

WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 8.453

Volume 14, Issue 13, 1112-1118.

Case Study

ISSN 2277-7105

SUCCESSFUL AYURVEDIC MANAGEMENT FOR HAEMORRHAGIC CYST: A CASE-REPORT

Dr. Shridevi Reddi^{1*} and Dr. Aishwarya Sajjan²

^{1*}Associate Professor, Dept. of Prasuti Tantra Evam Stri Roga, Sri. Kalabhyraveshwara Swamy Ayurvedic Medical College, Hospital and Research Center, Bangalore, Karnataka, India.

²Second Year Post Graduate Scholar, Dept. of Prasuti Tantra Evam Stri Roga, Sri.

Kalabhyraveshwara Swamy Ayurvedic Medical College, Hospital and Research Center,

Bangalore, Karnataka, India.

Article Received on 13 May 2025,

Revised on 02 June 2025, Accepted on 22 June 2025,

DOI: 10.20959/wjpr202513-37350



*Corresponding Author Dr. Shridevi Reddi

Associate Professor, Dept. of Prasuti Tantra Evam Stri Roga, Sri.

Kalabhyraveshwara Swamy Ayurvedic Medical College, Hospital and Research Center, Bangalore,

Karnataka, India.

ABSTRACT

Ovarian cysts are fluid-filled sacs that develop within the ovaries, often without symptoms. A haemorrhagic ovarian cyst, which involves internal bleeding, commonly arises from the ovulatory process. Cysts larger than 5 cm are considered significant, and in rare cases, rupture may cause internal bleeding, requiring surgical intervention. These cysts are frequently observed in routine gynecological practice and often resolve without treatment. Hormonal imbalances influenced by the hypothalamic-pituitary-ovarian (HPO) axis, along with lifestyle and dietary factors, can contribute to cyst development. This article presents a case of a 34-year-old woman diagnosed with a left-sided haemorrhagic ovarian cyst successfully managed through Ayurvedic treatment. The approach emphasized holistic management by addressing the root cause and preventing recurrence. The treatment included Ayurvedic formulations such as Agnitundi Vati, Shivagutika, Varunadi Kashaya, Kanchanara Guggulu, and Kulattadi Kashaya. provided noticeable interventions symptomatic particularly in relation to menstrual discomfort. The case is evaluated

using Ayurvedic principles, drawing correlations with conditions like Yonivyapad, Granthi, and Arbuda.

www.wjpr.net Vol 14, Issue 13, 2025. ISO 9001: 2015 Certified Journal 1112

World Journal of Pharmaceutical Research

Reddi et al.

KEYWORDS: Ayurveda, Shivagutika, Varunadi Kashaya, Arbuda, Granthi, Cyst.

Funding: Nil.

Conflict of Interest: None.

Ethical Approval: Not required.

Short title: Ayurvedic approach in treating heamorrhagic cyst.

CASE REPORT

A 34 years old married female patient visited OPD of Prasooti Tantra and Stree Roga at sri kalabyaraveshwara swamy ayurvedic medical college hospital and research center Vijayanagar bengluru. On 22/01/2025 with complaints of lower abdominal pain and scanty menstrual bleeding during menstruation with bleeding period of ½ day since 1 year. Patient's personal history was mixed diet, no any comorbidities. with Obstretic history of P2L2 and both were delivered by LSCS and has underwent B/L Tubectomy. USG report shows left ovarian heamorrhagic cyst.

Past history-Not a K/C/O DM, HTN, Thyroid dysfunction, asthma, epilepsy etc

Occupational history-Home maker

Family history-No similar complaints in family

Menstrual history

Nature: regular

Number of days bleeding: 1/2 day

LMP:17/1/2025

Colour: Bright red colour

Amount of Bleeding:scanty

Clots: absent

Dysmenorrhoea: Present

EXAMINATION

General Examination

Built: Moderate

Nourishment: Moderate

Pulse: 78/min.

BP: 120/70mmhg

Temperature: 97.2F

www.wjpr.net | Vol 14, Issue 13, 2025. | ISO 9001: 2015 Certified Journal | 1113

Respiratory Rate: 24 Cycles/min

Height: 148cm Weight: 54kg BMI:24.7kg/m²

Tongue: Uncoated

Pallor/Icterus/Cyanosis/Clubbing/Edema/Lymphadenopathy: Absent.

Ashtasthana Pareeksha

Nadi: 76/min

Mootra: 4-5 times/day Mala: regular, 1/day

Jihwa: Alipta

Shabdha: Prakrutha Sparsha: Prakrutha Drik: Prakrutha

Akruthi: Madyama.

Dashavidha Pareeksha

Prakruti: Vata Pitta Vikruti: Kapha vata

Dosha: Pitta 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: Madyama

Vaya: Madyama

<u>www.wjpr.net</u> | Vol 14, Issue 13, 2025. | ISO 9001: 2015 Certified Journal | 1114

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

GYANECOLOGICAL EXAMINATION

PELVIC EXAMINATION

Clitoris: Normal

Labia majora Swelling: Absent

Pain: Absent

Redness: Absent

Discharge: Absent

Palpation: Soft, non - tender

PER SPECULUM EXAMINATION AND PER VAGINAL EXAMINATION

P/S examination- Cervix healthy, multiparous OS, no erosion

P/V examination- Uterus normal in size and position, antiverted and antiflexed,

Cervix normal consistency, texture and fornices are free.

www.wjpr.net | Vol 14, Issue 13, 2025. | ISO 9001: 2015 Certified Journal | 1115

Breast Examination

Tenderness: Absent

Absent Lump: Absent

Colour of Areola: Normal Nipple discharge: Absent

Investigations

- 1. Hb 10 gm/dl
- 2. T3, T4, TSH Normal values
- 3. RBS 96 mg/dl
- 4. USG Left ovarian heamorrhagic cyst

INTERVENTION

Agnitundi vati 2-2-2 (A/F) days

Kanchanara Guggulu 2-2-2 A/F

ShivaGutika 2-2-2(A/F)

Varunadi kashaya 2tsp-2tsp-2tsp with 4tsp water

Kulattadi Kashaya 2tsp-2tsp-2tsp BF all for 15 days

DISCUSSION

In present era, the incidence of ovarian cysts has markedly increased among young girls and women of reproductive age. This rise is largely attributed to lifestyle changes, hormonal imbalances, dietary patterns, and sedentary habits. Ovarian cysts have emerged as a significant gynecological concern, often presenting with clinical symptoms such as dysmenorrhea, abdominal pain, menstrual irregularities, If not treated properly, these conditions can contribute to a growing public health issue—infertility, which is becoming increasingly prevalent nowadays.

In Ayurveda, a hemorrhagic cyst^[1] is compared to Raktaja Granthi. The term Granthi refers to a cyst or swelling, and many types are mentioned in Ayurvedic texts. These are usually considered benign in nature. Raktaja Granthi^[2] is a type of Granthi that has a vascular origin. The word Rakta means blood or blood vessels, and Granthi^[3] means a cyst or lump.

According to Sushruta Samhita, Bhaishajya Ratnavali, and Sharngadhara Samhita, Kanchanara Guggulu^[4] is primarily indicated in conditions such as Gulma, Apachi, Granthi,

and Vrana. Due to its Lekhaniya guna and anti-inflammatory action, it helps in reducing the size of cysts and arresting their further growth.

As per Ashtanga Hridaya and Sushruta Samhita, Varanadi Kashaya^[5] possesses Lekhaniya and Sthoulyahara (anti-obesity) properties. Its antioxidant and anti-lipase activity also contribute to inhibiting the progression of cystic formations.

Kulathadi Kashaya primarily acts on Vata dosha, thereby helping in controlling the further growth of cysts. Additionally, Agnitundi Vati^[6] acts as Pitta dosha hara and is beneficial in correcting hormonal imbalances.

CONCLUSION

The treatment of ovarian cysts with Ayurveda, especially when compared to Raktaja Granthi, shows good results. Ayurvedic treatment which is mainly corrects the doshas, dhatu and upadhatus all those medicines will corrects dhatwagni which intern corrects the hormonal inmabalance in the body which will helps to correct the cyst as well purifying the blood (rakta shodhana), and reducing the swelling (granthi-hara) provide a natural and personalized way of healing. This case shows that Ayurveda can help manage gynecological problems effectively, It also proves that ancient Ayurvedic principles are still useful in today's medical practice.

REFERENCES

- 1. D.C.Dutta edited by Hirlal Konar, Textbook Of Gynecology Enlarged and Revised Reprint of 6thEdition, Jaypee Brothers Medical Publishers, New Delhi, Pp-686, P-289.
- 2. Pt.Hari Sadasiva Sastri, Granthi Arbuda Shlipada Apachi Nadi Vijnaniyam, Astanga Hrudya with Sarvangasundara of Arunadutta and Ayurveda Rasayana of Hemadri, Varanasi, Choukambha Sanskrit Sansthan, 2022; Reprint. Pp-956, P-881.
- 3. Acharya Yadavji Trikamji, Granty Apachi Arbuda Galaganda Nidana, Sushruta Samhita, with Nibanda sangraha commentary by Dalhana, Varanasi, Choukhamba Sanskrit Sansthan, 2022; Reprint. Pp-824, P-310.
- 4. Acharya Ambikadutta Shastry, Galagandarogadhikara, Bhaishajya Ratnavalli, Varanasi Choukamba Prakashan, Pp1312, P830d.
- 5. Acharya Ambikadutta Shastry, Ashmari Chikitsa Prakaranam, Bhaishajya Ratnavalli, Varanasi, Choukamba Prakashan, Pp-1312, P-712.

www.wjpr.net Vol 14, Issue 13, 2025. ISO 9001: 2015 Certified Journal 1117

6. Acharya Ambikadutta Shastry, Ashmari Chikitsa Prakaranam, Bhaishajya Ratnavalli 2019; Varanasi, Choukamba Prakashan, Pp-341.

www.wjpr.net Vol 14, Issue 13, 2025. ISO 9001: 2015 Certified Journal 1118