

Ayurveda Treatment Protocol in the Management of Ovarian Cysts -Case Series

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ABSTRACT:

Ovarian cysts are fluid-filled masses that may develop in the ovary. They are most commonly derived from ovarian follicles. It is a relatively common disorder in women of reproductive age. It can be compared to *Granthi* as per Ayurveda. There are specific treatment protocols mentioned in various Ayurveda classics under the *Granthi cikitsa*. The main aim of this case series study is to establish a successful Ayurveda treatment protocol for the management of ovarian cysts. Specific objectives are, to design further clinical trial of Ayurveda treatments in the management of ovarian cysts. Five patients who were diagnosed with ovarian cysts were selected and managed by Ayurveda intervention of *Deepana Pachana* with *Panchamuli lagudrakshadi kashaya*, *Chirabilwadi kashaya*, *Chandraprabha vati* and *Manibadra churnaya*, *Shodana karma* using *Virechana* and *Basti karma* and *Shamana chikitsa* with *Diyamittadi kashaya*, *Kanchanara guggulu* and *Manibadra churnaya*. This protocol was continued for 2 months. As the subjective criteria signs and symptoms were assessed on the basis of standard grading system and objective criteria was assessed on the basis of Ultra Sound Scan findings and improvement. According to analysed data, these case series findings were showed that beneficial effects and efficacy of selected herbal formulations in the management of ovarian cysts for the given time period. Parameters of the Ultra Sound Scans had showed significant improvement of the size of the cyst and significant relief of the associated symptoms was showed. Therefore the prescribed Ayurveda treatment protocol have a considerable effect on management of ovarian cysts.

KEY WORDS: Cyst, *Vata Kaphaja Granthi*, Ovarian cyst, *Vata Kaphaja Granthi Cikitsa*.

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INTRODUCTION:

The incidence of ovarian cyst has increased dramatically and functional ovarian cysts were found to be the common cause for hospitalizations among women worldwide. It has been reported that 5% to 10% of women will undergo surgery for an adnexal

mass. Each year in the United States, more than 250,000 women are discharged from the hospital with a diagnosis of ovarian cyst. Cyst can be diagnosed by pelvic examination and ultrasound. Occasionally the retracting blood clot may become very small and may simulate a mural nodule or papilloma.

Surgery is the only option except for some hormonal medication. Occasionally the retracting blood clot may become very small and may simulate a mural nodule or papilloma. Surgery is the only option except for some hormonal medication⁽¹⁾.

According to Ayurveda, ovarian cyst is similar to *Granthi*. It develops due to localization of morbid body humours in body tissue. There are nine different types of *Granthi* have been mentioned in Ayurveda text depending upon the pathological factor and the body tissue involved. *Granthi* is explained as when *Rakta* (blood), *Mamsa* (muscles), and *Meda* (fat/ adipose tissues) are vitiated by *Tridoshas*, that are at mixed with *Kapha* produce rounded glandular, protuberant, knotty and firm swelling known as *Granthi*.

There are several types of *Granthi* mentioned in Ayurveda classics such as *vataja*, *pittaja*, *kaphaja*, *medoja*, *raktaja*, *mamsaja*, *asthija*, *vrunaja* and *shiraja*⁽²⁾. There are specific treatments mentioned in various Ayurvedic classics under the *Granthicikitsa*. The line of treatment for *Granthi* is *Shodhana*, *Shamana*, *Chedana Karma*. Ayurveda has such a good potential for treating the Ovarian Cyst (*Beejakosh Granthi*) and also prevent the recurrence of ovarian cyst. Henceforth the present observational case series study is to observe of Ayurveda treatments in the management of ovarian cysts. There is no such effective treatment in modern science except hormonal therapy, laparoscopy, and hormonal therapy has its own limitations. So this study planned with aim to establish a successful Ayurveda treatment protocol for the management of ovarian cysts. Specific objectives are, to design further clinical trial of Ayurveda treatments in the management of ovarian cysts and to identify most suitable drugs for the management of ovarian cysts.

MATERIAL AND METHODS:

Selection of patients:

Who was diagnosed with ovarian cyst in Gynaecology and Obstetrics clinic in Bandaranayake Memorial Ayurveda Research Institute, Sri Lanka.

Diagnostic criteria:

Diagnosis is based upon the presence of clinical features and USG findings of ovarian cyst (TVS or TAS).

Assessment criteria:

Subjective parameters - Pain and associated symptoms during menstruation, Numerical rating pain scale for pain and Ayush department establish grading scale for associated symptoms.

Objective parameter - Ultra Sound Scan of before and after treatment.

Case 01: A 25-year-old unmarried female patient complained the pain in the lower abdomen and irregular menstrual period associated with burning sensation in palms and soles. Also suffering with depression condition. Patient came to the OPD of BMARI with ultrasonographical report because she was already consulted to modern Gynaecologist before visited to our OPD. As per USG reports, She was diagnosed as ovarian cyst present in right ovary and polycystic condition present in left ovary (1.36cmX2.08cm, one cyst).

Case 02: A 40 year old married female patient complained the abdominal distension and mild lower abdominal pain during menstruation for 2 years associated with Gastric burning, hair falling and constipation. Patient came to the OPD of BMARI with ultrasonographical report because she was already consulted to modern gynaecologist before visited to OPD. As per USG reports she was diagnosed as ovarian cyst present in bilateral ovaries.

(Left side 1.4cmX2.1cm, on cyst, right side 3.3cmX3.2cm, one cyst).

Case 03: A 37 years old unmarried female patient complained of mild pain in the lower abdomen and lower back during and before periods associated with incomplete emptiness of bladder after urination and difficulty in urination since 2020. Patient came to the hospital and visited the outpatient department (OPD) in BMARI. She had taken some modern medical treatment for the same problem and did not get relief for same; she was interested to Ayurveda treatment for the same problem. She had taken ultrasonography report at BMARI. As per her USG reports, diagnosed as ovarian cyst present in right ovary (2.91cmX3.15cm, one cyst).

Case 04: A 40 years old married female patient complained irregular menstruation and Lower back pain since 8 months and she wasn't conceived without using any contraceptive method during last 3 1/2 years. She has taken allopathic treatments at the beginning, but the condition didn't recovered. She came to the OPD of BMARI and had taken ultrasonography report. As per her USG reports, diagnosed as ovarian cyst present in right ovary (5.71cmX4.09cm, one cyst)..

Case 05: A 26 years old unmarried female patient complained severe pain in left sided lower abdomen during menstruation since 2018. Gradually she had felt aching type lower abdominal pain and it radiate to the lower back side. In 2017 she had fainting and felt nausea during menstruation. As per USS report she had been diagnosed as

endometrioma which is adhered to posterior wall of uterus and right side fallopian tube adhered to ovary. After one year she had been diagnosed ovarian cyst in left ovary (7.5cmX5.6cm, one cyst).

Study design:

Patients were treated with the specific treatment protocol of *Stree roga* for *Granthi cikitsa*. *Deepana pachana* -with internal medicine. *Shodana -Virechana karma & Basti karma*. *Shamana*-with internal medicine. The treatment details and timeline is mentioned in table-1.

RESULTS:

Considering the pain relieving 60% of the patients reached to complete remission of pain and 40% of the patients were improved. Considering the USS findings after the treatment the cysts belongs to size range from 5cm to 10cm reduced the level of less than 5cm and Cysts less than 5cm reduced up to minute size. Most of the cysts more than 5cm recommend for surgical intervention in allopathic medical system. But analysing of the final results of this case series it revealed, cysts more than 5 cm also successfully managed by Ayurveda treatments.

These findings according to the total assessment before treatment 60% of patient's cyst size less than 5cm and 40% between 5cm-10cm. After the treatment all five cases reached the size of less than 5 cm. Before Treatment - size of the cyst was less than 5 cm in 60% of the patients and size of the cyst was in between 5-10 cm in 40% of the patients. After Treatment - size of the cyst was less than 5 cm in 100% of the patients. (Table-2).

Table 1: Treatment plan and Time line:

Time	Procedure	Drug and Dose	Duration
1 st month	Deepana & Pachana	Panchamuli lagudrakshadi kashaya - 120ml/bd /Before meal Chirabilwadi kashaya - 120ml/bd /Before meal Chandraprabha vati - 2 bd Manibadra churnaya - 5g bd.	First 14 days
	Snehapana	ghrta (10-35ml) & Thila taila (5ml) (as per koshta & agni) empty stomach in morning	3-7 days
	Abhyanga & Swedana	Dashamula for swedana - 20 mins Sarshapadi oil for abhyanga - 20 mins	3 days
	Virechana karma	Aralu + Bulu kashaya - 240ml + Eranda oil - 5ml	1 day
	Samsarjana karma	Diet (as per koshta shuddhi)	3-7 days
2 nd month	Shamana karma	Diyamittadi kashaya - 120ml/ bd/ before meal, Kanchanara guggulu - 2bd Manibadra churnaya - 5g bd	21 days
	Basthi karma	Diyamittadi kashaya - 240ml Sahindava lawana - 10g Tila taila - 48ml Thriphala churnaya - 20g Bee honey - 48ml	
	Follow Up		07 days

Table- 2: USS findings:

Case No		Before treatment		After treatment	
		Horizontal diameter (cm)	Vertical diameter (cm)	Horizontal diameter (cm)	Vertical diameter (cm)
Case 01		1.36	2.08	0.81	1.05
Case02	Left ovarian cyst	1.4	2.1	0.7	0.7
	Right ovarian cyst	3.3	3.2	2.4	1.8
Case 03		2.91	3.15	1.0	0.4
Case 04		5.71	4.09	4.91	3.32
Case 05		7.5	5.6	3.93	3.96



Figure 1: Before treatments, case no.1



Figure 2: After treatments, case no.1

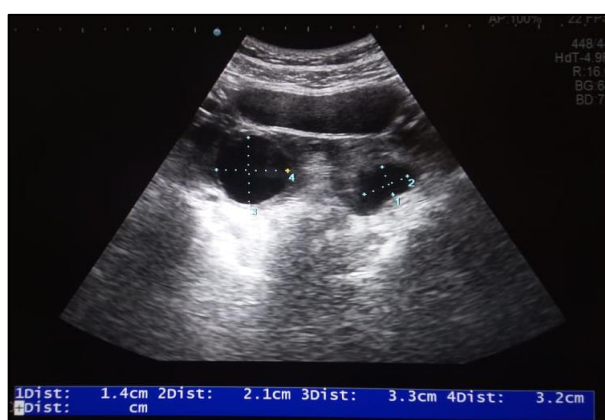


Figure 3: Before treatments, case no.2



Figure 4: After treatments, case no.2

DISCUSSION:

Ovarian cyst is a relatively common disorder in women of reproductive age. Ovarian cyst is one of the prevalent reasons for ovarian dysfunction, In Ayurveda ovarian cyst can be correlated with *Kaphaja Granthi*. There were specific treatments mentioned in various Ayurveda classics under the *Granthi cikitsa*. The principle of *Samprapthi vighatana* is used for the management of *Granthi*. In this study, *Chirabilvadi kashya*, *Panchamuli laghudraksha Kashaya*, *Manibadra churnaya* and *Chadrprabha vati* used as *Deepana Pachana karma*.

Chirabilva kashaya is a classical Ayurveda formulation indicated for *Guda keela*, *Bhagandara*, *Gulma*, *Jataragnivardhaka*. Its main ingredients are *Magul karada* (*Pongamia pinnata*), *Detta ala* (*B.nivea var. nivea*), *Thippili* (*Piperlongum*), *Sarana*

Boerhavia diffusa), *Aralu* (*Terminalia chebula*), *Viyali inguru* (*Zingiber officinale*) which have *Tikta, Katu, Kashaya* rasa, *Ushna veerya* and mostly predominant in *Laghu, Ruksha, Thikshna guna* with *Kaphavata shamaka* action. The main purpose of this *kashaya* is *Aama pachana* action. In *Vagbhata samhita* mentioned the *Saama doshas* which are spread all over the body, which are lurking in the *dhatu*s and which are not moving out of their places of accumulation, should not be forced out by purification *Panchakarma* therapies like emesis, purgation etc. Just as attempts of extracting juice from an unripe fruit leads to destruction, the dwelling place itself will get destroyed if *doshas* are tried to expel out along with *Aama*.⁽⁸⁾

Therefore *Aama pachana* and *Agni Deepana* therapies should include as a first line of

treatment before *Shodhana*. Ingredients of *Panchamulilaguadi Kashaya*⁽⁹⁾ has *Tikta*, *Katu*, *Kashaya rasa*, *Madhura vipaka* and mostly predominant in *Laghu*, *Ruksha*, *Thikshna guna* with *Vatapitta shamaka*, *Kaphavata shamaka* action.

Chandrprabha Vati is a classical Ayurveda herbomineral preparation, mostly used for disease of genitourinary system such as *Mutrakriccha*, *Granthi*, *Arbuda*, *Vidradhi*, *Bhagandara*, and *Meha*.

Diyamittadi Kashaya, *Manibadra churnaya* and *Kanchanara guggulu* used as *shaman karma*. *Diyamittadi Kashaya* is specially prescribed for *Granthi cikitsa* in *Susruta sharirasthana*. The main ingredients are *Diyamitta* (*Cissmplus pareira*), *Gammiris* (*Piper.nigrum*), *Viyali inguru* (*Zingiber officinale*), *Thippili* (*Piperlogum*), *Kelindahal* (*Holarrhena antdysentrica*) which have *Katu*, *Tikta rasa Laghu*, *Thikshna*, *Ruksha guna Ushna Kapha vata shamaka* action⁽¹⁰⁾.

Kanchanara Guggulu⁽¹²⁾ is a classical Ayurveda formulation, used for *Kapha* accumulations in the tissues. As *Kapha* moves deeper within the system, it may manifest as swollen lymph nodes, cysts or growths. Powerful decongestants such as *Kanchanara*, *Triphala* (a combination of fruits of *Terminalia chebula* Retz. *Terminalia bellerica* and *Trikatu* (*Zingiber officinale* Rosc. *Piper nigrum* L. and *Piper longum* L.) are mixed with *Guggulu* to break down and eliminate hardened *Kapha*.

Charaka Chikitsa 30th chapter (*Yonvyapath Chikitsitham*) mentioned in all the disorders in the genital tract, female should be treated with application of five mild *Vamanadi* measures after *Sneha* and *Swedana*.

According to analysed data, the case series' findings were showed that beneficial effects and efficacy of selected herbal formulations for in the management of ovarian cysts for the given time period. Parameters of the Ultra Sound Scans had showed significant

improvement after apply the selected herbal formulations by reducing the size of the cysts and according to the results, significant relief of the associated symptoms was showed.

CONCLUSION:

According to the results, conclusion can be drawn that this Ayurveda formulation has a significant effect of the management of ovarian cysts.

On the basis of data analysis, there was significant reduction of the size of ovarian cyst after treatments. Therefore present study reveals the effectiveness of the management of ovarian cyst by using Ayurveda line of treatment.

LIMITATION OF STUDY:

For the future suggestions recognize the quality of raw materials and the mode of actions of these medicines should be prime important to drug standardization and drug development and the important in future studies with larger sample of patients.

PATIENTS CONSENT:

All selected patients have been informed the nature of this study before the commencement of study and written consent has been obtained.

REFERENCES:

1. <https://www.mayoclinic.org/diseases-conditions/ovarian-cysts/symptoms-causes/syc-20353405> (Last accessed on 04 April 2021).
2. Shastri A, Sushrut Samhita Nidana Sthana 11/4. Chaukhambha Sanskrit Sansthan, Varanasi: 2014.Pp824-310.
3. <https://teachmeanatomy.info/pelvis/female-reproductive-tract/ovaries/> (Last accessed on 05 April 2021).
4. Hilger WS, Magrina JF, Magtibay PM. Laparoscopic management of the

- adnexal mass. *Clin obstet gynecol*.2006; 49:535-548.
5. <https://www.nhs.uk/conditions/ovarian-cyst/> (Last accessed on 04 April 2021).
 6. Kumar A, Singhal T. Importance & Mechanism of Virechana Therapy, *Journal of Vishwa Ayurved Parishad*, 2014; 0976 – 8300.
 7. Nandkishor P. anuvastana vasti facts and utility in clinical, a review, *IJRAR*, 2019; 6 (2): 2348-1269.
 8. Vagbhata, Ashtanga hrdaya samhita Sutra sthana13/28. krishnadas academy, Varanasi: 2000.PP291.
 9. Ayurveda pharmacopoeia (vol. I). Department of Ayurveda, Colombo10:1961.pp 102.
 10. Ayurveda pharmacopoeia (vol. II). Department of Ayurveda, Colombo10:1961. pp259-323.
 11. Gupta PK, Singh RH. A Conceptual Study on Vasti Effect, *Ancient Science of Life*, 200; 1(20: 54-59.
 12. Srikanthamurthy KR. sharangadhara samhita Madhya khanda 7/95. Chaukhambha Orientalia, Varanasi: 1984. pp 92.
 13. Bharati PL, Jadhav AD, Therapeutic effect of kanchanara guggulu and punarnavadi kwatha in the management of uterine fibroid. *International journal of applied Ayurveda research*, 2016; 2 (2): 1530-1534.

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