

A CASE STUDY OF UTERINE FIBROID I.E. *GARBHASHYAGATA GRANTHI*

Piyush Gupta^{*1}, Julee Mathur², Saurabh Kumar³ and Satyam Sonkar⁴

¹Assistant Prof., Department of Agad Tantra Evam Vyavhar Ayurveda, Amrapali Ayu. Med.

College and Hospital, Bangarmau, Unnao, U.P.

²Ayush Medical Officer, Bilgram, Hardoi, Uttar Pradesh.

³Assistant Prof., Department of Rog Nidan Evam Vikriti Vigyana, Amrapali Ayu. Med.

College and Hospital, Bangarmau, Unnao, U.P.

⁴Assistant Prof., Department of Rasa Shastra Evam Bheshajya Kalpna, Amrapali Ayu. Med.

College and Hospital, Bangarmau, Unnao, U.P.

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***Corresponding Author**

Piyush Gupta

Assistant Prof., Department
of Agad Tantra Evam
Vyavhar Ayurveda,
Amrapali Ayu. Med.
College and Hospital,
Bangarmau, Unnao, U.P.

ABSTRACT

Uterine fibroid is a non malignant benign tumor of muscular origin, which affects more than 50% of females in reproductive age. Common symptoms of uterine fibroid include painful and heavy menstrual bleeding with increased duration, lower abdominal cramps, polyurea/dysurea, constipation, lower back pain etc. In modern treatment of choice for uterine fibroid is surgical removal. In *ayurveda* uterine fibroid is known as *garbhashyagata granthi* and it is *aushadhi sadhya*. Present case study is of a female with uterine fibroid (*garbhashyagata granthi*) and treated at OPD level with *kanchanara guggula*, *kanchanara kashaya*, *chandraprabha vati*, *chitrikadi vati*, syp. Gynae plux and a combination of *pradar churna* & *nagakeshar churna*. This is present under the headings of case study, material method, selection of drugs, result and discussion.

KEYWORDS: Uterine fibroid, *garbhashyagata granthi*, *ayurveda*, *kanchanara guggula*, case study.

INTRODUCTION

Fibroids are benign tumors of muscular origin that grow in the wall of the uterus (womb). Fibroids are almost always not cancerous that is benign in nature but <0.1% of uterine

fibroids may be malignant.^[1] Uterine fibroids are also known as leiomyomas, fibromyomas, or myomas. Uterine fibroid is common in more than 50% of the woman by age of 50 years.^[2] There is not any exact cause of fibroids but hormones and genes may be common causes.^[3] Uterine fibroid may grow on myometrium (muscle wall of the uterus), Submucosa (under the surface of uterine lining) or Subserosa (under the outside of uterus lining).^[4] Common symptoms present as painful and heavy menstrual bleeding, frequent menstrual periods with increased duration, pain due to pressure in pelvic, polyuria/dysuria, constipation, lower abdominal bump, pain during sex and pain in lower abdominal area or in lower back region.^[5] Surgery is a common practice for removal of uterine fibroid. Uterine fibroids may leads to the surgical removal of uterus too.^[6] There are nine type of “*Granthi*” described in Ayurvedic text, Garbhashayagata granthi also falls under this category. Aharya Shusuta describe Granthi as vatakhodbhava and mansha, rakta & medha dhutu sandhushya.^[7]

CASE STUDY

This is a case of 30 year old female, comes in OPD level ultrasonography of lower abdomen. She was early detected for uterine fibroid. USG of lower abdomen suggesting A hypoechoic SOL 7.4cm ×7.4 cm seen at fundus projecting outwards toward left side, subserous fibroid/ left T.O. mass. Patient was on modern medication and suggested for surgical removal of fibroid. Patient is nulliparous so that she and her family did not want any surgical procedure.



MATERIAL AND METHODS

On 20/12/2023, at OPD level patients treatment was started on the basis of signs, symptoms, case history and USG provided as Primary investigation report. A combination of Ayurvedic Regime is provided for 2 months and said her to visit OPD at interval of 15 days for regular monitoring of sign and symptoms. Patient was told for USG of lower abdomen after 2 month of treatment.

Selection of drugs

Garbhashayagata granthi is a *vata-kapha* dominant disease which involves *Mansa*, *Medha* and *Rakta* as *dushya*. The *srotodushti* involves in Uterine fibroid (*Garbhashayagata granthi*) is *Sanga*, *Vimargagamana* and *atipravatti*. So that according to *Dosha*, *dushya* and *Srotodushti*, the Ayurvedic regime must have *Vatanulomaka*, *Vata-kaphahara*, *Deepan*, *amapachana*, *raktashodhaka*, *lekhana* and *shothahara* properties.

According to Sign symptoms and *samprapti vighatan* following regime were given

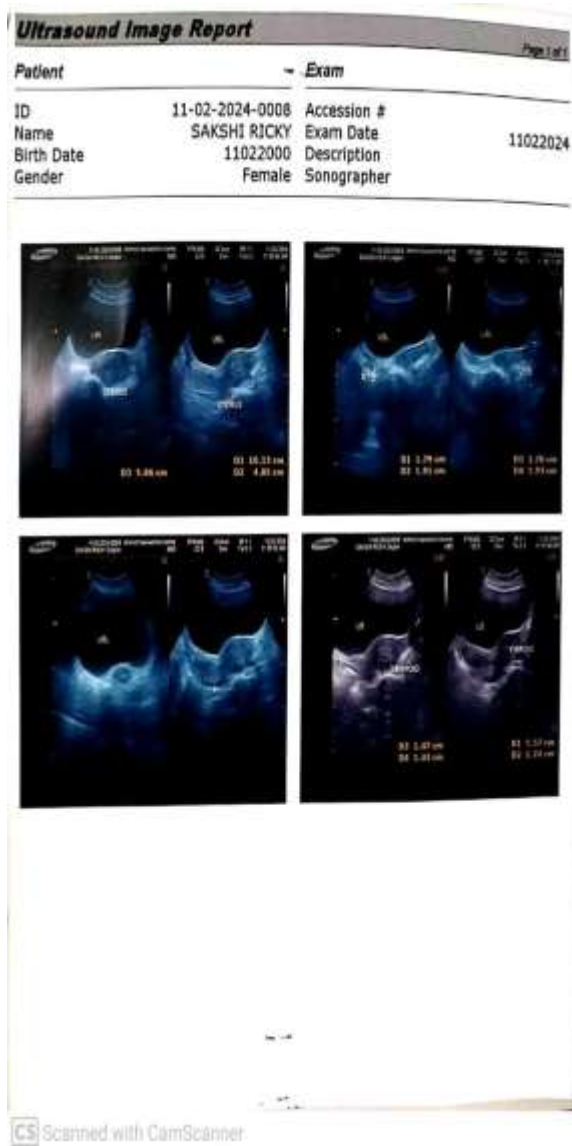
1. Tab. *Kanchanara guggula*- 2 Tab. BD with *Kanchanara kashaya* annupana in dose of 3 tsf dissolved in half cup of water.
2. *Chandraprabha vati*- 2 tab. BD with *jal annupana*.
3. *Chtrikadi vati*- 2 tab. BD with *jal annupana* in middle of the meal.
4. Syp. *Gynae plux*- 4 tsf BD dissolved in half cup of water.
5. Combination of *Pradar churna* and *nagakeshara churna* in equal quantity in dose of 4 gram BD with honey *annupana*.

RESULT

On the basis of signs, symptoms, case history and USG provided as Primary investigation report. A combination of Ayurvedic Regime is provided for 2 months and said her to visit OPD at intervals of 15 days for regular monitoring of sign and symptoms. Patient was also advised for USG of lower abdomen after 2 month of treatment.

On 16/02/2024, patient came in OPD with the new USG report of date 11/02/2024. USG of lower abdomen suggesting Uterus is anteverted with enlarge in size measurement. 101×48×58 mm with two small hypo echoic lesion seen in posterior and anterior wall of myometrium measuring about 15×17 mm and 14×14 mm in size respectively.

Patient was suggested to continue treatment for 2 months and advised for USG of lower abdomen after 2 months.



On 26/04/2024, patient came in OPD with the new USG report of date 24/04/2024. USG of lower abdomen suggesting uterus is anteverted with enlarge size measuring (94 × 43 × 56) mm. myometrial and endometrial echoes are normal. No obvious fluid collection seen with in endometrial canal. No focal mass lesion seen. Cervix appears normal.



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Patient Name:- Sex:- Female Age:- 35 Years
 Part Scanned:- Whole Abdomen Date:- 24-Apr-24
 Ref. By :- Dr. Piyush Gupta.

- LIVER:-** Liver is normal in size (121 mm) with normal shape & echogenicity. Biliary radicals are not dilated. No obvious focal lesion. Portal & hepatic veins are normal in caliber.
- GALL BLADDER:-** It is normal in size and lumen is anechoic. No mass or calculi seen. Wall is normal in thickness. No peri-cholecystic fluid seen. C.B.D. is normal in size at portal. No obstructive lesion is seen.
- PANCREAS:-** It is normal in size and contour. Parenchyma shows normal echo texture. No pancreatic duct dilatation is seen. No peri-pancreatic fluid collection seen.
- SPLEEN:-** It is normal in size (87 mm), shape & position. Parenchyma shows normal echo texture. Splenic veins are not dilated.
- RIGHT KIDNEY:-** RK-(95x36) mm
Right kidney is normal in size, shape, position, Cortical echoes are normal. Cortico-medullary differentiation is maintained. Pelvicalyceal systems are not dilated. No obvious calculus/mass/cyst seen.
- LEFT KIDNEY:-** LK-(91x36) mm
Left kidney is normal in size, site, shape, position, Cortical echoes are normal. Cortico-medullary differentiation is maintained. Pelvicalyceal systems are not dilated. No obvious calculus/mass/cyst seen.
- URINARY BLADDER:-** It is well distended with normal contour. Wall appears regular. No evidence of any calculus/mass lesion is seen.

P.T.O.

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- UTERUS:-** It is anteverted with enlarge in size measuring (94x43x56) mm. Myometrial & endometrial echos are normal. Endometrial stripe is normal. No obvious fluid collection seen with in endometrial canal. No focal mass lesion seen. Cervix appears normal.
- BOTH URETERS:-** Both ureters are not dilated.
- BOTH OVARIES:-** Both ovaries are normal in size, shape and echo texture.
- No fluid seen in POD.
- No retroperitoneal lymphadenopathy.
- No bowel mass
- OTHER:-** Dilated bowel loops are seen with lot of bowel gases seen in the abdomen...Suggestive of gases abdomen. No area of abnormal wall thickening/inflammation is noted.
- No retroperitoneal adenopathy/ascites seen.

IMPRESSION:-

- Bulky uterus.
- Gases abdomen.

RADIOLOGIST
 Dr. MISHRA, M.B.B.S., M.D.

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DISCUSSION

In present case study, a female aged 30 year was presented with USG investigation having uterine fibroid measuring 7.5 × 7.5 cm at fundus region of uterus. She was nulliparous so that she and her family did not want to operate as suggested by an allopathic doctor. As a proven fact *kanchanar* is the most effective drug against *granthi roga*. According to *ayurveda* uterine fibroid is considered as *garbhasayagata granthi*. The regimes given to the patient have *vatanulomaka*, *vatakaphahara*, *deepana*, *amapachana*, *raktashodhaka*, *lekhana* and *sothahara* properties. *Granthi* is mainly made by *vata* and *kapha dosha* but in case of uterine fibroid *rakta* and *ama dosha* is also involved. So that the regimes given to the patient acts on *ama dosha* due to its *deepan* and *amapachana guna*, acts on *rakta dosa* due to *raktashodhaka* and *sothahara* properties and acts on *vata kapha* due to *vatanulomaka*, *vatakakhahara*, *lekhana* & *sothahara* properties. Regular intervention of drugs and timely investigation by USG shows remarkable decrease in uterine fibroid. This is a mile stone in treatment of uterine fibroid where patient did not want to operate.

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