CASE REPORT

Ayurvedic Approach for Management of (Hemorrhagic Ovarian Cyst) Andashayagata Raktaja Granthi – A Case Report

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ABSTRACT

Ovarian cysts can be either simple or complicated. Complex ovarian cysts contain either a solid or blood component. Pelvic pain and vaginal bleeding are among the consequences caused by ovarian cysts or cystic masses.[3] A type of functional cyst known as a hemorrhagic cyst develops when a cyst bursts out inside the ovary during ovulation.[4] Rather than disintegrating, a Graafian follicle continues to persist, potentially causing a normal, absent, or delayed menstrual cycle, which is typically followed by severe and/or extended bleeding. While most of them are benign, a small percentage can be malignant. Granthi is the term for a nodule-like swelling that has cemented and consolidated.[5] When Rakta is vitiated by Vatadi Dosh, which has Pittaja Granthi-like characteristics, Rakta Granthi develops.[6] Pathogenesis of Granthi Roga is Vāta Kapha dominating Tridosha, for which Vata Kapha Harā

1. INTRODUCTION

In the field of gynecology, ovarian masses are frequently observed. An ovarian cyst is a sac that forms in the ovary that is filled with liquid or semi-liquid material. Most benign and malignant ovarian tumors are cystic in nature.[1] The diagnosis of ovarian cysts, cystic masses, and tubo-ovarian masses has increased with the introduction of routine physical examinations and ultrasound technology. When a woman finds an ovarian cyst or cystic mass, she may worry a lot because she thinks the condition might be cancerous. However, most of these cases are benign, and very few are malignant.[2] The majority of women with ovarian cysts or cystic tumors are asymptomatic. Nonetheless, a range of symptoms, some of which can be rather significant, can be brought on by some cysts.
medications are required, whereas involved Dushya are Rakta, Mamsa, and Meda hence the medications should possess Vatahara and Lekhana properties.

2. CASE PRESENTATION

A female patient, 22 years old, came to Prasutitantra and Striroga OPD of the National Institute of Ayurveda, Jaipur on September 01, 2022, with a chief complaint of pain in the lower abdomen in the past 10 days. Her abdominal pain was also associated with irregular menses, and generalized weakness. She was diagnosed as a complex cystic lesion with internal echos measuring $25 \times 21$ mm seen in the right ovary to hemorrhagic cyst. She was advised for surgery by allopathic doctors but she was not ready for surgery. Hence, she came to our hospital for further advice and ayurvedic management.

2.1. Menstrual History
Patient said that the duration of her menstrual cycle was 3–5 days with intervals of 26–35 days, amount of bleeding was normal and associated with lower abdominal pain.

2.2. Family History
No relevant family history.

2.3. Past surgical History
There was no significant history found.

2.4. Personal History
- Appetite-reduced
- Sleep-normal
- Bladder-burning micturition
- Bowel habits-Normal.

2.5. Clinical Findings

2.5.1. General examinations
- Built-Normal
- Weight-52 kg
- Height-153 cm
- Pulse rate-72/min
- B.P.-130/70 mm of hg
- Respiration rate-18/min
- Temperature −98.6 F
- Per abdomen-it was soft, non-tender, and no organomegaly was detected.

2.5.2. Physical examination
2.5.2.1. Ashta-vidha-pariksha
- Nadi-VP
- Mutra-Samyak mutra pravriti
- Mala-Sama
- Jihwa-Sama
- Shabda-Samyak
- Sparsha-Ushna
- Drika-Samanya
- Aakriti-Madhyaama.

2.5.2.2. Dash-vidha-pariksha
- Prakriti (nature)-Vatapitajata
- Sara (Purest body tissue)-Madhyama (medium)

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2.5.4. Samprapti Ghataka (Pathogenic factor)
- Dosh-Vata, Kapha
- Dushya-Mamsa (muscles), Rakta (blood)
- Agni (digestive fire)-Mandagni, Jatharagni mandya
- Srotas (channel) Artavahasrotas (channels carrying menstrual blood)
- Srotodushhti-Siragranthi (cyst), Sanga (obstruction)
- Vyaktisthana-Artau, Beejashaya Granthi.

2.6. Treatment Schedule
The treatment was carried out with the following medicines for 1 month Table 1.
- Gandharva hastadier and tail –10 mL with hot milk (BD)
- Arbudhara Kwatha –10 mL before food (BD)
- Kachnara Guggulu – 1 Tablet after food (TDS)
- Chandanasava – 10 mL with hot water (BD)
- Katuki Churna – 1 g with honey (OD)
- Avipatikara Churna – 3 g after food (BD)
- Maha Narayan taila – LA
- Dhatri loha – 250 mg after food (BD)
- Sankha bhasm – 500 mg after food (BD).

3. RESULTS
At the completion of the treatment, the patient was relived in all complaints ultrasound scans repeated after 40 days revealed no evidence of an ovarian cyst uterus and adnexa were found normal. She was completely cured and had considerably less agony after receiving ayurvedic treatment. None of the signs or indicators have reappeared as of this moment.

3.1. Patient Consent
We got the patient’s written approval before publishing this case study in your journal.

3.2. Pathya-Apathya
- To avoid psychological stress.
- To stay away from foods that are overly spicy, heavy, baked items, fermented foods, fast food (pasta, peaches, pizza), and cold beverages.
• To consume more green leafy vegetables (spinach, cabbage, capsicum, broccoli), sesame seeds, flax seeds, fruits (orange, apple, papaya), and jaggery in the diet.

4. DISCUSSION

The reproductive age group of women suffers greatly from ovarian cysts.[14] Ovarian cysts can lead to abdominal pain and congestion. Cyst-related pelvic disease may cause pain in abdomen.[15] The primary cause of infertility, anovulation, can result from an ovarian cyst interfering with the menstrual cycle.[16] In the current medical system, hormone therapy, and surgery are the only ways to treat ovarian cysts. Even if hormonal intervention is the only treatment available in modern science, many individuals are afraid of it due to their side-effects, and since ovarian cysts recur so frequently, there is no guarantee that the condition will not recur. Therapeutic options abound, but the best course of action ultimately comes down to the patient’s age, the size of the cyst, and whether or not the cyst has malignant characteristics. Treatment availability offers a patient the possibility to fully recover with no risk of the disease reoccurring, according to ayurvedic research.

For samprapti vighatana of and ashayagata Raktaja Granthi, medications should have the Vata-Kaphahara, Rakta shodhaka (blood purifier), and Granthihara, Lekhana (scrapping or dissolving) properties and to combat Agnimandhya (lack of digestive fire), medications with Deepana (stomachic), and Pachana (digestive) properties are required.

In the present study, all medicines have properties such as Tikta Rasa, Katu Vipaka, Ushna Virya, and Laghu and Ruksa Gunas, so it acts as Deepan, Pachan, Vatta-Kaphashamak, Shoth-har, Lekhana and Bhedana, Aamapachaka, Rakta Shodhana, Vilayana, Vedanahara (Maha narayana taili[17]) Granthihara and Bhedana properties of Kanchanara Guggulu, and Arbudhar kwatha act on reproductive system and improves the functions of ovary and Artava.

Dhatri Lauha[18] has Rasayana, Shonitasthapana, the richest sources of ascorbic acid which helps in the absorption of iron. Kanchnar guggul[19] exhibited a cytotoxic effect by inhibiting cell division (antimitotic) and reducing cell proliferation. Gandharvahasthadi Eranda Tailam is a safe laxative that promotes dushita rasaja nissarana and to combat Agnimandhya (lack of digestive fire), medications with Deepana (stomachic), and Pachana (digestive) properties are required.

5. CONCLUSION

The principles of Ayurveda are important in the treatment of diseases. A treatment plan can be determined after a detailed analysis of the etiopathogenesis, or Samprapti, of the disease based on Prakruti, Lakshan, and Upashay-anupashaya. Based on this case study, we may conclude that ayurvedic medicines are effective in treating ovarian hemorrhagic cysts; more research with longer study periods is necessary.

6. ACKNOWLEDGMENTS

None.

7. AUTHORS’ CONTRIBUTIONS

All the authors contributed equally in design and execution of the article.

8. FUNDING

Nil.

9. ETHICAL APPROVALS

This study has not required ethical clearance as it is a case study.

10. CONFLICTS OF INTEREST

Nil.

11. DATA AVAILABILITY

This is an original manuscript and all data are available for only review purposes from principal investigators.

12. PUBLISHERS NOTE

This journal remains neutral with regard to jurisdictional claims in published institutional affiliation.

REFERENCES

Table 1: The treatment was carried out with the following medicines for 1 month

<table>
<thead>
<tr>
<th>S. No</th>
<th>Medicine</th>
<th>Content</th>
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| 1.    | **Gandharva hastadieranda Taila**[^1] | • Gandharvahastadi moola (root of castor)  
• Yava (Barley seed)  
• Nagara (Ginger)  
• Cow milk        |
| 2.    | **Arbudhara Kwatha**          | • Varuna (Crataeva unuruva)  
• Shigru (Moringa oleifera Lam..)  
• Kanchnara (Bauhinia variegata)  
• Haridra (Curcuma longa)          |
| 3.    | **Content of Kanchnara Guggulu**[^2] | • Kanchanara (Bauhinia variegata)  
• Amalaki (Emblia officinalis)  
• Haritaki (Terminalia chebula)  
• Bibhitaki (Terminalia bella)  
• Pippali (Piper longum)  
• Shunthi (Zingiber officinale)  
• Maricha (Piper Nigrum)          |
| 4.    | **Ingredients of Chandanasave**[^3] | • Safed Chandan (White Sandalwood)-Santalum Album  
• Netrabala-Pavonia Odorata  
• Nagarmotha (Nut Grass)-Cyprus Rotundus  
• Gambhari (Beechwood/Kasmari)-Gmelina  
• Arborea  
• Neel Kamal (Blue water lily) flowers-Nymphaea Stellata  
• Priyanga-Callicarpa Macrophylla  
• Padmaka-Prunus Cerasoides  
• Lodhara-Symplacoc Racemosa  
• Manjishtha-Rubia cordifolia  
• Rakta Chandan (Red Sandalwood)-Pterocarpus Santalinus  
• Patha-Cyclos Peltata  
• Chiravata-Swertia Chirata  
• Vata (Banyan)-Ficus Benghalensis  
• Amra(Mango Tree Bark)  
• Mochras (Semal Gond)  
• Dhataki Flowers-Woodfordia Fruticosa  
• Draksha (Raisins)-Vitis Vinifera        |
| 5.    | **Ingredients of Avipatikar Churan**[^4] | • Shunthi (Zingiber officinale)  
• Maricha (Piper nigrum)  
• Pippali (Piper longum)  
• Haritaki (Terminalia chebula)  
• Vibhitaka (Terminalia bellerica)  
• Aamalaki (Emblia officinalis)  
• Musta (Cyperus rotundus)  
• salt (Vida Lavana)  
• Vidanga (Emblica ribes)  
• Elsa (Anomum subulatum)  
• Patra (Cinnamomum tamala)  
• Lavanga (Syzygium aromaticum)  
• Trivrit (Opeculina terpethum)  
• Sharkara (Sugar)          |
| 6.    | **Ingredients of Maha Narayan tail**[^5] | • Aegle Marmelos-Bilva (Indian Bael) root  
• Withania Somnifera-Ashwagandha (Indian Ginseng)  
• Solanum Indicum-Brihati (Indian Nightshade) root  
• Tribulus Terrestris-Gokshura  
• Oroxyym Indicum-Shyonaka  
• Sida Cordifolia Root-Bala (Country Mallow) root  
• Azadirachta Indica-Neem  
• Solanum Xanthocarpum-Kantakari  
• Boerhavia Diffusa-Purnarnava  
• Abutilon Indicum-Atibala (Indian Mallow)  
• Premna Sattafolia (Premna Macromata)-Agnimantha (Arani)  
• Paederia Fodendra-Praraini  
• Stereospermum Suaveolens-Patala etc.    |
| 7.    | **Content of Dhatri loha**[^6] | • Dhatri (Emblia officinalis Gaertn.)  
• Lauha Churna (calcined iron)  
• Yastimadhu (Glycyrrhiza glabra Linn.)  
• Anratta (Tinospora cordifolia Wild. Miers.)  

[^2]:  
[^3]:  
[^4]:  
[^5]:  
[^6]:
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Before Treatment

After Treatment