Jalaukavacharana in Bartholin’s Cyst

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ABSTRACT

A 33 year old women recently presented with a painful oval to round, well defined cystic lesion over right labia majora. On clinical examination diagnosis of Bartholin’s Cyst was made, which can be correlated with Karnini Yonivyapad in Ayurveda. She had a history of recurrence of Bartholin’s Cyst total 15 times in past 10 years out of which 12 times on her right side and 3 times on her left side and for which she underwent surgical procedure 3 times. In our texts Arogyavardhini Vati is well known for its effect on blood purification, liver, inflammation, digestive problems anemia etc. Kanchnar Guggulu plays a significant role in swelling, cyst and thyroid disorders and Jalauka (leach) counteracts the dominance of Pitta Dosha which is responsible for pain and inflammation and has many enzymes responsible for vasodilation, anticoagulant, anti-microbial property. Patient was treated accordingly with Arogyavardhini Vati, Kanchnar Guggulu orally, Jalaukavacharana (leech therapy) single leech weekly at the site of Bartholin’s cyst under proper observation and care and local wash with Triphala, Neem (Azadirac indica) and Haridra (Curcuma longa) Churna Kwath (decoction) followed by application of Jatyadi oil. After 2-3 sittings of leech therapy (weekly) effect of this Ayurvedic treatment was found to be very impactful.

Key words: Bartholin’s Cyst, Karnini Yonivyapad, Ayurveda, Jalaukavacharana

INTRODUCTION

Bartholin’s gland are the 2 pea sized (2 cm) glands, located in the groove between the hymen & the labia minora at 5 o’clock & 7 o’clock position.[4,1]

Gonococcus, E. coli, Staphylococcus, Streptococcus, chlamydia trachomatis or mixed type are a few possible causal organisms for infection of bartholin glands.

Bartholin’s cyst is closure of the duct or the entrance of an acinus. It may arise owing to infection or trauma followed by fibrosis and blockage of the lumen.[8]

KARNINI YONIVYPAD

“Karniyan Karnika Yonau Shleshmasrugbyam Prajayate.”[9] It denotes that Karnika (cyst ) occurs in Yoni (vagina) is Karnini Yonivyapad which involves vitiation of Kapha and Rakta.

Jalauka (leech) belongs to the phylum annelide. Acharya stated in the Susruta Samhita that Jalauka (Leeches) Counteracts the dominance of Pitta Dosha, which is responsible for inflammation & pain, because of its Sheet (cold) and Madhur characteristic.[6] Leeches release more than 20 known bioactive compounds out of which antistasin, hirudin, anti-inflammatory, thrombin regulating, platelet inhibitory, anticoagulant are present in addition to extracellular matrix degradative and anti-microbial actions have therapeutic importance but with more researches the range may broaden.[3] The method is inexpensive, efficient and simple to use. In the medicinal leech, the teeth of the three jaws are pored by the Canaliculi of unicellular gland which produce hirudin a potent anticoagulant that act as antithrombokinase.[3]
addition to anesthetic and vasodilatory compounds. Saliva also contains substances that dilates blood vessels to increase blood flow (acetyl choline, histamine like molecules) and prevent blood clotting. Jalauka (leech) first suck contaminated blood like the Hans (Swan) who is able to distinguish between milk, & water. Leeches also have rapid relief in inflammation & pain.\[7\]

**CASE PRESENTATION**

A P2L2, 33 year old female patient complaining of pain & swelling in the right labia majora came to hospital. Clinical examination findings were pus accumulation, induration and pain in the posterior portion of the labia majora. On microscopy; fluid cytology - “smear shows multiple scattered polymorphonuclear cells against a hemorrhagic and necrotic background suggestive of infected Bartholin’s cyst.” She had previously experienced Bartholin’s Cyst total 15 times out of which 12 times on right side and 3 times on the left side periodically over the course of the preceding 10 years. She also had history of surgical removal of cyst 3 times but recurrence was there with high frequency. No more abnormalities were found during clinical examination. A regular blood test revealed no abnormalities and 48 hours of aerobic incubation with culture and sensitivity revealed no trace of microorganism development.

There was no family history of such cystic lesion and there was no traumatizing past. Karnini Yonivyapad can be correlated with Bartholin’s cyst in modern science. Jalaukavacharana (leech therapy), Kanchnar Guggulu, Arogyavardhini Vati, Khadiradi Vati as well as other oral & topical Ayurvedic medications are used to treat the patient.

**METHODOLOGY**

In this instance, we adhere to the standard Ayurvedic treatment protocol thus begins with Deepana and Pachana for the first seven days and then introduce Shaman drugs in addition to treating the disease related Doshas. As we already mentioned that Arogyavardhini Vati has Deepana, Medodoshahara, Srotoshodhana property and Kanchnar Guggulu shows cytotoxic impact by inhibiting cell division (antimitotic) and lowering cell proliferation, So the drugs of choice in this case are Arogyavardhini Vati and Kanchnar Guggulu as oral medication and main line of treatment as procedure is Jalaukavacharana (leech therapy). The leech used suck near about 10-15 ml and duration of therapy in every visit is near about 40-50 minute; time till leach stop sucking itself. The patient receives total 10 sittings of leech therapy once in a week. Khadiradi Vati, Avipattikar Churna was also added from second month. Haridra, Triphala, Neem Churna Kwath (decocotion) recommended for local wash followed by application of Jatyadi oil. Bartholin’s cyst is totally cleared after 10 sessions of leech therapy. The patient was instructed to have monthly checkups, and as of now, (approx. 9 month) there was no recurrence.

**DISCUSSION**

Over the years, leeches have gained popularity over painful mechanism of bloodletting. Due to the recurrence rate after surgery, it is no longer the only choice of patient.

In this area Ayurveda has a lot of potential. This is the high time to develop an effective Ayurvedic treatment protocol for its prevention and treatment as well as for other diseases with similar pathophysiology. Weekly leech applications, Kanchnar Guggulu, Arogyavardhini Vati orally, Jatyadi oil for local application, and local wash with Neem, Haridra and Triphala Churna Kwath (decocotion) are the part of therapy.

Leech Contains hirudin, antistasin (anticoagulant) that inhibit the process of hemostasis by interaction with various components of coagulation cascade. Blood feeding leeches have 3 main mechanisms to inhibit hemostasis (blood clotting): 1. Inhibition of cross linked platelets by preventing platelet adhesion to collagen 2. Inhibition of platelets adhesion to fibrinogen and 3. Thrombin inhibition.

Among leeches thrombin inhibitors, antistasin targets factor Xa, an agonist of prothrombin. Leeches minimize the amount of clogged blood and prevents blood clotting by adding heparin to it as a result, clearing the
blockages of the Bartholin’s cyst. Leech Saliva also contains compounds that expand blood vessels to enhance blood flow due to which fresh blood flow to that place is increases which decreases the infection by the activity of WBC.

The ingredients in Arogyavarthini Vati such as Tamra Bhasma (incinerated Copper), Guggulu, Katuki, Triphala are having Lekhana, Deepana (improving digestion & metabolism), Medodoshahara (correcting lipid metabolism and transportation properties), Strotosodhana (removal of obstruction in micro channels), Rasayana (anti-oxidant) properties that may help to correct the underlying pathology of disease and restore normal physiology.

Kanchnar Guggulu exhibits a cytotoxic effect by preventing cell division (antimitotic) & reducing cell proliferation. In Ayurvedic text also Kanchnar is recommended for Granthi (cyst) & thyroid disorders etc.

Local wash with Triphala, Neem, Haridra Churna Kwath (decoction) inhibits the growth of microorganism and relieves inflammation Haridra (Curcuma longa) possesses various beneficial properties such as anti-inflammatory, anti-allergic, anti-septic & blood cleansing etc. Neem (Azadirachta indica) possesses anti-inflammatory, antibacterial and antioxidant properties & another known Ayurvedic antiseptic is Triphala.

**CONCLUSION**

Although Bartholin’s cyst is compared with Yonikanda in many Ayurvedic texts due to their geographical proximity but it is found that the Bartholin’s Cyst and Karnini Yonivyapad could be correlated based on Doshas involved. Treatment on the basis of its Dosha predominancy will helps to treat it efficiently. Considering the efficacy of Jalaukavacharana (leech therapy) it would be favorable to treat Bartholin’s cyst by leech application and oral medication like Kanchnar Guggulu, Arogyavarthini Vati, Gandhak Vati, Khadiradi Vati as well as local wash with Triphala, Neem and Haridra Churna Kwath (decoction). As it is very effective it can spare patients from undergoing surgical procedure. Additional research must be conducted regarding this.

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