

YOGA AND PCOD: CASE STUDY

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Abstract

The case we are going to present concerns a 30-year-old woman, suffering from PCOD and doing yoga for management of PCOD. We consider this case extremely interesting, because even though it has interrupted her studies in pursuing Chartered Accountancy, she managed to overcome her anxiety, managed her PCOD/ PCOS, and graduated successfully. The purpose of this article is to present the cognitive map of the patient and the procedures that led to the achievement of the Treatment through Yoga Practices

Keywords: PCOD, Chartered Accountancy, Yoga Practices

Introduction

This case study is regarding a 30-year-old female, a Chartered Accountant dealing with Polycystic Ovarian Disease in the light of yoga, diet, and lifestyle modification. She was diagnosed with PCOD at the age of 27 years, and during that time, she suffered from all kinds of bodily symptoms and mental ones such as irregular menses, extreme pain, weight gain, hair loss, work stress, and anxiety. Her high work pressure along with examination stress for Chartered Accountancy exams further impacted her mental health, thereby furthering the exacerbation of PCOD.

From a family background in yoga, she took it up as part of healing. However, after six months devoted to yoga, practice of asanas, pranayama, and meditation, she could not carry out the consistency due to the pressure of work. Though yoga brought improvement to energy, flexibility, and mental well-being, it did not stabilize her menstruation cycle. Ayurvedic treatment was symptomatic relief, but to fully recover from the disease, symptoms had to be supported by a holistic approach: lifestyle adjustments along with practicing yoga and maintaining a balanced diet.

This case highlights the necessary aspects of physical as well as emotional well-being in handling PCOD management. Although it appreciates the efficacy of yoga in dealing with stress and sound emotional level, it underlines that after having dietetic discipline and lifestyle changes only results are sustainable. This case study, being holistic in nature, has proved that the aspect of PCOD management has nothing to do with medicines but is full of emotions, family support, and personal drive.

Literature Review

PCOD or PCOS is a condition that affects women's ovaries, the reproductive organs that produce progesterone and estrogen hormones that help regulate the menstrual cycle and also produce small amounts of hormones inhibiting, relaxing, and male hormones called androgens. In comparison to PCOD/ PCOS women with PCOS produce higher-than-normal amounts of male hormones. This hormone imbalance causes them to skip menstrual periods and makes it harder for them to get pregnant.

Besides unpredictable hormonal behavior, this condition can trigger

- Diabetes
- Infertility
- Acne
- Excessive hair growth

It's a fairly common disorder, but one with no exact cure.

PCOD/ PCOS can be controlled by diet and lifestyle modifications.

Some factors that can cause PCOD/PCOS are lack of exercise, skipping breakfast, fast food, unbalanced sleep, obesity, genetics, environmental factors, and stress levels. (Tiwari et al., 2024)

Also, there is a strong relationship between obesity stress and PCOS. Obesity and stress disturb the normal Hypothalmo-pituitary –ovarian axis leading to insulin resistance produce a stage of hyperandrogenism due to which somatic symptoms of PCOS like Abnormal menstruation, Subfertility, acne and psychic symptoms like anxiety, depression, insomnia, loss of concentration, etc. are develop. Weight loss of 5% to 10% may dramatically improve the endocrine profile of PCOS. Daily yoga for 30 minutes with 4 Asanas, 4 Pranayama, meditation,

and Savasana helps in weight reduction and stress management which ultimately stabilizes the normal function of hypothalamic- pituitary – ovarian axis and cures PCOS (Verma et al., 2015). Further, Lifestyle and nutrition can affect PCOD/ PCOS development, and maintenance of PCOD/PCOS can be done through lifestyle changes such as diet regulation and exercise, as well as medications to regulate hormones and improve fertility and sleep which play a vital role in PCOD/ PCOS management. (Tiwari et al., 2024)

Description of Problem Behaviour

The subject is a 30-year-old woman who is a qualified chartered accountant currently on a sabbatical. During an interview with her, it became evident that she has been managing multiple challenges related to her health and career. She was diagnosed with Polycystic Ovarian Disease (PCOD) at the age of 27, which brought about a series of symptoms that have impacted her quality of life. Her primary symptoms include a delayed menstrual cycle, significant hair loss, weight gain, heavy menstrual flow, and periods that last for an unusually long duration. These symptoms prompted her to seek medical advice from gynecologists for proper diagnosis and management of her condition.

However, what became more apparent through the course of the interview is that her struggle with PCOD is not just a physical one—it is deeply intertwined with her mental and emotional health. The subject expressed that she has been dealing with intense stress and anxiety, which she believes has exacerbated her PCOD. This stress, according to her, primarily stemmed from the immense pressure of preparing for and passing her Chartered Accountant (CA) examinations, which are known to be highly challenging and demanding.

She explained that the period leading up to her diagnosis was marked by prolonged mental strain due to the rigorous study schedule and the high expectations she set for herself in her professional life. The long hours of preparation, the fear of failure, and the overall pressure to succeed created a significant emotional burden. She believes that the prolonged stress she experienced during this phase of her life contributed to the development and worsening of her PCOD/ PCOS symptoms. During the interview, it became clear that the subject's current state of mind is still heavily influenced by this stress and anxiety. Although she is now on a sabbatical, the mental toll of managing her health condition alongside her professional

aspirations continues to weigh on her. She reported feeling overwhelmed and anxious about her future, not only in terms of her career but also about how her health might affect her personal life.

Personal and Family History

The subject, a 30-year-old woman who is a Chartered Accountant, is the elder sibling in her family. She grew up in a middle-class joint family where relationships are close-knit, and she maintains a strong bond with all her family members, including her cousins. Her family has a strong professional background, with most members either running businesses or working as Chartered Accountants. This professional environment likely played a significant role in shaping her decision to pursue a career as a CA. Beyond their professional lives, her family places great importance on holistic well-being, particularly through the practice of yoga. Yoga has been an integral part of the family's lifestyle for a long time, with all members actively engaged in the practice. This inclination toward yoga and wellness has been passed down through generations, and the subject was particularly inspired by her mother. From a young age, she observed her mother practicing yoga regularly, which left a lasting impression on her. Her mother's discipline and commitment to yoga motivated her to integrate it into her own life, making it a vital part of her routine, especially in managing stress and maintaining balance.

In the context of her ongoing battle with PCOD/ PCOS and the stress associated with her career, yoga has likely provided her with tools to manage anxiety and stress. It underscores the importance of mental and emotional health in the family and reflects their approach to life: balancing professional ambitions with personal well-being.

Her strong family ties, supportive relationships, and shared commitment to yoga create a nurturing environment. This balance between her professional life, family, and personal health practices is central to her story, highlighting how familial influences can shape not just career choices but also the ways individuals cope with challenges.

Themes	Codes	Analysis
1. Health awareness and lifestyle changes	- Health Awareness - Stressful lifestyle - Sabbatical - Health prioritization	The subject is a 30-year-old CA on a health-related sabbatical, focusing on dietary changes and recently started exercising.
2. Emotional and Social Impact	- Anxiety - Stress - Family support	The subject felt anxious and stressed upon being diagnosed with PCOD, but her family supported and tried to make it easier for her.
3. PCOD	- Late diagnosis at 27 - Irregular periods - Menstrual pain - Anxiety and stress	She was 27 when diagnosed with PCOD. She had irregular periods and severe cramps, with cycles lasting 3-4 months before consulting a gynecologist.
4. YOGA	- Family influence on yoga - Inconsistent practice - No long-term impact - Physical and mental improvement - Spirituality	During her childhood, her parents would do yoga and she would join them. After being diagnosed with PCOD, her mother motivated her to do yoga. The subject's routine would consist of Pranayam along with Surya-Namaskar. Yoga increased her energy level and flexibility and also helped her deal with stress and anxiety.

5. Treatment	- Ayurvedic treatment: quick results, short-term effect	The subject went to a yoga center where they recommended ayurvedic pills to be taken regularly until the period comes. Ayurvedic treatment was quick and gave immediate results, while yoga seemed like a long process.
6. Advice for others	- Pelvic Health - Yoga recommendati on - Diet priority	Incorporating a strict diet plan and pelvic health asanas with daily pranayama can help mitigate the severe risks of PCOD/PCOS.

Methodology

The subject for this case study was a 30-year-old woman diagnosed with PCOD, who had tried conventional medical treatments and sought an alternative therapy (yoga) for symptom management.

Data Collection Method:

Data was collected through interviews with the subject to record her physical symptoms, mental state, and lifestyle before, during, and after the yoga intervention

Intervention:

The intervention consisted of a six-month yoga regimen, including daily practice of asanas (postures), pranayama (breathing exercises), and meditation. Sessions lasted 60 minutes per day. The interview was conducted at the end of the yoga regimen.

Data Analysis:

QUALITATIVE DATA: The data was analyzed for recurring themes related to the subject's mental well-being, stress levels, and perception of symptoms.

Result and Analysis

The case study revealed that yoga improved the subject's flexibility, energy levels, and mental well-being but did not regulate her menstrual cycle. Ayurvedic treatment provided immediate relief for irregular periods but lacked long-term benefits. Stress and a hectic lifestyle contributed to her PCOD symptoms, and maintaining a regular yoga routine was challenging. Ketki emphasized the importance of combining yoga with a balanced diet for effective management. While yoga alone did not show immediate results, it helped her stay mentally balanced. A holistic approach, including healthy eating and lifestyle changes, proved more effective overall.

Interpretation and Discussion

The case study provides valuable insights into the multifaceted experience of managing PCOD (Polycystic Ovarian Disease) through yoga, diet, and lifestyle adjustments. It illustrates the complexities surrounding the condition and the varying efficacy of different management strategies. The subject was diagnosed with PCOD at the age of 27, experiencing significant symptoms such as irregular menstruation, pain, and cramps. The irregularity of her menstrual cycles, extending up to 3-4 months, not only posed physical challenges but also contributed to her emotional distress. This aligns with existing literature that highlights anxiety and stress as common emotional responses among women with PCOD, often linked to concerns about fertility and hormonal health.

The subject was first introduced to yoga because it was a tradition of the family and this helped her believe that yoga could be an effective way to manage her symptoms. She started practicing yoga to help with her periods and other physical issues, but she also said it helped her feel more relaxed, flexible, and full of energy. This is in line with earlier research that highlights the benefits of yoga for people with long-term medical conditions in terms of stress reduction and emotional well-being. It is interesting to note, though, that her yoga experience did not result in an immediate regulation of her menstrual cycles, indicating that it may take some time for

the physical benefits of yoga to become apparent, especially in conditions as complex as PCOD.

The subject's comparison of yoga and Ayurvedic treatment highlights the need for a multidisciplinary approach to PCOD management. She discovered that taking Ayurvedic pills helped her irregular periods more quickly, demonstrating the value of traditional treatment techniques. She did, however, also express worries regarding the long-term viability of these treatments, suggesting a possible weakness in the PCOD management options at this time. This shows that integrated treatment plans are necessary, combining the short-term advantages of medicine with the long-term benefits of lifestyle interventions like yoga.

The subject noted several obstacles to continuing her yoga practice, such as time restraints from her full-time job and the relationship between her physical and mental well-being, which led her to take a sabbatical. Many people who try to fit regular physical activity into their hectic lives often struggle with this. The fact that she acknowledged that stress from her work and her early state of mind were factors in her PCOD symptoms emphasizes, even more, how closely mental health and chronic conditions are related. The interplay between physical and mental health in PCOD management emphasizes how crucial it is to include psychological well-being in an all-encompassing treatment plan.

The subject stressed the importance of an overall approach that includes yoga, a healthy diet, and a mindful way of living throughout her journey. Her claim that diet is essential for PCOD management is consistent with studies showing that nutrition affects hormonal balance and general health in PCOD women. This viewpoint promotes a change from a purely physical approach to a more comprehensive one that takes emotional well-being, dietary habits, and regular exercise into account as crucial elements of successful PCOD management.

In conclusion, the case study demonstrates the complexities of managing PCOD through yoga and lifestyle changes. While yoga improved her mental and physical health, it was not a complete solution for controlling her menstrual cycle. The combination of treatment options, emotional health, and lifestyle factors emphasizes the need for a comprehensive approach to PCOD management, with specific attention that addresses both physical symptoms and emotional well-being. As more women seek effective ways to manage PCOD, incorporating yoga, diet, and lifestyle changes may offer a promising path to better health outcomes.

Conclusion

The case study demonstrates the multifaceted nature of managing Polycystic Ovarian Disease (PCOD) through lifestyle changes, particularly the use of yoga. While the subject saw some benefits from her yoga practice, such as increased flexibility, energy, and mental well-being, she still struggled to regulate her menstrual cycle. Ayurvedic treatment provided faster results in managing her symptoms, but it lacked long-term sustainability. This study highlights the need for a comprehensive strategy that incorporates yoga, a healthy diet, and a mindful way of living to manage PCOD. It demonstrates that although yoga can be an effective means of improving both physical and mental well-being, it should be used in conjunction with dietary modifications and, if required, medical intervention.

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