

## Case report

## A novel approach to treat polycystic ovarian syndrome (PCOS) patients

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## ABSTRACT

The precise underlying pathophysiology for the progression of Polycystic Ovary Syndrome (PCOS) remains unclear. Eminent scientists and clinicians normally target the given clinical symptoms to curtail the syndrome in a given period. For years, multiple varied techniques have been developed and followed to treat this disorder. A novel non-invasive, pain-free treatment 'Neurotherapy' has been highlighted in this article that can be considered as a boon in the field of treatment and healing. This study aimed to evaluate the effectiveness of Neurotherapy in a patient with PCOS. A regular case of PCOS with ultrasonography denoting bilateral ovarian cysts is hereby discussed. Post the therapy, ultrasound reports have shown no trace of cysts in both the ovaries thereby concluding that this novel therapy can be very fruitful in treating one of the most common gynaecology related female problems, without any side effects or after-effects.

**Keywords:** Polycystic ovary syndrome; PCOS; ultrasonography; neurotherapy; treatment; application

## INTRODUCTION

One of the most common endocrine-specific gynaecological disorders among females of reproductive age is Polycystic Ovary Syndrome (PCOS) with a worldwide incidence of 4% to 12% (1). Hyperandrogenism, menstrual irregularities and polycystic ovaries are some of the highlighted characteristic features of PCOS, also medically termed as Polycystic Ovarian Disorder (PCOD) (1-3). Women with PCOS are considered to be at high risk for developing infertility, obesity, insulin resistance, cardiovascular disease and/or type 2 diabetes (3-6). The treatment of PCOS is solely based upon its clinical symptoms, hence the result varies from patient to patient. Several new therapeutic protocols have recently been adapted to provide the finest treatment possible. Some of the better fit techniques involve laparoscopic treatment (7-9), dietary modifications, oral contraceptive pills and assisted reproductive technology (ART; 10) and providing probiotic supplementation to PCOS patients (11). Over the past few years, several modified therapeutic approaches and protocols have been adapted depending upon patients' interest to try certain novel methodologies. Since the mode of clinical treatment to a patient with infertility is different from the one with reproduction issues, sometimes the results cannot be comparable. In this given case, a gynaecological problem such as PCOS is aimed to completely culminate without any side effects with the help of a novel therapy.

## Case presentation and clinical history

The study was conducted in a Neurotherapy clinic in Kolkata over five months from October 2020 to

March 2021. Written informed consent was obtained from the patient which included permission to take pictures during the therapy. The said patient is a forty-four-year-old woman with irregular menstruation and dysmenorrhea in the hypogastric region, complained of severe grade body ache and joint pain during the menstrual cycle, accompanied with insomnia, mood swings and anxiety which approximately lasted for a week. She also complained of a gradual increase in weight from 60kg to 76kg over three months. Along with this, she had hypothyroidism for 14 years and was on tablet Thyronorm 50mg OD. It has been noticed that similar kinds of complaints were not present in both the paternal and maternal sides of the family. Ultrasonography report of the lower abdomen presented PCOS.

## Ultrasonography of the lower abdomen

An ultrasound report through the abdominal route disclosed the presence of bilateral enlarged ovaries (right ovary measures 32mm × 15mm and left ovary measures 27mm × 20mm) in addition to bulky uterus, thereby suggesting PCOS. Due to the insufficiency of spatial resolution, the report did not mention the exact count of follicles in both ovaries. Following this, the patient did not take any clinical PCOS treatment and decided to opt for the novel treatment "Neurotherapy" on her own free will.

## Treatment

Neurotherapy is a new approach in the field of alternative medicine and healing that successfully treats PCOS patients. It is a circulation-oriented pressure therapy that works by directly increasing the blood flow to the target organ (in this case it is the bilateral ovaries) thereby rejuvenating the organ over

a while. Normally, an organ disorder imparts an imbalance in the biochemical parameters in the body henceforth leading to the progression of the disease. A neuro therapist completely focuses on activating (or deactivating) the targeted area of the organ by the application of bearable pressure on specific nerve channels to stimulate or inhibit the blood supply, hormones or other body fluids thereby restoring the equilibrium of the body.

## Procedure

The patient/subject must be allowed to rest for 5 minutes at least before the start of every therapy. The therapy is performed in a supine position ensuring complete comfort to the patient. Patients must abstain from consuming a high-fat diet for 1 hour, caffeine or alcohol for at least 6 hours before the treatment. In the above PCOS case, the following are the three pressure points that have been targeted to treat the patient by increasing the circulation of blood in the lower abdominal cavity. Forty-six therapies have been provided to the patient within approximately 5 months (3 therapies/week):

1. **Pan:** The therapist stands on the medial part of the patients' thigh with the medial and lateral plantar part of the foot/hand. Pressure is applied simultaneously on both the thighs for 6 seconds followed by 30 seconds interval (Fig.1). The same procedure needs to be repeated six times, keeping in mind that the weight of the body should be approximately equal on both the thighs. Application of pressure at this point reduces the size of the cyst and prevents further enlargement of the ovaries and the uterus. PCOS is often accompanied by excess secretion of androgens and luteinizing hormone (LH), which can be recovered with the help of this procedure. In addition, this sort of point pressure application also aids in keeping the insulin level under check, which is another common feature seen in PCOS.



**Fig. 1:** Application of pressure on the growth hormone (GH) inhibitor points

2. **Liv:** In this procedure, the therapist takes the help of a chair and places the sole of his/her right foot/hand on the subjects' left arm, and left foot/hand on the left thigh. An equal amount of pressure is applied on both arms. Pressure is

applied for 6 seconds, followed by a break of 30 seconds (Fig.2). The same method is repeated five more times. This is one of the most useful metabolic points that encourage increasing the functioning of Kupffer cells in the liver. As PCOS women present excessive accumulation of adipose tissues, a moderate amount of pressure for a short period on this point significantly improves the overall metabolism and reduces the adiposity simultaneously.



**Fig.2:** Application of pressure on the hepatic metabolic points

3. **WD:** The patient is asked to raise both arms while lying down in a supine position. With the help of a chair, the therapist puts one foot/hand by the side of the patients' neck (Fig.3). This is followed by the placement of the medial part of the sole on the arms of the patient, one at a time, near to the elbow. The same amount of pressure must be applied bilaterally, taking care of the patient's comfort. The pressure is henceforth applied on three points up until the wrist and repeated 5 times. This point primarily helps in improving the blood circulation in the lower abdomen to enhance the metabolism of genital organs.



**Fig.3:** Application of pressure for enhanced blood circulation of lower abdominal area

## Clinical outcome

After five months of periodic application of Neurotherapy, no signs of multiple cysts were present in the ultrasound report. In addition, the patient did not complain of any pain or side effects from the treatment. The patient was followed telephonically for a period of another three months to confirm that there were no after-effects of this therapy. The patient

seemed happy with the overall experience and gave good feedback in the last teleconsultation.

## DISCUSSION

We hereby mentioned a familiar case of Polycystic Ovary Syndrome in a 44 year old female presenting the characteristic features of PCOS. A new treatment “Neurotherapy” has been offered for five months and the results have been observed. Post-treatment, the ultrasonography report revealed both the ovaries to be normal in shape and size (right ovary measures 23mm × 11mm and left ovary measures 44mm × 17mm) thus suggesting no evidence of PCOS. As such, there has been no literature based on this novel technique and this is the first time that the effectiveness of Neurotherapy on PCOS patients has been discussed.

The only limitation to this study was that the patients' hematological reports were not simultaneously correlated along with the ultrasound reports. Thereafter, this field of science and healing must be explored more in future with a larger sample size to validate the above findings and to spread this novel treatment and help mankind.

## CONCLUSION

Accurate application of therapy has helped the patient to recover from the disease by significantly altering the biophysical structure of both ovaries. Not only does this therapy discover the source of the problem, but also curtails it without the help of any additional medications. Additionally, it restores the monthly cycle and hormonal balance. Also, it is a permanent solution to PCOS as the chances of reappearance is very minimal. Very few are aware of this remarkable healing process, therefore calling for better awareness for the well-being of humans. We can hereby conclude that neurotherapy provides a concrete directionality and with time can be a hallmark in treating PCOS patients.

## CONFLICT OF INTEREST

Authors declare that there is no conflict of interest.

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