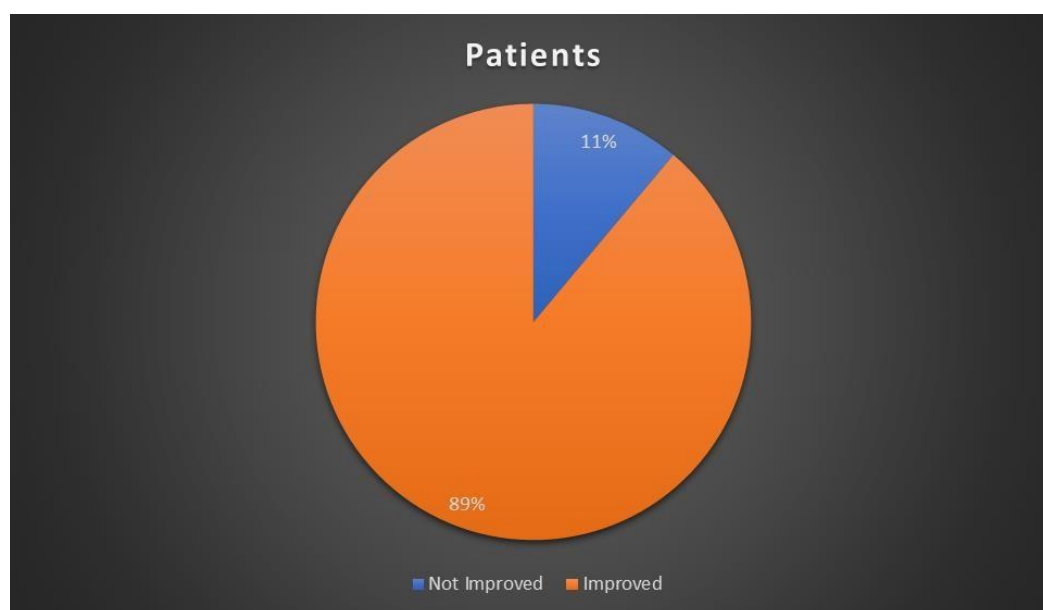


Figure 4

Discussion:-

Our study was aimed at finding out the effectiveness of homeopathic medicine in management of PCOS as well as improved in QOL in females with PCOS. Study group consisted of 45 females where most female were of 20-25 years of age (48.89%). They were treated using homoeopathic medicines based on symptom similarity and showed marked improvement. It is also reported that proper diet regimen and regular exercise should be practiced along with homoeopathic medicines in management of PCOS and improving healthrelated quality of life.

Conclusion:-

Homoeopathic medicines are effective in management of PCOS.

Homoeopathic medicines are effective in improving the QOL of PCOS cases.

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