

ROLE OF AYURVEDA IN THE CONSERVATIVE MANAGEMENT OF ENDOMETRIOTIC OVARIAN CYST: A CASE STUDY

¹*Dr. Arpana Jain and ²Dr. Km Shoma Mandal

¹Assistant Professor, Department of PG and PhD Studies in Prasuti Tantra and Stree Roga, Sri Dharmasthala Manjunatheshwara College of Ayurveda, Kuthpady, Udupi, India.

²³rd Year Postgraduate Scholar, Department of PG and PhD Studies in Prasuti Tantra and Stree Roga, Sri Dharmasthala Manjunatheshwara College of Ayurveda, Kuthpady, Udupi, India.

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*Corresponding Author

Dr. Arpana Jain

Assistant Professor,

Department of PG and PhD
Studies in Prasuti Tantra and

Stree Roga, Sri

Dharmasthala

Manjunatheshwara College
of Ayurveda, Kuthpady,
Udupi, India.

ABSTRACT

Introduction: Endometriotic cysts are a significant reproductive health issue, contributing to infertility and chronic pelvic pain in nearly 10% of women worldwide. Conventional treatment, often involving a combination of medical and surgical interventions, has shown limitations in effectively managing recurrence and enhancing fertility outcomes. In *Ayurveda*, endometriosis and related conditions, such as endometriotic cysts, can be understood through the principles of Vata-Kapha imbalance and Rakta Dhatu Dushti. This study examines an Ayurvedic treatment approach aimed at addressing the underlying causes, alleviating symptoms, and enhancing reproductive health outcomes. **Methods:** A 42-year-old woman diagnosed with an endometriotic cyst and white discharge was treated following *Ayurvedic* principles. The treatment protocol included supportive ayurvedic medicines that were provided to manage pain and dysmenorrhea. Post-treatment follow-up included ultrasonography to evaluate cyst size and reproductive health. **Results:** Following regular and continuous *Ayurvedic* treatment, ultrasonography revealed

complete resolution of the endometriotic cyst and her complaints of white discharge. The patient reported significant relief from pelvic pain and dysmenorrhea. **Discussion:** The results suggest that *Ayurvedic* management protocol, including *Shodhana* through Basti and *Shamana* therapies, can effectively address both symptomatic relief and the root causes of

endometriotic cysts. Additionally, by focusing on *Apana Vata* balance, the *Ayurvedic* approach offers potential benefits in reducing the recurrence of issues and promoting natural conception. **Conclusion:** This study demonstrates the efficacy of an *Ayurvedic* approach in managing endometriotic cysts, highlighting its potential as a complementary or alternative therapy for improving reproductive health outcomes. Further research is recommended to substantiate these findings and explore broader applications of *Ayurveda* in gynecological health.

KEYWORDS: Dysmenorrhea, Endometriotic cyst, Reproductive Health, *Ayurvedic* approach.

INTRODUCTION

Endometriotic cysts, also known as ovarian endometriomas, are a common manifestation of endometriosis, affecting approximately 10% of women of reproductive age worldwide. These cysts form when endometrial-like tissue grows within the ovaries, resulting in the development of fluid-filled sacs. Endometriosis itself is a chronic gynecological condition characterized by the growth of endometrial tissue outside the uterine cavity, often causing pelvic pain, inflammation, and infertility. While conventional treatments such as hormone therapy and surgical intervention can offer symptom relief, they are frequently associated with high recurrence rates, prompting many patients to seek alternative and complementary approaches, including *Ayurveda*.

In *Ayurvedic* medicine, endometriosis and related disorders, including endometriotic cysts, are interpreted through the lens of *Vata-Kapha* imbalance and *Rakta Dhatu Dushti* (vitiation of the blood tissue). Clinical symptoms such as chronic pelvic pain, dysmenorrhea (painful menstruation), and dyspareunia (pain during intercourse) are indicative of aggravated *Vata* dosha. At the same time, the cystic, adhesive, and stagnant characteristics of endometriotic lesions are attributed to a disturbance of the *Kapha* dosha. The *Ayurvedic* concept of disease progression, known as *Kriya Kala* (the six stages of pathogenesis), outlines how accumulated doshas and metabolic waste products (*Ama*) can manifest as pathological growths within the reproductive organs, including the ovaries. *Ayurvedic* treatment strategies focus on restoring *Doshic* balance by pacifying aggravated *vata* and *kapha*, detoxifying the body through *Shodhana* therapies, and *Shodhana* of *Rakta Dhatu* to halt disease progression. This study explores the efficacy of an *Ayurvedic* treatment protocol incorporating *Shamana* (palliative)

Chikitsa in managing endometriotic cysts. The objective is to alleviate symptoms, minimize recurrence, and support maintaining the health of the reproductive system.

CASE REPORT

A female patient aged 42 years reported to the OPD of Prasuti Tantra Evum Stree Roga at SDM College of Ayurveda and Hospital, UDUPI, with complaints of painful menstruation and pain in the lower quadrant of the abdomen before and during menstruation associated with white discharge per vagina. She also brought an ultrasonography (USG) report dated 05/04/2019. She was diagnosed with an endometrial cyst (3.4 cm) in the right ovary and a left ovary cyst measuring 9.2*5.7 cm in size, adherent to the anterior and lateral wall of the uterus. She took treatment from the allopathic hospital but didn't get much relief. Then, she came to our hospital for *Ayurvedic* management.

History of Present Illness - The patient reports experiencing painful menstruation (dysmenorrhea), pain in the right lower quadrant of the abdomen, and white discharge. The abdominal pain intensifies before and during menstruation and radiates to the surrounding pelvic area, significantly affecting daily activities. Hence, she used to take medications that provided minimal relief. Despite attempts at pain relief, the symptoms persist, leading her to seek specialized care.

Past History—Nothing relevant.

Family History—No relevant information; all family members are reported to be healthy.

Table 1: Personal History.

Diet	Mixed
Bowel	Regular
Micturition	Regular
Appetite	Good
Sleep	Sound
Habits	Nil

Gynaecologic and Obstetric History

Menstrual history

Menarche -13 years

LMP- 24/1/2019

Interval – 26-28 days

Duration – 3-5 days

Amount: Day 1- 3 pads (fully soaked)

Day 2- 2 pads (fully soaked)

Day 3 – 2 pads (partially soaked)

Day 4 – 1 pad (spotting)

Dysmenorrhea - present

Lower backache – present

Leg cramps - present

Clots - Present

White discharge PV - present

Odor: present

Pelvic pain mainly in the right lower quadrant—VAS 8/10

Obstetric History - P1 L1

L1: 14-year-old male LSCS

General Physical Examination

Built – Normal

Nutritional status – Moderate

Height – 156 cm

Weight – 87 kg

Pulse rate – 72 beats /min

BP – 120/80 mmHg

Temperature – 98.6°F

Laboratory and Ultrasonography Report

On laboratory investigations,

Haemoglobin was 12.4 g/dL

Haematocrit – 39.3%

Platelet count- 280.0×10^3 / ml

TSH - 2.49

HbA1C - 5.5%

Creatinine - 0.8 mg/dl

C-reactive protein - 1.5 mg/dl

Anti CEP - negative

Rheumatoid factor - negative

The transvaginal sonography of the pelvis report dated 09/4/2019 showed

Uterus: Anteverted, normal in size, 5.7 * 3.6 cm. Normal-appearing uterus with homogeneous myometrial echoes. The endometrial cavity is clear and normal. Endometrial thickness is normal, measuring 5 mm. The left ovary cyst measures 9.2*5.7cm in size. The right ovary shows an endometriotic cyst 3.4 cm in size with low-level internal echoes seen within the cyst; the cyst is adherent to the anterior and lateral wall of the uterus.

Impression – Endometriotic Cyst

Treatment - The treatment protocol was implemented in accordance with classical Ayurvedic principles. Follow-up assessments were conducted at one-month intervals, with concurrent recommendations for diet and lifestyle modifications based on textual guidelines.

Shodhana

✓ **The Dashmoola sitz bath was advised** for the patient as she's having white discharge per vagina along with itching.

✓ **Basti – Lekhana basti**

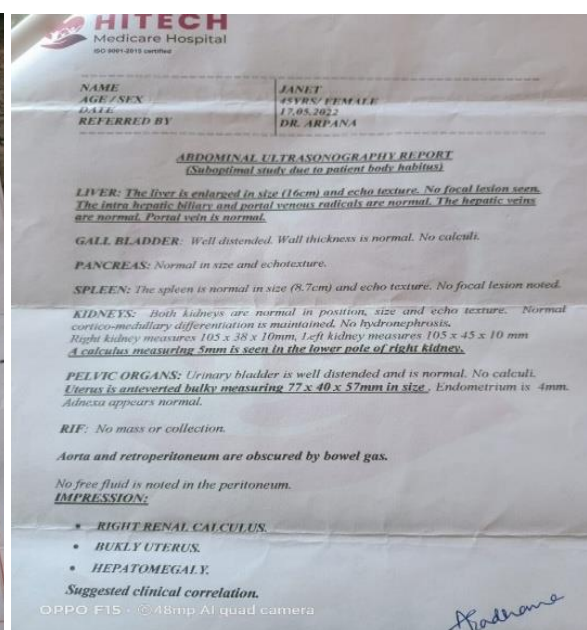
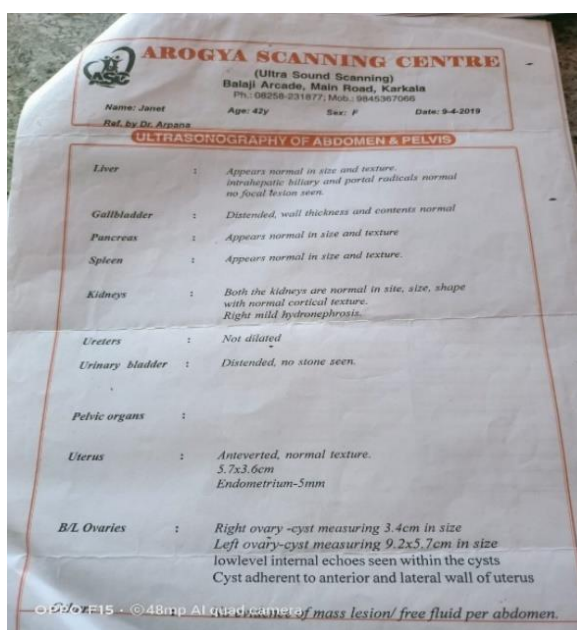
1. Shamana aushadhi

Table 2.

Month	Medicine	Dose
16/3/2019	Tablet. Chandraprabhavati DS Tablet. Kanchnar guggulu Syrup: Varunadi kashaya	250mg (BD) after meals 250 mg (BD) after meals 15 ml with 20 ml of water (BD) before meals
4/5/2019	Tablet. Chandraprabhavati DS Tablet: Kanchnar guggulu Syrup: Chitrakgranthayadi kashaya Triphala qwatha churna for wash	250mg (BD) after meals 250 mg (BD) after meals 15 ml with 20 ml of water (BD) before meals
16/11/2019	Tablet. Chandraprabhavati DS Tablet: Kanchnar guggulu Syrup: Varunadi kashaya	250mg (BD) after meals 250 mg (BD) after meals 15 ml with 20 ml of water (BD) before meals

RESULT

At the end of the treatment, the patient reported significant clinical improvement and was satisfied with the outcome. A follow-up ultrasonography (USG) conducted on 17/05/2022 revealed no evidence of the previously noted right ovarian endometriotic cyst. All associated symptoms, including pelvic pain and dysmenorrhea, were significantly reduced. The patient experienced complete symptomatic relief with *Ayurvedic* management. Notably, there has been no recurrence of any signs or symptoms to date, indicating the effectiveness and sustainability of the treatment.



DISCUSSION

In the treatment of cysts, our protocol involves *Dashmoola* sitz bath and *Basti*, along with *shaman aushadhi*, systematically targeting cyst resolution through dosha balance and channel purification. ***Varunadi Kashayam***- This formulation is recognized for its Kapha-Vata pacifying and *Lekhana* (scraping) properties. Due to the presence of ***Tikta and Katu Rasa*** along with ***Ushna Virya***, the formulation exerts a potent ***Lekhana*** (scraping) and ***Kapha-Meda hara*** action, which aids in the resolution and gradual shrinkage of cystic masses such as ovarian cysts. It helps in the resolution of cystic formations, clearing obstructions in the urinary and reproductive tracts, thereby improving overall reproductive function. ***Kanchnara Guggulu*** is a potent *Kapha-Vata hara* compound with strong *Lekhana* action. *Kanchnara Guggulu* targets abnormal tissue growths, assists in reducing glandular swellings, and promotes the resolution of cysts.

Chandraprabha Vati – चन्द्रप्रभेति विख्याता सर्वरोगप्रनाशिनि. ग्रन्थिमर्बुदं... स्त्रीनामर्तवाजरुजं. //
(शारङ्गधर संहिता मध्यमखण्ड वटकल्पना ७/४०-४९)

It is a classical Ayurvedic polyherbal-mineral formulation widely used in genitourinary disorders, including ovarian cysts, PCOS, endometrial cysts, and related conditions. Its multi-drug synergistic action targets dosha imbalance, *dhatu dusti*, and *srotorodha* (obstruction of bodily channels). Ingredients like *Shilajatu*, *Guggulu*, and *Triphala* exhibit *Lekhana guna*, which helps in **breaking down and absorbing cystic tissue** by reducing accumulated *meda* (fat) and *malas*.

Chitrakagranthayadi kashaya

चित्रकगन्धकगुग्गुलुशुण्ठयतिविषादारुनिसौवर्चलवाचाः।

हरिद्रायास्तु कटुका दावीं त्रिकटुकं विधाय क्वाथोऽयं ग्रन्थिहरः प्रदिष्टः॥

(*Sahasrayoga, Kashaya Prakarana*) *Chitrakagranthyadi Kashaya* acts through *Lekhana*, *Deepana*, *Srotoshodhana*, *Raktashodhana*, and *Kapha-Medohara* properties. It is particularly effective in disorders involving *Meda*, *Mamsa*, and *Rakta Dhatu*, especially when associated with *Vata-Kapha* vitiation and *Sanga* in *Srotas*.

Lekhana Basti: Gana & Mode of Action in Ayurveda

लेखनानि च सर्वाणि शुष्काणि कटुतीक्ष्ण च ।

उष्णानि लघूनि स्थिराण्यपतरपणानि च ॥

(अष्टाङ्गहृदयम्, चिकित्सास्थानम् १२/३२)

अरुणदत्त टीका (Sarvangasundara tika on A.H. 12/35)

"लेखनार्थाय कफमेदोहरं शरीरस्य स्थिरीकरणम् इति ।

तिक्तकटुरसयुक्तं श्यामत्रिवृत्प्रभृति द्रव्यैः सिद्धम् ।

बस्तिः स्रोतःशोधनम् अपि कुरुते ॥"

Lekhana Basti is a specific type of *Niruha Basti* (decoction enema) designed for *Lekhana* (scraping/reducing) purposes, mainly indicated in *Medoroga* (obesity), PCOS, *Granthi*, ovarian cysts, endometriotic cysts, hyperlipidemia, and other *Kapha-Meda*-dominant disorders.

Acharya Sushruta has described *Lekhana Basti* as a type of *Niruha Basti* possessing both *Shodhana* (purificatory) and *Lekhana* (scraping) properties. The term *Lekhana* denotes the action of scraping or evacuating the vitiated Doshas, especially *Kapha* and *Meda*, from the body. This therapeutic effect is achieved through *Lekhaniya Dravyas*, which remove excess *Mala* (waste products) and accumulated pathological tissues by their *Ruksha* (dry), *Tikshna* (penetrating), and *Ushna* (hot) qualities. The major constituents of *Lekhana Basti* typically include *Triphala Kwatha*, *Madhu* (honey), *Gomutra* (cow's urine), and *Yavakshara*, among others. These ingredients synergistically promote channel clearance (*Srotoshodhana*), metabolic regulation, and tissue detoxification. *Lekhana Basti* has shown remarkable clinical efficacy in the management of conditions like polycystic ovarian disease and endometriotic cysts. By pacifying the vitiated *Vata* and *Kapha* Doshas, it addresses the root cause of the condition as per Ayurvedic principles. It helps in regulating the menstrual cycle, reducing cystic mass, correcting hormonal imbalances, and facilitating weight loss, thereby offering a holistic approach to polycystic ovarian disease and endometriotic cyst management.

CONCLUSION

Endometriotic cyst, a manifestation of ectopic endometrial tissue primarily affecting the ovaries, presents a significant challenge in women's reproductive health due to its chronic nature, debilitating symptoms, and impact on fertility. While modern gynecology offers effective diagnostic tools and surgical or hormonal interventions for symptomatic relief, recurrence remains a major concern.

From the Ayurvedic perspective, the condition can be correlated with *Artava Dushti* and *Granthiroga*, primarily arising from *Vata-Pitta-Kapha* vitiation and *Rakta Dushti*. Ayurveda emphasizes correcting the underlying *doshic imbalance*, improving *Agni*, eliminating *Ama*, and restoring *Artava* and *Rakta* dhatu integrity through internal medications, Panchakarma therapies (especially *Basti*), and lifestyle regulation.

An integrative approach that combines **modern diagnostic accuracy** and **surgical management** with **Ayurvedic systemic detoxification** (*Shodhana Chikitsa*), **rejuvenation**,

and hormonal regulation offers a holistic and sustainable solution. Such synergy not only improves symptom control but also enhances the quality of life and reduces further recurrence.

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