# Efficacy of Homoeopathic Remedies in Management of Polycystic Ovary Disease

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***Abstract*—Polycystic ovarian disease (PCOD) can be positively impacted by homeopathic therapy, which is founded on the ideas of individualization and symptom similarity. To address the distinct symptomatology of PCOD patients, Homoeopathy offers gentle, non-invasive treatments including Pulsatilla, Sepia, and Lachesis. These treatments work to normalize menstrual cycles, balance hormones, and lessen ovarian cysts. Homoeopathy is a promising treatment for PCOD management since it has few adverse effects and, when used by trained professionals, improves the well-being of those who are affected.**

***Index Terms*—Homoeopathy, Repertory, Medicine, Polycystic ovarian disease.**

## I. INTRODUCTION

Polycystic ovary syndrome, or polycystic ovarian syndrome (PCOS), is the most common endocrine disorder in women of reproductive age. **(12**). The syndrome is named after cysts which form on the ovaries of some people with this condition, though this is not a universal symptom, and not the underlying cause of the disorder .Women with PCOS may experience irregular menstrual periods, heavy periods, excess hair, acne, pelvic pain, difficulty getting pregnant, and patches of thick, darker, velvety skin etc.

Polycystic ovary syndrome, or polycystic ovarian syndrome (PCOS) is the 4th gynecological problem of hospital admission.

About 15 – 20 % of women in reproductive age group are affected by Polycystic ovary syndrome, or polycystic ovarian syndrome (PCOS).

Symptoms of PCOS may begin in adolescence with menstrual irregularities, or woman may not know that she has PCOS until later in life when symptoms and / or infertility occur.

"Never choose indifference – choose to fight." September is PCOS (Polycystic ovary syndrome) awareness month. PCOS affects women of reproductive age (15-49 years). Worldwide, it affects 4%–20% (8-40 crore) of women. In India, it affects 3.7% to 22.5% (1.3-7.9 crore) of women. (12)
An estimated one in five (20%) Indian women suffer from PCOS. PCOS is common in reproductive age women, most patients come with complain of pain 54(44.1%) and Obesity 36(25.7%) with Disturbed Menstrual cycle 13(9.3%) some were present with complain of Infertility 13(9.3%). PCOS were seen in 48(34.3%) patients. Ultrasound is effective in the diagnosing PCOS in early age.

## II. DEFINITION

Polycystic ovary syndrome is a condition where you have few, unusual or very long periods. It often results in having too much of a male hormone called androgen. Many small sacs of fluid develop on the ovaries. They may fail to regularly release eggs.

## III. ETIOLOGY

The exact cause of PCOS isn't known. Factors that might play a role include:
Insulin resistance.
Low grade inflammation.
Hereditary.
Excess androgen.

## IV. PATHOGENESIS

The pathogenesis of PCOD/PCOS as follow.
1. Alteration – GTRH – Result – increasing in LH secretion.
2. Alteration – insulin secretion – result – increasing insulin production or insulin resistance.
3. issue with androgen synthesis – result – increase ovarian androgen production.
Genetic and environmental factors + others factors = PCOD/PCOS.
Obesity is main factor and obstacle in PCOS. Insulin resistance plays role in metabolic and reproductive features.

## V. CLINICAL FEATURES

Symptoms of PCOS often start around the time of the first menstrual period. Sometimes symptoms develop later after you have had periods for a while.

- heavy, long, intermittent, unpredictable or absent periods
- infertility
- acne or oily skin
- excessive hair on the face or body
- weight gain, especially around the belly.

PCOS signs and symptoms are typically more severe in people with obesity.ICD-10 code E28. 2 for Polycystic ovarian syndrome is a medical classification as listed by WHO under the range - Endocrine, nutritional and metabolic diseases.

## VI. INVESTIGATION

Physical Examination:
Ask the patient about menstrual history
Abnormal hair growth
Acne etc.

Pelvic examination: - feel the area of patient body including vagina, cervix, uterus, fallopian tube, ovaries, for anything unusual.
Lab Investigation:

Blood tests: - Hormonal level: -
FSH - affects the ability to get pregnant – in case of PCOD it is lower than normal value.
(Normal range: - 4.5 – 21.5 IU/L) (International unite per liter)
FH – encourage ovulation – in case of PCOD it is higher than normal.
(Normal range: - Women week 2, before ovulation 6.17 – 17.2 IU/L) & (Women week 3 & 4 of menstrual cycle 1.09 – 9.2 IU/L) (international unite per liter)
Testosterone – sex hormone – higher in women with PCOD.
(Normal range: - 15 to 70 ng/dl) (Nano grams per deciliter)
Estrogen – allow to women to get their period – higher in women with PCOD.
(Normal range: - 50 – 170 pg/ml) (Pictograms per milliliter)

Radiological investigation:
Pelvic ultrasound: -
It shows the picture of ovaries. Women has to lie down and place ultrasound device in your vagina. The doctor will check for cysts in your ovaries & thick lining of uterus.
If the lining of uterus is thicker than normal than women aren't able to menses at time. Ovaries may be 1.5 to 3 times larger than normal.
Ultrasound can show ovary changes in 90% of women who have PCOD.

## VII. HOMOEOPATHIC CONCEPT

Homeopathy is a form of alternative medicine that uses highly diluted substances to treat various health conditions. Many female patients use homeopathy for managing symptoms of Polycystic Ovary Syndrome (PCOS). Homeopathic remedies are individualized based on a person's specific symptoms and overall constitution. Some commonly used homeopathic remedies for PCOS include:

- Pulsatilla: Used for those with irregular periods, particularly when periods are late or absent. The person may also exhibit emotional changes.

- Sepia: May be recommended for those with hormonal imbalances, irritability, and mood swings, as well as for heavy or irregular periods.
- Lachesis: May be used for individuals with left-sided ovarian cysts, irregular periods, or intense premenstrual syndrome (PMS) symptoms.
- Calcarea Carbonica: May be suggested for those with weight gain, cravings for sweets, and fatigue.
- Natrum Muriaticum: Sometimes used for hormonal imbalances, depression, and irregular periods.
- Thuja Occidentalis: May be used for individuals with ovarian cysts and a tendency for warts or other skin growths.