

## Management of Uterine Fibroid along with Metrorrhagia through Virechen, Lekhan Basti and Uttar Basti - A Case Study

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### Abstract:

Uterine fibroid is the most common, non-cancerous tumor in women of childbearing age and the second most common reason women of childbearing age undergo surgery. Metrorrhagia is one of the most common menstrual disorders associated with uterine fibroid and it is caused to excessive menstrual bleeding with or without inter menstrual bleeding. Ayurveda texts have described *Mamsajagranthi* which can be correlated with benign neoplasm which comes under *Raktagulma*. Here 48 years old female multigravida patient, was diagnosed with uterine fibroid on the basis of clinical features and USG findings. Patient treated with *Samshodhana Karma*, *Uttara Basti* and Oral Ayurved medicines. Patient was treated with *Virechana Karma* with *TrivrutAvaleha* with *Thripala Kwatha*, *Lekhana Basti* with *Lekhaneya Maha Kashaya* for 10 days, *Varunadi* decoction 50ml for 8 weeks morning and evening after meal and *Uttara Basti* with *Palash KsharaTaila*(5ml) for 6 days in two consecutive cycles. The result of this study was found after 3 months lower-abdominal pain, body weight and size of the fibroid got reduced along with regular menstrual bleeding. It can be concluded that uterine fibroid can be managed with Ayurvedic modalities and the complication be prevented.

**Keywords:** *Lekhana Basti*, *Mamsajagranthi*, *Raktagulma*, *Uterine fibroid*, *Uttara Basti*, *Virechana*.

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**Introduction:**

Fibroid are the Commonest Benign tumor of the Uterus and also the commonest benign solid tumor among female and most of them (50%) remain asymptomatic. The incidence of symptomatic fibroid in hospital outpatient is about 3%. These are the most common in nulliparous or in patients having one child infertility i.e secondary infertility. The prevalence is highest between 35-45 years age group. <sup>[1]</sup>

Metrorrhagias is one of the most common menstrual disorder associated with excessive menstrual bleeding with or without inter menstrual bleeding. The menstrual cycle may be defined by its length, regularity, frequency and pattern of menstrual blood loss. Menstruation when it comes in excess amount, for a prolonged period and even with or without inter menstrual bleeding, different from the features of normal menstrual blood or denoting the specific *dosha* as described in *Sushruta Sutrasthana* is known as *Asrugdara*. <sup>[2]</sup>

Most women with uterine fibroid have no symptoms (75%). The symptoms are related to anatomic type and size of the tumor. The common symptoms are menstrual abnormality such as menorrhagia, metrorrhagia, dysmenorrhea, infertility, pressure symptoms, recurrent pregnancy loss (Miscarriage, Pre-term labour), dyspareunia, lower abdominal pain or pelvic pain, abdominal enlargement. <sup>[3]</sup>

*Charak* has mentioned *Arbuda* in *Chikitsa Sthana* and described *Arbuda* as *shophavishesha* (one of the forms of *Shotha*). <sup>[4]</sup> This clearly indicates that

basically aetiopathogenesis, clinical features and treatment of tumours of reproductive system are identical to the tumours of any other body part; however, few clinical features present due to specific location of disease has to be investigated. Ayurveda texts have described *Mamsajagranthi* which can be correlated with benign neoplasm on modern lines. Pathogenesis of *Granthi* is propounded as when morbid *Tridoshas*, vitiate *Rakta* (blood), *Mamsa* (fleshy/muscles), and *Meda* (fat/adipose tissue) that are admixed with *Kapha* produce rounded protuberant, knotty or glandular and hard swelling called *Granthi*. *Granthi* when present in *Yoni* (female reproductive system) *Garbhashaya* (uterus) will lead to disturbed menstrual cycle menorrhagia, metrorrhagia, dysmenorrhea, etc., along with infertility.

*Vata* and *Rakta* both are accumulated gradually and develop irregular, rounded shaped growth or *Pinda* within and around the wall of uterus i.e. *Raktagulma*. <sup>[5]</sup> It palpitates as whole but there is non-movement in its parts. Pain is one of the most important features of this disease. Others sign and symptoms are fullness of abdomen, occasional burning pain and pregnancy related sign and symptoms. *Raktajagulma* occurs only in female and should be treated after passing 10 months. <sup>[6]</sup>

Uterine fibroids do not have definite medical treatment in the modern gynaecological practices other than surgery, available treatment protocol in modern are hormonal therapy, hysterectomy, myomectomy, myolysis,

endometrial ablation and uterine artery embolization with their own limitations and complications.

### Case Report:

48 years old female multigravida patient, reported to *Prasuti tantra* and *StreeRoga* outdoor patient department in I.P.G.T.&R. A, GAU, Jamnagar with complaints of irregular excessive bleeding per vagina during menstruation along with lower abdominal pain for last 4-5 months. She also had intermittent low back pain. She complained that pain was increasing day by day and felt occasional burning pain in lower abdomen. In addition to these symptoms she has weight gain within 1 year (12Kg). On palpation abdomen was slightly firm in the lower portion. She was already Trans vaginal USG done and she was diagnosed with sub serous uterine fibroid and was advised hysterectomy.

### History of Present illness:

The patient states that she was quite well 1 year back. Since then, she has been suffering from heavy menstrual bleeding with pain in the abdomen during menstruation. Her menstrual cycle duration was for 10 -13 days with 24 -37 intervals and the passing of heavy blood flow with clots using 5-6 pads/day, moderate painful cycle, daily activity is not that much affected. She had gone through 9 months of allopathic treatment and took medication, Tab Sysron-N (Norethisterone acetate 5mg), Tab Trenaxa (Tranexamic acid 500mg), Tab Meftal Spas (Mefenamic acid 250mg + Dicyclomine 250mg) and injection Drotin (Drotaverine-40 mg). But she did not get any relief and advised for surgery.

Therefore, she consulted for the Ayurvedic medication.

### Past History:

According to her obstetrics and gynecological history - G3P2A1L2, 1 times D & C done, History of complete abortion at the age of 4 weeks of gestation on due to unknown cause and two full term normal delivery per vaginally before 14 years ago. As a contraceptive method cu-T was used and removed before 1 year. Patient did not have any drug history or allergy. Familial obesity was reported by patient. In menstrual history patient reported irregular menses (24 -37 days), for 10-13days and 5-6 pads/day needed with clotted, blackish red color bleeding having moderate pain during menses

### General Examination:

She is 5-4 height and weight 96kg. Vital signs BP – 130/ 90 mmHg, Pulse – 80 Per min, RR-20 Per min, Temperature – 98 F normal *Mala, Mutra, Jivha*, sleep sound, dry skin with associated symptoms of increased hair fall,

### Investigations:

Hematological, Urine, Biochemical and microbiological investigation were done. All investigation findings were within normal range. Trans vaginal USG was done on 2.1.18 Sub Subserous fibroid noted to the anterior wall fundal (34 x 31 x 34 mm size) and volume was 18 ml.

### Treatment protocol:

Patient has been given following treatment for three months after taking the informed written consent.

1<sup>st</sup> month - *Virechana karma* and *Lekhana*4<sup>th</sup> month – Follow up*Basti*2<sup>nd</sup> month and 3<sup>rd</sup> month - Oral therapyand *Uttara Basti***1<sup>st</sup> Month of Treatment Protocol****1. *Virechana***

Procedure	Drug and dose	Duration
<i>Deepana&amp;pachana</i>	<i>Amapachanavati</i> - 2 tablets/bd / before meal with Luke warm water	3 days
<i>Snehapana</i>	<i>Goghrita</i> (as per <i>Kostha and Agni</i> ) 30ml -150ml empty stomach in morning	3-7 days
<i>Abayanga&amp;Swedana</i>	<i>TilaTaila</i>	3 days
<i>Virechana Karma</i>	<i>TrivrutAvaleha</i> 100gm with <i>TriphalaYavakuta</i> 30gm	1 day
<i>Samsarjana Karma</i>	Diet (as per <i>KoshthaShuddhi</i> )	3-7 days

**2. *Lekhana Basti*: *Lekhaneya MahaKashya* (Decoction) was used for *Lekhana Basti***

Procedure	Drug and Dose	Duration
<i>Snehana – Abhyanga</i>	<i>Tilataila</i> (As per required) lower abdomen, lower back and thigh	15 min
<i>Swedana</i>	<i>Nadisweda</i> by steam lower abdomen, lower back	15min
<i>Lekhana Basti</i>	<i>LekhaneyaMahakashya</i> – 250ml <i>Kalka Dravya</i> - 10g, <i>SaindhavaLavana</i> - 5g, <i>Madhu</i> (Honey) - 30gm, <i>TilaTaila</i> (Sesame oil) - 60ml	10 days

**In 2<sup>nd</sup> and 3<sup>rd</sup> Months of Treatment Protocol:**

**Oral Therapy:** After completion of *Basti Karma* Oral drug *Varunadi Kwatha* [*Varuna* 1 part (16g), *Gokshura* 1 part (16g), *Shunti* 1 part (16g), *Yavakshara* 2g] 50 ml per day/BD/after meal was administration for 8 weeks

**1. *Uttara Basti*:** It was administered on the next day.after cessation of mensuration

Procedure	Drug and dose	Duration
<i>Snehana -Abayanga</i>	<i>Tilataila</i> (as per required) Lower abdomen and lower back	15 min
<i>Swedana</i>	<i>NadiSweda</i> by steam at lower abdomen and lower back	15min
<i>Yoni Prakshalana</i>	<i>Triphala Kwatha</i>	5min
<i>Uttara Basti</i> (IUUB)	<i>PalashaKsharaTaila</i> - 5ml after cessation of menstruation once daily for 6 days.	6 days for 2 consecutive cycles

**Follow Up:** Patient was also advised for USG of Trans vaginal and to come for follow up after 1 month.

### Results and Discussion:

Among clinical features, about excessive bleeding the patient responded at first and relieved after *Virechana* and after *virechana*, menstruation cycle also become regular. There after 10 days of *Lekhana Basti*, the severity of lower back pain becomes mild. These subjective criteria were measured by scoring pattern. Then after treatment Transvaginal USG was done on 8.5.18 Sub Subserous fibroid noted to the anterior wall fundal (23 x 18 x 20 mm size) and volume was 4.8 ml it means volume reduced 13.2ml. Size of fibroid was reduced the transverse and vertical diameter 1.1cm and 1.3cm respectively.

### Probable mode of *Virechana karma*:

*Arbuda* is a *Bahu Dosaja vyadhi* and *Virechana karma* is the best for vitiated *pitta*, and also it has *Raktaprasadana karma*. It helps to normalise the endocrine function by its purifying action.

### Probable mode of *Lekhana Basti*:

When consider of characteristics and actions of contents of *Lekhaneya Mahakashaya* [7] individually, find each of the contents contribute to *lekhan karma*. *Katuka* is *pitta rechaka* and *pitta virechana* this results into depletion of *dhatu*, mainly *Medo* and *Maansa dhatu*. *Haridra* and *daruharidra* stimulate *agni* and performs *Lekhana karma* because of their *katu- tikta* taste, *katuvipaka*, *ushnavirya* and *laghu*, *rukshaguna*. *Tikshna guna* of *Vacha*, *chitrak* and *Kushtha* along with above mentioned characteristics aids more to *lekhan karma*. *Chirbilva* and *Haimvati*

mainly perform *lekhana karma* on *dhatu* and body because of their properties. *Mustak* and *Ativisha* performs "*grahi*" *karma*, hence, they check the excessive motions caused by *Katuka*. *Grahi karma*, also helps reabsorption of water in large intestine reducing the risk of patient getting dehydrated because of loose motions.

### Probable mode of *Uttarbasti*:

*Uttarbasti* is beneficial in gynaecological disorders and other menstrual disorders.<sup>[8-9]</sup> *Kshara-Taila* is mentioned for *Stree Roga Adhikar* in *Bharta Bhaishajya Ratanakara*.<sup>[10]</sup> *Palashkshar* oil contains *Palashkshara* and *tila* oil has the action of *ksharan* and *lekhan*. Therefore, it might be resulting into *kshara* and *lekhan* of nodular growth. *Tila* tail has property of *vatashamak*, *sleshmahar*, *yonivishodhan* and *yonishulaprashman*. The *ushna* and *snigdha guna* of the *tila* (sesame) oil pacifies the increased *rukshatva*, *khartava guna* of *Vayu* restoring its normal function and thus brings about *srotoshodhana*. When instilled into uterine cavity a known place of *apanavayu*, which gives direct access to the seat of *dosha dushya sammorchana*. This directly acts on *vikratavayu* and *kaphadosha* which causes *ksharan* and *lekhan* of *vikrutamamsa* and *medodhatu* and breaks the *samprapti*.

### Probable mode of *Varunadi Kwatha*:

The main ingredient of this drug is *Varuna*, *Gokshura*, *Shunti* and *Yavakshar* which have *Tikta Rasa*. It is *kapha-pitta hara*, *Sophahara*, slightly laxative. So, it can easily clear up the channels or *srota*. *Yavakshar* which have *Lekhan*, *Chedan* and *Granthihara* property. It is well known drug of *Gulma roga*.<sup>[11-12]</sup> The



ingredients of the compound pacify *Kapha Dosha* by virtue of their *Ruksha Guna*, *Katu Vipaka* and *Ushna Virya* and also show "*Lekhana*" property due to *Ushna Virya*. The *Lekhana Karma* is again enhanced by famous *Lekhana Dravya* i.e. *Yavakshara*, which is one ingredient in it. The *Vatanulomana*, *Shothahara* and *Mutrala* properties of ingredients helps to relieve pain and *Sthanika Sotha*.

### Conclusion:

Study concluded that uterine fibroid along with metrorrhagia can be efficiently and effectively managed by Ayurvedic medicines, *Virechan*, *Lekhan basti* and *Uttar basti* without side effects and needed to be study in more number of patients.

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