

AYURVEDIC MANAGEMENT OF ADENOMYOSIS WITH CERVICITIS: A CASE REPORT

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ABSTRACT

Introduction: Adenomyosis is defined as a benign invasion of the endometrium into the myometrium, with endometrial glands and stroma surrounded by hypertrophic and hyperplastic myometrium. In the present era, most women suffer from various menstrual problems, and Adenomyosis is also one among them. Very little scientific data is available depicting the effect of *Ayurvedic* intervention in such cases.

Main Clinical Finding: A 33-year-old woman presented with a bulky uterus with adenomyotic changes in ultrasonography (USG) and also Cervicitis. She was intended to be treated with some *Ayurvedic* formulations. The case was treated for 9 months with a combination of different *Ayurvedic* drugs to reduce symptoms and cure the Cervicitis.

Diagnosis: The patient came with the complaint of Excessive bleeding per vagina during the menstrual cycle and, pain during menses since menarche, lower abdomen pain for one year. And also suffering from white discharge and was diagnosed with bulky uterus with adenomyotic changes by ultrasonography (USG) and also Cervicitis.

Interventions: This patient of Adenomyosis with Cervicitis was treated with *Nagakesara churna, Kahrva Pishti, Bolabadhha Rasa, Punarnava Mandura in combination, Panchatikta Ghruta Guggulu, Panchawalkala Kwatha Yoni Prakshalana, Jatyadi Pichu* for three consecutive menstrual cycles and then start *Darvyadi taila Matra Basti* 60 ml 5th to 11th day of cycle in 3 alternate menstrual cycles.

Outcome: Complete remission of Adenomyosis and cervicitis were observed after 9 months of treatment.

Conclusion: This case study sets forth the feasibility and usefulness of *Ayurveda* in managing adenomyosis and cervicitis.

Keywords: *Ayurveda*, Adenomyosis, Case Report, *Matra Basti* etc.

INTRODUCTION

Adenomyosis is characterised by uterine enlargement caused by ectopic rests of the endometrium, both glands and stroma located deep within the myometrium. The most frequent symptoms associated with the condition are dysmenorrhea, menometrorrhagia, chronic pelvic pain, dyspareunia, symmetrically enlarged uterus and tender uterus, and infertility. The definitive treatment is surgical Hysterectomy (parous and aged women). For all others, conservative treatment includes NSAIDs (control pain and bleeding), hormonal therapy like progestins or cyclic estrogen and conservative surgeries. Conservative surgery like Adenomyomectomy, Uterine mass reduction (laparotomy or laparoscopy), and Uterine artery embolisation. *Ayurvedic* treatment relieves the symptoms and is very helpful in improving the overall health of the patient. There is no direct correlation of adenomyosis, but it can be correlated to *Vataja Asrgdhara* based on symptoms like *Theevra Vedana*, *Shyava aruna varna Artava*, *Kati Vankshana Prusta Shroni Vedana*. The treatment approaches should be *Raktastambhana*, *Raktavardhaka* and *Vata Shamaka*. It has been clinically observed that *Ayurvedic* treatment relieves the symptoms and is very helpful in improving the patient's overall health.

Case Report:

A 33-year-old married female patient, a housewife by occupation, with complaints of Excessive bleeding per vaginum during the menstrual cycle. Severe pain in the lower abdomen before the onset of menstruation and during menstruation for the last year associated with white discharge per vaginum, low back pain and general weakness. She was unable to perform day-to-day activities during menses, like household work, due to excessive bleeding and severe lower abdominal pain. She visited the nearby clinic for the same complaints and was advised of the USG Abdomino pelvis. Findings - Adenomyosis changes in the uterus

The patient was advised for a hysterectomy as she was not willing for a hysterectomy.

On 16/11/23, the patient approached the OPD of the PRASUTI TANTRA EVAM STRI ROGA department of M.M.M.Govt. Ayurved College, Udaipur, for the necessary treatment.

Past History: No H/O DM/HTN/Hypo-Hyperthyroidism or any other medical or surgical history.

Family history: No history of the same illness in any family member.

Personal History:

- Diet - Vegetarian
- Appetite - Normal
- Bowel - Regular, once a day.
- Micturition - 4-5/day, 1/night.
- Sleep - 5-6 hrs in Night
- Habits - Tea

Menstrual History:

Menarche - 13 years of age

Menstrual cycle -

- Nature - Regular
- Duration - 28days
- Bleeding phase - 6-8 days
- Color - Dark Brownish red
- Clots - Present
- Pain - Present
- No. of pads used /day - 5-6pads/day on 1st 4 days
3-4 pads/day on 5th And 6th day
1-2 pads/day on 7th and 8th day

Associated complaints - Severe intermittent lower abdomen pain, low back pain and general weakness.

Contraceptive history - Barrier

Obstetric History

O/H- G5 P3 L3 A2 D0

LD- 3.5 year female FTND

A1- 5 week (MTP by Tablets) 7 year Back

A2 – spontaneous 6 years back

General examination

- Built - Moderate
- Nourishment - Moderate
- Temperature - 98.4 F
- Respiratory rate -20/min
- Pulse rate – 76 bpm
- B.P - 110/70 mm of hg
- Height – 158 cms
- Weight - 56 Kg
- Tongue: Uncoated

Systemic examination

- CVS: S1 S2 Normal
- CNS: Well-oriented, conscious.
- RS: normal vesicular breathing, no added sounds

Ashtavidha Pareeksha

- Nadi -76 bpm
- Mootra- 4-5 times a day, 1 time at night.
- Mala – Once/ day.
- Jihwa- Alipta
- Shabda - Avisesha
- Sparsha - Anushna sheeta
- Druk - Avisesha
- Aakruti – Madhyama

Pelvic Examination

P/S Examination

Chikitsa

Based on symptoms, the treatment was carried out initially to normalise menstrual flow and cervicitis.

Table 1. Medication

S. N.	Medication	Dose	Time	Duration
1.	Nagakesara Churna + Punarnava Mandura + Kahrva Pishti+ Bolbadha Rasa	1gm + 125mg + 250mg + 125mg with Honey	Two times after the food	3 month
2.	Panchatikta ghrta gugglu	250 mg 2 tab	Two times after the food	3 month
3.	Panchavalkala kwatha – Yoni Prakshalana	10 gm + 1lit. water boiled and reduced by half	After menstruation, bleeding stops 7 day	3 consecutive men- strual cycles
4.	Jatyadi Taila – Yoni Pichu	10 ml	After menstruation, bleeding stops 7 days	3 consecutive men- strual cycles

Vagina- Healthy

Discharge – white discharge present
(white discharge, no foul smell)

Cervix – Hypertrophied

External os – Multiparous os

Erosion – Present on both lips

P/V Examination: -

Uterus- Position – Anteverted

Size- Bulky

Mobility – Mobile

Tenderness – Present

Vagina – Healthy

Cervix – Mid posterior

External os – Multiparous os

Movement – tenderness present.

Bleeds on touch – Absent

Investigation

Hb% (16/10/23) - 10.50gm%

Urine test (16/10/23)

Pus cell-3-4/mpl

Epithelial cell- 10-12/np gm%

USG (16/10/2023)

Findings- Bulky uterus with adenomyotic changes.

Normal size ovaries with polycystic morphology

Endometrial thickness- 9.3mm

Table- 2: Medication 2nd Phase: Added matra basti and repeat medicine 1 and 2.

Medication	Dose	Time	Duration
Darvyadi taila Matra Basti	60 ml	5 th to 11 th day of cycle	3 alternate menstrual cycle

Table-3: Results:

Symptoms	Before Treatment	After 3 months of treatment	After Treatment
Heavy bleeding	++++	++	Normal flow
Pain during menstruation	++++	++	Subside pain
Lower abdominal pain	+++	+	Relief
Low backache	+++	+	Relief
White discharge p/v	+++	+	Relief
Cervical motion tenderness (CMT)	Present	Absent	Absent
USG findings	Bulky uterus with adenomyotic changes	-	Bulky uterus 96×55×62mm with homogeneous echotexture.

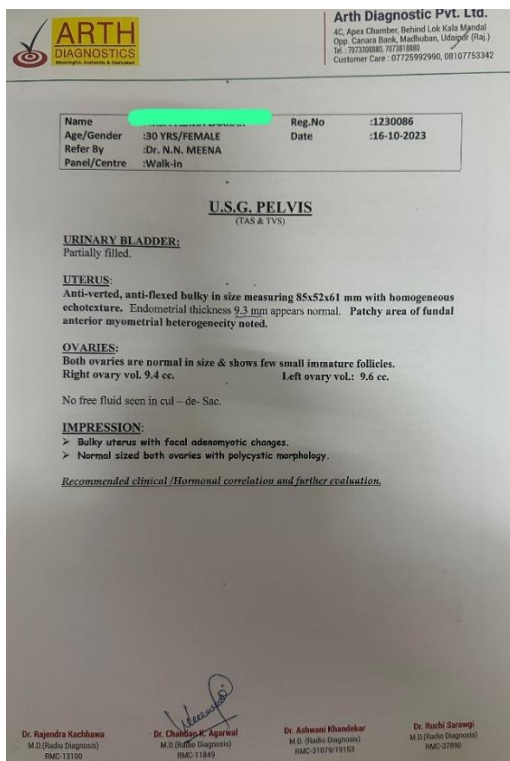


Figure no. 1: USG before treatment

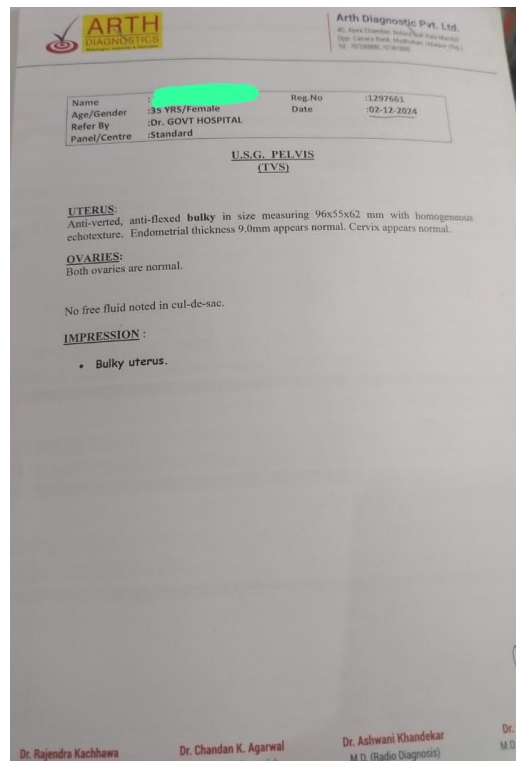


Figure no. 2: USG after treatment

DISCUSSION

Nagkeshar Churna: Nagkesara has Kashaya Rasa, Katu Vipaka, Ushna Veerya, Laghu, Ruksha Guna &

Kapha pittahara. Used as a hemostatic in cases of heavy menstrual bleeding, it helps reduce pain. Bioflavonoid has anti-inflammatory and antioxidant

properties and acts on blood vessels, thus helping reduce infection and the amount of blood loss during menses.

Punarnava Mandura balances *Vata* and *Raktadosha*. The combined effect of all its ingredients shows an anti-inflammatory, antifibrinolytic, and hepatoprotective effect and enhances Hb level in the blood.

Bolbaddha Rasa: balances *Tridoshas* and normalises the *Rakta dhatu* function, especially *Pittashamaka*, *Raktasthapaka* and *Deepana pachana* properties. A significant improvement was observed in symptoms of heavy bleeding, such as intensity, amount, and duration of bleeding.

Kaharwa Pishti: balances *Rakta* and *Pitta*, antibacterial, hemostatic, astringent, anti-inflammatory, and antacid properties. *Sheeta* properties may help balance *Pitta dosha*, hemostatic properties may help manage heavy bleeding and normalise menstrual blood flow.

Panchatikta Ghrita Guggulu: Useful in cooling the inflamed part of the body, mostly due to aggravated *Pitta*. It purifies blood. Mainly, it is anti-inflammatory, antitoxin, antibacterial, and analgesic.

Panchavalkala Kwatha: *Kashaya Rasa*, *Ushna Veerya*, *Katu Vipaka*, *Ruksha Guna*, *Vata Kapha Dosha Nashaka*, *Stambhaka*, *Shothahara* & *Krimighana*. *Kashaya Rasa* has pharmacological properties like *Stambhana*, *Sangrahani*, *Shoshana*, *Kledashoshaka*, and *Kaphanashaka*. So, in this way, *Kashaya Rasa* also decreases the *Srava*.

Darvyadi Taila: *Darvyadi Taila* Contains *Darvi*, *Rasanjana*, *Kiratatikta*, *Vasa*, *Bilva*, *Chandana*, *Arka*

contents Kashaya and Tikta Rasa along with Laghu and Ruksha Guna, Sheeta Virya, Rakta Stambhaka, Vatanulomana, and Pitta-Kapha-Shamaka properties, which help to alleviate symptoms like duration and amount of bleeding and pain in the abdomen.

CONCLUSION

This case study demonstrates how therapeutic Ayurvedic treatment can help a patient not only with symptom relief but also with returning to normal health and preventing subsequent issues. *Panchatikta ghrita* and *Panchavalkala Kwatha* were found to be very effective in cervicitis. *Nagakesara churna*, *punarnava mandura*, *bolbadha rasa*, *kaharva pishti* and *darvyadi taila matra basti* are effective in adenomyosis.

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