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# Understanding the *Nidana Panchaka* of *Sthoulya* induced Fibroid Uterus (*Garbhashaya Granthi*) through its Ayurvedic management

Chaithra TM<sup>1</sup>, Pramod Katti<sup>2</sup>

<sup>1</sup>Post Graduate Scholar, Dept. of Kayachikitsa, Ayurveda Mahavidyalaya and Hospital, Hubballi, Karnataka, India.

<sup>2</sup>Professor, Dept. of Kayachikitsa, Ayurveda Mahavidyalaya and Hospital, Hubballi, Karnataka, India.

## ABSTRACT

*Sthoulya* (obesity) is one among the non-communicable disease which is a threat for human health. The overweight population have been doubled in a few decades in urbanised societies as a result of changes occurring in Food Habits, Lifestyle and Occupational patterns, and these have significant health implications as they produce *Santarpanotha Vikaras*. In Ayurveda metabolic disorders can be correlated with the *Santarpanotha Vikaras*. *Sthoulya* is enumerated under *Santarpanotha Vyadhi*. *Dustha Kapha* and *Meda Dhatu* when they take *Sthanasamshraya* in *Garbhashaya Mamsa Dhatu* and results in the manifestation of *Granthi*, *Arbuda*, which are enumerated under *Santarpanotha Vyadhi*. In the *Nidanaarthakara Roga*, the *Ubhayarthakara Roga* is explained which refers to the manifestation of secondary disease with persistence of primary disease. Here in this *Vyadhi Sthoulya* acts as a *Ubhayarthakara Roga* for *Garbhashaya Granthi*. In the literatures of *Ayurveda*, research articles, Allopathic books, Modern research articles we have found a link between *Kapha Dosha*, *Meda Dhatu*, *Sthoulya* (Obesity) having relation with manifestation of Fibroid Uterus (*Garbhashaya Granthi*). To come out with line of treatment, as direct line of treatment is not explored hence, we want to explore the line of treatment for *Sthoulya* (Obesity) induced Fibroid Uterus (*Garbhashaya Granthi*). The present article is focused on understanding of pathophysiology of *Sthoulya* induced Fibroid Uterus (*Garbhashaya Granthi*) with its different dimensions of Ayurvedic treatment.

**Key words:** *Sthoulya*, obesity, *Santarpanotha Vikara*, Fibroid Uterus, *Garbhashaya Granthi*.

## INTRODUCTION

As changes occurring in Food style, Lifestyle, Lack of exercise are the main culprit for Obese patients especially in Female. This Obesity is one of the main causes for the Fibroid Uterus (*Garbhashaya Granthi*).

The *Nidanas*<sup>[10]</sup> explained in *Santarpanotha Vyadhi* are responsible for the Metabolic disorders which vitiates

the *Agni* and *Samana Vayu*, Thereby it vitiates *Kapha* and its *Gunas* like *Guru*, *Manda*, *Sheeta* and *Snigdha Guna*. This *Vikruta Kapha* further vitiates *Meda* and *Mamsa Dhatu* in *Garbhashya* producing Fibroid Uterus(*Garbhashaya Granthi*).<sup>[3]</sup> Fibroid Uterus (*Garbhashaya Granthi*) can be seen in all the three layers of *Garbhashaya* i.e., Submucosal Fibroids - Endometrium, Intramural Fibroid -Myometrium, Subserosal Fibroids – Perimetrium.<sup>[11]</sup> The Asymptomatic Fibroids are *Kapha Pradhana*, Submucous Fibroids presenting with Menstrual irregularities are *Vata Pitta Anubandha Avastha*, and subserous fibroid presenting with Pressure symptoms are *Vata Anubandha Avastha*.

This disease can be properly understood based on the *Dosha*, *Dushya*, *Agni*, *Srotas*, *Vyadhi Avastha*, for proper Diagnosis and Management. Uterine Fibroids are the most common abnormal growths that arise from the myometrium of uterus. The symptoms are mostly related to Nature, extension and location of

### Address for correspondence:

Dr. Chaithra TM

Post Graduate Scholar, Dept. of Kayachikitsa, Ayurveda Mahavidyalaya and Hospital, Hubballi, Karnataka, India.

E-mail: drchaithra238@gmail.com

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lesion - further it's Number, Size, Layer and Location of the Fibroid and the common symptoms include Dysmenorrhoea, Menorrhagia, Lower abdominal pain, irregular menstrual cycle etc.

### Nidana Panchaka of Sthoulya induced Fibroid Uterus (Garbhashaya Granthi)

Sthoulya is one among the Santharpanottha Vyadhi<sup>[1]</sup> involving Meda, Mamsa and Kapha Dosha which is responsible for the manifestation of Metabolic disorders. Athisthoulya is mentioned as Medoroga in Madhavanidana<sup>[12]</sup> and Bhaishajyaratnavali.<sup>[13]</sup> Where as in Brihatrayi, it is not mentioned as a specific Vyadhi.

Apatarpana is the line of treatment for all the Santarpana Vyadhi<sup>[14]</sup> and for Metabolic Disorders. As in cases of Sthoulya and Fibroid Uterus (Garbhashaya Granthi) the line of treatment continues the same as because there is an involvement of Kapha and Medo Dhatu. The excessive Meda will get accumulation at Spik, Sthana and Udara Pradesha.<sup>[15]</sup>

In Sthoulya Roga Meda Sanchaya takes place predominantly in Udara Pradesha and Garbhashaya has its Sthana in the Udara. Therefore, the Granthi which is formed in the Garbhashaya is influenced by the Medo Dhatu. hence there is a direct relationship between Garbhashaya and Udarastha Meda and the Samprapti and Chikitsa of both these diseases are interlinked with each other.

### Nidana

#### Aharaja

- Madhura, Guru, Sheeta, Snighdha, Ahara Sevana<sup>[10]</sup> (foods which are sweet, heavy to digest, cold, fatty food substance).
- Kapha Vardaka Ahara Sevana<sup>[10]</sup> (intake of the food, which increases Kapha),
- Ati Bhakshana<sup>[10]</sup> (excessive eating),

#### Viharaja

- Avyayama<sup>[10]</sup> (lack of physical exercise),
- Divaswapna<sup>[10]</sup> (sleeping during day time),
- Avyavaya<sup>[10]</sup> (lack of sexual intercourse),

### Manasika

- Krodha
- Chinta

### Others

- Beeja Svabhava
- Agni Vaishamyatva

### Samprapti

Sthoulya and Fibroid Uterus (Garbhashaya Granthi) are the Santarpanotha Vyadhi. There are 2 stages of Samprapti which can be understood in relation to Sthoulya induced Fibroid Uterus (Garbhashaya Granthi). Sthoulya patients are more prone to develop Garbhashaya Granthi hence we need to understand Samprapti in detail. In the initial stage Sthoulya Roga manifested. In the 2<sup>nd</sup> stage this Sthoulya Roga becomes Nidanaarthakara Roga for the Fibroid Uterus (Garbhashaya Granthi).

### 1st stage - Samprapti of Sthoulya:<sup>[16]</sup>

Nidana Sevana (Kapha and Meda Sadharmi Amsa)



Kapha Dosha Vriddhi



Jatharagni Vikriti



Medo Dhatwagnimandhya



Vikruta Medo Vriddhi and Sanchaya



Sanga in Medo Vaha Strotasa



Margavarodha Janya Vata Prakopa and Vimarga Gamana of Vayu



Sarvanga Sharira Gamana (Vata) especially in Koshtha



Jatharagni Sandhukshana



Atiaahara Sevana due to Sheegra Jarana



Increases *Medo Poshakamsha*



*Meda Sanchaya*



*Sthoulya (Medoroga)*

In further stage (2<sup>nd</sup> stage) *Sthoulya* will act as *Ubhayarthakari Nidana* for Fibroid Uterus (*Garbhashaya Granthi*)

*Sthoulya*



Due to the dysfunctioning of *Rasadhatwagni* and *Samanavayu* there will be excessive formation of *Ashuddha Rasa*



This *Ashuddha Rasa* having *Snigdha, Manda, and Guru Guna* affects its subsequent *Dhatu* and *Upadhatus* formation.



This results in the formation of *Ashuddha Artava* (altered steroidogenesis and anovulation).



Which initiates the growth of leiomyoma by abnormally stimulating the *Garbhashaya* (uterine myometrium).



Smooth muscle hypertrophy in *Garbhashaya* leads to the development of Uterine Fibroids.



*Sthoulya* becomes *Nidanarthakara Roga (Ubhayarthakari Nidana)* for the Fibroid Uterus (*Garbhashaya Granthi*), the line of treatment of *Granthi* will follow the same line of treatment as that of *Santarpanottha Vikaras* i.e., here we follow the both *Sthoulya* and *Granthi Chikitsa*.

**Samprapti Ghatakas**

**Dosha**

*Vata - Samana Vayu, Apana Vayu*

*Pitta - Pachaka Pitta*

*Kapha - Kledaka Kapha*

**Guna**

*Vata - Sheeta*

*Pitta - Sasneha, Sara*

*Kapha - Snigdha, Guru, Slakshna, Sthira*

**Dushya** - *Rasa, Rakta, Mamsa, Meda, Artava*

**Agni**

*Jhatargni - Mandagni*

*Dhatvagni - Medo Dhatvagni Mandya*

*Mamsa Dhatvagni Mandya*

*Rasa Dhatvagni Mandya*

*Artava Dhatvagni Mandya*

*Ama - Sama Avastha*

*Srotas - Rasa, Rakta, Mamsa, Meda, Artava Vaha*

*Sroto Dusti Prakara - Sanga (Sthoulya), Granthi (Garbhashaya Granthi)*

*Udbhava Sthana - Udara, Amashaya*

*Sanchara Sthana - Medovaha Srotas, Artavaha Srotas,*

*Adhithana - Garbhashaya*

*Vyaktasthana - Garbhashaya*

*Rogamarga - Abhyanthara*

*Vyadhi Svabhava - Chirakari*

**Roopa**

The *Lakshanas* related to the *Sthoulya* induced *Garbhashaya Granthi* (Fibroid Uterus) includes the pathophysiology of the *Santarpanottha Vikaras* wherein *Sthoulya Lakshanas* are more prominent which leads into the manifestation of Fibroid Uterus (*Garbhashaya Granthi*).

**Sthoulya Lakshanas**

|   |   |
|---|---|
| <i>Medomamsa Ativrudhi, mainly at Sphik, Stana Udara Sthana</i> <sup>[15]</sup> | Excessive fat deposition mainly at the buttocks, chest region and abdominal region. |
| <i>Ayathaopachaya</i> <sup>[17]</sup>   | Abnormal fat deposition   |

|                                 |  |
|---------------------------------|--|
| Javoparodha <sup>[17]</sup>     | Lethargic                                      |
| Kruchra Vyavaya <sup>[17]</sup> | Difficulty in performing the sexual activities |
| Durbalata <sup>[17]</sup>       | General weakness                               |
| Atiswedha <sup>[17]</sup>       | Excessive sweating                             |
| Atikshudha <sup>[17]</sup>      | Increased hunger                               |
| Atipippasa <sup>[17]</sup>      | Increased thirst                               |

Fibroid Uterus (*Garbhashaya Granthi*) Lakshanas were not directly explained in the *Samhithas* but *Granthi Lakshanas* are explained. Depending on the *Sthana* of the *Granthi* we can consider the *Lakshanas* of Fibroid Uterus (*Garbhashaya Granthi*) as:

शरीरवृद्धिक्षयवृद्धिहानिः स्निग्धो महानल्परुजोऽतिकण्डुः ।

मेदःकृतो गच्छति चात्र भिन्ने पिण्याकसर्पिःप्रतिमं तु मेदः॥  
(स.सं.न.११/७)

According to Sushruta Acharya, *Medoja Granthi* increases or decreases in size based on the *Shareera Vrudhi* i.e., based on the increase of body fat. It has Unctuous property, Large in size with Less pain and intense itching.<sup>[18]</sup>

|                            |   |
|----------------------------|---|
| <i>Granthibhuta Artava</i> | Clots during menstruation               |
| <i>Atyartava</i>           | Increased menstrual bleeding            |
| <i>Kastartava</i>          | Pain during menstruation                |
| <i>Alpartava</i>           | Decreased menstrual bleeding            |
| <i>Kastamaithuna</i>       | Dyspareunia                             |
| <i>Kukshishula</i>         | Pain at the abdominal and pelvic region |
| <i>Putragni</i>            | Habitual abortion                       |

### Diagnostic criteria

Ultrasonography of Abdomen and Pelvis/ Transvaginal scan - which confirms the presence of Fibroid Uterus (*Garbhashaya Granthi*) manifesting in different Position, Number, Layers and Size.

- Submucosal (5%) - Endometrium

- Intramural (75%) - Myometrium
- Subserosal (15%) - Perimetrium

*Sthoulya* can be diagnosed by BMI and Anthropometric measures like waist hip ratio.

To rule out Hypothyroidism tests like Thyroid profile test are done.

To rule out Dyslipidemia Lipid profile tests are done.

To rule out the Cardiac disease cardiac profile is done.

To rule out the cancer Pap Smear is done.

### Vyadhi Vyavachedhaka

Adenomyosis, PCOD, Uterine tumours, Cervical or Vaginal tumours

**Vyadhi Vinischaya:** *Sthoulya* induced Fibroid Uterus (*Garbhashaya Granthi*)

### Chikitsa

*Chikitsa Siddhanta* which is explained for *Santarponottha Vikara*,<sup>[19]</sup> *Sthoulya Vikara*,<sup>[13,20]</sup> *Kapha-Meda vikara*,<sup>[21]</sup> *Kaphasya Upakrama*,<sup>[22]</sup> *Granthi*,<sup>[23-25]</sup> *Arbuda*<sup>[26-28]</sup> *Chikitsa* can be included to manage this disease, wherein *Kapha Dosha*, *Dushya* like *Mamsa*, *Meda* is involved. Hence the treatment principle will include drugs having *Sthoulyahara*, *Kaphagna*, *Medoghna*, *Granthihara* properties can be incorporated.

### Principles and Practice of Medicine in Sthoulya induced Fibroid Uterus (Garbhashaya Granthi)

This article focuses on exploring the *Chikitsa Siddhanta* of the *Oushadhi Sadhya Vyadhi*. From the *Chikitsa Sutra* of *Santarponottha vikaras*, *Sthoulya*, *Granthi*, *Arbuda*, *Gulma*, *Kaphasya Upakrama Chikitsa Siddhanta* we can adopt some of the treatment principles in the Fibroid Uterus (*Garbhashaya Granthi*).

The *Chikitsa* of *Sthoulya* induced Fibroid Uterus (*Garbhashaya Granthi*) can be understood in 3 levels

- 1) *Hetu Viparita Chikitsa*
- 2) *Dosha Viparita Chikitsa*
- 3) *Vyadhi Viparita Chikitsa*

**Hetu Viparita Chikitsa:**

Amapachana is done as Ama is the main cause for the Sthoulya and it acts as inflammatory cause for the Fibroid Uterus (Garbhashaya Granthi).

**Chikitsa:** Langhana, Pachana, Deepana

Drugs which are used for Amapachana are –

- Agnimukha Choorna,
- Intuppu Kanam Choornam,
- Trikatu Choorna,
- Shivakshara Pachana Choorna,
- Sanjivini Vati,
- Panchalavana Bhasma

**Dosha Viparita Chikitsa:**

To expel out the Dushitha Dosha from the body Shodhana is carried out.

Shodhana like - mainly Mrudu Vamana, Mrudu Virechana, Lekhana and Tikshna Basti.

| Panchakarma procedure | Dravya used   |
|-----------------------|---|
| Vamana                | Snehapana- Krishna Tila Taila, Varunadi Ghrita<br>Abhyanga –Tila Taila, Kottamchukadi Taila, Maha Vajraka Taila<br>Vamana- Madhanaphaladi Yoga                |
| Virechana             | Snehapana - Guggulutiktaka Ghrita, Sukumara Ghrita<br>Abhyanga - Nirgundyadi Taila, Dhanwantaram Tailam, Brihat Saindhava Taila<br>Virechana - Trivrutt Lehya |
| Basti                 | Lekhana Basti, Kshara Basti , Uttara Basti  |
| Udwartana             | Kolakulathadi Choorna, Triphala Choorna, Kotamchukadi Choorna   |
| Nasya                 | Triphaladi Taila  |

**Vyadhi Viparita Chikitsa**

To bring back the equilibrium state of the Dosha, Dhatu, Mala the Shamana Oushadhi are given.

| Oushadhi Kalpa      | Formulations   |
|---------------------|--|
| Single Drugs        | Shilajatu, Guggulu, Gomutra, Guduchi, Nagaramotha, Vayavidanga, Nagara, Amalaki, Agnimantha, Shilajatu   |
| Choorna Kalpanas    | Hingwastaka Choorna, Hingwachadi Choorna, Vidanagadi Choorna, Vyoshadi Guggulu Choorna, Gomutra Haritaki, Triphala Choorna, Trikatu Choorna                                    |
| Kashaya Kalpanas    | Chitrakagrathikadi Kashaya, Saptasara Kashaya, Vizhalveradi Kashaya, Varanadi Kashaya, Guggulutiktakam Kashayam, Hamsapathyadi Kashaya, Sukumara Kashaya, Trayantyadi Kashaya, |
| Asavaarista Kalpana | Dhanwanataram Arista, Sukumararista, Chavikasava, Gomutrasava, Guggulutiktaka Arista, Khadiraritam,  |
| Guggulu Kalpana     | Kanchanara Guggulu, Triphala Guggulu, Navaka Guggulu, Punarnavadi Guggulu, Trayushandi Guggulu, Kukkutanakhi Guggulu   |
| Vati Kalpana        | Kankayana Vati, Guggulu Panchapala Gulika, Siva Gulika, Vidangadi Gulika, Shilajatvadi Vati, Dwipanchamooladi Vati, Kshara Vati, Gomutra Vati, Trayushnadi Loha,               |
| Taila               | Dhanwantaram Taila, Varanadi Tailam, Hingutriguna Tailam, Eranda Sukumara Tailam, Nimbamrutaeranda Tailam,   |
| Ghrita              | Chiravilwadi Ghrita, Hapushadi Ghrita, Misrakasneha, Pathyapada Ghrita, Saptasara Ghrita, Panchatikta Ghriram, Guggulutiktaka Ghrita   |
| Rasaoushadhi        | Gulmakalanala Rasa, Sthoulyantaka Rasa, Kanmada Bhasma, Kasisa Bhasma, Tamra Bhasma, Rasa Sindura,   |

|                |   |
|----------------|---|
|                | Vidangyadi Loham, Gulmaktara Rasa   |
| Lehya Kalpanas | Danti Haritaki Leahya, Hingutriguna Leahya, Dasamula Haritaki Leahya, Bhallataka Rasayana, Lasuna Rasayana, Madhusnuhi Rasayana |
| Lepas          | Kulathadi Chorna, Tuthadwayadi Gulika   |
| Others         | Rasanjanam, Kalyanaka Kshara  |

Menorrhagia and intermenstrual bleeding should be treated by using *Raktapradara* (menorrhagia) *Chikitsa*.<sup>[29]</sup> *Kashaya Pradhana Dravya* can be used as *Rakta Stambhana Dravya* (haemostasis). Further, *Rakta Vardhaka* treatment is needed to correct the depletion of haemoglobin level because of menorrhagia. *Apanavata Anulomana, Vedana Nashana* (Analgesic) treatments are needed for the cases with *Kashta Rajas* (dysmenorrhea). The same *Apana Vata Anulomana* treatments can be adapted for *Maithuna Asahishnuthva* (dyspareunia) and *Kati Shula* (noncyclic pelvic pain). *Mutra Dosha* (increased urinary frequency) associated with fibroids can be managed with the help of *Mutra Shodhaka* (urine purification), *Mutra Vaha Srotas Avarodha Hara* medicines.

**Pathya-Apathya**

| Ahara Varga                 | Pathya   | Apathya                       |
|-----------------------------|--|-------------------------------|
| Shuka Dhanya (Cereal grain) | Purana Shali, Kodrava, Shyamak, Yava, Priyangu, Laja, Nivara, Koradushaka, Jirna, Prashatika, Kanguni                    | Godhum, Naveen, Dhanya, Shali |
| Shami Dhanya (Pulses)       | Mudga, Rajamasha, Kulatha, Chanaka, Masur, Adhaki, Makusthaka, Tila  | Masha                         |
| Shaka Varga (Vegetables)    | Patol, Patrashaka, Shigru, Vrutaka, Katutikta, Vastuka, Trapusha, Vartaka, Evaruka, Adraka, Mulaka, Surasa, Grajjan etc. | Kandashaka.                   |
| Phala Varga (Fruits)        | Kapittha, Jambu, Amalaki, Ela, Bibhitaki, Haritaki, Maricha, Pippali, Eranda, Karkati, Ankola, Narang, Bilvaphala        | Madhuraphala                  |
| Drava Varga                 | Honey, Takra, Ushnajala, Tila And Sarshapa Taila,  | Milk preparations             |

|             |   |   |
|-------------|---|---|
|             | Asava Arista, Surasava, Jeerana Madhya    | (Kshira, Dadhi, Sarpi) Ikshuvikara  |
| Mamsa Varga | Rohita Matsya                             | Aanupa, Audaka, Gramya Mamsa  |
| Viharaja    | Shrama, Jagarana, Nitya Bhramana, Vyavaya | Sheetal Jala Sevana Divaswapa, Avyavaya, Avyayama, Ati Asana, Sukha Shaiya Sevana |
| Manasika    | Chinta, Shoka, Krodha                     | Nitya Harsha, Achinta, Manaso Nivriti, Priya Darshan                              |

**DISCUSSION**

In the *Samprati* (pathogenesis) of *Granthi*, it is mentioned that *Mamsa* (muscle fibers), *Rakta* and *Medo Dhatu* are vitiated. Several studies have found that an association between obesity and increased incidence of uterine leiomyomas. In a prospective study from Great Britain,<sup>[5]</sup> the risk of fibroids increased approximately 21% for each 10 kg increase in body weight; similar results were obtained when the body mass index (BMI) was analysed rather than weight. In a case-control study from Thailand,<sup>[6]</sup> a 6% increase in risk was observed for each unit increase in BMI. Similarly, a large prospective study of registered nurses in the United States found an increased fibroid risk with increasing adult BMI, as well as an increased risk associated with weight gain since age 18 years.<sup>[7]</sup> A case-control study from Japan likewise reported that women with occult obesity (BMI <24.0 and body fat ≥30%) or women with upper-body fat distribution (>0.80 waist-to-hip ratio) were at significantly higher risk.<sup>[8]</sup> In a study from Boston, Massachusetts, 51% of the hysterectomies- or myomectomies-confirmed patients with leiomyomata were overweight, and 16% were severely obese.<sup>[9]</sup> Obesity is one of the risk factors for Fibroid Uterus and increased body fat (Especially abdominal visceral fat) is capable of raising the chances of Fibroid Uterus. The waist -hip ratio of

Perimenopausal women can often be measured as an indicator for screening high risk groups of Fibroid Uterus.<sup>[30]</sup>

Uterine fibroid needs clear understanding of pathogenesis, with emphasis to the status of different *Dosha*, their key *Gunas* and its interaction with *Dushya* (*Dosha*, *Dhatu*, *Mala*, *Upadhatu* etc). This disease initially following *Prakupita Kapha* in *Rasa dhatu* with *Manda*, *Guru* & *Snigdha Gunas* interact with uterine myometrium by causing increased oestrogen receptor formation/ due to *Dustaartava* lead by *Samana Vayu* dysfunction and there by leading to leiomyoma. The *Manda Guna* of *Prakupita Kapha* is responsible for its very slow growth and *Apakitva*. Only after substantial increase in size of the tumour the symptoms are produced, this is the reason behind asymptomatic fibroids. The *Vikruta Kapha* which interacts with *Sthanika Pitta* (*Pitta* which resides in the endometrium) and *Vyana Vayu* (controller of function of blood circulation in endometrial vasculature) and *Apana Vayu* (initiator of menstrual efflux) present in the endometrium and myometrium cause the menstrual irregularities. Menstrual irregularities like menorrhagia, menometrorrhagia, metrorrhagia, dysmenorrhea, pressure symptoms, infertility, abortion etc are common features of submucous fibroids. *The Chikitsa Siddhanta* which is explained for *Santarponottha Vikara*,<sup>[19]</sup> *Sthoulya Vikara*,<sup>[13,20]</sup> *Kapha-Meda Vikara*,<sup>[21]</sup> *Kaphasya Upakrama*<sup>[22]</sup>, *Granthi*,<sup>[23-28]</sup> *Arbuda*<sup>[26-28]</sup> can be included to manage this disease as *Kapha Dosha* and *Dushyas* like *Mamsa*, *Meda* are involved in all these *Vyadhi*. We are having the medical management for the fibroid uterus of size less than 5cm and >5cm size is advised for surgical management.

## CONCLUSION

The disease uterine fibroid is initiated by *kapha* causing *Mamsavaha Sroto Dushti* in *Garbhashaya* resulting in *Mamsa Vriddhi* (muscular outgrowth). The submucous fibroid and subserous fibroid are the *Upadravas* produced following the *Vata Pitta* dysfunction and *Vata* dysfunction respectively. *Kapha Prakupita Nidana* strongly initiates the pathology by altering the function of *Samana Vayu* in *Artavaaha Srotas* at *Garbhashaya*.

*Sthoulya* is the diseases which is produced due the involvement of *Prakupita Kapha* and *Meda Dhatu*, so by treating the *Dushitha Kapha* and *Meda* we can treat both *Sthoulya* and Fibroid Uterus (*Garbhashaya Granthi*).

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