



ISSN 2456-3110

Vol 8 · Issue 10

October 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 Ovarian Cyst - A Case Report

Pawan Kumar Soni

Senior Ayurvedic Medical Officer, Govt. Ayurvedic Hospital, Sangod dist. Kota, Rajasthan, India.

ABSTRACT

In this present case study 32 years and 29 years old women both patients consulted with a complain of pain in lower abdomen and epigastric region, burning micturition and constipation and irregular menses, both were advised for ultrasonography (USG) and finding suggested ovarian cyst. They were intended to treat with traditional Ayurvedic formulations, the cases were treated with the combination of different traditional Ayurvedic drugs, with the aim to alleviating symptoms and dissolves the ovarian cyst. In Ayurveda Cyst may be correlated with *Granthi*. The present case revealed the *Granthihara* properties of some Ayurvedic medicines viz. *Kanchanar Guggulu*, *Varunadi Kashaya* & *Punarnava Mandoor*. The trial drugs were procured from the local market. Patient's conditions were assessed through USG after treatment for ovarian cyst which was completely relieved. Report showed no cyst in the ovary. This indicates the ovarian cyst can be completely and successfully cured with Ayurvedic treatment.

Key words: Ayurveda, *Granthi*, Ovarian Cyst, *Granthihara* Drugs, *Kanchanar Guggulu*.

INTRODUCTION

Any ovarian follicle that is larger than about two centimetres is termed an ovarian cyst. Ovarian cysts are closed, sac-like structures within the ovary that are filled with a liquid or semisolid substance. Ovarian cysts affect women of all ages however, most often they occur during childbearing years. Most ovarian cysts are functional in nature and harmless (benign). Common symptoms of an ovarian cyst are abnormal uterine bleeding, irregular periods, pain in the lower abdomen or pelvis, fatigue, headaches, Nausea.^[1]

During a bimanual examination of the pelvis sometimes ovarian cysts may be noticed. Ovarian cysts are diagnosed by ultrasound, MRI & CT scan. The treatment of an ovarian cyst is mainly done by Hormonal

treatment (combined oral contraceptive pills) and by surgical treatment such as laparotomy and pelvic laparoscopy, which are having their own side effects.^[2]

In Ayurveda ovarian cyst can be correlated with *Kaphaja Granthi*. The Lakshanas of *Kaphaja Granthi* is *Vedana Rahita* (pain-less), *Ghana*, *Sheeta*, *Savarna* & *Kandukta* (itching).^[3] *Chikitsa* of *Kaphaja Granthi* include *Shodhana*, *Shamana* and *Chedana Karma*.^[4] In present case study *Shamana Yoga* (*Kanchanar Guggulu*, *Punarnava Mandoor* & *Varunadi Kashaya*) is used for the management of ovarian cyst.

1. *Kanchanar Guggulu*

It is a polyherbal formulation used for tumour, cystic swelling, PCOS and ulcers. *Kanchanar Guggulu* is effective in *Arbuda*, *Galganda*, *Gandamala* and it is used due to *Granthihara* and *Lekhaneeya* property, it contains ingredients which shows anti-inflammatory, anti-tumour, diuretic and decongested properties that helps to promote healthy functions of the body.^[5]

2. *Punarnavadi Mandoor*

It is an herbal formula it contains antioxidants and other ingredients that help in iron deficiency and improve the haemoglobin level and it has *Rasayan* property also that helps regulate metabolism, enhance immunity and strength and has *Shothaghna* property that reduce mass and inflammation.^[6]

Address for correspondence:

Dr. Pawan Kumar Soni

Senior Ayurvedic Medical Officer, Govt. Ayurvedic Hospital,
Sangod dist. Kota, Rajasthan, India.

E-mail: pawanksoni2010@gmail.com

Submission Date: 19/09/2023 Accepted Date: 22/10/2023

Access this article online

Quick Response Code



Website: www.jaims.in

DOI: 10.21760/jaims.8.10.46

3. Varunadi Kashaya

Varunadi Kashaya is also having Bhedana, Ashmarihara and Basthishulaha property. Varunadi Kashaya is an Ayurvedic proprietary medication for Kaphaj imbalance.

CASE REPORT

Case 1

A female subject aged 32 years unmarried was examined in the hospital for Right ovarian cyst. She had no previous history of mumps, syphilis, gonorrhoea, secondary amenorrhoea, and exposure to radiation or any toxin or chemical agent. She had done 1-month conventional therapy for ovarian cyst but was unsuccessful. On Examination, Vital signs included a BP - 138/78 mm of mercury, heart rate of 76 bpm, respiratory rate of 17 breaths per minute, oxygen saturation of 98% on room air, and a temperature of 36.6°C. The physical examination revealed an anxiety for the specified age and depressed due to future married life. The body proportion was found to be normal with normal secondary sexual characters, were belonging to Vata-Kaphaj Prakrti and Asthisara. There were no any abnormal findings seen.

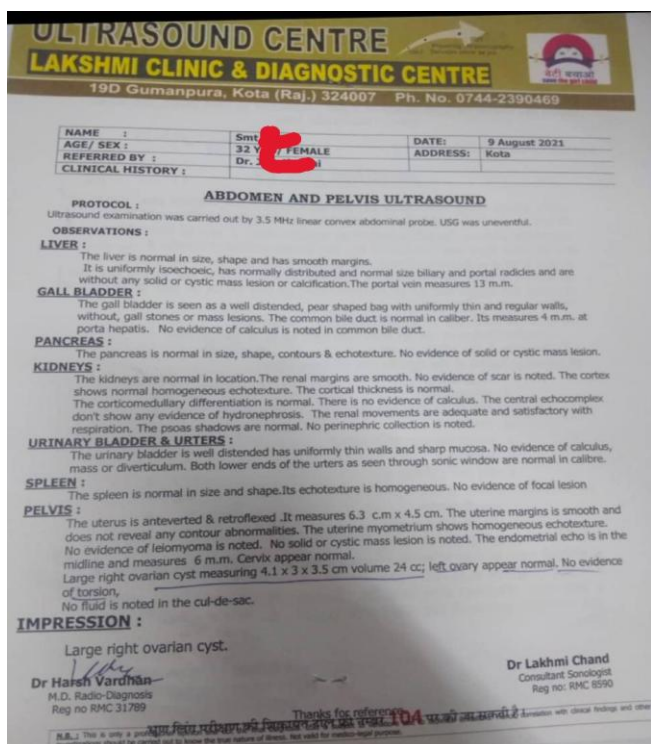


Figure 1: USG (Before treatment): dated 09/08/2021

Uterus: Normal in size 6.3cm x 4.5cm

Myometrium: Ecotexture is homogeneous

Endometrium: Is normal, no mass

Left ovary: Appear normal, no evidence of torsion

Right ovary: A cyst measuring 4.1x 3 x3.5 cm volume 24 cc

Cul de sac: No free fluid is seen [figure -1]

Case 2

A female subject aged 29 years, married 5 year back, anxious to conceive, doing job, was examined for Right ovarian cyst. She had no previous history of mumps, syphilis, gonorrhoea, secondary amenorrhoea, and exposure to radiation or any toxin or chemical agent. She had suffered from typhoid in childhood. She had done conventional therapy for ovarian cyst but was unsuccessful. On Examination, Vital signs included a BP of 132/82 mm of mercury, heart rate of 74 bpm, respiratory rate of 18 breaths per minute, oxygen saturation of 97% on room air, and a temperature of 36.8°C. The physical examination revealed an anxiety for the specified age. The body proportion was found to be normal with normal secondary sexual characters, were belonging to Vata-Kaphaj Prakrti and Maansasara. There were no any abnormal findings seen.

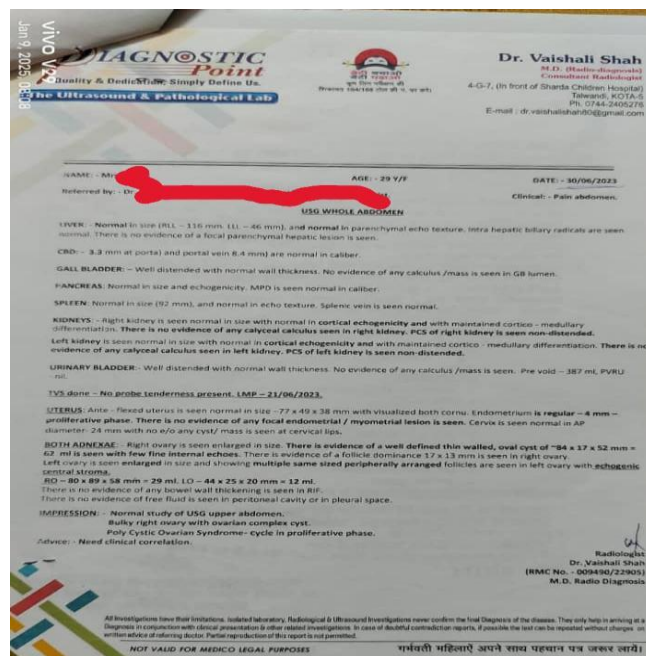


Figure 2: USG (Before treatment): dated 30/06/2023

Uterus: Normal in size

Myometrium: Ecotexture is normal

Endometrium: Is normal, no mass seen

Left ovary: Normal in size

Right ovary: A cyst measuring 8.4 × 1.7 × 5.2 cm with 62 ml fluid.

Cul de sac: No free fluid is seen [figure - 2]

Treatment

The treatment was carried out with the following medicines.

Name of the drugs	Doses	Anupana
Kanchnar Guggulu	500 mg	Jala
Punarnavadi Mandoor	250 mg	Jala
Varunadi Kashya	20 ml	Jala (lukewarm water)

All above medicines were given twice daily for three months. During this period the patient was advised to take *Garisth Ahara* (nutritive diet like milk etc.) and avoid *Snigdha* (oily), *Lavana* & *Amla* (curd, imli & kairi) *Ahara*.

OBSERVATION AND RESULTS

The patient had followed the *Ahara (Pathya)* & drug restriction strictly. The sonography was made after 40 days of treatment due to 32 years old patient felt good and she wants sonography report for progress. The findings of sonography report after treatment are:

Case 1 - Sonography report after treatment (20 sept 2021)

Uterus: Normal in size

Myometrium: Ecotexture is normal

Endometrium: Is normal, no mass seen

Left ovary: Normal in size

Right ovary: Normal in size no cystic mass is noted

Cul de sac: No free fluid is seen. [figure - 3]

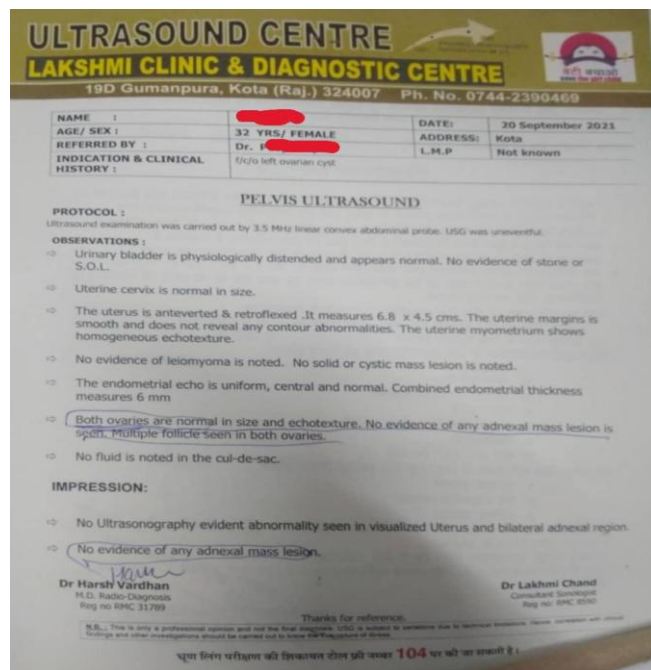


Figure 3: Case 1 - USG (After treatment)

Case 2 - Sonography report USG (After treatment)

Uterus: Normal in size

Myometrium: Echotexture is normal

Endometrium: Is normal, no mass seen

Left ovary: Normal in size

Right ovary: Normal in size no cystic mass is noted

Cul de sac: No free fluid is seen. [figure-4]

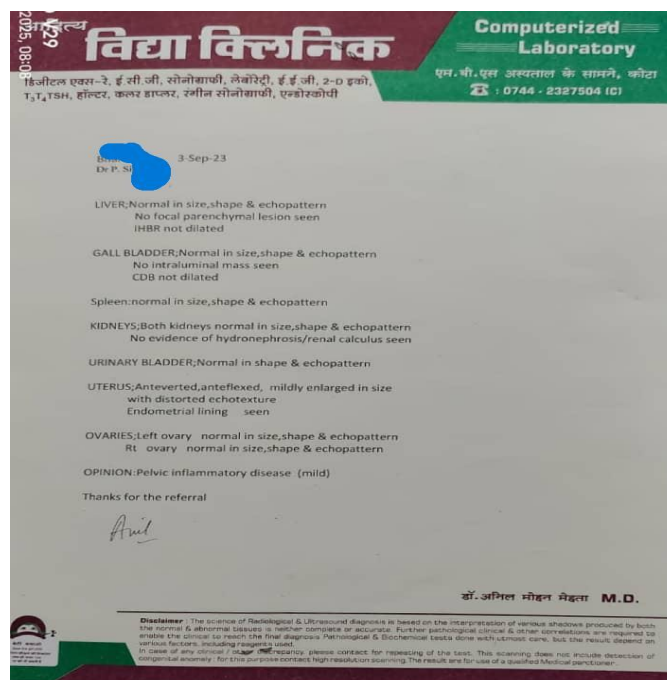


Figure 4: Case 2 - USG (After treatment)

DISCUSSION

Ovarian cyst is one of the prevalent reasons for ovarian dysfunction, which directly affects the fertility potential. The present finding based on sonography and the effective management of ovarian cyst with Ayurvedic formulations [table-1] with no adverse effect highlights the promising scope of traditional medicine in the ovarian and infertility disorders. *Granthihara* and *Bhedana* properties of *Kanchanar Guggulu*, *Varunadi Kashaya* and *Punarnavadi Mandoor* act on reproductive system & improve the functions of ovary and *Artava*.

CONCLUSION

In modern medicine, the treatment of ovarian cysts is primarily done through hormonal treatments (such as combined oral contraceptive pills) and surgical procedures like laparotomy and pelvic laparoscopy, both of which have their own side effects. Many people are terrified of hormonal intervention and may reluctantly undergo the only treatment option in modern science, which does not assure the non-recurrence of the disease. The chances of recurrence of ovarian cysts remain high. Ayurveda, a branch of natural science, offers effective management of various female disorders through herbal formulations with no adverse effects. The present study reveals the effective management of ovarian cysts through Ayurvedic treatment, particularly herbal medicines.

Consent

Before starting treatment consent of the patient was taken along with proper advice and counselling.

REFERENCES

1. Dutta D.C. text book of Gynaecology, 4th edn. New Central Book Agency Pvt. Ltd. Kolkatta, 1994, Chapter, 20, p279-292.
2. Dutta D.C. text book of Gynaecology, 4th edn. New Central Book Agency Pvt. Ltd. Kolkatta, 1994, Chapter, 20, p279-292.
3. Vagbhata. Ashtanga Samgraha. Granthi-Arbud-Shlipada-Apachi-Nadi Vijananiya Adhyaya. In: Gupta AD, editors. Revised edition. Varanasi (India): Chaukhambha Krishnadas Academy; 2016. p. 803-804.
4. Dutta D.C. text book of Gynaecology, 4th edn. New Central Book Agency Pvt. Ltd. Kolkatta, 1994, Chapter, 20, p279-292.
5. Sharma P.V. Dravyaguna Vigyan Vol.2, Chaukhambha Bharti Academy, Varanasi, Chathurtha Adhyaya, 1995;p.319-328.
6. Sharma P.V. Dravyaguna Vigyan Vol.2, Chaukhambha Bharti Academy, Varanasi, Chathurtha Adhyaya, 1995;p.319-328.

How to cite this article: Pawan Kumar Soni. Ayurvedic management of Ovarian Cyst - A Case Report. J Ayurveda Integr Med Sci 2023;10:285-288. <http://dx.doi.org/10.21760/jaims.8.10.46>

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