



ISSN 2456-3110

Vol 8 · Issue 8

August 2023

Journal of
**Ayurveda and Integrated
Medical Sciences**

www.jaims.in

JAIMS

An International Journal for Researches in Ayurveda and Allied Sciences



Maharshi Charaka
Ayurveda

Indexed

Ayurvedic management of *Stangranthi* w.s.r. to Fibroadenoma of Breast: A Case Study

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ABSTRACT

According to *Ayurveda*, Breast CA can be correlated to *Granthi* explained by many *Acharya's* which is developing due to abnormal vitiation of *Dosha* and *Dushya*. According to *Acharya Charaka*, *Granthi* can be equated with all types of small-sized glandular or nodular swelling in any part of the body due to benign tumours or cysts. There is no direct reference for *Stana Granthi* but *Maansaja Granthi* occurs in *Stana* is having a close resemblance with fibroadenoma of the breast. So, in the present study, a patient with fibroadenoma was successfully treated by *Ayurvedic* management from *Cap Boheco Peace*, *Raspachak Yoga*, *Kanchanar Guggul* and *Abhyanga* with *Chandanabala Lakshadi Taila* which got the significant result.

Key words: *Abhyanga*, *Boheco peace*, *Fibroadenoma*, *Granthi*, *Oestrogen*, *Raspachak*.

INTRODUCTION

Globally, Breast cancer (BC) is the most prevalent cancer that affects women. With an anticipated 2.3 million new cases, or 11.7% of all cancer cases, it will now surpass lung cancer as the most common type of cancer worldwide in 2020. In India, there were an estimated 118000 incident cases in 2016 (95% confidence interval: 107000–130000), 98.1% of whom were female, and 526000 prevalent cases (474000–574000).^[1] According to recent trends, Indian women experience the disease more frequently and at a younger age than Western women. In *Ayurveda*, Breast cancer can be co-related with *Agnimandya* of *Rasa*

Dhatu due to which there is malformation of *Rasaposhak Dhatu* and there is abnormal growth of cells in breast tissue. It is a new growth formed of both fibrous and glandular tissues. This tumour is said to develop as the result of increased sensitivity of a focal area of the breast to oestrogen. This tumour most commonly presented as a painless, slowly growing, solitary lump in the breast. In modern medicine after a systemic review of available conservative management like hormonal therapy, keeping in mind the side effect of hormonal treatment, surgeries like lumpectomy and mastectomy becomes the ideal option which also has its own physical and psychological impact on women's life. A balanced and rational approach to the management of fibroadenoma of the breast needs to address the crucial questions about its association with breast cancer, which is ideally done by imaging techniques like mammography where fibroadenoma appears as a distinct area from other breast tissue, with smooth round edges and breast ultrasound where it is typically seen as well-circumscribed, round to ovoid or macro lobulated mass or if necessary, a minimally invasive biopsy may be performed via a core needle biopsy i.e., FNAC. Fibroadenoma is one of the most common benign tumours of the breast in women under 30 years of age. In the adolescent population,

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Submission Date: 12/06/2023 Accepted Date: 25/07/2023

Access this article online

Quick Response Code



Website: www.jaims.in

DOI: 10.21760/jaims.8.8.41

the overall incidence of fibroadenoma is 2.2%. They account for 68% of all breast masses and 44%-94% of biopsied breast lesions. Blacks have a greater propensity than whites to develop fibroadenoma and at a younger age.

Aetiology^[2]

Breast cancer is caused by a complex interplay of multiple factors including age, genetics, environment, and reproductive history and probably yet unknown factors. The risk of breast cancer increases with older age and is most common in post-menopausal women. Genetics and heritable factors play an important role in the development of breast cancer. A first-degree family history of breast cancer significantly increases breast cancer risk. Potentially modifiable factors including obesity, alcohol consumption, smoking, physical inactivity, and replacement hormonal therapy have all been associated with increased breast cancer risk. Women's reproductive history also affects risk with nulliparity associated with increased rates compared to multiparity.

Pathophysiology^[3]

This lesion invariably has a relation to oestrogen sensitivity, and it occurs predominantly in the 2nd and 3rd decades of life.

- These lesions are encapsulated and tend to be spherical but on occasions, they may be multinodular or somewhat irregular, these typically stop growing when they reach 2 to 3cm in diameter.
- On section, these lesions are composed of uniform, greyish white, fleshy, homogeneous mass with fibrous whorls which tend to bulge from the capsule.
- There may be some minute yellow to pink softer areas. These are classified into two varieties based on their origins-
- Peri canalicular variety (hard fibroadenoma)
- Intracanalicular variety (soft fibroadenoma)

Oestrogen and progesterone

- Oestrogen predominance over progesterone is considered a causative factor for this.
- Presence of High Levels of serum oestrogen. Shortened luteal phase.
- Progesterone level decreased to 1/3rd of the normal and women with progesterone deficiency carry a five-fold risk of premenopausal breast cancer.
- Patients with premenstrual tension syndrome more likely to develop fibrocystic disease of the breast.

Clinical Features^[4]

- a) The peri canalicular type usually occurs in younger girls between 15 and 30 years of age. Intracanalicular affects older groups from 30 to 50 years of age.
- b) This tumour most commonly presented as a painless, slowly growing, solitary lump in the breast is often seen in the lower part of the breast and mostly in the upper and outer quadrant of the breast.
- c) Multiple fibroadenomas may be present in about 10% of cases.
- d) Pain is usually conspicuous by its absence, though it may occasionally be complained of.
- e) Though hard variety is known for its slow growth and never attains big size, yet intracanalicular fibroadenoma tends to be larger due to rapid growth.
- f) Discharge through the nipple is almost unknown.

Local examination

- Inspection- does not reveal anything particular and the nipple remains always normal, but in some cases, swelling may be visible.
- Palpation- is important. Fibroadenoma is characteristically mobile. Freely mobile solitary lump usually firm inconsistency with a round

smooth margin within the breast is nothing but a fibroadenoma.

- The lump is neither fixed to the overlying skin, nor fascia covering pectoralis major. It is not also fixed within the breast and is so freely movable, that is often called a “Breast mouse”.
- The axillary lymph nodes are not usually enlarged.

Diagnosis

- Up to the age of 25 years, clinical diagnosis is enough.
- Mammography has no place in its routine diagnosis. With increasing age mammography and fine needle aspiration cytology (FNAC) should be performed to exclude malignancy.
- Ultrasonography is quite helpful in the differential diagnosis of a palpable breast lump.
- **BI-RADS** (breast imaging- reporting and data system) is a risk assessment and quality assurance tool developed by the American college of radiology. It applies to mammography, ultrasound and MRI.^[5]

According to *Ayurveda*, Due to abnormal vitiation of *Dosha* and *Dushya* may cause excessive abnormal growth of cells which may develop in any part of the body, these types of growths are multiple in numbers, because of their different locations in the body and clinical features, they are named and classified into different types. These all types of growth are called “*Granthi*” and “*Arbuda*.” *Acharya Charaka* explained these types in the chapter of “*Shotha*”.^[6] There are many types of *Granthi*, but the *Granthi* present in the *Stana* is “*Maansaja Granthi*”.^[7] *Charaka* described it as “*Maansaja Granthi*” which is a big and painless structure, correlated with fibroadenoma. According to the classical text of *Ayurveda*, it is mentioned to treat *Maansaja Granthi* similar to *Kaphaja Granthi*. *Ayurveda* being a holistic approach towards the line of treatment gives complete satisfactory results without any complications, hence, to find a long-lasting solution with not many adverse effects is the need of the hour. Considering the above facts, this ailment has

been selected to pursue its perfect cure through *Ayurveda*.

MATERIALS AND METHODS

Case Report

The present case study is about the *Ayurvedic* management of fibroadenoma i.e., *Stana Granthi*.

A 35-year-old female patient came to OPD with chief complaints of a freely movable lump at upper lateral quadrant of left breast associated with pain in the past 2 years.

Associated complaints - nausea and vomiting, loss of appetite.

History of present illness - The patient was normal 2 years back. Then she suddenly developed with freely mobile lump associated with tenderness and slight swelling in the left breast.

History of family - Father has DM. Rest nothing significant.

Personal history

Name - XYZ	Bala - Madhyama
Age - 35 years	Sleep - Sound
Sex - Female	Addiction - None
Marital status - Married	Bowel habit - Regular
Occupation - Housewife	Appetite - Loss of appetite

Menstrual history

Age of Menarche	14 years
L.M.P.	26/10/2022
Duration of flow	4 to 6 days
Length of the cycle	28-30days
Regularity of cycle	Regular

Amount of flow	2 to 3 pads/day
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Ashtavidha Pariksha

Nadi - 76/min	Shabda - Normal
Mala - Regular	Sparsha - Normal
Mutra - Regular	Drik - Normal
Jivha - Niram (not coated)	Akriti - Madhyama

Weight - 68 Kg

BP - 110/70 mmHg

Systemic examination

CVS: S1 S2 heard, No added sounds

Respiratory system: lungs clear

Digestive system: No abnormality detected.

Breast examination

Inspection - Swelling present in the left breast

Nipple - normal

Skin - normal, localised mild redness was present at the site of pain.

Palpation - Tenderness - present

Lump - single lump in superomedial quadrant of left breast at 9 o'clock position.

Treatment plan

The patient was treated on OPD basis.

1. Cap BOHECO PEACE 0-0-1 after dinner
2. Rasapachak Yoga 2-0-2 before meals
3. Tab Kanchanara Guggulu 2-0-2 after food
4. Abhyanga with Chandanabala Lakshadi Taila – 2 times per day.

Follow up after every 2 weeks. Above mentioned medicines were continued for 2 months.

Pathya

Ahara - Protein-rich diet (Split Green gram, Soya bean), Sesame, Black gram, Horse gram, Intake of egg, Plenty of fluids, Seasonal fruits and vegetables.

Vihara - Walking, Physical exercise, Meditation.

Apathya

Ahara - Oily fried food, Spicy food, Non-vegetarian, Potato and Brinjal, Junk foods.

Vihara - Day sleep, Night vigilance (awake).

Diagnostic criteria - Patient with classical signs and symptoms of fibroadenoma with mammography reports.

Investigation - Breast examination and mammography.

Breast examinations

Before treatment	After treatment
<p>Inspection: left lumps - present in left breast Nipple - normal Skin - normal, localised redness was present at the site of pain.</p>	<p>Inspection: left lumps - reduced within 2 weeks Nipple - normal Skin - normal, localised redness reduced completely.</p>
<p>Palpation: Tenderness - present Lump - multiple lumps in Lump upper lateral quadrant of left breast, freely mobile with irregular border.</p>	<p>Palpation: Tenderness - relieved Lump - less palpable, freely mobile with smooth round border.</p>
<p>Nipple discharge - absent No changes during the menstrual cycle.</p>	<p>Nipple discharge - absent No changes during the menstrual cycle.</p>

Mammography results

Before treatment	After treatment
<p>Done on 02/11/2022</p> <ul style="list-style-type: none"> A large highly dense lobulated solid mass measuring 2.5cm, 2.2cm, 1.7cm, in size with micro lobulated margins noted 	<p>Done on 28/02/2022</p> <ul style="list-style-type: none"> Lesions in the left breast measuring 1.6cm, 1.4cm, 1.0cm, at 9-10'o clock position and,

- in superomedial quadrant of left breast.
- A small oval hypoechoic predominantly cystic lesion measuring 1.2cm, 0.5cm in size is seen in superomedial quadrant of left breast at 9 o'clock position.
- Assessment: BI-RADS Category - 4-C
- 1.6cm, 1.1cm, 0.8cm, at 11 o'clock position with circumscribed margin.
- Assessment: BI-RADS Category - 4

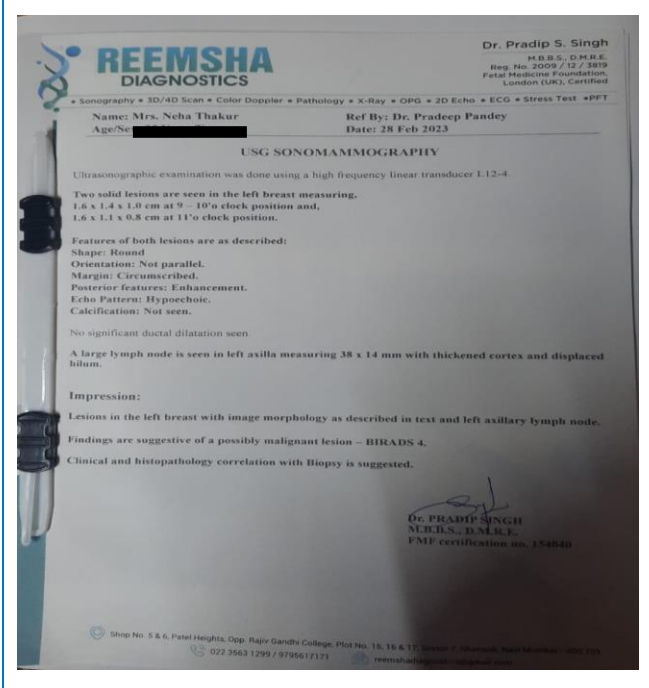
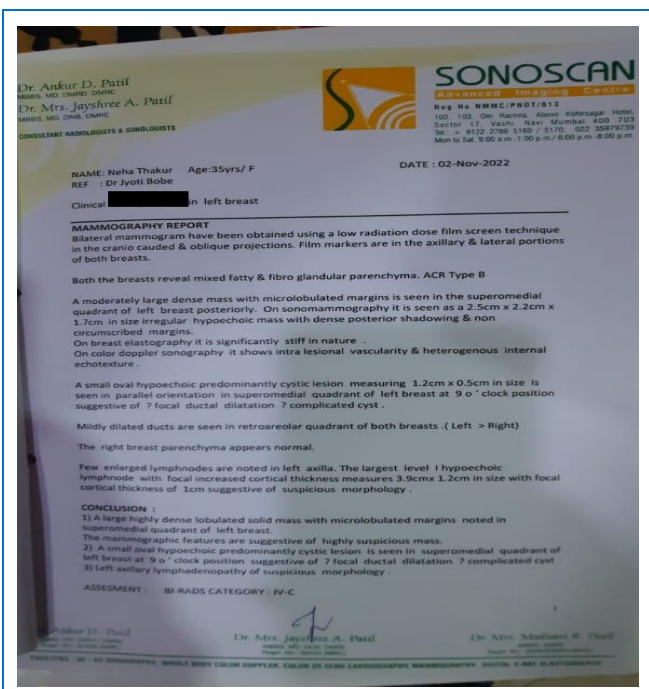
OBSERVATION AND RESULTS

Remarkable reduction in the size of the lumps was observed and symptoms like pain, swelling and redness reduced within 2 weeks of treatment and mammography also revealed significant results following two months of treatment. The above-said management was found to be more effective and satisfactory without many complications

DISCUSSION

The health of a nation mainly depends on the health of a woman, because the healthy and happy woman lays the first step of a prosperous nation. Apart from undergoing natural processes of menstruation, pregnancy etc., *Stana Granthi* (fibroadenoma of the breast) is a common condition seen in a woman. Though it seems to be common, it affects the whole role of women in the day- to-day activities. It is computed that about 30% of women are suffering from benign tumours of the breast at any age. So, it is necessary to pay immediate attention to this most troublesome disease.

Pathogenesis of *Granthi* is propounded as when morbid *Tridoshas*, vitiate *Rakta*, *Maansa* and *Meda* that are admixed with *Kapha* produce rounded protuberant, knotty or glandular hard swelling called *Granthi*. Etiopathogenesis, clinical features and treatment of *Granthi*, are identical to the *Granthi* of any other body part. In Ayurvedic literature, many type of *Granthi* have been mentioned depending on the pathological factor and body tissue involved. *Granthi* present in *Stana* can be compared with *Maansaja Granthi* due to similar pathology and clinical features. So as in *Samprapti* of *Granthi*, *Vata* and *Kapha* dominating *Tridosha* are involved, *Vata-Kaphahara* medications are required. *Dushiyas* are *Rakta*, *Maansa* and *Meda* hence medications that possess *Raktashodhak*, *Lekhana*, *Bhedana*, *Deepana* and *Pachana* properties should be selected. With this hypothesis, in this study *Cap Boheco Peace* for pain management as *Vijaya* is *Uttam Shulhara*, *Raspachak Guggulu* and *Chandanabala Lakshadi Taila* to reduce the size of *Granthi* has been selected.



Ingredients of Cap Boheco Peace^[8]

Drug name	Latin Name	Rasa	Guna	Virya	Vipaka	Karma
Vijaya ^[9]	<i>Cannabis sativa</i> Linn.	Tikta	Laghu, Tiktsna	Ushna	Katu	Grahi, Dipana, Pachan, Medhya, Rasayana. Kaphahara, Pittala
Haridra ^[10]	<i>Curcuma longa</i> Linn.	Tikta, Katu	Ruksha Laghu	Ushna	Katu	Kaph-Pitta Shamak, Sothahara, Kandughna, Vranahara, Visaghna, Krimighna, Ruchikar, Sheetapittahara.

Ingredients of Raspachak Yoga^[11]

Drug name	Latin Name	Rasa	Guna	Virya	Vipaka	Karma
Kutaj	<i>Holarrhena antidysentria</i>	Tikta, Katu, Kashaya	Laghu, Ruksha	Sheeta	Katu	Deepana, Pachan, Jwarghna
Patol	<i>Trichosanthes dioica</i>	Tikta	Laghu, Snigdha	Ushna	Madhura	Kapha-Pittahara
Kutki	<i>Picrorhiza kurroa</i>	Tikta	Laghu Ruksha	Sheeta	Katu	Jwarghna, Kapha-Pittahara

Ingredients of Kanchanara Guggulu^[12]

Drug name	Latin Name	Rasa	Guna	Virya	Vipaka	Karma
Kanchanara	<i>Bauhinia purpurea</i> linn.	Kashaya	Ruksha, Laghu	Sheeta	Katu	Kapha-Pittahara, Dipana
Shunti	<i>Zingiber officinale</i>	Katu	Guru, Ruksha, Tikshna	Ushna	Madhura	Vata-Kaphahara, Dipana, Bhedana
Maricha	<i>Piper nigrum</i>	Katu	Laghu, Tikshna	Ushna	Katu	Kapha-Vatahara, Pramathi, Dipana

Pippali	<i>Piper longum</i> Linn.	Katu	Laghu, Snigdha	Ushna	Madhura	Vata-Shleshmahaara, Dipana
Haritaki	<i>Terminalia chebula</i>	Kashaya Pradhana Pancaras a	Laghu Ruksha	Ushna	Madhura	Tridoshahara, Anulomana, Lekhana
Vibhitaki	<i>Terminalia bellerica</i>	Kashaya	Ruksha, Laghu	Ushna	Madhura	Kapha-Pittahara, Bhedana
Amalaki	<i>Emblica officinalis</i>	Amla Pradhana Pancharasa		Sheeta	Madhura	Tridoshahara, Vrishya, Vayasthapana
Varuna	<i>Crataeva religiosa</i>	Tikta Kashaya	Laghu Ruksha	Ushna	Katu	Kapha-Vatahara, Dipana, Krimighna
Twak	<i>Cinnamomum zeylanica</i>	Katu, Tikta, Madhura	Laghu, Ruksha, Tikshna	Ushna	Katu	Vata-Pittahara, Varnya, Grahi
Ela	<i>Elettaria cardamomum</i>	Katu, Madhura	Laghu, Ruksha	Sheeta	Katu	Kapha-Vatahara, Dipana
Patra	<i>Cinnamomum verum</i>	Katu, Tikta, Madhura	Laghu, Ruksha, Tikshna	Ushna	Katu	Kapha-Vatahara, Pitta-Vardhaka
Guggulu	<i>Commiphora mukul</i>	Tikta, Katu	Laghu, Ruksha, Visada, Sara	Ushna	Katu	Tridoshahara, Lekhana

Ingredients of Chandanabala Lakshadi Taila^[13]

Drug name	Latin Name	Rasa	Guna	Virya	Vipaka	Karma
Devadaru	<i>Cedrus deodara</i>	Tikta, Katu, Kashaya	Laghu, Ruksha	Ushna	Katu	Krimighna, Shothaghna, Kaphahara
Ashwagandha	<i>Withania somnifera</i>	Katu, Tikta, Kashaya	Laghu, Snigdha	Ushna	Katu	Vata-Kapha Hara, Shothahara, Balya

Haridra	Curcuma longa	Katu	Laghu, Tikshna	Ushna	Katu	Kapha Pittahara, Shotha Hara
Daruharidra	Berberis aristakia	Katu	Laghu, Ruksha Tikshna	Sheeta	Katu	Shulaghna, Krimighna, Vatakaphahara
Bala	Sida cardifolia	Madhur	Laghu, Snigdha	Sheeta	Katu	Vata-Pitta Hara, Balya, Brimhana
Rakta Chandana	Santalum album	Tikta, Madhur	Laghu, Ruksha	Sheeta	Katu	Varnya, Dahaprashmana, Kandughna
Ushira	Vetiveria zizanioides	Tikta, Madhura	Ruksha Laghu	Sheeta	Katu	Kaphapittahara, Pachana

CONCLUSION

Science is advancing as the treatment modalities have also been changed. So, the treatment having maximum benefits with fewer side effects is well anticipated by Ayurveda management. As per the case study, it has once again proved that the time-tested age-old Ayurvedic treatment in fibroadenoma of the breast is very effective which was confirmed by the mammography reports before and after the treatment. Clinical features and reports of mammography suggested a remarkable reduction in symptoms and size of the lump that almost disappeared. Further detailed clinical research studies are needed to conclude.

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How to cite this article: Reenu A. Sahani, Harshad K. Jain. Ayurvedic management of Stangranthi w.s.r. to Fibroadenoma of Breast: A Case Study. J Ayurveda Integr Med Sci 2023;08:258-264.
<http://dx.doi.org/10.21760/jaims.8.8.41>

Source of Support: Nil, **Conflict of Interest:** None declared.

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