

Ayurvedic Approach for Management of Uterine Fibroid: A Case Report



Neha Rawat¹, Manjry A Barla², Rakesh Roushan³

ABSTRACT

A 31-year-old woman presented with uterine fibroid of 12.3 mm diameter in right lateral uterine wall and a cyst of 30 mm diameter in left ovary. She was intended to treat with some Ayurvedic formulations. Fibroids are the abnormal growths that develop in a woman's uterus. Sometimes these tumors are quite large and cause severe abdominal pain and heavy periods. In other cases, they cause no signs or symptoms at all. The growths are typically benign or noncancerous. The cause of fibroids is unknown. Fibroids are also called leiomyomas or myomas. Ayurvedic drugs have been proved useful for these manifestations. The case was treated for 14 months with a combination of different Ayurvedic drugs to alleviate symptoms and reduce the size of fibroid. Patient came with the complaint of excessive menstrual bleeding with pelvic pain and was diagnosed with uterine fibroid by ultrasonography (USG). This patient of uterine fibroid, diagnosed as *Granthi* was treated with *Pradarantak rasa*, *Kanchnar guggulu*, *Arogyavardhini vati*, *Kumaryasava*, *Ashokarishta*, and *Pushyanuga churna* during the treatment. Only oral Ayurvedic drugs were used during the treatment. Patient's condition was assessed for symptoms of uterine fibroid which was completely relieved. No evidence of uterine fibroid was seen in USG; therefore, it indicates the case of uterine fibroid successfully and completely cured with Ayurvedic treatment. Surgical removal of uterine fibroid or cyst is the only curative treatment in contemporary modern medical science. In Ayurveda, it may be successfully treated with oral Ayurvedic drugs and without surgical intervention.

Keywords: Ayurvedic treatment regimen, *Granthi*, Leiomyomas, Uterine fibroid.

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INTRODUCTION

Uterine fibroids are the most common benign tumors observed in the women of the reproductive age. It is also known as fibromyomas, leiomyomas, or myomas; is one such gynecological disorder which is posing a major health problem.¹ The fibroids can be of different sizes and shapes. They can be located anywhere in the uterus. Approximately 50% of women who have this condition are asymptomatic. However, heavy menstrual bleeding or menorrhagia and severe pain or cramps during periods (dysmenorrhea) is a major burden. Uterine fibroids (also known as leiomyomas or myomas) are the most common benign uterine tumors, with an estimated incidence of 20% to 40% in women during their reproductive years.^{2,3} Uterine fibroids are not usually dangerous but may lead to complications such as anemia because of heavy blood loss. Fibroids usually do not interfere with getting pregnant. However, it's possible that fibroids, especially submucosal fibroid, could cause infertility or pregnancy loss. Fibroids sometimes also raise the risk of certain pregnancy complications, for example, placental abruption, fetal growth restriction, and preterm delivery. Surgery is the only management of uterine fibroid present in modern practice to meet urgent need of the patient but challenges remain to establish a satisfactory conservatory medical treatment till date. Unavailability of satisfactory treatment in biomedicine leads to a need to search satisfactory treatment available in other medical systems. A patient of uterine fibroid was treated with Ayurvedic management of *Granthi*. Uterine leiomyomas, or fibroids, are a major cause of abnormal uterine bleeding in women. These benign tumors and their growth have been shown to be dependent on the ovarian steroid hormones, estradiol and progesterone. These steroid hormones have growth promoting effects that appear to be mediated through the local production of specific growth factors. Hysterectomy or myomectomy through surgical removal is the

^{1,3}Department of Kriya Sharir, Chaudhary Brahm Prakash Ayurved Charak Sansthan, New Delhi, India

²Directorate of AYUSH, Govt. of NCT of Delhi, New Delhi, India

Corresponding Author: Rakesh Roushan, Department of Kriya Sharir, Chaudhary Brahm Prakash Ayurved Charak Sansthan, New Delhi, India, Phone:+91 9136226421, e-mail: rakesh.roushan45@gov.in

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traditional treatment of leiomyomas in modern practice. Ayurveda interprets this disease under the name of *Granthi* that develops due to localization of morbid body humors in body tissue.⁴ In total nine types of *Granthi* have been mentioned in Ayurvedic texts, depending upon the pathological factor and the body tissue involved.^{5–7} Pathogenesis of *Granthi* is explained as when morbid *Tridoshas*, vitiate *Rakta* (blood), *Mamsa* (fleshy/muscles), and *Meda* (fat/adipose tissue) that are admixed with *Kapha* produce rounded protuberant, knotty, or glandular and hard swelling called *Granthi*.⁸ *Granthi* when present in yoni (female reproductive system)/*Garbhashaya* (uterus) will lead to disturbed menstrual cycle, menorrhagia, metrorrhagia, dysmenorrhea, etc., along with infertility. Per vaginal examination, bulky uterus is felt. Such clinical entity is diagnosed today as uterine fibroid wherein *Vata Dosha* (humor) is the predominant pathological factor. Its natural site is *Basti Pradesh* in the body. Fibroids can be related to the "*Granthi*" mentioned in Ayurvedic texts, and it can be managed according to the principle of *Samprapti Vighatana* (to break the pathogenesis). Here we present a case that was successfully treated on the line of Ayurvedic management of *Granthi*.

CASE DESCRIPTION

A 31-year-old Indian, nonsmoking, nonalcoholic married woman consulted in the outpatient department (OPD) of Maharishi Valmiki Hospital, New Delhi (under Govt. of NCT of Delhi) with a complaint of heavy menstrual bleeding (menstrual periods lasting more than a week) with pelvic pain since 5 years. It is associated with lower back pain which wakes her up at night, frequent urination with mild constipation and pain in both legs. For a long time, the patient was on self-medication and took analgesic for pain relief. The patient consulted a gynecologist of modern medicine, who advised for USG to know the cause of complaint. Ultrasound clearly revealed the finding of bulky retroverted uterus and shows about 12.3 mm diameter of myomatous fibroid in right lateral uterine wall. The left ovary shows 30 mm diameter cyst. Right ovary was normal in size and had no cyst. During the vaginal examination, retroverted uterus was felt which was bulky and enlarged in size and irregularly shaped. Patient was advised to go for surgical removal of the fibroid and cyst. The patient was not prepared to go for surgical intervention. The patient subsequently attended the Ayurvedic OPD of Maharishi Valmiki Hospital, New Delhi, on February 10, 2013. On examination, the patient was found to be anxious with disturbed sleep and had a moderate appetite with mild constipation and frequent urination. The tongue was slightly coated; the voice was clear and the skin was rough. Patient had *Madhyam* (medium) *Sara* (purest body tissue), *Samhanana* (medium body built), *Satmya* (homologation), *Satva* (mental strength), *Vyayamshakti* (least capability to carry on physical activities), *Aharshakti* and *Jaranshakti* (medium food intake and digestive power), and *Sama Pramana* (normal body proportion). *Vata* and *Kapha doshas* were mainly affected in the patient. Chest expansion showed normal respiratory sounds. Heart rate was 72 beats per minute with normal heart sounds. No organomegaly was seen. Patient came to OPD on February 10, 2013, and her last menstrual period was on February 1, 2013, with a duration 6 days. Her menstrual cycle was normal, i.e., after 28 days. She had two full-term delivery (first delivery was 10 years ago and last delivery was 5 years ago) through lower section cesarean.

Treatment Schedule

Uterine fibroid can be compared to *Granthi roga* and *Vata, Kapha* dominating *Tridoshas* are involved in the pathogenesis of the *Granthi Roga* and hence *Vata-Kaphahara* medications are required; *Dushyas* are *Rakta, Mamsa, and Meda* and hence the medications should possess *Rakta shodhaka* (blood purifier) and *Lekhana* (scrapping or dissolving) properties. At the beginning, the patient came with the problem of heavy menstrual bleeding and dysmenorrhea on February 13, 2013. The Ayurvedic management with oral drugs were advised to the patient as depicted in Table 1. Certain diet and life style modifications are also advised to the patient.

DISCUSSION

The case was treated on the line of management of *Granthi roga*. As mainly *Vata* and *Kapha Doshahara* drugs were prescribed because of predominance of *Vata* and *Kapha Dosh* in *Granthi*. *Pradarantaka Rasa, Arogyavardhini Vati, Kumaryasava, Kanchnar Guggulu, and Ashokarishta* were advised to patient for the treatment, and proper dietary habits were advised such as to avoid junk, oily, spicy, and refrigerated food. Fibers and vegetables were also advised to the patient. Uterine fibroid was completely cured as no sign of uterine

fibroid was seen in USG. There is no recurrence of any symptoms and sign until now. This is an important finding, considering the prognosis and unsatisfactory treatment in modern medicine. *Pradarantak rasa* was prescribed as two tablets thrice a day, as *Pradrantaka rasa*⁹ cures gynecological disorders and anemia. It gives strength to uterus and ovary. It gives relief of abnormal discharge from vagina; low appetite; digestive impairment; low fever; weakness; irritability; and pain in vagina, lower back, and pelvic. *Pradarantaka Rasa* is a herbomineral Ayurvedic medicine, and it is also a *Ras Aushadhi*. Mercury is known as *Rasa* in Ayurveda and medicines that are prepared using purified mercury, purified sulfur, *Bhasma, etc.*, are named as *Ras Aushadhi* (mercurial preparations). *Parad* is one ingredient of *Pradarantaka rasa*, which balances *Vata, Pitta, and Kapha* due to its powerful medicinal properties. *Ras aushadhi* (*Parad*-containing medicine) are fast acting. They nourish whole body and has tonic, aphrodisiac, rejuvenative, anti-aging, wound healer, and antimicrobial effects. The therapeutic efficacy of medicine is enhanced due to the *Yogvahi* property of *Parad*. This medicine is indicated in the treatment of gynecological disorders, *Pradar*.¹⁰ As we can compare *Atyaartav* with metrorrhagia which is a classical symptom of uterine fibroid, so along with this *Kumaryasava* was also given to the patient as it helps in controlling heavy menstrual flow and also helps in *Kashtartava*.¹¹ *Kumaryasava* mainly acts on *Vata* and has a great role in *Artava Dosh*.¹² *Vata* and *Kapha* are the main *Doshas* involved in *Granthi*. The dose was 3 teaspoonful (tsf) with equal water twice a day. Generally, poor digestion may cause malabsorption and production of more toxins, i.e., *Ama* in the body, which ultimately cause a variety of disorders. The second factor is constipation. Constipation occurs in *Vata Vriddhi* and is also a root of many diseases in the body. *Arogyavardhini Vati* works on both. Along with the above two drugs *Arogyavardhini vati* was also advised as it is *Vatakaphahara* and works dominantly on *Granthiroga*. It improves absorption and metabolic activities in the body. It also cures constipation and prevents diseases. *Arogyavardhini Vati* reduces cholesterol levels by improving liver functions. The dose was two tablets twice a day. After 10 days along with the same drugs, *Kanchnar Guggulu* was also added on February 23, 2013. *Kanchnar Guggulu* was prescribed due to its *Vata-Kaphahara* (which alleviates vitiated *Vata* and *Kapha Doshas*), *Raktashodhana* (purification of blood), *Lekhana* (bio-scraping), and *Shothahara* (anti-inflammatory) properties, which in turn shows significant effect in *Granthi*.¹³ Patient was asked about the menstrual blood flow during the follow-ups, and it was observed that menstrual flow was heavy with more than 7 days per cycle. After that 1 tsf of *Pushyanug churna* thrice a day along with *Ashokarishta* 2 tsf along with equal lukewarm water twice a day was also added to the above drugs on April 24, 2013; on next the follow-up on May 7, 2013, patient got relief of pelvic pain and the duration of menstrual bleeding was also reduced from more than 7 to 5 days. Same treatment was continued for the next 12 months with regular follow-up. *Pushyanuga churna*¹⁴ is *Raktapitta-hara*, which means it cures bleeding disorders. It is useful in treatment of all menstrual disorders such as excessive bleeding, fibroids, painful periods, mid-cycle bleeding, and heavy bleeding before menopause. Mainly indicated in *yoni Dosh* and in different types of *Pradara roga* too.¹⁵ *Ashokarishta* is *Tridoshahara* but mainly acts on *pitta* and control the menstrual irregularities. *Ashokarishta* helps in short menstrual cycle and in heavy menstrual bleeding. It is very useful in *Yoni Dosh*, i.e., *Asrgdararuja, Yoniruja, and Shwetapradara*.¹⁶ The dose of *Pushyanugchurna* was 1 tsf twice a day with lukewarm water

Table 1: Timeline of case

Date and year	Clinical events and intervention	
2003	Patient had her first delivery through LSCS	
2008	Patient had her second delivery through LSCS	
2009–2013	<ul style="list-style-type: none"> • Gradual onset of pelvic pain and excessive menstrual bleeding • Took allopathic painkillers 	
February 10, 2013	<ul style="list-style-type: none"> • Patient came to OPD with the complaints of excessive menstrual bleeding and pain • USG was advice to the patient 	
February 13, 2013	USG findings: before treatment Retroverted uterus, about 12.3 mm diameter Rt. lateral uterine wall myomatous fibroid Left ovary shows about 30 mm diameter cyst	Oral Ayurvedic drugs were advised to the patient 1. <i>Pradarantak Rasa</i> two tablets thrice a day with lukewarm water 2. <i>Arogyavardhini Vati</i> two tablets twice a day with lukewarm water 3. <i>Kumaryasava</i> 3 tsf with equal water twice a day
February 23, 2013	4. <i>Kanchnar guggulu</i> two tablets thrice a day added with the above drugs	
March 13, 2013	Follow-up—patient was getting mild relief of dysmenorrhea but menorrhagia was continued	
April 24, 2013	5. <i>Ashokarishta</i> 2 tsf with equal lukewarm water twice a day 6. <i>Pushyanug churna</i> 1 tsf with lukewarm water thrice a day Were advised with the above oral Ayurvedic drugs	
May 7, 2013	Follow-up—patient got relief of pelvic pain Duration of menstrual bleeding was also reduced	
May 24, 2013	USG advised again	Same treatment continued
June 11, 2013	USG findings: during treatment USG revealed retroverted uterus, bulky in size (72 × 48 mm) with presence of a small hypo-echoic lesion in left lateral wall without measuring, 10 × 11 mm. Both ovaries appeared normal in size (no cyst was seen)	Oral Ayurvedic drugs were advised to the patient Same treatment continued
July 17, 2013	Regular follow-up	
August 7, 2013	Regular follow-up	
September 5, 2013	Treatment continued	
October 23, 2013	<ul style="list-style-type: none"> • Gradual decrease in menstrual bleeding • Duration of menses reduced 	
November 25, 2013	Regular follow-up	
December 23, 2013	Regular follow-up	
January 3, 2014	Relieved of all the complains for which patient came to OPD	
February 4, 2014	USG advised again	Same treatment continued
April 21, 2014	USG findings: after treatment USG findings—retroverted uterus normal in size (51 × 76 × 51 mm) with normal shape and echo pattern. Endometrial echo central and regular measuring approx. (8 mm) in thickness Both ovaries appeared normal	Oral Ayurvedic drugs advised to the patient No further treatment advised
July 21, 2014	Patient was called for follow-up and was completely fine No symptoms of excessive menstrual bleeding and pelvic pain present No recurrence of uterine fibroid was found	

and *Ashokarishta* was 2 tsf twice a day with equal lukewarm water after meal. Follow-up was regularly done after every 15 days in OPD. Before treatment, the USG finding showed a uterine fibroid of 12.3 mm diameter and a cyst of 30 mm diameter was present in it. Further USG findings during treatment were that the size of uterine fibroid was reduced to 10 × 11 mm diameter and no cyst was seen. After treatment, no evidence of uterine fibroid was seen in USG (Table 1). This case study shows that only oral Ayurvedic

drugs show significant relief in uterine fibroid, whereas compared to modern medicine they have only surgical intervention for this disease and that also with the possibility of recurrence of disease. But the major limitation for Ayurvedic treatment in this case was that it took long duration to treat the disease and the symptoms also subsided gradually. A combination of above-said drugs has significant effect on uterine fibroid and ovarian cyst. As the estimated incidence of uterine fibroid is 20% to 40% in women

during their reproductive years, so it is one of the major areas of concern in India; and by using these oral Ayurvedic drugs, we can prevent surgical intervention in females.

CONCLUSION

The above-mentioned oral Ayurvedic drugs were helpful in treating the patient with uterine fibroid. This approach may be taken into consideration for further treatment and research work for uterine fibroid.

Patient Perspective

The patient was satisfied with the improvement. Her ultrasound reports show significant change with disappearance of fibroid along with ovarian cyst. Her pain was also reduced, and she was completely cured from Ayurvedic management.

Patient Consent

Written permission for publication of this case study had been obtained from the patient.

CLINICAL SIGNIFICANCE

In modern medicine, only surgical intervention, i.e., hysterectomy is the only treatment available for uterine fibroid. As many people are terrified of surgical intervention or do not want to undergo surgery. Even though surgery is the only treatment in modern science but that also do not assure recurrence of disease, as chances of recurrence of uterine fibroid are very high. In Ayurvedic science, availability of medicine is a chance for patients to avoid surgical intervention and to get cured completely without the recurrence of disease.

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हिन्दी सारांश

आयुर्वेदिक चिकित्सा पद्धति के माध्यम से गर्भाशय स्थित फाइब्रॉइड का इलाज- एकल आतुर चिकित्सा पत्र

नेहा रावत, मंजरी ए. बारला, राकेश रौशन

फाइब्रॉइड असामान्य वृद्धि होती है जो एक महिला के गर्भाशय में विकसित होती है। कभी-कभी ये ट्यूमर काफी बड़े होते हैं और गंभीर पेट दर्द और अत्यधिक मसिक स्त्रावका कारण बनते हैं। अन्य मामलों में, वे बिल्कुल कोई संकेत या लक्षण नहीं पैदा करते हैं। वृद्धि आमतौर पर सौम्य, या कैंसर रहित होती है। फाइब्रॉइड का कारण अज्ञात है। फाइब्रॉइड को लेयोओमामा या मायोमा भी कहा जाता है। इस विकार के लिए आधुनिक चिकित्सा में कोई संतोषजनक दवा उपलब्ध नहीं है। इन अभिव्यक्तियों के लिए आयुर्वेदिक दवाएं उपयोगी साबित हुई हैं। हम गर्भाशय फाइब्रॉइड का एक मामला पेश करते हैं, जिसका इलाज विभिन्न आयुर्वेदिक दवाओं के संयोजन के साथ 14 महीने के लिए किया गया था। इस मामले में आयुर्वेदिक उपचार, लक्षणों को कम करने और असामान्य वृद्धि के आकार को कम करने के लिए निर्देशित किया गया था। रोगी श्रोणि प्रदेश में दर्द के साथ अत्यधिक मासिकरक्तस्राव की शिकायत के साथ आई थी और अल्ट्रासोनोग्राफी द्वारा गर्भाशय फाइब्रॉइड का निदान किया गया था। गर्भाशय फाइब्रॉइड के इस रोगी को गंधी के रूप में विचार करने के साथ इलाज किया गया था और इलाज के दौरान प्रदरान्तक रस, कांचनर गुगुलु, अरोग्यवर्धिनी वटी, कुमार्यासव और अन्य आयुर्वेदिक औषधियों के साथ इलाज किया गया था। उपचार के दौरान केवल मौखिक आयुर्वेदिक दवाओं का उपयोग किया गया था। गर्भाशय फाइब्रॉइड के लक्षणों के लिए रोगी की स्थिति का आकलन अल्ट्रासोनोग्राफी द्वारा पुनः किया गया था जिसमें पूर्ण रूप से रोग का निवारण हुआ। इस अध्ययन से पता चलता है कि आयुर्वेदिक उपचार से गर्भाशय स्थित फाइब्रॉइड का सफलतापूर्वक इलाज किया जा सकता है।