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Review Article

Women's health: the new dimensions and homoeopathy of AYUSH

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ABSTRACT

Women's health is an integral part of public health and especially the reproductive health. The Reproductive and Child Health (RCH) is a big component in National Health Mission (NHM) where primarily the target is woman. This article discusses the span of women health across the various stages in the life of a woman. It traverses through the fact that reproductive health is not exclusively hormonal but also cellular. Here cellular means the mitochondria generated cellular energy. The cellular approach will help masses to see a variety of clinical conditions in women's health but also understand the issues of ageing, fertility and vitality in women. With the new census coming up in 2027, almost half of the population or about 75 crores (750 million) will be women in India. It will also help policy makers to understand the complexity both clinically and culturally. It is a priority under the domain of Community Medicine and Public Health (CMPH). With the new view, health policies will be impacted and accordingly the women's health approach has to be relooked. It clearly needs a holistic approach as the approaches till date were based on hormones. Future clinical approaches have to be preventive, resilient, cost effective, clinical effective and no side effects. Homoeopathy of AYUSH ministry of India has the quality to meet the future demands. NFHS 6 says that the menace of Non-Communicable Diseases (NCD) has surged. NCDs are the triggers in women's health. Dealing with women's health effectively means impacting future generations positively.

Keywords: Mitochondria, Hormones, AYUSH, Homoeopathy, RCH, NCD, NFHS

INTRODUCTION

Medical science has been describing the health of women through hormones. Estrogen and Progesterone has been often linked to various stages of a women's life. It starts with adolescence, moves through pregnancy, sails through peri-menopause and destines at ageing. These stages manifest through fatigue, metabolic changes, fertility issues and emotional issues. Here hormonal imbalance is the focus and thus the hormonal therapies.[1,2]

This hormonal approach only explains the symptoms and not the causes. The new approach sees the system that determines the work of hormones as well as the cellular energy approach. Hormones are mere messengers that are chemical in nature. These chemicals carry signals that regulate reproduction, metabolism, mood, immunity and

ageing. These actions do not take place in isolation but these are to be ably supported by energy in the cells and metabolic flexibility that allows for adequate response.[1,2]

The cellular energy comes from the power house of the cells which are the mitochondria. In reality, their action is much beyond production of energy. The mitochondria also regulate cellular stress responses, inflammation, metabolism, gene expression. They also influence how cells interpret and respond to hormonal signals. That's why when mitochondrial function is low, hormonal signals are inefficient even though the hormonal levels are normal. In short, hormones send signals but mitochondria decide whether these signals are to be carried out or not.[1,2]

LITERATURE REVIEW

Across the life span of a woman, the hormones and mitochondria work in a biological arc. When the woman is in her 20s, mitochondrial efficiency is supported by high levels of estrogen. Thus, a woman has high energy, reproductive fitness and metabolic resilience. Thus, younger women are able to tolerate stress in a better way.[3,4]

Moving on, by the 40s, mitochondrial resilience falls much before changes in major hormones of the body become clinically evident. This is the reason why many women experience fatigue, insomnia, body weight changes, mood fluctuations during the peri-menopausal stage even though the hormonal levels are within the normal ranges.[3,4]

Further in the 60s, estrogen falls further and removes a layer of mitochondrial protection. Thus, the changes in metabolism, cardiovascular risk, bone health and cognitive functions are affected. That's why hormonal replacement alone does not restore the cellular energy systems. By the 80s, the most critical indicator is the mitochondrial integrity which indicates mobility, cognition and independence in a woman's life. At this stage of life, cellular energy determines quality and not hormonal levels.[5,6]

Individual well-being is just a part of women's health. Mitochondrial Deoxyribo Nucleic Acid (DNA) is inherited exclusively from the mother. This shows that a women's cellular health does not end with her but is passed onto generations impacting metabolic and developmental health. The mitochondrial health is thus critical during stages of adolescence, pregnancy and mid-life transitions as these stages demand high cellular energy. Thus, reproductive health is a cellular phenomenon and not a hormonal phenomenon.[5,6] Medical science currently finds that conditions like Poly Cystic Ovarian Syndrome (PCOS), endometriosis, infertility, thyroid disorders and chronic fatigue syndromes are linked to mitochondrial dysfunction and not just hormonal. Although these conditions are managed through hormonal interventions, these are actually due to impaired cellular energy metabolism, oxidative stress and inflammation. Mitochondrial health has to be addressed in these conditions.[5,6]

REFLECTIONS

Reframing women's health through the cellular energy approach does not deny the role of hormones. Hormonal therapies are effective tools but their efficiency depends upon the biological capacity of the cells to respond. Hormonal therapies mainly focus on symptom management whereas cellular energy approach focus on prevention and long-term resilience. The shift not only impacts clinical interventions but also how the masses see and comprehend ageing, fertility and vitality in women. Hence, it is not a cafeteria approach to choose between hormones and cellular energy but complementation of both the approaches.[5]

The section below describes the homoeopathic approach towards women's health with medicines that are suggestive in nature.

HOMOEOPATHIC PERSPECTIVE

Like all other therapeutics, the homoeopathic therapeutics integrates the case management, life style and dietetic measures for effective dealing with the cases.

As mentioned above, women's health requires personalized approach. Here homoeopathy fits the bill as it is not a generalized system of therapeutics but a personalized one. The various conditions that need to be addressed through the mitochondrial approach are poly cystic ovarian syndrome (PCOS), endometriosis, infertility, thyroid disorders and chronic fatigue syndrome (CFS).

For pcos, the drugs are 'apis', 'apocyanum', 'argentum metallicum', 'aurum met', 'bovista', 'formica r', 'kali brom', 'iodum', 'lycopodium'.

For endometriosis, the drugs are 'medorrhinum', 'carcinosin'.

For issues of infertility, the drugs are 'agnus castus', 'aurum met', 'borax', 'conium', 'natrum carb', 'natrum mur', 'sepia'.

For cfs, the drugs are 'alumina', 'ammon carb', 'caladium', 'calcarea carb', 'carcinosin', 'china', 'conium', 'ferrum met', 'gelsemium', 'graphites', 'lachesis', 'nux vomica', 'acid phos', 'acid picric', 'silicea', 'sulphuric acid'.

For thyroid disorders, the drugs are 'ambra g', 'bromium', 'calc carb', 'calc iod', 'iodum', 'kali iod', 'lyco', 'nat carb', 'nat mur', 'sepia', 'spongia', 'thyroidinum'.

For inflammation, the drugs are 'prednisolone', 'cortisone', 'curcuma longa','hydrocortisone', 'aconitinum', 'argentum phos', 'emetine mur', 'morgan co', 'sanguinarinum', 'atropine'.

Hence, it is seen here that homoeopathy has a full range of medicines to deal with the conditions of women's health. A homoeopath can use her/his intuition and experience to choose the potency of the medicines suggested above.[7-11]

CONCLUSION

The women's health is a matter under health policy at the global, regional, national, state, district, block and village level. Unfortunately, the clinical interventions become the fore front pushing back the issues like gender, ecology, family health, cultural practices, myths and misconceptions and outlook of the society. As a homoeopath with a practice of 35 years till date, the lead author always treated cases of women's health with a holistic approach with success. The woman has to adhere and compliance to the diet and regimen for the desired results.

The concept of women's health is multi-dimensional. The new dimension will help us to move on from the deficiency and hormonal approach. The hormonal approach was directly related to the emotional angle in women. The new dimension especially in reproductive health will lead to better prognosis. Keeping the triggers like metabolic, stress and inflammation in the back ground of women's health the clinical and epidemiological stakeholders can deal with the issues of women effectively.

Women bear physical and mental pain like during menstrual cycles, birth and depression during postnatal stages. The next priority for women's health should follow the approach that includes physical, mental and emotional angles.

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