



AYURVEDIC INTERVENTION IN THE MANAGEMENT OF UTERINE FIBROIDS-A CASE REPORT

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ABSTRACT

In the reproductive age group, Pregnancy is the commonest and most first possible cause to be considered for the enlargement of the body of the uterus. Other than pregnancy, retained product of conception, hematometra, pyometra, endometrial polyp, adenomyosis, benign and malignant neoplasms can be considered as other causes. Due to fibrous consistency of Leiomyomas, they are considered as benign smooth muscle neoplastic growth that typically originate from the myometrium and are also called as fibroid which can be associated with typical complaints including pain or abnormal uterine bleeding.¹

The cause of Fibroids is generally unknown. Management of uterine fibroid through surgery is available to meet urgent need of the patient, but challenges remain to establish a satisfactory conservatory medical treatment. Ayurvedic drugs have been proved useful for these manifestations. Hence, it was critically reviewed in the context of *Granthi Roga* and treatment protocol befitting the *Samprapti Vighatana of Granthi* was subjected in patient of uterine fibroid.

The Patient came with the complaint of excessive menstrual bleeding with pelvic pain and was diagnosed with uterine fibroid by ultrasonography. The case was treated with a combination of

different oral Ayurvedic formulations to alleviate symptoms and reduce the size of fibroid. Patient's condition was assessed for symptoms of uterine fibroid which was completely relieved.

Keywords: *leiomyomas, uterine fibroids, granthi, Ayurvedic interventions*

INTRODUCTION:

The leiomyoma is the commonest of all pelvic tumours, being present in 20 percent of women in the reproductive age group and increasing with age [1].

“Leio” means smooth, “Myo” means muscle and “Oma” means tumour.

Less than 0.1% of all uterine fibroids are malignant. Regardless of benign neoplastic character, uterine fibroids are responsible for significant morbidity in a large segment of the female population. The clinical effects are related to their local mass effect which results in pressure upon adjacent organs as well. As a consequence of these uterine fibroids rank as a major reason for hysterectomy accounting for approximately one-third of all hysterectomies or about 2,00,000 hysterectomies/year [2, 3]. Localized nodular swelling/growth has been referred under the name of *Granthi* that develops due to localization of morbid body humours in body tissue.

In Ayurvedic literature, Acharyas differ about classification of *granthi*. *Charaka* has classified it into six types. *Sushruta*, *Bhela* and *Madhava* etc. into five and both *Vaghabhata*s as well as *Sarngadhara* into nine. According to Ayurveda, Uterine fibroid is considered as

Garbhashyagata Granthi on the basis of location and can be correlated to *Mamsaja Granthi* as well [4].

In the modern era of busy lifestyle, intake of junk food, lack of exercise etc had led to *Agnivaishamya* and *Aama* formation. Thus, in turn Vitiated *vata* etc doshas, vitiating *mamsa*, *Rakta* and *Medas Artava* mixed with kapha resulting in *dhatwagnimandya* produces rounded, protuberant, knotty and hard swelling, Since, it is Knotty or glandular, so it is called as *granthi*, when present in *Garbhashaya*, it will result in disturbed menstrual cycle-menorrhagia, metrorrhagia, dysmenorrhea including infertility and repetitive loss of pregnancy along with infertility and other associated complications [4].

Uterine Fibroid can be correlated with the *Mamsaja Granthi* and it can be managed according to the principle of Ayurveda.

Case Description-

A 45-year-old Indian, not k/c/o Hypertension, Diabetes mellitus, Thyroid disorders, married woman consulted in the outpatient department of Stree Roga, Sri Dharmasthala Manjunatheshwara College of Ayurveda and Hospital, Hassan,

Karnataka with the following complaints for 1 year.

- Heavy menstrual bleeding during menstruation (lasting for more than a week)
- Low back ache
- Pelvic pain
- Frequent urination
- Difficulty emptying the bladder.

Menstrual History: Cycle = Irregular (20-25 days), Duration = 7-10 days, Amount = 5-6 pads/day, Clots – present, Pain – present, Smell – absent

The patient was on analgesics for pain relief as self-medication for 6 months.

She was advised to have USG to exclude any pelvic pathology as the causative factor of her gynaecological complaints.

Patient had a H/O surgical removal of endometrial polyp in August 2021.

On examination –

Appetite- Moderate

Bowel- Regular

Micturition- Frequent urination around 10 times a day

Sleep- anxious with disturbed sleep

Per abdomen – Soft, tenderness + in Right iliac and hypogastric region

Per vaginal Reveals anteverted uterus/bulky in size/free fornixes.

Per speculum examination Reveals cx healthy, mild white discharge per vagina present

DASHAVIDHA PAREEKSHA-

- **PRAKRUTI** – Kapha-Pitta
- **VIKRUTI** – Dosh- Vata kapha, Dushaya- Rasa, Rakta, Mamsa, Meda
- **SARA** – Twaka sara
- **SAMHANANA** – Madhyama
- **PRAMANA** – Madhyama
- **SATVA** – Avara
- **SATMYA** – Katu, Madhura Rasa Satmya
- **AHARASHAKTI** – **ABHYAHARANA SHAKTHI-** Madhyama
- **JARANA SHAKTHI** – Avara
- **VYAYAMA SHAKTI** – Avara
- **VAYA** – Madhyama

ASTASTHANA PAREEKSHA-

- **NADI**- Prakruta (72/min)
- **MUTRA** – Prakruta
- **MALA** – Prakruta
- **JIHWA** – Alipta
- **SHABDA** – Prakruta
- **SPARSHA** – Shlaksna
- **DRUK** – Prakruta
- **AKRITI** – Prakruta

INVESTIGATIONS-

Blood and Urine investigations done – within normal limits.

Thyroid profile- within normal limits

HIV, HbsAg, VDRL – Non-reactive

ABDOMINO-PELVIC

ULTRASONOGRAPHY:

Uterus- Bulky in size and show multiple intramural fibroids biggest measuring 4.5x3.8 cm.

ET-8mm

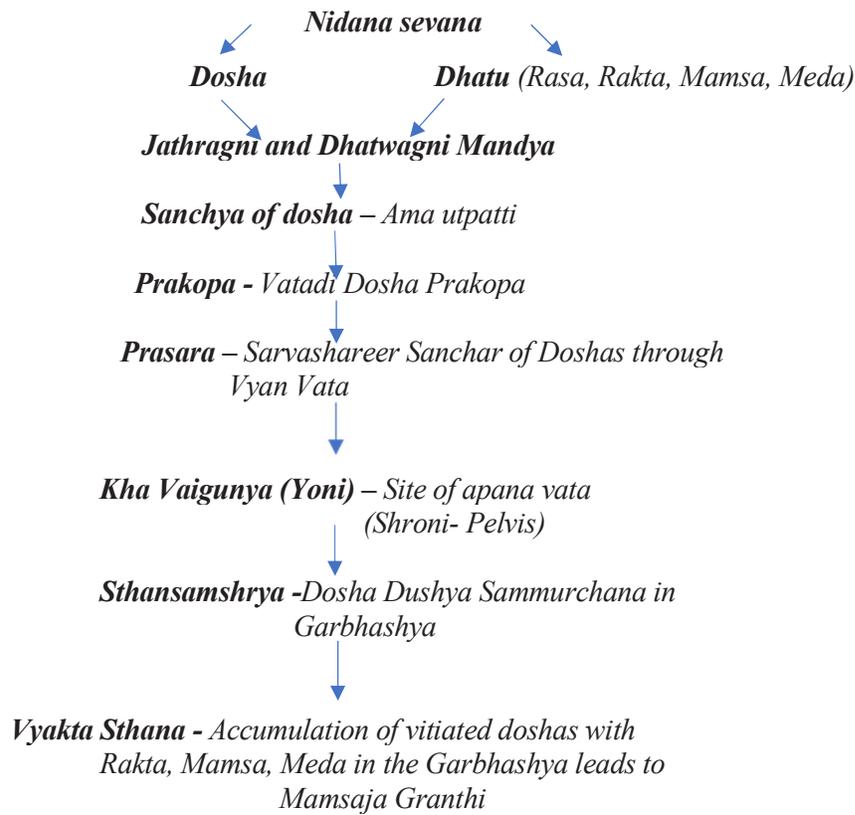
Both ovaries- Normal

No free fluid in POD

Impression – Bulky Fibroid Uterus

Diagnosis – By analysing her complaints and USG reports, she was diagnosed to have bulky fibroid uterus

Samprapti-



Samprapti Vighatana-

<i>DOSHA</i>	<i>Kapha Vata</i>
<i>DUSHYA</i>	<i>Rasa, Rakta, Mamsa</i>
<i>AGNI</i>	<i>Jataragni, Dhatawagni</i>
<i>SROTAS</i>	<i>Rasavaha, Raktavaha, Mamsavha</i>
<i>SROTO DUSTI</i>	<i>Vimargamana, Atipravritti</i>
<i>UDHBHAVA STHANA</i>	<i>Ama Pakvashaya</i>
<i>SANCHARA STHANA</i>	<i>Yoni</i>
<i>VYAKTHA STHANA</i>	<i>Garbhashaya</i>
<i>ADHISTHANA</i>	<i>Garbhashya</i>
<i>ROGA MARGA</i>	<i>Bahayaja Rogmarga</i>
<i>SADHYASADHYATHA</i>	<i>Krchrha Sadhya/ Shastra Sadhya</i>

Treatment schedule – At the beginning, patient was managed with symptomatic *Shamana Chikitsa* to reduce the bleeding.

Once the menstrual bleeding was controlled

with *Stambhana Chikitsa*, *Lekhana* and *Granthihara* medications are added as treatment for Fibroid uterus.

Timeline of case –

Date and year	Clinical events and interventions
1998	Patient had first full term normal vaginal delivery with RMLE
2000	Patient had second full term normal vaginal delivery with RMLE
2001	Tubectomy done
2020-2021	<ul style="list-style-type: none"> Gradual onset of pelvic pain and excessive menstrual bleeding Took allopathic painkillers
July 2021	Dilatation and curettage done
28 August 2021	Endometrial polypectomy was done (Histopathology report suggestive the features of hyperplastic polyp with fragments of bleeding non secretory endometrium but negative for atypia, granuloma and malignancy) on 20/8/21 in some other private hospital.
4 April 2022	<ul style="list-style-type: none"> Patient came to PTSR OPD of SDMCAH with the complaints of Irregular menstruation associated with excessive menstrual bleeding with pain USG was advice to the patient USG findings- Impression of bulky fibroid uterus and shows multiple intramural fibroids of 4.5*3.8 cm. <i>Shaman aushadh</i> to control the excessive bleeding was advised to the patient- <i>Panchavalkala choorna siddha Ksheerapaka</i> 15 ml TID before food <i>Chandrakala rasa</i> 2 BD after food <i>Bolbaddha rasa</i> 1BD after food for 20 days
30 April 2022	<i>Ashokarishta</i> 10 ml TID after food <i>Shiva Gutika</i> 1 BD after food <i>Kanchanara Guggulu</i> 2 BD after food for 2 Months Diet and lifestyle modification were advised to patient.
4 June 2022	Same line of treatment continued With <i>Pratimarsha Nasya</i> of <i>Anu taila</i>
6 august 2022	Regular follow up Gradual decrease in associated symptoms and excessive menstrual bleeding Duration of menstruation decreased
1 October 2022	After 6months of treatment patient was completely fine with complete reduction in the symptoms of excessive menstrual bleeding and pelvic pain. Patient was prescribed with- <i>Varunadi Kashaya</i> 20ml BD before food <i>Shiva Gutika</i> 1 BD after food <i>Kanchanara Guggulu</i> 2 BD after food for next 3 months

RESULT-

Patient had complete relief from symptoms and fibroid uterus.

The Findings of USG before and after treatment are-

Before treatment –

SEX: F Date: 15/02/2021

ABDOMINO-PELVIC ULTRASOUND SCAN:

Liver is normal in size & Shape, shows normal echotexture and architecture. No focal lesion seen. No intra/extra hepatic biliary dilatation seen.

Gall bladder is fairly well distended, showing normal wall & echogenicity. CBD is normal.

Both kidneys are normal in size and shows normal cortical echopattern
Corticomedullary differentiations are normal.

Spleen is normal in size and echogenicity.

Pancreas is normal in size and shows normal echopattern

Aorta, IVC, Portal and splenic vein are normal in caliber.
No retroperitoneal lymphadenopathy seen.

Bladder is normal in size & echogenicity. Wall thickness is normal
Uterus---Bulky in size and show multiple intramural fibroids measuring 4.5 x 3.8cms
ET---8mm
Both ovaries---Normal
No free fluid in POD

IMPRESSION:

BULKY FIBROID UTERUS

After Treatment –

Date: 17/12/22

ABDOMINO- PELVIC ULTRASOUND SCAN:

Liver –shows diffuse increase echogenicity suggestive of fatty liver measures 13.54cm in length
Gall bladder - normal
Pancreas- normal and shows normal echogenicity.

Spleen—Normal in size, measuring 11.06CM

Bilateral kidney are normal in size and shows normal echopattern
Corticomedullary differentiation maintained.
Right kidney – measures 10.27X2.48CM
Left kidney-measures 10.16X3.19CM

Aorta, IVC, Portal and splenic vein are normal in caliber.
No retroperitoneal lymphadenopathy seen
No mass, no free fluid in the abdomen

Urinary Bladder – well distended, shows normal wall thickness

Uterus—bulky uterus,measures 6.64x5.62CM
ET—10mm
Ovary—both ovaries normal
Right ovary-2.32X2.63CM
Left ovary-2.01X2.26CM

No free fluid in POD

IMPRESSION:

1.FATTY LIVER
2.BULKY UTERUS

SONOLOGIST

DISCUSSION –

A fibroid less than 5 cm can be managed with *Granthihara* and *Sthambaka* line of treatment orally in women waiting for menopause, as menopause may lead to atrophy of fibroid and uterus as well. The medicines used in this case are *sthambaka* and *lekhana*, thus helped her to get relief from fibroids and its presenting symptoms.

Ashokarishta- It is a popular poly herbal Ayurvedic medicine mentioned in the classical text *Bhaisajya Ratnavali* in the context of *Streeroga*. It is extensively used in the condition of *Raktapradara*, *Mandagni*, *Raktapitta*. It mainly contains medicinal plants like *Amalaki*, *Bibhitaki*, *Jeeraka*, *Haritaki*, *Shunti*, *Amra*, *Vasa*, *Chandana*, *Daruharidra*, *Dhataki*, *Kamala* and *Guda*. It contains 5–10 % of self-generated alcohol, which acts as a medium for herbal active principles. *Ashoka* contains mainly tannins, saponins, β -sitosterol and exhibits anti-oxidant, anti-inflammatory activities, hence indicated in Uterine bleeding [5]. It has both antioxidant and Hepatoprotective potentials which is essentially needed for management of menorrhagia. *Ashoka* bark contains phenol glycoside which has direct effect on uterine musculature. It stimulates both endometrium and ovarian tissue. It decreases blood flow and tones up the endometrial vascularity and thus, checks excessive bleeding [6].

Chandrakala Rasa is Herbo-mineral Ayurvedic medicine which is useful in treating *Raktapitta* or bleeding due to *Pitta Dosh*. It consists of *Kajjali*, *Tamra*, *Abharak*, *Musta*, *Dadima*, *Durva*, *Ketaki*, *Sahadevi*, *Kumari*, *Parpata*, *Ramasitalika*, *Satavari*, *Katuka*, *Guduchi*, *Satva*, *Parpata*, *Usira*, *Madhavalata*, *Swetchandan*, *Sariva* and *Draksha*. It is extensively used in condition of *Asrugdara* and it can be administered with *Ashokarishta* to increase the drug efficacy. *Chandrakala Rasa* possessing *Rakta Sthambhaka* and *Rasayana* properties and proved the efficacy in treating *Asrugdara* [7].

Shiva Gutika has *Kapha-Vata shamaka*, *Rasayana*, *Chedana* and *Bhedana* property. It consists of *Shilajatu- Sarvaroga hara*, *Tridosha Shamaka* used as *Yogavahi* as it increases efficacy of many drugs, has anti-inflammatory, analgesic, immunomodulatory and anti-oxidant activity. *Pippali*, *Maricha*, *Nagara* are best in *Agni-Mandya* and *Ama* condition [8].

Kanchanra Gugglu is a classical Ayurvedic formulation, used for *Kapha* accumulations in the tissues. As *Kapha* moves deeper within the system, it may manifest as swollen lymph nodes, cysts or growths. Powerful decongestants such as *Kanchanara*, *Triphala* and *Trikatu* are mixed with *Guggulu* to break down and eliminate hardened *Kapha*, aiding in the prevention of further accumulation. It acts as

anti-inflammatory and is very useful in extra growth or tumours [9].

Panchavalkala consists of *Vata, Udumbara, Ashwatha, Plaksha and Parisha*. These *Dravyas* has *Katu, Tikta, Kashaya rasa, Laghu Ruksha Teekshna guna, Ushna veerya, Katu Vipaka, kapha Pittaghna, Yoni doshahara* properties [10].

CONCLUSION-

In modern era, incidence rate of occurrence of uterine fibroids are 30-40 % irrespective of age, which may result in various menstrual problems such as dysmenorrhea, menorrhagia and irregularity of menstruation, by disturbing both anatomical as well as physiological integrity. Other than surgical interventions Ayurvedic Management is possible on the basis of fundamental principles. The present case study concludes that the holistic approach to ayurvedic treatment in relieving uterine fibroids and its associated symptoms, also avoids the further complications.

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