



## Case Study

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### AYURVEDIC MANAGEMENT OF SECRETORY PITUITARY MICROADENOMA: A CASE STUDY

Nimisha OP <sup>1\*</sup>, Shaiju Krishnan P <sup>2</sup>

<sup>1</sup> PG Scholar, Department of Panchakarma, MVR Ayurveda Medical College, Kannur, Kerala, India

<sup>2</sup> Professor and HOD, Department Panchakarma, MVR Ayurveda Medical College, Kannur, Kerala, India

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#### \*Corresponding author

E-mail: nimisha0101@gmail.com

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#### ABSTRACT

Prolactinomas are the most common hormone-secreting pituitary adenoma and more frequently occur in females than males. A 35-year-old female patient had c/o milky discharge from the nipple of the breast, headache, and irregular menstrual periods for one year. She has consulted an obstetrics doctor and has taken modern medicine, and she had found some improvement in the starting phase of the treatment, but there has been no progress in that condition for the last six months. So, she has planned to take Ayurveda treatment for the same. The patient was subjected to an Ayurvedic management protocol, including Snehapana, Virechana, and Nasya, for seven days, followed by Shamana Chikitsa for six months. The clinical presentation of this case points towards the diagnosis of Granthi in Ayurveda.

**Keywords:** Prolactinoma, Snehapana, Nasya, Virechana, Granthi

#### INTRODUCTION

Prolactinoma is a prolactin-secreting adenoma that develops in the pituitary gland. It is the most common type of pituitary tumor<sup>1</sup>. Most prolactinomas in pre-menopausal women are microadenomas because the symptoms of prolactin excess usually result in early presentation<sup>2</sup>. In men and post-menopausal women, the presentation is often much more insidious, and the tumours are almost invariably macroadenomas at the time of diagnosis<sup>3</sup>. Prolactin-secreting adenoma cause hyperprolactinemia. The cardinal features of hyperprolactinemia are galactorrhoea and hypogonadism<sup>4</sup>. As per modern medicine, the first line of treatment approach for prolactinomas is dopamine agonist drugs, with radiotherapy and surgery for medication intolerant patients<sup>5</sup>. Ayurveda classics have not mentioned pituitary adenomas but discuss the formation and treatment of Granthi<sup>6</sup>, Gulma, etc.

**Aim:** To evaluate the effect of Ayurveda treatment in Prolactinoma.

**Objective:** To evaluate the effect of Snehapana, Virechana, and Nasya in Prolactinoma.

**Place of Study:** This case study was done in the department of Panchakarma, MVR AMC, Parassinikkadavu, Kannur, Kerala, India.

#### Case report

**Presenting complaints:** A 35-year-old, married, non-pregnant female patient complains of milky discharge from the nipple of the breast, headache, and irregular menstrual periods for one year.

**History of Presenting complaints:** The patient was normal before one year. Then she noticed a milky discharge from the nipple of the breast, irregular menstruation, and headache. She has consulted an obstetrics doctor, advised investigation, which

revealed a pituitary microadenoma on MRI and high prolactin level of 217 ng/ml in blood reports and has taken modern medicine. She had found some improvement in the starting phase of the treatment, but there was no progress in that condition for the last six months. So, she has planned to take Ayurvedic treatment for the same.

**History of previous illness:** N/c/o DM and Hypertension

**Personal History:** The patient had no addiction. The appetite was normal. Her bowel was sometimes constipated. The bladder was regular. Sleep was disturbed due to stress.

#### Menstrual History

G<sub>2</sub>P<sub>2</sub>A<sub>0</sub>L<sub>2</sub>

Duration of bleeding: 5- 6 days

Interval of bleeding: 1.5- 2 months

Quantity of bleeding: <1pad/day

**Family History:** Nothing

**General physical examination:** Vitals were normal. Pallor, icterus, cyanosis, clubbing, and lymphadenopathy were absent. On examination, the cardiovascular, respiratory, urinary, and central nervous systems revealed no abnormality.

**Clinical examination:** Dasavidha Athura Pariksha assessed Athura Bala Pramana. Prakriti of the patient was Vata- Pittaja; Samhanana was Madhyama; Pramana- height- 156 cm, weight 57 kg Vyayamashakti was Madhyama; Aharashakti and Jaranashakti were Madhyama; Satva was Madhyama.

**Diagnosis:** The present case was diagnosed as Vata kaphaja Dosh Pradhana Granthi based on detailed clinical history.

**Ethical approval:** Written consent was taken from the patient.

#### Treatment protocol

- Dhanyamladhara for 3 days.
- Snehana karma (Abhyanthara and Bahya)  
Snehapana with Varanadi Grita in Arohanakrama Matra until Samyak Snigdha Lakshana has obtained. In this case for 7 days (30 ml, 60 ml, 90 ml, 120 ml, 150 ml, 170 ml, 200 ml).  
Abhyanga with Dhanwantharam Tailam and Basha Sweda for three days.
- Shodhana Karma  
Virechana with Manibhadra Choornam (20 gm)  
Nasya with Varanadi Ksheera Grita for seven days
- Thakradhara for seven days (Varanadi kashayam)
- Shamana therapy  
Pathyakshadhatryadi kashayam with jaggery  
Sapthasaram kashayam  
Kanchanara Guggulu  
Hinguvachadi gudika  
Varanadi Grita 5ml (A/F Night only)

#### RESULT AND DISCUSSION

Ayurveda interprets tumour formation as a condition of Vata Kapha origin. As a result of the benign pituitary tumour and increased prolactin secretion, symptoms follow that result in further Kapha and Vata vitiation in other dhatus and Srotas, including milky discharge from the breast, irregular menstruation, headache. From an Ayurvedic perspective, the first step is to remove the Ama and regulate Agni. Arohanakrama Snehapana with Varanadi Grita was given for 7 days. Samyak Snigdha Lakshana, such as Vata Anulomata, Agni Deepti, Snigdha Vit, etc., was obtained. In the present case study, the patient is Dushchardya too. So Virechana karma was planned. Nasya Karma is to be a very effective therapy for the removal of vitiated Doshas from the head. After seven days of Varanadi ksheera Grita Nasya intensity of headache was reduced. After Shodhana Karma, improvement was observed in almost all clinical features. Thakradhara relaxes and revitalizes the central nervous system and balances the brain and hormonal functions. Kanchanara guggulu is specific for clearing all growths and swellings.

After Shodhana Karma, the patient noticed a milky discharge from the breast, and the headache reduced. The patient noticed

regular menstruation after three months of oral medication. After six months of treatment, the blood sample was evaluated for a prolactin level was 12.09 ng/ml.

#### CONCLUSION

Ayurveda is an ancient system of medicine which effective in the management of pituitary microadenoma. Shodhana Chikitsa and Shamana Chikitsa should be considered in the ayurvedic treatment of Prolactinoma. However, the present study should be conducted in a large sample size to confirm its efficacy.

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