

POLYCYSTIC OVARY SYNDROME (PCOS)

A. OVERVIEW IN MODERN BIOMEDICINE

1. Chronic anovulation

- a. Caused by inappropriate estrogen feedback to the hypothalamus-pituitary system

2. Characteristics

- a. Bilateral polycystic ovaries
- b. Various menstrual disorders
 1. Amenorrhea
 2. Oligomenorrhea (infrequent periods)
 3. Dysfunctional uterine bleeding
- c. Infertility
- d. Obesity
- e. Rarely, endometrial carcinoma

3. Treatment with Western medicine

- a. Clomiphene (Clomid)
- b. Surgery not recommended
 1. Can lead to adhesions

B. Traditional Chinese Medicine

1. Etiology

- a. Kidney *yang* deficiency
 1. Excess water accumulates and congeals into phlegm
- b. Blood stasis
- c. Liver *qi* stagnation

2. Formula (Yu Jin, *Obstetrics and Gynecology in Chinese Medicine*)

- a. Treatment principle: Tonify kidney *yang*, resolve phlegm, invigorate blood
- b. Works on ovary as well as hypothalamus-pituitary
- c. Research
 1. Increases FSH and E₂
 - a. This will help lead to ovulation
 2. Reduces LH/FSH and T/ E₂ ratio (testosterone/estrogen)

3. Reduces prolactin level and breast engorgement (when liver qi stasis is also addressed)
4. Efficacy
 - a. In one study, 133 women treated with this formula
 - b. 82.7% went to ovulation
 - c. In 76 infertile women, 36 became pregnant

Formula:

Rehmannia <i>Shu Di Huang</i>	12 g.	AB
Dioscorea <i>Shan Yao</i>	12	AA
Polygonatum <i>Huang Jing</i>	12	AA
Epimedium <i>Yin Yang Huo</i>	12	AC
Psoralea <i>Bu Gu Zhi</i>	12	AC
Ligusticum <i>Chuan Xiong</i>	12	K
Gleditsea <i>Zao Jiao Ci</i>	12	CA
Fritillaria <i>Chuan Bei Mu</i>	12	CB
Angelica <i>Dang Gui</i>	12	AB
Persica <i>Tao Ren</i>	12	K

Modifications:

With cold, add:

Aconite <i>Fu Zi</i>	9	E
Cinnamomum <i>Rou Gui</i>	3	E

With liver *qi* stagnation,

Omit:

Gleditsea, <i>Zao Jiao Ci</i>	CA
Fritillaria <i>Chuan Bei Mu</i>	CB

Add:

Moutan <i>Mu Dan Pi</i>	9	DC
Gardenia <i>Zhi Zi</i>	12	DA
Bupleurum <i>Chai Hu</i>	6	BB
Citrus <i>Qing Pi</i>	6	G