CASE STUDY

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Case Study of Follicular Ovarian Cyst

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Abstract

Ovarian cysts are sacs filled with fluid or semisolid material that are formed in the ovaries or on their surface. They may occur as the result of normal ovarian functions, or they may be abnormal growths. The majorities of ovarian cysts are benign and are asymptomatic, but some may cause pain, abnormal menstrual bleeding and irregular menstrual periods. In Ayurveda the follicular ovarian cyst may be correlated with Medaj Granthi. The present study describes a case of follicular ovarian cyst. The study revealed the Granthihar and Medanasan properties of Ayurvedic medicines viz., Arogyavardhini vati, Varunadi kwatha, Triphala guggulu and their result in follicular cyst as revealed after 3 month of treatment in the ultra sound reports.

Keywords

Follicular ovarian cyst, Arogyavardhini vati, Varunadi Kwatha, Triphala guggulu, Medaj Granthi



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INTRODUCTION

The scope of this study is to focus on the management of follicular ovarian cyst in the reproductive age group of women. The relative frequency, the functional cyst accounts for about 24% of all ovarian cysts, benign cyst 70 % and malignant 6% ¹. The great majority of ovarian cysts occur in reproductive age patient and most of them are benign ². Follicular cyst is a dominant graafian follicle sometimes fails to ovulate and does not involute. When it becomes larger than 3 cm is called follicular cyst. Common symptoms of follicular ovarian cyst are irregular periods, abnormal uterine bleeding, pain in the abdomen & pelvis.

The ovarian cysts are diagnosed by ultrasound, MRI, CT scan. On ultrasound follicular cyst present as simple, unilocular, anechoic cyst with thin smooth wall. For years, gynecologists have prescribed oral contraceptives, containing a variety of estrogen & progestin combinations, for the resolution of the functional ovarian cysts. In Ayurveda follicular ovarian cyst can be correlated with Medaj Granthi, Vitiated Vata etc.dosas, vitiating Manmsa, Rakta & Medas mixed with Kapha produces rounded, protruberant, knot and hard swelling³·Aggravated Vayu along with Meda mixed with Kapha produces Medaj Granthi. On rupture, Medas discharged from cyst resembles oil cake or ghrit⁴·

CASE REPORT

A female patient aged 22yr was diagnosed to have an ovarian cyst (size 4.8× 3.9cm) in the left ovary on date (27-10-2015) (Fig 1) at SDAMC & RC, Mathura. OPD no. (16085693). Her main complaint was 2 month amenorrhea. Her marital life was 3 years and was not able to conceive. She had past history of delayed menses (> 40 days). On physical examination secondary sexual characters were present. There was no any abnormal finding seen pelvic in examination.

Treatment given

- 1- Varunadi kwatha- 30 ml twice daily before meal
- 2- Triphala guggulu- 1 tab thrice daily before meal
- 3- Arogyavardhani vati 1 tab thrice daily before meal

Above treatment was given for 3 months

OBSERVTION AND RESULTS

• Patient came to OPD on date (22-3-2016) and she was 3 month pregnant. USG

report on date (21-3-2016) revealed the pregnancy status of the patient under study for which USG report shown in (Fig 2).

- Single live fetus at 12 weeks 4 days gestation with variable presentation
- Normal cardiac activity was seen
- Placenta was superior and posterior in location

DISCUSSION

Ovarian cyst is one of the prevalent reasons for female infertility. The present finding is based on ultrasonography and the effective management of follicular ovarian cyst with Ayurvedic formulation.

Probable Mode of action

Varunadi Kaphavatahar, kwatha has Medohar and Vidradhinashan properties⁵. There are several components Arogyavardhini vati, which are known to have hypo lipidemic effects i.e., Picorrhiza Terminalia kurroa. chebula.Terminalia belllerica. Emblica officinalis and Commiphora mukul^{6,7,8,9,10,11}.

In Shushrut Samhita Chikitsa 1/10 the treatment of Granthi is described same as Shopha¹². For Shopha, the line of treatment is Virechan. Again Granthi comes as under Virechan yogya vyadhi. The karma of

Triphala guggulu and of Arogyavardhini vati is Mradu Virechan and Anuloman.

CONCLUSION

The present study concludes that Varunadi Kwatha, Arogyavardhini Vati and Triphala guggulu are the highly effective drugs for follicular ovarian cyst.

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