



Review Article

www.ijrap.net

(ISSN Online:2229-3566, ISSN Print:2277-4343)



UTERINE FIBROIDS: A COMPREHENSIVE OVERVIEW IN AYURVEDA

Mayuri Ramkrushna Gondhane ^{1*}, Swathi C. ², Ashutosh Chaturvedi ³

¹ PG Student, Sri Jayendra Saraswathi Ayurveda College, Chennai, (Department of Ayurveda) Sri Chandrashekharendra Saraswathi Viswa Mahavidyalaya, Kanchipuram, Tamil Nadu, India

² Associate Professor, Department of Prasuti Tantra And Stree Roga, Sri Jayendra Saraswathi Ayurveda College, Chennai, (Department of Ayurveda) Sri Chandrashekharendra Saraswathi Viswa Mahavidyalaya, Kanchipuram, Tamil Nadu, India

³ Assistant Professor, Department of Panchakarma, Sri Jayendra Saraswathi Ayurveda College, Chennai, (Department of Ayurveda) Sri Chandrashekharendra Saraswathi Viswa Mahavidyalaya, Kanchipuram, Tamil Nadu, India

Received on: 17/10/23 Accepted on: 30/11/23

*Corresponding author

E-mail: mayurigondhane9796@gmail.com

DOI: 10.7897/2277-4343.1406168

ABSTRACT

The most frequent solid benign tumours in women of reproductive age are uterine fibroids. The symptoms of uterine fibroid adversely affect social and recreational activities, women's quality of life, and productivity at work. Due to its muscular ancestry, it might be compared to Granthi in garbhashaya. In the present era, lack of exercise and intake of junk food causes agnivaishamya and ama formation. This vitiates doshas like Kapha and Vata and dushyas like Rasa, Rakta, Mamsa, Meda, and Artava, resulting in dhatwagni mandya forming Garbhashaya Granthi. The management goal is samprapti vighatana of Granthi using tikshna, ushna, and lekshana dravya. Unwillingness to undergo prolonged hormone therapy and fear of surgery brings more patients to Ayurveda. The current article focuses on and explores the potential of Ayurveda in Garbhashaya Granthi.

Keywords: Garbhashaya Granthi, Uterine Fibroid, leiomyoma, Apana Vayu Dusthi.

INTRODUCTION

Uterine fibroid is a common gynaecological disorder that affects 20% to 40% of women of reproductive age.¹ It is also known as leiomyomas, myomas, and fibromyomas.² They are benign tumours that can vary in size and shape and can be located anywhere in the uterus. There are three types of uterine fibroids according to their location: (1) intra-mural, (2) sub-mucosal, and (3) sub-serosal.³ While approximately 50% of women with uterine fibroids do not experience symptoms, those who do may suffer from heavy menstrual bleeding, severe pain or cramps during periods, and other complications such as anaemia due to blood loss may occur. Uterine fibroids are not usually dangerous but may lead to complications such as infertility, placental abruption, abortion, foetal growth restriction, and preterm delivery. Surgery is the only known treatment for uterine fibroids.¹

Ayurveda interprets fibroids as a type of Granthi that arises due to the vitiation of Rakta (blood), Mamsa (fleshy/muscles), and Meda (fat/adipose tissue) admixed with Kapha. This produces rounded protuberant, knotty, or glandular and hard swelling called Granthi.⁴

The Ayurvedic management of Granthi has proven to be a successful treatment for a patient with uterine fibroids. This approach follows the principle of samprapti vighatana, which aims to break the pathogenesis of the disease. By addressing the root cause of the disease, Ayurvedic management provides a holistic approach to treating uterine fibroids.

ETIOPATHOGENESIS

The nidana (etiological factors) of shophya, like the intake of gramya mamsa, ajeerna ahara, and diwaswapna⁵ along with dushta bhojana, dushta arthava, beeja dosha, and daivta⁶ are also causative factors for Granthi. Dustha bhojana, including guru abhishyandhi bhojans that vitiate Mamsa and Medo dhatu along with mithya viharas like divaswapna, avyayama, etc, lead to Agni vaishamya and sroto vaigunya. Varying types of chromosomal abnormalities like deletion, trisomy, and translocation associated with fibroids signify beeja dushti. This vitiates Vata, Pitta, Kapha doshas along with Mamsa, Rakta, and Meda, then produces rounded, protuberant, knotty, and hard swelling called Granthi.⁷ Granthi considered as Mamsapradoshaja vyadhi.⁸

SAMPRAPTI GHATAKA

1. Dosha -Vata Kapha predominant tridoshika vyadhi
2. Dushya -Mamsa, Rakta, Meda
3. Agni - Dhatwagni
4. Srotas - Rasavaha, Raktavaha, Mamsavaha, Medovaha and Artavavaha srotas
5. Sroto Dushti - Sroto sanga
6. Udbhavasthana - Garbhashaya, Pakwashayottha vyadhi
7. Rogmarga - Abhyantara
8. Swabhava - Chirkari
9. Sadhyasadyata - Yapy vyadhi ⁹

TYPES

1. Kevala Kaphajam- Asymptomatic,
2. Pitta Samsargana- Menorrhagia, Metrorrhagia.
3. Vata Samsargana- Dysmenorrhoea, Pressure symptoms. ¹⁰

CLINICAL PRESENTATION

Different types of fibroids can cause various symptoms.

1. If the fibroid is located outside the myometrium, it may cause a feeling of heaviness in the abdomen. Symptoms of sub-serous fibroids can be identified this.
2. Conversely, the fibroid inside the uterine cavity may cause heavy bleeding, prolonged menses, and intermenstrual bleeding. This can be identified through symptoms of Rakta atipravritti or Asrigdara.
3. If the fibroid is located in the outer walls and expands outward, it may cause symptoms such as pelvic pain, back pain, dysmenorrhea, and a feeling of pressure in the pelvic region. This can be identified by symptoms like presta vamshana shoola and artava ruja.¹¹

It is not listed among the Yonivyapad, but symptoms of Garbhashaya Granthi can be observed in various Yoni rogas. Gulma and vamskhana parswa ruja are common in Vatik, while prista jangha ura vamshana ruja is prevalent in prakcharana. Excessive bleeding is observed in Rakta Yoni and Asrigdharam. Sroni vamshana ruja, dyspareunia (painful intercourse), and basti kukshi gurutwam are commonly seen in Pariplutha Yoni vyapad.¹²

CHIKITSA

The treatment for Garbhashaya Granthi involves three approaches:

Shodhana chikitsa (detoxification), shamana chikitsa (conservative), and shashtra chikitsa (operative). The eradication of the root cause of the disease is the essential aspect of the treatment, known as "Nidana Parivarjana".¹³ In the case of Garbhashaya Granthi, one should avoid consuming food items that trigger Kapha doshas and the vitiation of Rasa, Rakta, Mamsa, and Medo dhatus. Granthi is primarily caused by mandhagni (poor appetite). Hence, deepana, pachana dravyas, and langhana can be administered to improve Agni. The drugs that possess lekhana properties are mainly used due to the involvement of Mamsa and Meda Dushya. Sthoulya chikitsa can be administered to tackle Medo dushti along with the above measures.⁹ Additionally, avasthano chita chikitsa might be used to control the signs and symptoms of Granthi.

The Formulations used commonly include

1. Kashaya: Varunadi kashayam, Chitraka granthikadi kashayam, Nyagrodhadhi kashayam, Trayantyadi kashayam.
2. Guggulu: Kanchanara Guggulu, Shigru Guggulu.
3. Kshara: Palasa twak kshara, Kalyanaka kshara
4. Arista: Ashoka arista
5. Choorana Kalpana: Ashoka pattai choornam, Pushyanuga choornam
6. Ghritam Kalpana: Kalyanaka ghritam, Dadmadi ghritam
7. Pichu: Dhanwantaram tailam, Nalpamaradi tailam.
8. Vati Kalpana: Chandraprabha vati, Siva gutika.
9. Lehya Kalpana: Kalyanka gulam.¹⁰

Numerous clinical trials and case studies have been conducted on the conservative management of fibroids. One clinical study found 500 mg Palasa twak kshara effective in treating uterine fibroids.¹⁴ Additionally, in a case series, the use of 250 mg of Kanchanara Guggulu, 250 mg of Shigru Guggulu, and 3 gm of Haridrakanda twice daily for seven weeks with ksheera as anupana was beneficial in managing uterine fibroids.¹⁵ One comparative study revealed that using 6 gm of Jalakumbhi churna and 6 gm of Nagkesar churna twice daily for two months demonstrated the effectiveness of Jaalakumbhi churna in reducing excessive bleeding, low back ache and fibroid size compared to the control drug.¹⁶

When a fibroid presents with heavy and prolonged menstrual bleeding, Asrigadara chikitsa and Raktapitta chikitsa can be done. In cases where fibroid presents with pressure symptoms like low backache and lower abdominal pain, Vatika yoni roga chikitsa can be done. When fibroids present with urinary symptoms, Mutrakichra chikitsa can be done. Mutrashodhaka and mutravaha sroras avarodhahara can be used. Raktavardhaka treatment may be needed to correct the depletion of haemoglobin. For cases with Kastata rogas (dysmenorrhea), Apanvata anulomana and vedana nashna measures can be used. The Apana Vata anulomana treatment can be adapted for maithuna asahishnuthva (dyspareunia) and kati shula. Hormones might be balanced using ambu shamaka measures, which are important in menorrhagia.⁹

MODE OF ACTION OF SOME DRUGS

1. Chandraprabha Vati possesses katu-kashaya-madhura rasa, ushna virya, and laghu-tikshna-ruksha guna and is indicated in Shoola, Granthi, or Arbuda. It also has Rasayana properties. Chandraprabha Vati balances Tridosha and possesses an emmenagogue effect and anti-inflammatory properties. Chandraprabha Vati contains Shilajatu, Guggul, and Yavakshara, which exert scraping action, i.e. lekhana and help reduce fibroid. Lohabhasma makshika helps in balancing the hematopoietic component.¹⁷

2. Kanchnaar Guggulu possesses Vata-Kaphahara, raktashodhana, lekhana, and shothhara properties. Kanchnaar Guggulu is therapeutically important for managing Granthi, Apachi vrana, and Gulma. Lekhana and shothhara properties help reduce the size and arrest further growth of existing fibroid.¹⁸

3. Ashoka arista contains phenol glycoside, which directly affects uterine musculature. It stimulates both endometrium and ovarian tissue. It decreases blood flow. Tone up the endometrial vascularity and check for excessive bleeding. Ashoka is an antioxidant anti-inflammatory due to tannin, saponins, and b-sitosteol.¹⁹ As Ashoka has kashaya rasa, ruksha-sheeta-laghu guna, sheeta virya causes rakta prasadana, so it probably acts as Rakta-sthapak and directly helps symptomatically to control excessive bleeding.²⁰

4. Kanashathwadi kashaya has lekhana, gahabhashaya sankochaka, vranaropana, and vedanasthapana properties that help in reducing endometrial hyperplasia, thereby helped in normalizing the endometrial thickness.²¹

5. Muslikhadiradi kashayam is used in Raktapradara, Shwetapradar, and Kashtaartava. It is Pitta-Kapha shamaka in nature, which helps in normalizing excessive bleeding and painful menstruation.²²

6. Shigru Guggulu have katu-tikta rasa, laghu-tikshana-ruksha guna, and Kapha-Vatahara properties, which seem effective against fibroids. It contains kshara that has ushna tikshna properties, making it Vata Kapha shamaka; it also contains Bhallatak, Chitraka, and Pippali along with gomootra, enabling kalyanaka kshara to destroy the fibroids, which are Kapha Vata in nature.¹⁴

PATHYA APATHYA

Pathya

- Rakta shali, Puraan Ghrita, Mudga, Yava, Patola
- Rakta Shigru, ruksha, katu, and deepana dravyas, Shilajatu and Guggulu
- Pathya mentioned in yoni roga like Yava-Annam, Abhayarisham, Lashun, Pippali, Amalaki.

- Light exercise like jogging, brisk walking, yoga.
- Sleeping at the right time.
- Do meditation.

Apathya

- Use of milk with Lahsun
- Kapha medo vardhak aahara, like mamsa bhojana, junk food.
- Srotoavarodh ahara like abhishyandhi bhojana, guru bhojan.
- Meat of aquatic animals.
- Dough of grounded wet pulses.
- Excess use of white sugar, white salt, and white hydrogenated oil.
- Sweet, sour, heavy, and moisture-producing substance.
- Processed foods like cheese, frozen pizza, and microwaveable dinners.
- Foods with ingredients added for flavour and texture, like spices, sweeteners
- Colours and preservatives like jam, sauce, juice, yoghurt, etc.
- Virudh ahara.²³

CONCLUSION

It can be concluded that the condition of Garbhashaya Granthi is closely related to the uterine fibroid. The Acharyas emphasize nidana parivarjana (eradication of cause) and also elaborate on the importance of dinacharya, rithucharya, and rajaswala charya and their role in the upbringing of healthy womanhood. Thus, medications and lifestyle modifications ensure women reach a higher potential.

REFERENCES

1. Rawat Neha, Barla Manjry and Roushan, Rakesh. Ayurvedic Approach for Management of Uterine Fibroids: A Case Report. Journal of Research in Ayurvedic Sciences, 2019; 3:34-38.
2. Richard Shlansky-Goldberg, Mark Rosen, and Ann Honebrink, Clinical review: Uterine leiomyomas, Radiology Key. 2015, (Accessed: 21 November 2023). Available at: <https://radiologykey.com/clinical-review-uterine-leiomyomas/>.
3. Konar Hiralal. D C Dutta's Textbook of Gynaecology, Jaypee Brothers Medical Publishers (P) Ltd; 6th ed; 2013. p. 273.
4. Jadavji Trikamji Acharya, ed. Sushruta Samhita of Sushruta, Nidana Sthana, Chapter 1, Verse 3, 9th ed., Varanasi: Chaukhamba Orientalia, Varanasi; 2007. p. 256
5. Sreekanthamurthy KR. Illustrated Sushruta Samhita Vol.1 (Sutra Sthana). Varanasi; Chaukhamba Orientalia; 2014. p. 121
6. Sreekanthamurthy K.R. Vagbhata Ashtanga Hridaya Vol. III (Uttara Sthana). Varanasi; Chaukhamba Orientalia; 2012. p. 320.
7. Acharya Vidhyadhar Shukla and Tripathi, Ravidutta Shavayathu chikitsa adhyay, Charaka Samhita Chikitsa Sthana, Chaukhamba Publication, Varanasi 2013, p. 284.
8. Agnivesha. Charaka Samhita, revised by Charaka and Dridhabala. Vol. 1 (Sutra Sthana) Varanasi; Chaukhamba Orientalia. p. 572.
9. Sunita Goswami and Rashmi Sharma. An Ayurvedic review of uterine fibroids. International Journal of Advanced Research. 2022;10 (Jan):177-181.
10. Dam Bhagavathi, Stree roga and PCOD, Sitaram Research Foundation Educational Interactive Session, 1st edition 2019, Vol 1, p. 21-22.
11. Mary Blossom CJ, Giby Thomas, Jyoti PK. Understanding Fibroids in light of Ayurveda. International Journal of Ayurveda and Pharma Research. 2020;8(10): 95-99
12. Sreekanthamurthy KR. Vagbhata Ashtanga Hridaya Vol. 3 [Uttara Sthana]. Varanasi; Chaukhamba Orientalia; 2012. p. 310-14.
13. Ambika Dutta Shastri, "Sushruta Samhita" Ayurved Tatva Sandipika", Vol I & II Uttartantra 1/25 p. 11.
14. Dhiman K. Ayurvedic Intervention in the Management of Uterine Fibroids: A Case Series. Ayu 2014; 35: 303-8.
15. Meshram Manjusha R. Effect of Palash kshar on uterine fibroid. Int. J. Res. Ayurveda Pharm. 2014;5(4):474-475 <http://dx.doi.org/10.7897/2277-4343.05497>
16. Seema Murthy, Siddaram Arawatti, Pankaj Rai, Debasis Biswal, Mohapatra Nibedita. Role of Jalakumbhi in Uterine Fibroid - A Clinical Study. International Journal of Ayurveda and Pharma Research. 2015;3(10):61-65.
17. Ministry of Health and Family Welfare. Ayurvedic Formulary of India. Part I, Part A formulation. 2nd ed. India: Ministry of Health and Family Welfare; 2016. p. 512-515.
18. Bhavamishra, Bhavaprakasa, Guduchyadi Varga, 103-104, edited by Brahmashankar Mishra, 11th ed. Chaukhamba Sanskrit Sansthan, Varanasi, 2004; p. 336-7.
19. Gahlaut A, Shirolkar A, Hooda V, et al. β -sitosterol in different parts of *Saraca asoca* and herbal drug Ashoka arista: Quali-quantitative analysis by liquid Chromatography-Mass Spectrometry. J Adv Pharm Technol Res. 2013;4(3):146-150.
20. Anonymous. Ayurvedic Formulary of India, Part I, Part A, 1:5 Ashoka arishta, (Bhaishajyaratnavali Strirogadhikara). 2nd ed. New Delhi, India: Ministry of Health and Welfare; 2003. p. 8.
21. Shruti G. Math, Padmasaritha K, Ramesh M. Management of Uterine Fibroids in the Ayurvedic perspective - A Case Study. J Ayurveda Integr Med Sci 2018;5: 222-24.
22. KV Krishnan Vaidyan and S. Gopla Pillai, Editor. Kashaya Yogam - Asrigdaram. In: Sahasrayogam - Sujanapriya vyakhyanam. Alappuzha: Vidyarambham publishers; 2015. p. 101.
23. Gulnar Mariam M et al. A case study on management of garbhasaya granthi with reference to uterine fibroid. International Journal Research Ayurveda Pharm. 2022;13(5): 32-36.

Cite this article as:

Mayuri Ramkrushna Gondhane, Swathi C., Ashutosh Chaturvedi. Uterine Fibroids: A comprehensive overview in Ayurveda. Int. J. Res. Ayurveda Pharm. 2023;14(6):56-58
DOI: <http://dx.doi.org/10.7897/2277-4343.1406168>

Source of support: Nil, Conflict of interest: None Declared

Disclaimer: IJRAP is solely owned by Moksha Publishing House - A non-profit publishing house, dedicated to publishing quality research, while every effort has been taken to verify the accuracy of the content published in our Journal. IJRAP cannot accept any responsibility or liability for the site content and articles published. The views expressed in articles by our contributing authors are not necessarily those of IJRAP editor or editorial board members.