

A CASE REPORT ON AYURVEDIC MANAGEMENT OF STANA GRANTHI W.R.T FIBROADENOMA

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ABSTRACT

Fibroadenoma^[1] is one of the most common benign diseases of the breast, accounting for about 77.6% of all benign breast conditions. Although it is known to regress spontaneously and can often be managed conservatively, the anxiety associated with the presence of a lump frequently leads patients to seek surgical intervention. Early diagnosis and appropriate treatment can help alleviate this anxiety and prevent unnecessary procedures. In Ayurveda, *Mamsaja Granthi*, described by Acharya Vaghbata^[2] with the features of *Snigdha* (unctuous), *Katina* (hard), *Niruja* (painless), and *Ghana* (solid), closely resembles fibroadenoma of the breast. *Granthi*, as explained by various Acharyas, arises due to the vitiation of *Dosha* and *Dushya*, leading to nodular or glandular swellings. Acharya Charaka equates *Granthi* with all types of small, benign glandular or nodular swellings that can occur in any part of the body. Though there is no direct reference to *Stana Granthi* (breast tumor), *Mamsaja Granthi* occurring in the breast shows

a close resemblance to fibroadenoma. In the present study, a patient with fibroadenoma was successfully treated through Ayurvedic management using Dashanga lepa and Ksheerabala taila for external application with oral intake of Carsocare which got the significant results.

KEYWORDS: Sthana Granthi, Mamsaja Granthi, Fibroadenoma.

INTRODUCTION

Granthi and *Arbuda* are pathological growths that can develop in any part of the body and resemble tumors, which arise due to excessive, abnormal, and uncontrolled cellular proliferation. Acharya Charaka^[3] explained that *Granthi* and *Arbuda* can occur in various body parts, presenting with different names, types, and clinical features based on their location. When such growths occur in the breast (*Stana*), they are termed *Stana Granthi*.

According to Chakrapani, the term *Granthi* denotes a glandular or nodular swelling, defining its specific nature. Based on this, *Stana Granthi* can be understood as a condition arising from the vitiation of *Dosha* and *Dushya*. Acharya Sushruta further explains that vitiated *Vata* and other *Doshas*, when interacting with *Mamsa*, *Rakta*, and *Medas* mixed with *Kapha*, produce rounded, protuberant, knotty, and hard swellings known as *Granthi*.^[4] These growths are generally non-fatal, though in some cases they may become malignant.

In modern times, it has been observed that Indian women develop such breast diseases more frequently and at a younger age compared to Western women. In Ayurveda, breast cancer is correlated with *Agnimandya* of *Rasa Dhatus*, which leads to defective formation of *Rasaposhaka Dhatus* and results in abnormal cellular proliferation within the breast tissue. The tumour, composed of fibrous and glandular elements, is believed to arise due to increased sensitivity of a localized breast area to oestrogen. Clinically, it presents as a painless, slowly growing, solitary lump in the breast.

From a modern medical perspective, fibroadenoma is recognized as one of the most common benign breast tumours in women under 30 years of age. Despite available conservative options such as hormonal therapy, surgical interventions like lumpectomy or mastectomy are often preferred—though they carry significant physical and psychological consequences. Therefore, a balanced and rational approach to managing fibroadenoma is essential. Modern diagnostic tools such as mammography and breast ultrasonography play a key role, where fibroadenoma appears as a well-circumscribed, smooth, round to ovoid mass. If needed, minimally invasive procedures like fine needle aspiration cytology (FNAC) or core needle biopsy are performed to confirm diagnosis and rule out malignancy.

MATERIALS AND METHODS**CASE REPORT**

A 48-years-old female patient who was apparently normal 2 years back came to OPD of Sri Kalabryaveshwara swamy ayurvedic Medical college and research centre with chief complaints of pain in B/L breast region since 1 week associated with movable lump and heaviness in B/L breast 2 years.

History of present illness - The patient was apparently healthy two years ago with no significant breast-related complaints. Gradually, over time, she noticed the development of a small, freely mobile lump in her breast, which initially was painless and caused no major discomfort. Over the past few months, she observed a slow but progressive increase in the size of the lump, associated with intermittent heaviness and discomfort.

She initially visited nearby clinics, where she was provided with symptomatic and temporary relief, but her symptoms recurred shortly after. Hence came to our OPD for further management.

Menstrual history

Underwent hysterectomy 2 yrs back

Prasava vrittanta

P2 L2 A0 D0 – both the pregnancies uneventful

P1 L1 – 20 years Male – FTND

P2 L2 – 15 years female - FTND

Vayakthika vrittanta

Diet- vegetarian

Appetite- good

Bowel- once daily, regular

Micturation- 4-5 times/day

Sleep- sound

Habits- nothing specific

Ashtasthana Pariksha

Nadi-72/min

Shabda- prakruta

Mala-Regular,once daily
Sparsha-prakruta
Mutra-Regular, 4-5 times/day
Drik- prakruta
Jivha-alipta
Akriti-Madhyama
Height – 145cm
Weight - 55Kg
BMI – 21kg/m²
BP -110/70 mmHg

Dashavidha Pareeksha

Prakruti: Pitta kapha
Vikruti: Kapha vata
Dosha: kapha Pradhana Tridoshas
Dushya: Rakta Mamsa
Desha: Sadharana
Bala: Madyama
Sara: Madyama
Samhanana: Madyama
Pramana: Madyama
Satmya: Madyama
Satva: Madyama
Ahara shakti: Madyama
Jarana shakti: Madyama
Vyayama shakti: Avara
Vaya: Madyama

Systemic Examination

1. Central Nervous System

Patient is conscious
Well oriented to time, place and person

2. Cardio Vascular System

Inspection: No distended vessels over neck or chest

Palpation: Apex beat palpable at 5th intercostal space

Percussion: Cardiac dullness present on left side

Auscultation: S1 S2 heard no added sounds

3. Respiratory system

Inspection Shape of chest: Bilaterally Symmetrical

Movement symmetrical RR 18 cycles/min

Palpation

Trachea: Centrally placed. Percussion:

Resonant over the lung field except card

4. GIT

P/A examination revealed soft and nontender

No organomegaly noted

Local Examination

Breast examination

Examination	Right breast	Left breast
Inspection	symmetrical Nipple – normal, no discharge Skin – normal, localized Redness was present in upper quadrant	symmetrical Nipple – normal, no discharge Skin – normal, localized Redness was present in upper quadrant
Palpation	Tenderness – present Lump noted in upper quadrant	Tenderness – present Lump noted in upper quadrant

Diagnostic criteria - Patient with classical signs and symptoms of fibroadenoma with mammography reports.

Investigation - Breast examination and mammography.

TREATMENT

The patient was treated on OPD basis

- DASHANGA LEPA^[5] - E/A *15DAYS
- CARSOCARE-1-0-1 (A/F)*15DAYS
- KSHEERABALA TAILA^[6] E/A*15DAYS

BEFORE TREATMENT (B/L Breast)	AFTER TREATMENT (B/L Breast)
INSPECTION- SYMMETRICAL	INSPECTION- SYMMETRICAL
NIPPLE -NORMAL,NO DISCHARGE SKIN-NORMAL,LOCALISED REDNESS WAS PRESENT IN UPPER QUADRANT OF B/L BREAST	NIPPEL-NORMAL, NO DISCHARGE SKIN -NORMAL
PALPATION- TENDERNESS-PRESENT LUMP- AVERAGE LUMP NOTED IN UPPER QUADRANT OF B/L BREAST	PALPATION- TENDERNESS-ABSENT LUMP- LUMP SIZE REDUCED in Upper QUADRANT OF B/L BREAST

Mammography

before treatment-3/10/2023

A well defined oval density lesion in right upper outer quadrant with coarse of calcifications. classified fibroadenoma
birads-2

after treatment-6/04/2024

no evidence of solid /cystic lesion in bilateral breast



DEPARTMENT OF RADIO DIAGNOSIS

Name: Shashi Kalu.
Age / Sex: 46y / F

Date: 03/10/2023
IP/OP: 5004

BILATERAL MAMMOGRAPHY

RIGHT BREAST:

- A well defined oval ^{IR}coarse density mass & whl. In right upper quadrant measuring 01x17 mm. There are multiple coarse calcifications whrl. within.
- Breast composition - Type B, fibroglandular density.
- No evidence of focal or global asymmetry.

LEFT BREAST:

Type B breast parenchyma
No evidence of any oval opaque masses.
No evidence of focal or global asymmetry.
No evidence of any calcifications P.T.O.

Before treatment – 3/10/2023

IMPRESSION

A well-circumscribed oval equal density lesion
In right upper outer quadrant with
Coarse Calcifications - Calcofibroadenoma
- BIRADS-2.



Dr. Sophia
Professor.

Dr. Ayesha.
Dr. Neesum.

After treatment – 20/07/2024

NAME : MRS. SHASHIKALA
AGE : 48 YRS
REF BY: DR.SOWMYA.G

DATE : 20.7.2024
ID NO : 1930
BILL.NO: 36054

SONOMAMMOGRAM OF BOTH BREASTS

No solid or cystic mass lesion was imaged in the breasts.

No evidence of lymph nodes in the axilla.

Examination of both breasts revealed normal echomorphology.

IMPRESSION:

- NORMAL SONO MAMMOGRAM

BIRADS CLASSIFICATIONS:

1. NEGATIVE
2. BENIGN
3. PROBABLY BENIGN
4. SUSPICIOUS OF MALIGNANCY
5. HIGHLY SUSPICIOUS OF MALIGNANCY
6. KNOWN BIOPSY WITH PROVEN MALIGNANCY.

20/07/24
DR. P.SRINIVAS

DISCUSSION

The health of a nation largely depends on the health of its women, as a healthy and content woman forms the foundation of a prosperous society. Among various conditions affecting women, *Stana Granthi* (fibroadenoma of the breast) is a common disorder that, though benign, significantly impacts daily life and wellbeing. It is estimated that about 30% of

women experience benign breast tumours at some stage, highlighting the need for timely attention and effective management.

According to Ayurveda, the pathogenesis (*Samprapti*) of *Granthi* occurs when the morbid *Tridoshas* vitiate *Rakta*, *Mamsa*, and *Meda*—especially when mixed with *Kapha*—resulting in rounded, hard, glandular swellings. The *Etiopathogenesis*, *Lakshanas*, and *Chikitsa* of *Stana Granthi* are similar to *Granthi* occurring in other body parts. Based on tissue involvement and doshic predominance, *Stana Granthi* can be compared to *Mamsaja Granthi*. As *Vata* and *Kapha* are primarily vitiated, *Vata-Kaphahara* medicines are indicated, along with *Raktashodhaka*, *Lekhana*, *Bhedana*, *Deepana*, and *Pachana* drugs to correct *Dushyas* (*Rakta*, *Mamsa*, and *Meda*).

In *Shrangadhara Samhita* (Uttara Khanda, 11th chapter), *Dashanga Lepa* has been described by various Acharyas in the context of *Vrana Shotha* and *Vrana Chikitsa*. This formulation consists of ten potent herbal ingredients such as shirisha, yashti, Chandana, nata, ela, jatamamsi, kushta, haridra, daruharidra, hribera known for their *antibacterial*, *antifungal*, *antimicrobial*, and *antioxidant* properties. The application of *Dashanga Lepa* helps reduce breast tenderness and inflammation, making it highly effective in subsiding inflammatory conditions associated with *Stana Granthi*.

The capsule carsocare with the combination of Punarnava, Sahanjana, Varuna, Mulethi, Giloy and Vasa along with Tamra Bhasma, Shuddha Bhallataka, Ras Sindoor, Abhrak, Suvarna, Panna and Hirak Bhasma acts effectively in *Stana Granthi* by targeting Kapha-Medo dushti. Their collective *Tikta-Kashaya rasa*, *Laghu-Ruksha-Tikshna guna* and predominantly *Ushna virya* produce strong *Lekhana*, *Shothahara* and *Granthi-vilayana* effects, helping to reduce fibrotic breast lumps. *Rasāushadhi* like Tamra Bhasma, Bhallataka, Ras Sindoor and Hirak Bhasma provide deeper penetration and enhance the action through *Yogavahitva*, while Giloy, Mulethi, Abhrak and Suvarna Bhasma act as *Rasayana*, supporting healthy tissue and preventing recurrence *Ksheerabala* with Bala, *Ksheera*, and *Tila Taila*—provide *Snigdha*, *Mridu*, and *Balya* effects that soften the tissue, reduce pain, and improve local circulation. The *Vata-shamana*, *Shothahara* (anti-inflammatory), and *Vedanasthapana* (analgesic) actions help relieve glandular discomfort, reduce stiffness, and support healthy tissue metabolism. By enhancing microcirculation and reducing local *Vata-Kapha* stagnation, *Ksheerabala Taila* supports resolution of fibrotic changes and improves breast tissue health in *Stana Granthi*.

CONCLUSION

Stana Granthi (fibroadenoma) is a common benign breast condition seen in many women and affects overall wellbeing. Ayurveda attributes it to vitiated Kapha along with Rakta, Mamsa, and Meda, producing firm, rounded swellings similar to Mamsaja Granthi. With predominant Vata-Kapha involvement, management includes Vata-Kaphahara, Raktashodhaka, Lekhana, Deepana, and Bhedana therapies. Various cysts and benign swellings can be understood under the broader concept of Granthi, and both require accurate diagnosis and combined conservative or surgical treatment to prevent complications and recurrence.

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