

CASE STUDY

Ayurvedic Treatment Regime of Ovarian Hemorrhagic Cyst: A Case Report

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ABSTRACT

In this present case study, a 29 year old woman patient consulted the Ayurvedic OPD of M.M.M. Govt. Ayurved College & Hospital, Udaipur with the complain of pain in lower abdomen, irregular menses and generalized weakness. She was advised for ultrasonography (USG) and the findings suggested a left ovarian haemorrhagic cyst measuring 38 × 34 mm. She was supposed to be treated with traditional ayurvedic formulations; but the case was treated for three months with a combination of different traditional Ayurvedic drugs, with the goal of relieving symptoms and dissolving the ovarian cyst. This patient was treated with traditional Ayurvedic formulations like syrup Evecare forte, *Kanchnarguggulu*, *Dashmoolakwatha*, *Panchkolchoorna*, *Punarnavamandoor*, *Balsudha*, *Yavkshara*. Only traditional Ayurvedic medicines were used during the course of the treatment. Patient's condition was assessed through USG after three months of treatment for ovarian cyst which was completely relieved. Therefore this study was conducted to evaluate one of the treatment regimens for ovarian cyst.

Key Words *Ovarian cyst; Haemorrhagic, Treatment regime, Ayurveda*

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INTRODUCTION

Ovarian cyst is a health condition that is becoming increasingly common these days, and it has a direct impact on fertility. An ovarian cyst is defined as any ovarian follicle that is larger than two centimetres in diameter. Ovarian cysts are closed; sac structures within the ovary that contain a liquid or semisolid substance. Ovarian cysts affect women of all ages, but they are most common in young and child-bearing women. They are most of the time benign (non-cancerous), but some of them can be malignant (cancerous). When you suspect ovarian cysts, it is

important to make a diagnosis about their type. Common symptoms of an ovarian cyst are irregular menses, abnormal uterine bleeding, pain in the lower abdomen, dysmenorrhea, fatigue, headaches and nausea. Ovarian cyst diagnosed can be done on the basis of ultrasonography, MRI and CT scan. The incidence of ovarian cyst has increased dramatically and functional ovarian cysts were found to be the fourth most common cause for hospital admission of women¹. About 7% of women have an ovarian cyst at some point in their lives and out of all ovarian cysts, 13.7% are said to be haemorrhagic ovarian cysts².

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Haemorrhagic ovarian cysts are typically formed by expanding haemorrhage within a corpus luteum or other functional cyst. One of most serious emergency condition is ruptured haemorrhagic ovarian cysts. The mechanism of haemorrhagic cysts can be elucidated as follows: When a Graffian follicle ruptures and releases an oocyte, it is converted to the corpus luteum. The corpus luteum is lined by granulosa cells which quickly become vascularized. Some of these thin-walled vessels can rupture. This causes bleeding into the corpus luteum, leading to the formation of haemorrhagic cysts in the ovaries³. Patients may also present with sudden-onset pelvic ache, pelvic mass, or they'll be asymptomatic and the haemorrhagic ovarian cyst is an incidental finding⁴. Except for hormonal therapy, laparoscopy, and hormonal therapy, there is no such effective treatment in modern science. Regardless of the presence of this disease, laparoscopy or surgical management is a treatment option; however, it is not always the only option. Here, we introduce a case of haemorrhagic ovarian cyst that was successfully treated after Ayurvedic management.

CASE PRESENTATION

A female patient, 29 years old, came to Prasutitantra and Stiroga OPD of MMM Govt. Ayurveda College, Udaipur, on 29 April 2020 with chief complaint of pain in lower abdomen since 6 months. Her abdominal pain was also associated with irregular menses, generalized weakness. She had also brought her USG report

and some other blood investigations along with her. She was diagnosed as Left Ovarian Haemorrhagic Cyst (38×34 mm). She took advice from allopathic hospital for surgery but she was not ready for surgery. So she came to our hospital for further advice and ayurvedic management.

Menstrual History – Patient told that her duration of menstrual cycle was of 2-3 days with irregular interval of 30 days to 45 days, amount of bleeding was reduced and associated with lower abdominal pain and radiated to lower back.

Obstetric history – G1P0A1L0

G1- MTP by D&E (GA-8 weeks in 2017)

Family history- No relevant family history

Past surgical history – There was not significant history found.

Personal history–Her appetite, sleep, micturition, and bowel habits were all normal.

Clinical findings:

General examinations: Built – Normal, Weight – 45kg, height – 155 cm, pulse rate- 70/min, B.P. - 110 /70 mm of hg, respiration rate- 18/min, temp. -98.6 F

Per abdomen-it was soft, non-tender and no organomegaly was detected.

Physicalexamination – -

Ashtavidhpariksha-

Nadi– VP

Mutra – *Samyakmutrapravriti*

Mala– *Sama*

Jihwa- *Sama*

Shabda– *Samyak*

Sparsha- *Ushna*

Drika– *Samanya*

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Aakriti- Krishna

Dashvidhpariksha-

Prakriti(nature)-Vatapittaja,

Sara (Purest body tissue) - Madhyama(medium)

Samhanana(Body compact) - Avara(minimum)

Pramana(Body proportion)- Madhyam(medium)

Satmya(homologation) -Madhyam(medium)

Satva(mental strength) - Madhyam(medium)

Vaya(age)-Yuvati

Vyayamshakti (to carry on physical activities) - avara(least capability)

Aharashakti- (food intake and digestive power)

Abhyavaranashakti & Jaranashakti – Madhyam

Systemic Examination:

The treatment was carried out with the following medicines for three months.

Sr.no.	MEDICINE	DOSE
1.	A mixture of following drugs- 1. <i>PanchkolChoorna</i> - 1gm 2. <i>PunarnavaMandoor</i> - 250 mg 3. <i>Balsudha</i> -250mg 4. <i>Yavkshara</i> -250mg	Bid with warm water- after meal
2.	<i>KanchanaraGuggulu</i> – 250 mg tab	2 tab twice daily - After meal
3.	<i>DashamoolaKwatha</i> - 50 ml	Twice daily -empty stomach
4.	Syrup Evicare forte – 2 teaspoon	TID -after meal

No contributing allopathic medicine was administered throughout the duration of the treatment.

CVS: Heart sounds (S1S2): normal

Respiratory system: normal bilateral air entry, no added sounds.

No abnormality found on other system

Samprapti Ghataka (Pathogenic factor):

Dosha - Vata, Kapha

Dushya - Mamsa (muscles), Rakta (blood)

Agni (digestive fire) - Mandagni,

Jatharagnimandya.

Srotas (channel) Artavahasrotas (channels carrying menstrual blood)

Srotodushti- Siragranthi (cyst), Sanga (obstruction)

Vyaktisthana- Artava, Beejashaya Granthi

TREATMENT SCHEDULE

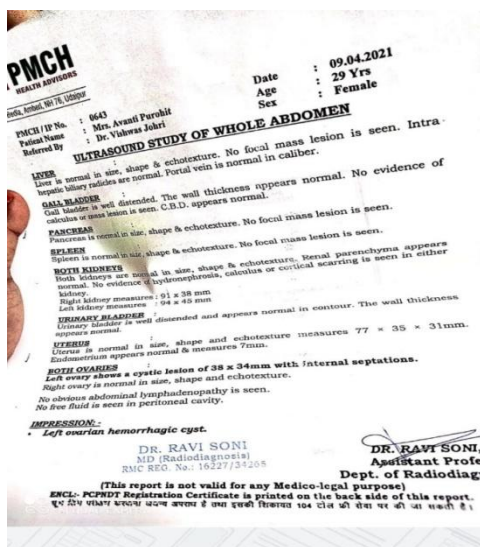


Figure 1 Before Treatment

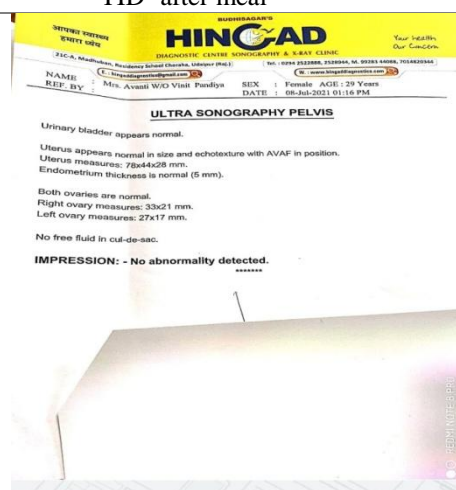


Figure 2 After Treatment

RESULT

In the end of the treatment patient got satisfied with the result. Her ultrasound reports revealed no evidence of Haemorrhagic ovarian cyst along

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with symptoms. Her pain was also reduced, and she was completely cured with Ayurvedic treatment. There is no recurrence of any symptoms and signs until now.

Patient consent –

Written consent for publication of this case study in your journal was obtained from the patient.

Pathya-Apathya:

- ✓ To avoid psychological stress.
- ✓ To avoid spicy and excessive foods, fast foods (pasta, peaches, pizzas), baked goods, fermented foods and cold drinks.
- ✓ To consume more green leafy vegetables (spinach, cabbage, capsicum, broccoli), sesame seeds, flax seeds, fruits (orange, apple, papaya), and jiggery in diet.

Mode of action of drugs:

Kanchnarguggulu- *KanchanaraGuggulu* was prescribed due to its *Vata-Kaphahara* properties i.e., which alleviates the aggravated *Vata* and *KaphaDoshas* and due to its *Raktashodhana*(purification of blood), *Lekhana* (bio-scraping) and *Shothahara* (anti-inflammatory) properties it shows significant effect in *Granthi*⁵. *Bhedaneeya* and *Lekhaneeya* properties of *Kanchnarguggulu* also helps in reducing the size and arrests further growth of cyst.

Dashmoolkwatha–Collective properties of *Dashmoolkwath* are *Katu Rasa*, *Katu Vipaka*, *Laghu- Ruksha Guna*, and *UshnaVeerya*. By virtue of these properties *Dashmool* act as *Aamapachana* and remove the *Avarana* of *KaphadiDoshas*. *Dashmool* is *Ushnaveerya*, and

the properties associated with it act on *Vatadosha* as well. It has anti-inflammatory and uterine tonic properties.

Punarnavamandoor-Punarnava Mandur is an ayurvedic formulation mentioned in various ayurvedic samhitas and texts like *Charak Samhita*, *Bhaishajya Ratnavali*, *Bhavprakasha* and *Sidhayog Sangraha* etc. It is an iron containing classical Ayurvedic formulation. The most of ingredients of *Punarnavadi Mandur* are *Laghu*, *Ruksha Gunawith Ushnavirya* and their post digestive effect is *Katu* hence *Punarnavadi Mandur* shows *Shothagna* property (anti-inflammatory). It is having *Kaphapittashamak*, *Rasayan*, *Dipana*, *Pachan*, *Anulomak*, *Raktavardhak*, *Preenan*, *Raktaprasadan*, *Dhatuposhan* properties. It works as *Haematogenic*, *Haematinic*, *Diuretic*, *Depurative*, *Hepatoprotective*, *Cardio protective*, *Antiinflammatory*, *Antioxidant*⁶. due its diuresis property it helps to reduces swelling and fluid accumulation in the body.

Panchkolachurna –*Panchkolachurna* contains an equal part of *Pippali*, *Pippalimula*, *Chavya*, *Chitrak* and *Shunthi*. All the ingredients of *Panchkola* is predominantly having *Ushna*, *Tikshna*, *Laghu*, *Rukshaguna* & *Katu Rasa*, *Katu vipaka*, *Ushnavirya*. Hence it exhibits *Kapha-Vatashamaka*, *Dipana*, *Pachana*, *Rochana*, *Lekhana*, *Srotovishodhana* & *Shothahara* properties. It is considered as one of the best drugs to treat the condition of *Mandagni*, *Gulma*, *Ama*, *Aruchi* and *Kapha-Vata* disorders⁷.

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Himalaya Evecare Forte Syrup- It has analgesic and estrogenic properties which helps in repairing the endometrium, regulating estrogen levels and helps in healing the inflamed endometrium during menstruation. This formulation improves fertility by regulating ovarian hormones. It helps in hormonal balance in women so it is useful in treating irregular menstruation. The key ingredients of Himalaya Evecare Forte syrup are *Kumari, Jatamamsi, Lodhra, Methi, Mundi*.

Balsudha- *Balsudha* carries properties like *Kapha-Vishleshaka* and *Vatharadue* to *Katu Rasa, Ushnavirya, Ruksha & Tikshnaguna*. *Katu rasa & Tikshnaguna* helps the drug to penetrate the deeper parts of tissue which removes the vitiated *Kaphadosha*. Because *Vitiated Kapha* undergoes *Vishleshana* due to *Tankan's Kshariya Swabhav*, this further aids in the opening of obstructed channels.

Yavkshara- Because of *Sukshma, Laghu, Sara, Vyavayi, Vikasi, Pramathi* properties of *Yavkshara* it helps in scraping of obstructing substance. Its properties show its potency to enter in minute channels and spread easily. *Yavkshara* had *Vata-Kaphashamaka* and *Aampachaka* action⁸. It also has *Gulmanashana* and *Kaphanissaraka Karma*.

CONCLUSION

In the modern medical system, hormonal and surgical interventions are the only available treatments for ovarian cysts. Even if this is the

only treatment in modern science, as many people are afraid of hormonal intervention, the recurrence of ovarian cysts is so likely that it cannot be guaranteed to recurrence of disease. There are several treatment options available, but ultimately the treatment depends on the patient's age, the size of the cyst, and whether the cyst has malignant characteristics. In Ayurvedic science, drug availability is an opportunity for a patient to be completely cured without a recurrence of the disease. This Ayurvedic treatment helps treat patients with ovarian cysts. From this case study, we can conclude that Ayurvedic drugs are effective in treating hemorrhagic ovarian cysts and require further studies for longer periods and larger sample sizes.

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