



Case Report

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AYURVEDIC APPROACH FOR MANAGEMENT OF OVARIAN CYST: A CASE REPORT

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ABSTRACT

In this present case study, an 18 years old woman patient consulted to the ayurvedic outpatient department (OPD) of polyclinic, Govt. of NCT of Delhi, New Delhi, India with the complain of pain in lower abdomen and epigastric region, burning micturition and constipation. She was advised for ultrasonography (USG) and finding suggested a right ovarian cyst measuring 3.32 X 2.75 cm. She was intended to treat with traditional ayurvedic formulations; the case was treated for 03 months with the combination of different traditional Ayurvedic drugs, with the aim to alleviating symptoms and dissolves the ovarian cyst. This patient was treated with traditional Ayurvedic formulations like tablet Antaf, syrup Dealka, *Gokshuradi guggulu*, *Khadir arishta*, *Punarnavadi guggulu*, *Kanchnar guggulu*, *shankh vati*, *Ashok arishta*, *Amlapitta mishran* and *sphatik bhasma*. Only traditional Ayurvedic drugs were used during the treatment. Patient's condition was assessed through USG after three months of treatment for ovarian cyst which was completely relieved. This indicates the ovarian cyst can be completely and successfully cured with Ayurvedic treatment.

Keywords: *Gokshuradi guggulu*, *Granthi*, *Khadir arishta*, ovarian cyst and *Shankh vati*

INTRODUCTION

Ovarian cyst is one of the prevalent reasons for ovarian dysfunction, which directly affects the fertility. Any ovarian follicle larger than two centimetres in diameter is termed as ovarian cyst. Ovarian cysts are closed; sac structures within the ovary filled with a liquid or semisolid substance. Ovarian cysts affect women of all ages and most often occur during young and child bearing years. Most ovarian cysts are functional in nature and harmless (benign). Common symptoms of an ovarian cyst are irregular periods, abnormal uterine bleeding, pain in the abdomen or pelvis, fatigue, headaches and nausea. Ovarian cysts are diagnosed by ultrasound, MRI and CT scan.

In modern system of medicine, the treatment of an ovarian cysts mainly done by hormonal treatment (combined oral contraceptive pills) or by surgical treatment such as pelvic laparoscopy. This is the only management of ovarian cyst present in modern system of medicine to meet urgent need of the patient and challenges are remain to establish a satisfactory conservatory medical treatment till date; unavailability of conservative and satisfactory treatment in bio-medicine need to search for conservative and satisfactory treatment available in other medical system. In Ayurveda ovarian cyst is similar to *granthi*. It develops due to localization of morbid body humours in body tissue¹. There are nine different types of *Granthi* have been mentioned in ayurvedic texts depending upon the pathological factor and the body tissue involved²⁻⁴. Pathogenesis of *Granthi* is explained as when *Rakta* (blood), *Mamsa* (fleshy/muscles), and *Meda* (fat/adipose tissue) are vitiated by *Tridoshas* that are admixed with *Kapha* produce rounded glandular, protuberant, knotty and firm swelling known as *Granthi*⁵. Such clinical entity can be correlated today as ovarian cyst where *vata Dosha* (humor) is the predominant pathological factor being the natural site of its location (Basti Pradesh) in the body. The principle of *Samprapti Vighatana* (i.e., to break the pathogenesis) is used for the management of *granthi*.

Here we present a case of ovarian cyst that was successfully treated on the line of Ayurvedic management of *Granthi*. Ethical standards were followed as per as per International conference of Harmonization-Good Clinical Practices Guidelines (ICH-GCP) or as per Declaration of Helsinki guidelines.

Presenting complains

An eighteen-year-old Indian, non-smoker, non-alcoholic unmarried woman consulted in Out-Patient Department (OPD) of Aam Admi Polyclinic, Rohini sector 18, New Delhi. (Government of NCT of Delhi) on 07.09.2018 with complaint of pain in lower abdomen and epigastric region along with burning micturition and constipation for about six months. On examination, the patient was found anxious with disturbed sleep, moderate appetite, constipation and burning micturition. The tongue was coated, voice was vibrant and roughness of the skin was present. Patient had *Madhyam Sara*, *Madhyam Samhanana* (proper body built), *Sama Pramana* (normal body proportion), *Madhyam Satmya* (proper homologation), *Madhyam Satva* (Balanced Mental strength), *Madyayam Vyayamshakti* (moderate capability to carry on physical activities), *Madhyamaharshakti* and *Madhyam Jaranshakti*. *Vata* and *Kaphadoshas* were mainly affected in the patient. Chest expansion was normal with normal respiratory sounds. Heart rate was 72 bpm with normal heart sounds. No organomegaly was seen. Last menstrual Period (LMP) was on 23.08.2018 for 3 days. Her menstrual cycle was regular i.e., after 28 days. Woman had sedentary mode of life and was on self-medication for long time and took analgesic for pain relieving. She was advised for ultrasonography (USG) to know the cause of complain. USG was done on 12.09.2018 and report showed cyst in right ovary measuring 3.32 X 2.75 cm. Left ovary was normal in size, shape and echotexture. Ayurvedic drugs were advised for management of cyst.

Treatment schedule

Ovarian cyst can be compared to *Granthi roga* and in the pathogenesis of the *Granthi Roga Vata, Kapha* dominating *Tridoshas* are involved and hence *Vata-Kaphahara* medications

are required whereas involved *Dushyas* are *Rakta, Mamsa* and *Meda* hence the medications should possess *vatahara* and *Lekhana* (scrapping or dissolving) properties. The treatment schedule given to the patient was as per given below Table 1:

Table 1: Timeline of case

Date and Year	Clinical events and Intervention	
07 September 2018	Patient came to OPD with the complains of- <ul style="list-style-type: none"> Pain in lower abdomen and epigastric region Burning micturition and Constipation - Whole abdomen USG was advised to the patient. Following ayurvedic medicines were advised for oral intake to the patient 1. Tab. <i>Antaf</i> 2 Tablet TDS 2. Syrup <i>Dealka</i> 2 Teaspoonful BD 3. <i>Gokshuradi guggulu</i> 2 Tablet BD	
12 th September 2018	Whole abdomen USG was done. USG findings showed- right ovary showing cyst measuring 3.32 X 2.75 cm. Left ovary is normal in size, shape and echotexture.	
17 th September 2018	On the basis on USG finding some drugs were withdrawn and a revised drug was advised to continue as below-	
	Continued drugs 1. Tab. <i>Antaf</i> 2 Tablet TDS 2. <i>Khadir arishta</i> 2tsf BD with equal water after meal 3. <i>Punarnavadi guggulu</i> 2 Tablet TDS	Withdrawn drugs 1) Syrup <i>Dealka</i> 2) <i>Gokshuradi guggulu</i>
12 th October 2018	Patient came for follow up. Some drugs were withdrawn and below mentioned drug were advised to continue.	
	Continued drugs 1) <i>Punarnavadi guggulu</i> 2 Tablet TDS 2) <i>Kanchnar guggulu</i> 2 Tablet TDS 3) <i>Shankh vati</i> 1 Tablet TDS	Withdrawn drugs 1. Tab. <i>Antaf</i> 2. <i>Khadira rishta</i>
22 th October 2018	Patient came for follow up. <i>Sankhvati</i> was withdrawn and below mentioned drug was advised to continue.	
	Continued drugs 1. <i>Punarnavadi guggulu</i> 2 Tablet TDS 2. <i>Kanchnar guggulu</i> 2 Tablet TDS 3. <i>Ashoka rishta</i> 2tsf BD with equal water after meal.	Withdrawn drugs 1. <i>Shankh vati</i>
29 th October 2018	Patient came for follow up and same treatment continued.	
20 th November 2018	Patient came for follow up and same treatment continued.	
28 th November 2018	Patient came for follow up and complained for vaginal discharge. <i>Sphatik bhasma</i> was added and advised for vaginal wash. Whole abdomen USG was advised.	
	Continued drugs 1. <i>Punarnavadi guggulu</i> 2 Tablet TDS 2. <i>Kanchnar guggulu</i> 2 Tablet TDS 3. <i>Ashoka rishta</i> 2tsf BD with equal water after meal 4. <i>Sphatik bhasma</i> was added for vaginal wash	
18 th December 2018	Whole abdomen USG findings showed- Both the adnexa normal.	
19 th December 2018	Patient got complete relief from ovarian cyst. Patient complained epigastric pain and heartburn.	
	Continued drugs 1. Tab. <i>Antaf</i> 2 Tablet early in morning empty stomach. 2. <i>Shankh vati</i> 2 Tablet BD	Withdrawn drugs 1. <i>Punarnavadi guggulu</i> 2 Tablet TDS 2. <i>Kanchnar guggulu</i> 2 Tablet TDS 3. <i>Ashoka rishta</i> 2tsf BD with equal water after meal 4. <i>Sphatik bhasma</i> was added for vaginal wash
28 th December 2018	During the regular follow up	
	Continued drugs 1. Tab. <i>Antaf</i> 2 Tablet early in morning empty stomach. 2. <i>Shankh vati</i> 2 Tablet BD 3. <i>Amlapitta mishran</i> 2 Teaspoonful BD	
11 th January 2019	Relieved of all the complains for which patient came to OPD No further treatment advised. Patient was called for follow up and was completely fine.	
	Withdrawn drugs 1. Tab. <i>Antaf</i> 2 Tablet early in morning empty stomach. 2. <i>Shankh vati</i> 2 Tablet BD 3. <i>Amlapitta mishran</i> 2 Teaspoonful BD	

Diet and lifestyle modifications

Patient was advised to avoid junk, oily, spicy and refrigerated food. Fibres and vegetables were also advised to the patient. Junk foods are deficient in nutrients and one of the main causes of

many diseases. Over cooking of vegetables should be avoided; it loses most of the nutrients. Onion, cabbage, beans, garlic, carrots, beets were asked to avoid because it forms excess of gases and plenty of water was recommended for drinking. She was advised to increase physical activity.

Follow up and outcomes

Patient's treatment was started on 7th September 2018. Her treatment was continued with oral ayurvedic drugs for three months. Some other oral ayurvedic drugs were added and

withdrawal during the course of treatment. On 18th December 2018 USG finding suggested both the adnexa normal. Both ovaries appeared normal in size. There was no evidence of ovarian cyst. The patient got complete relief from ovarian cyst (Table 2).

Table 2: Chronological USG report date wise

Before treatment	After treatment
12 th September 2018	18 th December 2018
USG findings- right ovary showing cyst measuring 3.32 X 2.75 cm. Left ovary is normal in size, shape and echotexture.	USG findings- Both the adnexa normal.

Action of Ayurvedic drugs

Gokshuradi guggulu mainly acts on *Vata* and has a great role in *Shukra Dosh*. *Gokshuradi guggulu* is recommend as it helps in the treatment of *artvadushti* as well as helps in the management of pain. *Vata* is responsible for pain and *goksuradi guggulu* helps in the management of *vata* "vatasramvataroganshsh shukradoshamtatha ashmarim"⁶. *Khadira rishta* is "gulmamgranthikrimenkasamshvasamplehhouudramjayeta." This drug has a direct effect on *granthi roga*⁷. *Kanchanara Guggulu* was prescribed due to its *Vata-Kaphahara* properties i.e., which alleviates the aggravated *Vata* and *Kapha Doshas* and due to its *Raktashodhana* (purification of blood), *Lekhana* (bio-scraping) and *Shothahara* (anti-inflammatory) properties it shows significant effect in *Granthi*⁸.

Kanchnar guggulu is one of the preferred drugs for the treatment of *granthi* and a lot of effects are observed in several studies for the management of ovarian cyst. "*Granteenvranch gulmanschkusthani cha bhaganderm*"⁹ *Ashokarishta* is effective in scanty menstruation and menorrhagia. It is useful in *Yoni roga* i.e., *Asrgdararuja*, *Yoniruja* and *Shwetapradara*¹⁰. *Tab Antaf* manufactured by Karnataka antibiotics and pharmaceuticals limited contains *Glycyrrhiza glabra*, *Embelica officinalis*, *Narikela Lavana* and *Shankha Bhasma*. It acts an antacid and Anti-flatulent. These medicines were advised to treat epigastric pain. *Amlapitta mishran* is also indicated for the same. Later on, patient had a complaint of vaginal discharge so; *sphatika bhasma* was advised for vaginal wash to the patient. *Sphatika bhasma* is useful in vaginal discharges as well as low backache as it balances *vata* and *pitta*. Fibres and vegetables were also advised to the patient. Ovarian cyst was completely cured as no sign of ovarian cyst seen in ultrasonography. There is no recurrence of any symptoms and sign till now.

RESULT AND DISCUSSION

Aetiology of ovarian cyst remains poorly understood. It often affects several family members and is aggravated by obesity. Ovarian cyst often leads to pituitary dysfunction, anovulatory menstrual cycles, androgen excess, obesity, insulin resistance. Patients with ovarian cyst may have amenorrhea. Though patients vary in the severity of each feature. Patient came to OPD with the complain of pain in lower abdomen and epigastric region along with burning micturition and constipation. USG was advised to the patient for proper diagnosis. Oral ayurvedic drugs *Antaf* two tablets thrice a day, Syrup *Dealka* manufactured by Karnataka antibiotics and pharmaceuticals limited 2 Teaspoonful twice a day and *Gokshuradi guggulu* 2 Tablets twice a day were advised to the patient. USG was done on 12th September 2018. USG findings suggested right ovary showing cyst measuring 3.32 X 2.75 cm. Left ovary was normal in size, shape and echo texture. Ovarian cyst requires the demonstration of cyst in the ovary which are most readily detected by transvaginal USD.

The case was treated on the line of management of *Granthi roga*. Mainly *Vata* and *Kapha Doshahara* drugs were prescribed because of predominance of *Vata* and *Kapha Dosh* in *Granthi*. These drugs help to cures female disorders. It gives strength to uterus and ovary. It relieves epigastric pain. *Vata* and *Kapha* are the main *Doshas* involved in *Granthi*. Generally, poor digestive power (*mandagni*) causes production of *Ama* (partial digested food) in the body, which ultimately cause a variety of disorders. Constipation occurs due to *Vata Vriddhi* and is also a root cause of many diseases. These drugs work on both ovarian cyst as well as constipation. It improves absorption and metabolic activities in the body as well as cures constipation and prevents diseases.

On 17th September 2018 Tab. *Antaf* along with *Khadir arishta* two teaspoonful twice a day with equal water and *Punarnavadi guggulu* two tablets thrice a day were advised and Syrup *Dealka* and *Gokshuradi guggulu* were withdrawn. On 12th October 2018 all the drugs were withdrawn only *Punarnavadi guggulu* two Tablet thrice a day, *Kanchnar guggulu* two Tablet thrice a day and *Shankh vati* one tablet thrice a day were added. On 22th October 2018 *Shankh vati* was withdrawn and *Ashoka rishta* 2 t.s.f. twice a day with equal water was added. These drugs continued for one month with the regular follow up on 29th October 2018 and 20th November 2018. On 28th November 2018 patient complained of vaginal discharges so; *Sphatika bhasma* was added for vaginal wash and USG was advised. On 18th December 2018 USG was done and the findings showed both the adnexa normal. On 19th December 2018 as the patient got complete relief from ovarian cyst but burning sensation was still there in epigastric region and pain in abdomen. So, all the above-mentioned drugs are withdrawn and Tab. *Antaf* 2 Tablet early in morning empty stomach and *Shankh vati* two tablets BD were advised. On 28th December 2018 same treatment is continued and *Amlapitta mishran* two teaspoonful BD was added. On 11th January 2019 patient got relieved from all the complaint for which patient came to OPD. No further treatment was advised. Patient was called for follow up and was completely fine. Tab *Antaf*, Syrup *Dealka*, *Gokshuradi guggulu*, *Khadira rishta*, *Punarnavadi guggulu*, *Kanchnar guggulu*, *shankh vati*, *Ashoka rishta*, *Amlapitta mishran* and *sphatik bhasma* were found effective in the treatment of ovarian cyst.

CONCLUSION

This Ayurvedic treatment is helpful in treating the patient of ovarian cyst. This approach of treatment should be taken into consideration for further treatment and research work for ovarian cyst.

Patient perspective

The patient was satisfied with the improvement. Her ultrasound reports showed no evidence of ovarian cyst along with symptoms. Her pain was also reduced, and she was completely cured with Ayurvedic management.

Patient consent

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

Clinical significance

In modern system of medicine hormonal and surgical intervention is the only treatment available for ovarian cyst. As many people are terrified of hormonal intervention and try even though the only treatment in modern science but that too do not assure recurrence of disease, as chances of recurrence of ovarian cysts very high. In Ayurvedic science availability of medicine is a chance of patients to get cured completely without the recurrence of disease.

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