MANAGEMENT OF UTERINE FIBROID IN THE AYURVEDIC PERSPECTIVE – A CASE STUDY

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ABSTRACT

Uterine fibroids also known as uterine leiomyomas which are benign tumors of the Uterus. Histologically this tumor is composed of smooth muscle and fibrous connective tissue. Though uterine fibroids are non-cancerous in character, they exhibit wide range of symptoms like dysmenorrhea, menorrhagia, metrorrhagia, low backache, etc. It significantly hampers the general health and quality of life in women causing great mental agony. Contemporary treatment protocols include hormonal therapy, hysterectomy, myomectomy, etc. Ayurveda classics mention various pathological conditions that have features similar to fibroids. Owing to its muscular origin with slow growth may be better compared to Granthi in Garbasaya. In the modern era of busy life, intake of junk food, lack of exercise etc. had led to Agnivaishamya and Ama formation. This in turn vitiates kapha and vata and dushyas like rasa, rakta, mamsa, meda and artava resulting in Dhatwagnimandhya leading to formation of Garbasaya granthi. These article presents a successfully managed case of 45years old female with multiple uterine fibroids by ayurvedic management The case was treated for 5months with pushyanugachurna, vaikrantabhasma, rasasindhoor, pravala pishti, guduchi sattwa combination of drugs which has given significant results.

KEYWORDS: Uterine fibroid, Ayurvedic treatment regimen, Agnivaishamya, Granthi.
INTRODUCTION
Leiomyomas/Uterine fibroid are the most common benign tumors of the uterus. Histologically, this tumor is composed of smooth muscle and fibrous connective tissue, so named as uterine leiomyoma, myoma or fibromyoma.[1] Uterine fibroids are the commonest reason for hysterectomy.[2] In the contemporary sciences pharmacological treatment hormonal therapy is used as a short-term therapy because of significant risks with long term therapy and most women avoid surgical treatments such as hysterectomy, myomectomy because of fear of surgery, financial constraint, social reason and so on.[3] As in the present case the patient was presented with abnormal uterine bleeding that is menorrhagia, excess lower abdomen pain, low back ache before onset of menstruation and during the menstruation and had general weakness and palpitations due to heavy bleeding Hb% was 6.4gms for this case Samprapti vighatana is made with our medication in order to cure her Abnormal uterine bleeding where the underlying cause is multiple uterine fibroids. For the treatment through our medications which are Kaphavatahara, Raktapittahara, Lekhana, Raktaastambaka, Deepana, Pachana, Rakta shodaka and Shothahara, Rasayna dravyas are advised.

CASE REPORT
A 45 years old female patient, Muslim by religion presented chief complaint of excess of vaginal bleeding since 10days and has prolonged bleeding during menstrual cycle since 6months she took allopathy treatment for the same and not relieved from that and advised for Hysterectomy and Blood transfusion before surgery. As she was scared of surgery and also lack of financial support, she approached our institution for further treatment. Excessive bleeding per vaginum which is dark brownish red in color with big sized clots during Menstrual cycle. Generalized weakness during Menstruation. Unable to perform daily routine activities during menstruation since 6months and she is not known case of Thyroid dysfunction, Diabetes mellitus, Hypertension.

Menstrual history – irregular, since one year, LMP – 20-02-2021.

M/H: Irregular, 10-15days/60-90days, heavy flow with big sized clots, 10pads/day for first 5-6days with pain.

Prasava vruttanta/Obstetric history
OH- P2L2A0D0, L1-Male -28yrs L2- Female 24yrs and both were FTND, H/O Tubectomy 15years ago.
General examination
Pulse - 82/min
Bp- 130/80mmhg
RR-24/min
Weight-78kg
Built- obese

Systemic examination
RS: AEBE clear
CVS: S1S2 normal
CNS: conscious well oriented
P/A: Soft.

P/V EXAMINATION
P/V Uterus Anteverted, bulky in size, Cervix: Downward, Firm, Freely mobile, No Cervical Motion Tenderness, All Fornics: Clear and non-tender.

Ashtasthana pareeksha
Nadi – 82/min
Mutra- 4-5 times a day, 1-2 times at night
Mala – once a day regular
Jihva- alipta
Shabda- prakruta
Sparsha- prakruta (Anushna sheeta)
Druk – prakruta
Akrkuti- sthoulya

Lab Investigations
12-03-2021
Hb% - 6.4gm/dl
01/03/2021

USG- Abdomen and pelvis shows uterus size measuring 136x76x91mm increased in size, Anteverted. Endometrium thickness 25mm (Thick), E/O 32X23mm and 27x21mm in the posterior wall of body of uterus, intra mural fibroids and another anterior wall subserous fibroid of 25x19mm.
Right ovary not visualized and left ovary measuring :50x25mm. E/O Simple cyst of 28x26mm

**Impression:** A V BULKY UTERUS with thick endometrium and multiple fibroids. Simple cyst in left ovary.

**Treatment Given**

1. Initially treatment given for symptomatic relief:
   - **Bolabadda Ras 500mg BD with Anupana of Jala**
   - **Godanti bhasma 3gm with honey**
   - **Pradarantka Ras 500mg BD with Anupana of Jala**

   The Above-mentioned drugs are advised for 5days as patient had heavy bleeding with big sized clots using 10pads per day previously by 3rd day after treatment used 5pads per day then by 5th day one pad and then bleeding completely stopped.

   *Pathya advised: kushmana juice with misri, takra, cow ghee +rice+moongdal as kidchi as food twice daily.*

2. **Main line of treatment given**
   - **Punarnava Mandoora 500mg BD with Anupana of Jala**
   - **Arogyavardhini vati 250mg BD with anupana of Jala**
   - **Pushyanug churnam 100gm + vaikrantha bhasma 2.5gm + rasa sindhoora 10gm + pravala pishti 10gm + guduchi sattva 10gm combination of all together making as churna and advised 1tsf BD with anupana of Madhu.**

   *Pathya advised: haridra churna empty stomach in the early morning, lasuna 2-3 along with food, one glass of takra with 3gm of haritaki churna.*

**Duration of treatment:** The total treatment duration was 5months.
OBSERVATION AND RESULT

The patient followed strict *pathya Ahara* and drug restriction strictly. Patient got reduced with all symptoms after 5 months of treatment protocol.

<table>
<thead>
<tr>
<th>Month of Treatment</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st month of treatment</td>
<td>Duration 10-15 days with dark brownish red menstrual bleeding associated with big sized clots and severe lower abdomen pain and patient unable to do daily routine activities general weakness present complete rest on bed.</td>
</tr>
<tr>
<td>2nd month of treatment</td>
<td>Duration 6-7 days with dark red menstrual bleeding associated with medium sized clots but reduced. Lower abdomen pain and back pain persists on before one day of menstruation and 1st 3 days. Daily activities with some restrictions</td>
</tr>
<tr>
<td>3rd month of treatment</td>
<td>Duration 5 days with dark red menstrual blood clots very of small size only on 1st and 2nd day of cycle lower abdomen pain and low back pain only for first two days of cycle. Can able to do daily activities without any restrictions</td>
</tr>
<tr>
<td>4th month of treatment</td>
<td>Duration 4-5 days with red menstrual blood without clots and pain abdomen and low back pain only on 1st day of cycle. Can able to do daily activities actively.</td>
</tr>
<tr>
<td>5th month of treatment</td>
<td>Duration 4-5 days with normal red menstrual blood without clots and pain can able to do daily routine activities.</td>
</tr>
</tbody>
</table>

Patient was relieved with all symptoms to maximum extent within 5 months of treatment then stopped all medication then after discontinuation for 2 months repeat scan was done in November.

No evidence of two posterior wall fibroids and no evidence of left ovarian cyst and uterus from A Very bulky uterus to normal size left ovary size normal and right ovary visualized and normal size.

<table>
<thead>
<tr>
<th>USG before Treatment</th>
<th>USG After Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>USG O1-03-2021</td>
<td>USG ON 06-11-2021</td>
</tr>
<tr>
<td>Uterus very bulky in size 136x76x91mm</td>
<td>Uterus normal size measures 98x38x34mm</td>
</tr>
<tr>
<td>Endometrium thick 25mm</td>
<td>Endometrium 6mm</td>
</tr>
<tr>
<td>Intramural fibroids in posterior wall of body of uterus size measuring 32x23mm and 27x21mm</td>
<td>NO EVIDENCE OF 2 Intramural fibroids in the posterior wall of body of uterus</td>
</tr>
<tr>
<td>Anterior wall subserous fibroid size measuring 25x19mm</td>
<td>No evidence of anterior wall subserosal fibroid</td>
</tr>
<tr>
<td>Right ovary not visualized</td>
<td>Right ovary visualized normal size</td>
</tr>
<tr>
<td>Left ovary 50x25mm E/O cyst 28x26mm</td>
<td>Left ovary normal size no evidence of cyst</td>
</tr>
<tr>
<td>Impression A VERY BULKY UTERUS with thick endometrium and multiple fibroids</td>
<td>Impression F/S/O small intramural fibroid 17x22mm</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HB BEFORE TREATMENT</th>
<th>HB AFTER TREATMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.4gms%</td>
<td>8.4gms%</td>
</tr>
</tbody>
</table>
DISCUSSION

The case was treated on the line of management of granthi roga. As mainly kapha vata dosa hara drugs were prescribed because of predominance of vata and kapha in granthi. Combination of pushyanugachurna, vaikrantabhasma, rasasindhoora, pravalpishti, guduchi sattva are advised to patient, and proper dietary habits were advised. When susceptible individuals indulge in vidahi anna, ati lavana, amla, katu sevana and anupaudaka mamsa lead to vitiation of pitta and raktaja along with vata leads to uthkrama in raktaja pramana (increase in amount of bleeding) through rajah vaha sirs leading to artava atipravrutti (menorrhagia). As patient chief complaint was heavy bleeding with big sized clots and pain in abdomen and low back ache associated with general debility. The first line of treatment principle was Rakta Sthambaka chikitsa for which Bola badda Ras was advised 500mg tablets BD with anupana of Jala. It has Madhura, Tikta, Kashaya rasa Pradhan dravyas. Laghu, snigdha gunas as predominant guna, sheeta virya, Madhura vipaka thus the selected drug by virtue of its action fully helped in controlling the bleeding. Pradarantak ras was prescribed two tablets twice a day as it cures gynecological disorders and anemia. It gives strength to uterus and ovary and gives relief of abnormal discharges from vagina. Arogyavardhini vati was advised one tablet twice a day it is vatakapha hara works predominantly in granthi roga. Reduces medhodhatu dhusti and improves liver functions. Punarnava mandoora is advised two tablets twice a day the pitta balancing property of Punarnava mandoora helps to provide aid in iron – deficiency anemia. It also has Rasayan property which helps to regulate metabolism, enhance immunity and strength, it also has diuretic and anti-inflammatory property. Helps in reducing toxins from the blood. Pushyanuga churna is Rakta pitta hara cures bleeding disorders can be used in fibroids, excessive bleeding, painful bleeding. Rasa sindhoor is a very effective in kaphaja rogas, balkshaya loss of strength, dhatu kshaya, Raktapitta, Pandu roga etc. as it is Ushna veerya helps in curing kaphajanya vikaras. It cures Rasa, Rakta, Mamsa dhatu gata vikaras. It acts as yogavahi Deepana, Pachana, Sothahara, Rasayana, Ojovardhaka, Hrdya etc. Vaikrantta bhasma is Sothahara, Tridoshagna corrects Dhatwagnivaishamya, Rasayana, Dhatu pushtikara, Medhya, Deepana, Pachana, Lekhana karma Rasayana and termed as Sarva roga nashak. Pravalpishti is pitta hara, hrdya, provides natural calcium and vitamin c supplement. Guduchi sattwa it is pittahara, anti oxidant, sothahara, haematogenic, raketasodhakaa, deepana, pachana, ojo vardhaka, useful in managing bleeding disease and improves body strength.
Counselling about greater risk of developing fibroids in people who are taking excessive
kapha Medo vardhaka Aharas like Mamsa Bhojana, junk foods, pizzas etc. Should be
avoided.\textsuperscript{6,7} The Acharyas gives emphasis to Nidana parivarjana and also elaborates the
importance of Dinacharya Ritucharya, Rajaswala charya and their role in upbringing healthy
woman hood. Thus, with ayurvedic medications and lifestyle modifications, we can assure
women to reach higher potentials of personal and professional life.

A combination of above said drugs has significant effect on uterine fibroid and ovarian cyst.

**CONCLUSION**
The above mentioned oral ayurvedic drugs were helpful in treating the patient with uterine
fibroid without and panchakarma procedure this approach may be taken into consideration for
further treatment and research work on uterine fibroid.

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