

Original Research Article

Volume 13 Issue 4

April 2024

HOMEOPATHY FOR HORMONAL HARMONY (PCOD): A RETROSPECTIVE CASE STUDY AT DR. BATRA'S CLINIC

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Abstract:

Polycystic Ovary Disease (PCOD) is a prevalent hormonal disorder marked by ovarian cyst formation, irregular periods, and fertility issues. This study aimed to evaluate the efficacy of homeopathic treatment in managing PCOD symptoms and improving patient well-being. 30 female patients exhibiting PCOD symptoms such as acne, weight gain, and irregular periods were enrolled from various Indian cities. They received individualized homeopathic treatment for 12 months and were observed for three years post-treatment cessation. Results showed significant improvement in symptoms within three months of treatment initiation, with gradual progress observed thereafter. This study underscores the efficacy of homeopathy in addressing diverse PCOD symptoms and improving overall patient well-being without adverse side effects

Keywords: Polycystic Ovary Disease, PCOD, individualized homeopathic treatment

Objective:

Polycystic Ovary Disease (PCOD) is a common hormonal disorder where cysts form on the ovaries, leading to irregular periods and infertility. It can also cause obesity and features like excess hair growth. PCOD increases the risk of diabetes and heart disease. While its exact cause is unknown, factors like obesity, inactivity, and family history may contribute. Screening for PCOD-related issues can help prevent long-term complications.

Method:

We enrolled 30 female patients with symptoms such as acne, weight gain, hair loss, and irregular periods from different cities in India. They weren't on hormonal treatment or had major illnesses. They received homeopathic treatment for 12 months and were observed for three years after stopping.

Observation:

Patients responded to treatment within three months, showing gradual improvement in associated symptoms and menstrual regularity. Homeopathy naturally corrects hormonal imbalance without side effects, addressing the root cause and restoring ovulation and menstrual cycles. Mood swings due to hormonal imbalance also improved.

Result:

The study findings revealed:

Complete disappearance of cysts was observed in 73% of patients.

26% of patients experienced a reduction in cyst size, although recurrence of symptoms was noted in this group.

Regularization of menstrual cycles occurred within 12 to 18 months for nearly 84% of patients.

Improvement in acne was noted in 66% of patients.

81% of patients who initially experienced hair fall showed improvement.

Anxiety was relieved in 70% of patients after receiving their constitutional remedy.

Depression symptoms improved in 65% of patients.

Conclusion:

In summary, the findings demonstrate favorable outcomes across various health parameters. A significant proportion of patients experienced complete disappearance or reduction of cysts, alongside improved menstrual regularity, acne, and hair fall. Moreover, a notable alleviation of anxiety and depression symptoms was observed in a substantial portion of patients following personalized constitutional remedies. These results underscore the effectiveness of tailored treatments in addressing diverse health concerns and enhancing overall patient well-being.

Homeopathic treatment showed promising results in improving symptoms such as acne, weight gain, hair loss, and irregular menstrual cycles among the enrolled female patients within a short span of three months. Notably, the gradual recovery observed in these symptoms highlights the effectiveness of homeopathy in addressing the underlying hormonal imbalances that characterize PCOD.

One of the distinctive advantages of homeopathy is its ability to correct hormonal imbalances naturally, without causing adverse side effects. By addressing the root cause of the disorder, homeopathic remedies promote the restoration of ovulation and regulation of menstrual cycles. Furthermore, the alleviation of mood swings, often attributed to hormonal fluctuations in PCOD patients, further emphasizes the holistic approach of homeopathy in improving overall well-being.

The transformation:

Priyadarshini Rao

ARMED FORCES CLINIC
DALHOUSIE ROAD, NEW DELHI-110011

RELATION: *W/O*
NAME: *K. P. Rao* DATE: *02/02/11*
NUMBER: *51450 F* USG NO: *028*
RANK: *cdv*
UNIT: *D. 50k*
AGE: *36yrs*

USG - PELVIS

UTERUS Measures *85x68x36* mm
Anteverted and ante-flexed.
Myometrial echotexture is normal.
Endometrial echo is central and measures *09* mm in thickness.
No intra-luminal contents or focal lesion seen.

RIGHT OVARY Measures *22x21x12* mm
Normal echo morphology.
Multiple follicles seen, largest measuring *0.6* mm.
No focal lesion seen.

LEFT OVARY Measures *26x17x13* mm
Normal echo morphology.
Multiple follicles seen, largest measuring *0.3* mm.
No focal lesion seen.

No free fluid in POD.

IMPRESSION: NORMAL SCAN
Lt Ovarian cyst - likely follicular

C

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E-mail: info@drchandimgg.org
Website: www.drchandimgg.org
Toll Free No: 1800-11-2RAY (1106-11-6726)

Ms Priyadarshini Rao - 37 Yrs/F
KG00190859

Pelvic Ultrasound 10-09-2011

The urinary bladder is normal in appearance.

The uterus is normal in shape, size and echotexture without evidence of any mass lesion. It measures 6.1 x 3.4 x 3.5 cms. Endometrial thickness is 0.4 cms.

Few nabothian cysts are seen in the cervix, largest measuring 0.6 x 0.4 cms.

The right ovary measures 2.2 x 2.1 x 1.2 cms with an estimated volume of 3.2 cc.

The left ovary measures 2.6 x 1.7 x 1.3 cms with an estimated volume of 3.3 cc.

There is no free fluid in the pouch of Douglas.

Clinical correlation would be necessary.

Report Date: 10-9-2011

2/2/2011 : Left ovarian cyst 34 * 17 mm

10/09/2011 : Normal USG findings

DR. B. C. ROY GENERAL HOSPITAL & MATERNITY HOME
(MANAGED BY NEW BARRACKPORE MUNICIPALITY)
DR. B. C. ROY SARANI (MAIN ROAD WEST) NEW BARRACKPORE - 24 PARGANAS (NORTH)

NAME: *Chanda Dry Biswas* PART OF EXAMINATION: *Lower abdomen*
AGE: *25 y* DATE: *10-3-09*
SEX: *F* REFERRED BY DR.: *A. Lahiri*
ADDRESS: REF. NO.:

SONOLOGICAL FINDINGS

Kidneys : Right kidney - Size, shape & position is normal. No calculus, no S.O.L, no hydronephrosis seen.
Left kidney - Size, shape & position is normal. No calculus, no S.O.L, no hydronephrosis seen.

Urinary bladder - Wall appears smooth. No calculus, no S.O.L seen.

Uterus : Size normal. Margin regular. Anteverted. Myometrium homogenous. Endometrium not thickened.

Ovaries : Both appear polycystic. No S.O.L seen.
Rt Ovary - 40 x 25 mm Lt Ovary - 40 x 22 mm

POD - No collection seen.

Impression : PCOS suspected.

Suggested : Biochemical test for PCOS.

10/3/09 – Bilateral ovarian cysts
Right – 40*25mm Left 40*22mm

KIDNEYS

Normal in shape, size, echopattern and corticomedullary differentiation. No evidence of any renal S.O.L. or hydronephrosis detected.

URETERS : Not dilated.

URINARY BLADDER

Normal in shape, size and capacity. Wall is smooth. No obvious intraluminal lesion seen.

UTERUS

Anteverted. It measures 77.7 mm x 45.7 mm x 27.9 mm.
Central endometrial echocomplex is normal in position and thickness (4.2 mm).
Myometrial echopattern is homogeneous.

OVARIES :

Both the ovaries are normal in size, shape and echopattern. Multiple small follicles in both ovaries measuring 8.2 mm & 5.3 mm. respectively. No dominant follicle seen.
RO : 34.1 mm x 16.7 mm LO : 29.9 mm x 16.2 mm.

Adnexa - Clear. No obvious mass lesion or cyst seen.

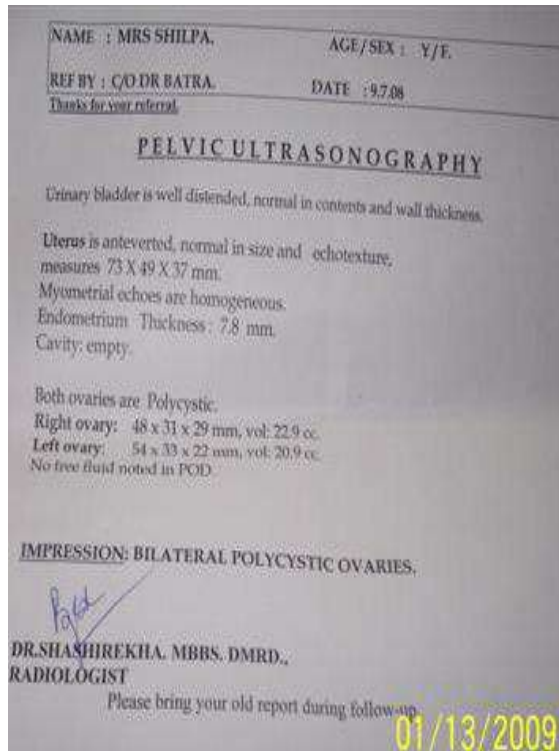
No collection seen in P.O.D.

IMPRESSION

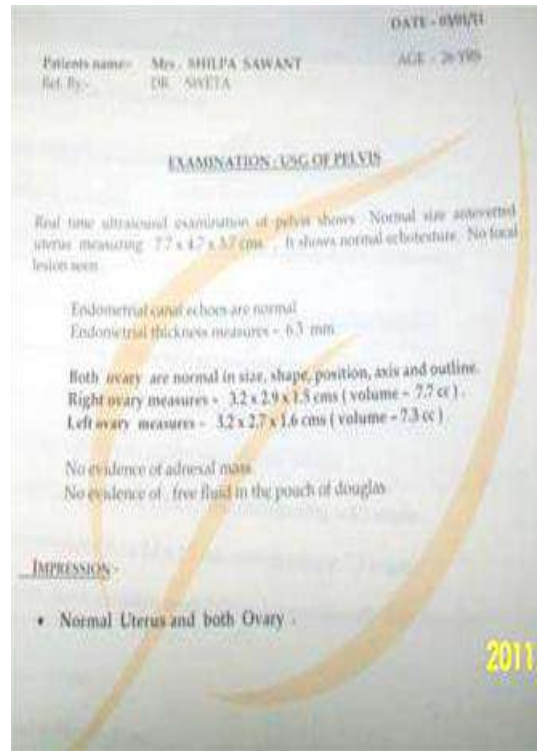
No significant abnormality seen in visualized organs.

No dominant follicle seen.

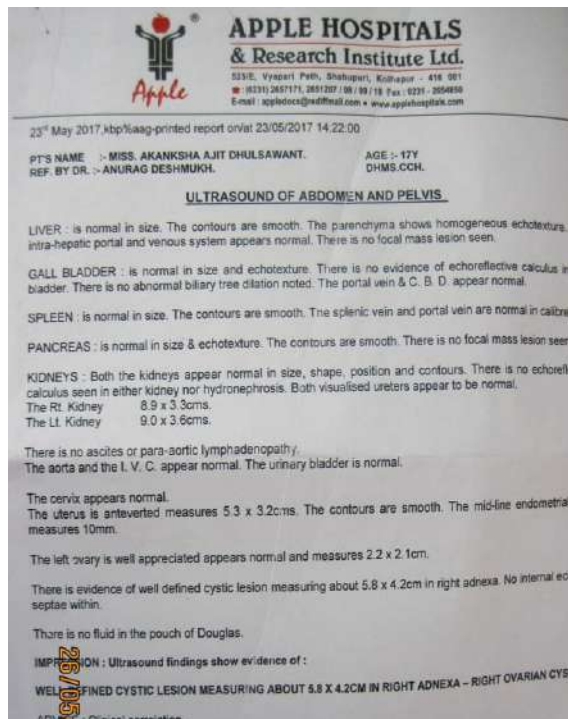
31/04/2012 – Normal USG findings



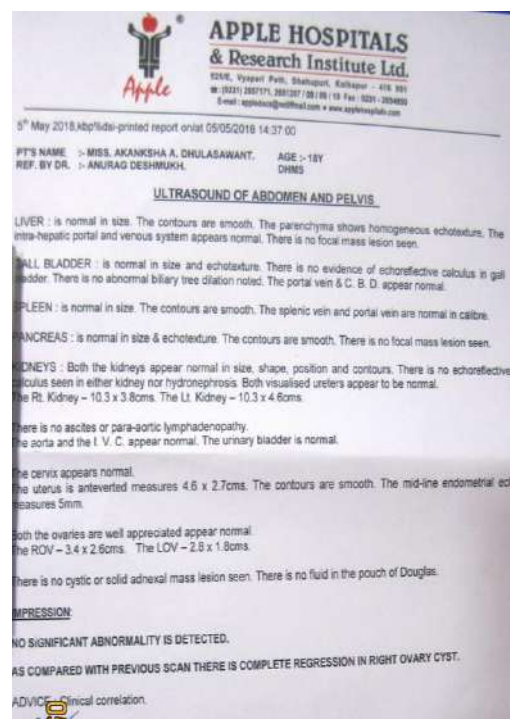
9/7/2008 : Bilateral ovarian cysts
Right – 48*31*29mm Left – 54*33*22mm



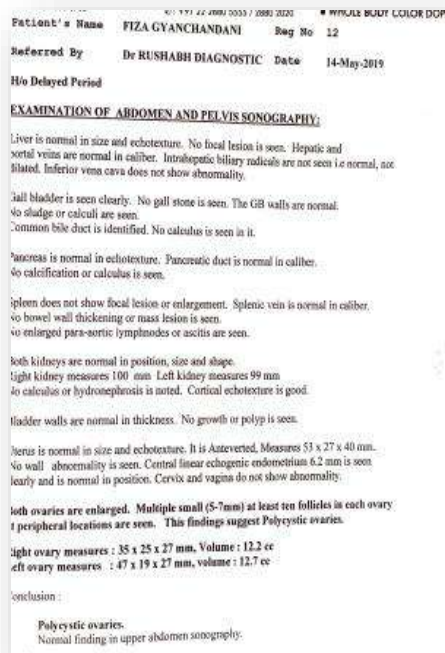
1/11/2011 : Normal USG findings



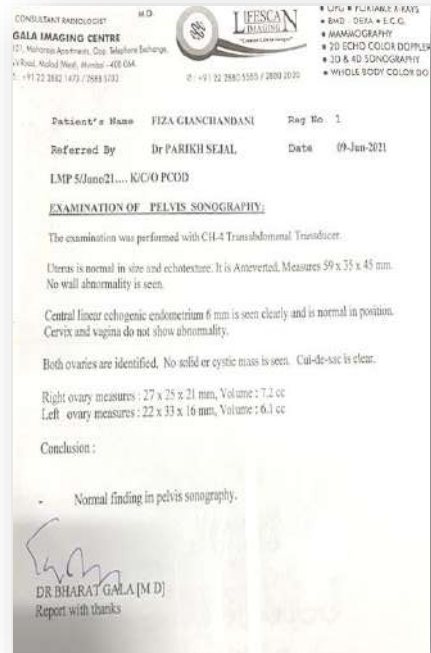
23/5/2017 –Right ovarian cyst- 5.8 * 4.2cm



5/5/2018 – Normal USG findings



14/5/19 – Bilateral ovarian cysts
Right – 35*25*27mm Left- 47*19*27mm



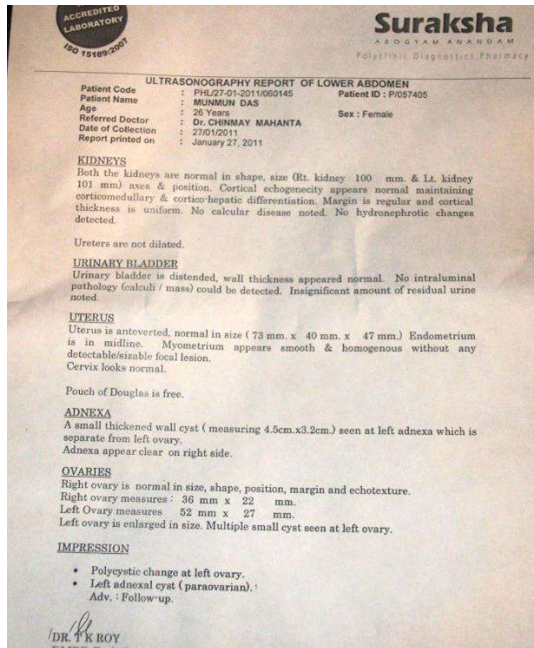
9/06/21 – Normal USG findings



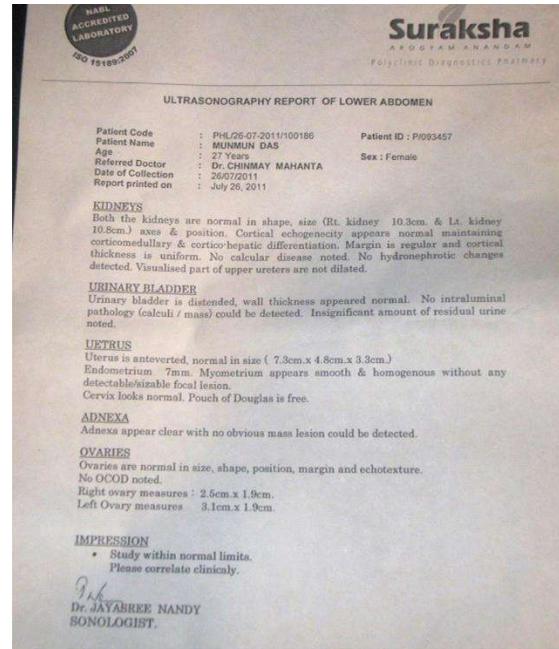
9/5/13 – Bilateral ovarian cysts
Right – 3.7*4.7cm Left – 3.7*2.5cm



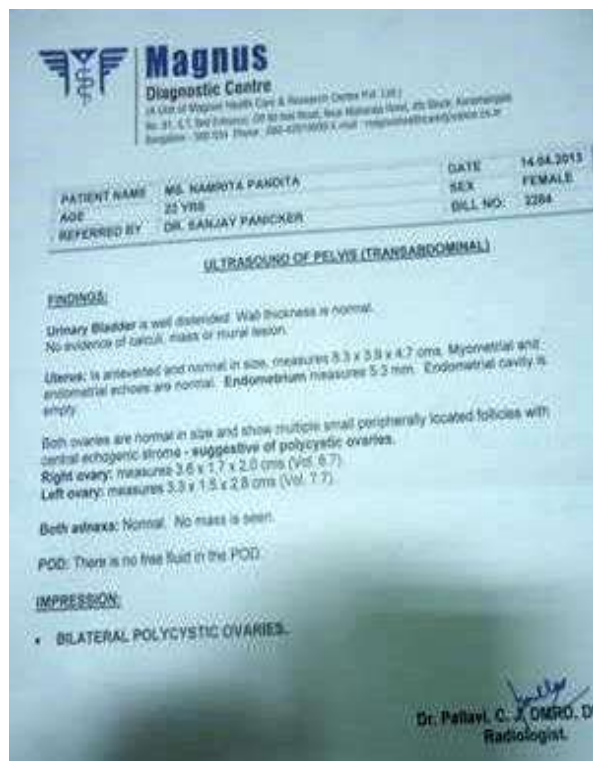
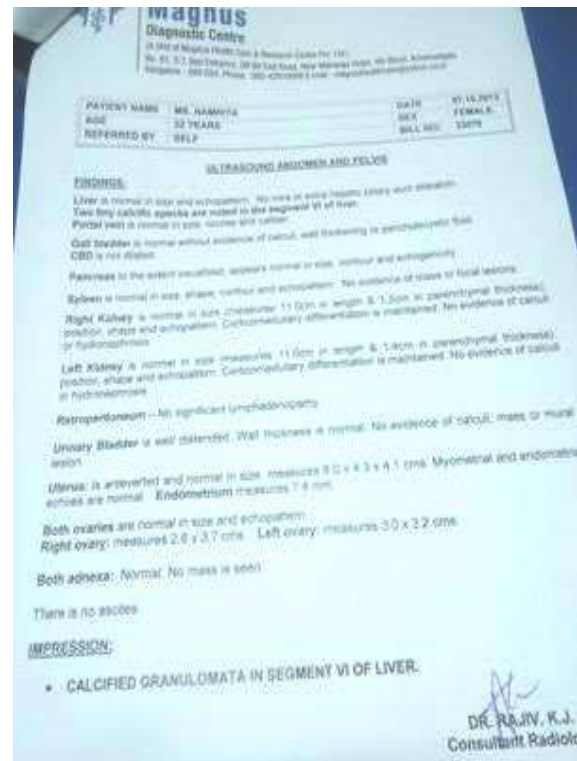
7/12/13 – Normal USG findings



27/01/11 – Left ovarian cyst 52*27mm



26/07/11 – Normal USG findings

14/03/13 – Bilateral ovarian cysts
Right – 3.6*1.7*2.0cm Left 3.3*1.5*2.8cm

22/09/14 – Normal USG findings



10/07/16 – Bilateral ovarian cysts
Right – 3.8*1.8cm Left- 3.9*2.3*2.8cm

18/04/17- Normal USG findings

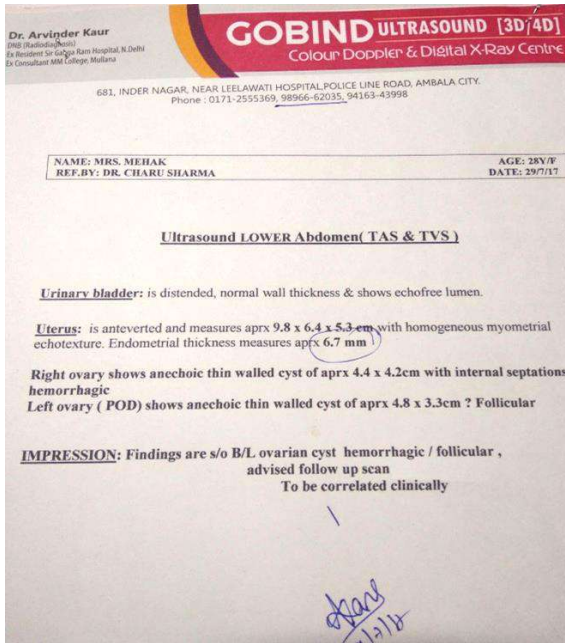


29/05/17 – Bilateral ovarian cysts – 4-5mm

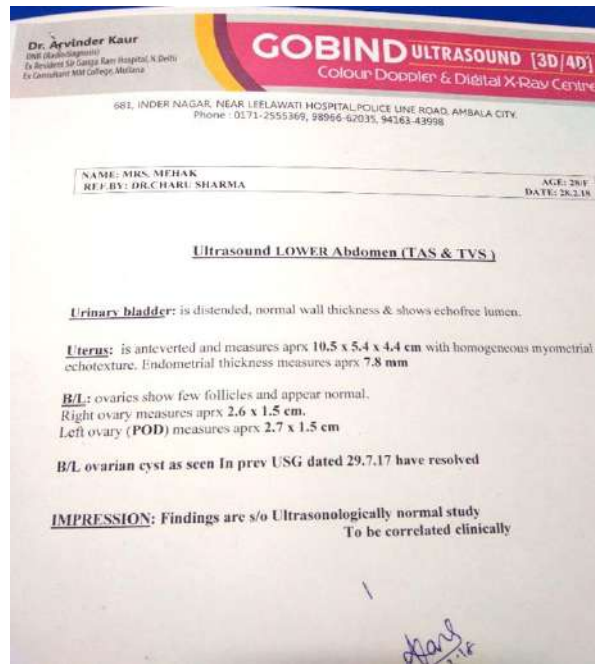


19/03/18- Normal USG findings

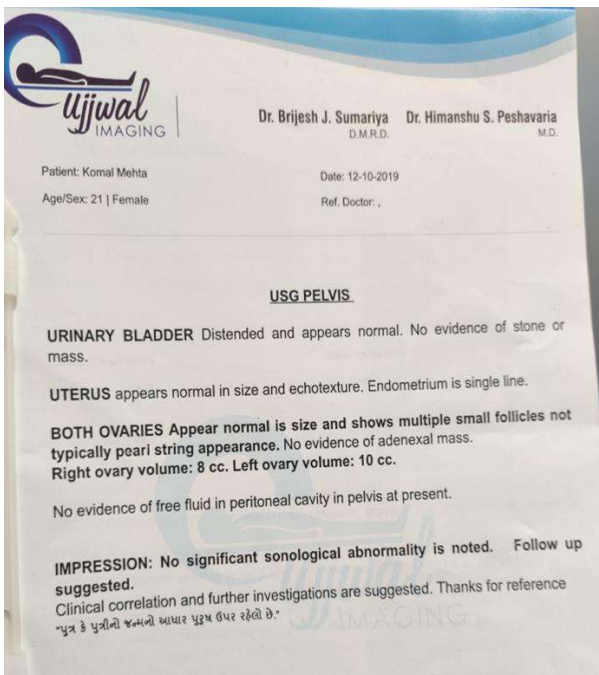
19/03/18- Normal USG findings



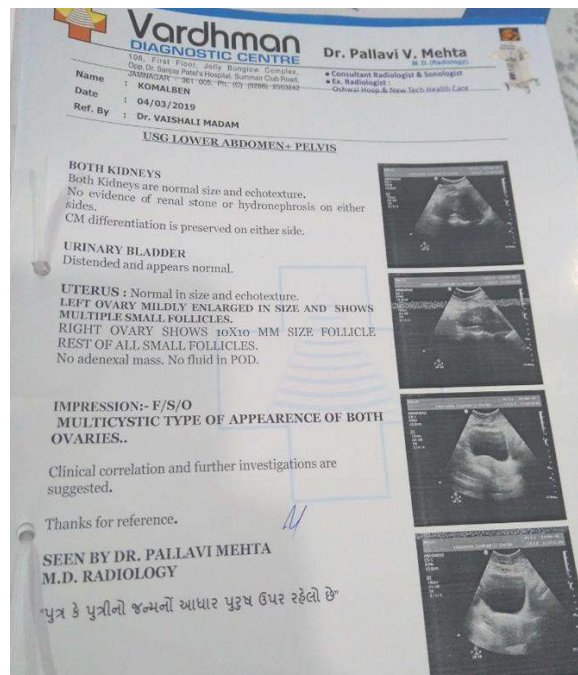
29/07/17 – Bilateral ovarian cysts
Right – 4.4*4.2 cm Left – 4.8*3.3cm



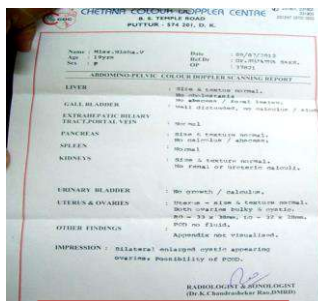
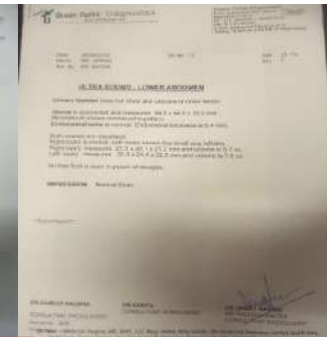
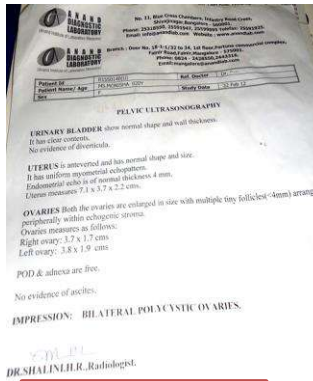
28/02/18– Normal USG findings



04/03/19 – Bilateral ovarian cysts
Right – 10*10mm Left- mildly enlarged

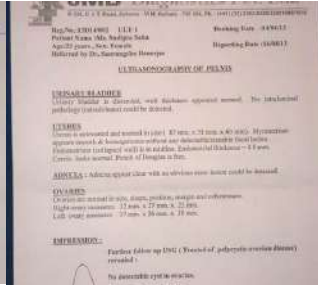


12/10/19– Normal USG findings





05/08/12 –
Bilateral ovarian cysts
Right –
48.5*27.9*22.5m
m
Left-
41.7*36.1*18.8m
m



14/04/13–
Normal
USG
findings



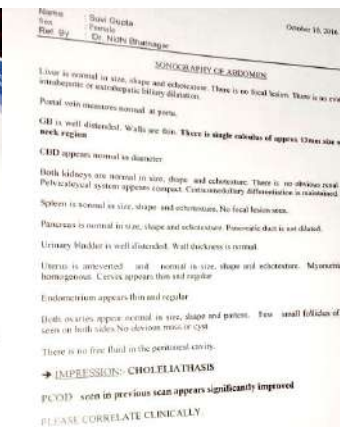
28/11/18
–
Bilateral
ovarian
cysts
Right-
10cc



23/09/20–
Normal
USG
findings



24/01/16 –
Bilateral
ovarian cysts
Right – 9.5cc
Left- 10cc (2-
4mm)



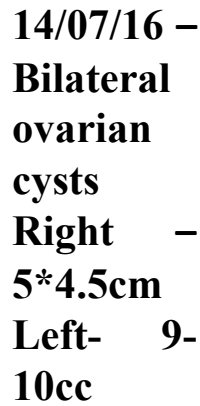
10/10/16–
Normal USG
findings



07/11/15 –
Bilateral
ovarian
cysts
Right –
34*18*34m
m
Left-
33*16*34m
m



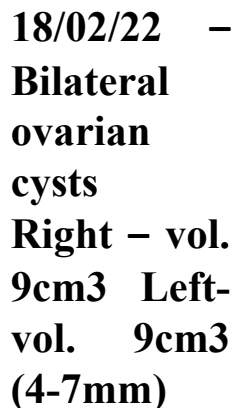
07/07/16–
Normal
USG
findings



**07/08/18-
Normal
USG
findings**

10/01/22 —
Bilateral
ovarian cysts
Right —
32*28*20mm
Left-
33*21*21mm

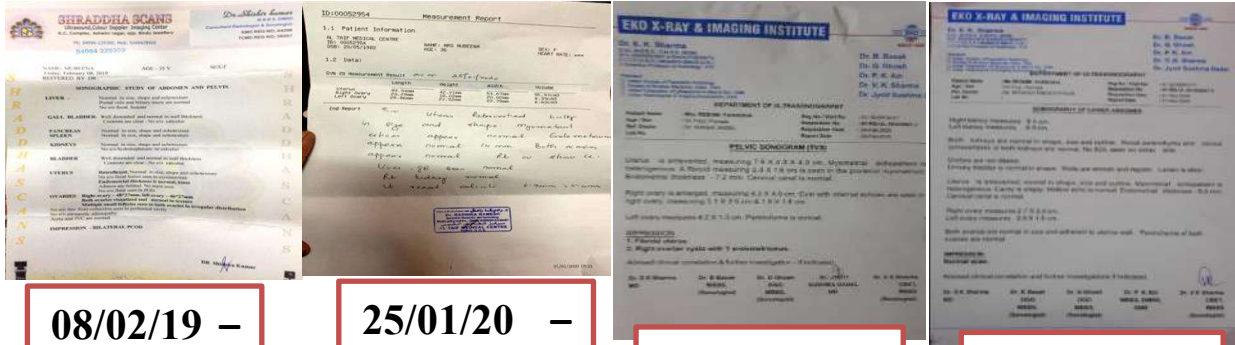
30/06/22 —
Normal
USG
findings



**09/07/22 -
Normal
USG
findings**

**13/10/20 –
Left
ovarian cyst
32*29mm**

04/12/20 –
Normal
USG
findings

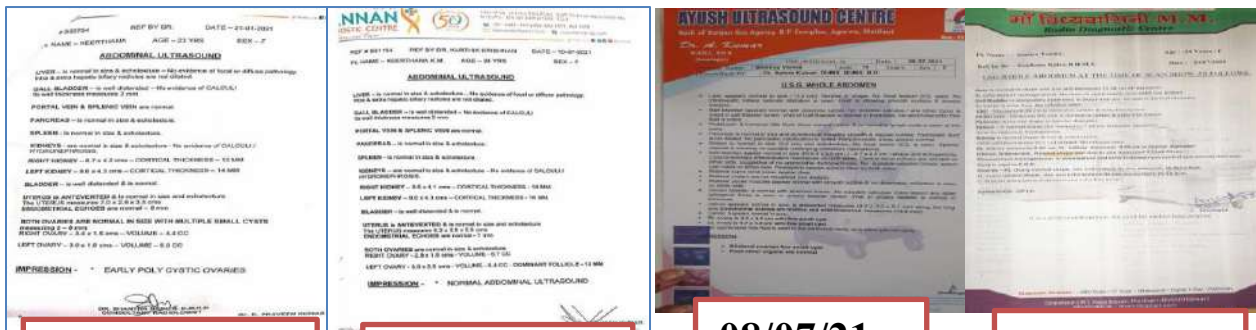


08/02/19 –
Bilateral
ovarian
cyst
Right –
48*27mm
Left-
46*27mm

25/01/20 –
Normal
USG
findings

29/02/20 –
Right
ovarian
cysts
3.1*2.5*1.5
cm

21/11/20 –
Normal
USG
findings

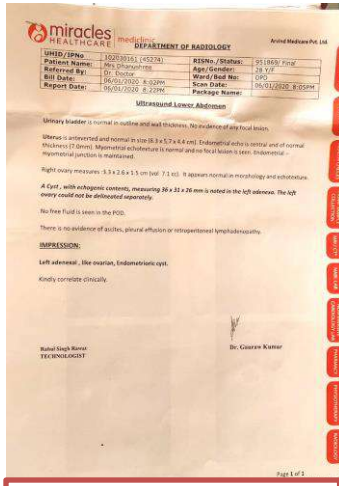


21/01/21 –
Bilateral
ovarian cysts
Right –
3.4*1.5cms
Left –
3.0*1.9cms

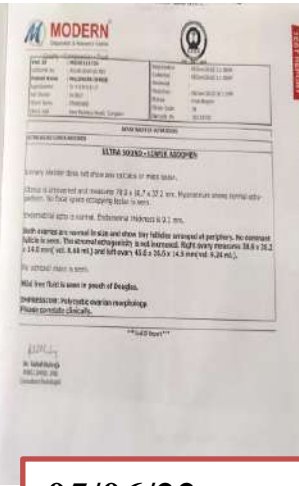
10/07/21 –
Normal
USG
findings

08/07/21 –
Bilateral
ovarian
cysts
Right –
4.3*4.1cm
Left-
4.7*4.4cm

20/07/22 –
Normal
USG
findings



06/01/20 – Left ovarian cysts - 36*31*26mm



05/06/22 – Normal USG findings



11/11/13– Bilateral ovarian cysts Right – 2.0*1.3 cm Left- 2.1*1.2cm



05/02/14 – Normal USG findings