

## AYURVEDIC APPROACH TO OVARIAN HAEMORRHAGIC CYST – A CASE REPORT

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## INTRODUCTION

Ovarian cysts, especially functional types like corpus luteal or haemorrhagic cysts, are commonly observed in gynaecological practice and may present with abdominal pain, abnormal bleeding, or urinary complaints. Conventional management often includes hormonal therapy or surgery, depending on the size, persistence, and symptom severity<sup>1</sup>. Hemorrhagic ovarian cyst can be correlated to Raktaja Granthi roga. The Pathogenesis of Granthi Roga is characterised by a Vata Kapha-dominant Tridosha, for which Vata Kapha-hara medication is required. The involved Doshas are Rakta, Mamsa, and Meda; hence, the medication should possess vathara and Lekhana properties. Ayurvedic treatment focuses on dosha pacification, detoxification, and reproductive system

modulation through specific herbal formulations<sup>3</sup>. This case study highlights a successful Ayurvedic approach using Kanchanar Guggulu, Dashmularishta & Mahanarayan taila Matra basti in managing a left-sided haemorrhagic cyst with associated abdominal pain, heavy & painful menstrual bleeding.

### CASE PRESENTATION

A 33-year-old married woman attended the OPD at Patanjali Ayurvedic Hospital on 14/05/2018, complaining of lower abdominal pain for one year. Her pain was accompanied by heavy, painful menstrual bleeding. She brought an ultrasound report, which showed a left-sided haemorrhagic cyst measuring 3.2 x 3.2 cm.

Menstrual history :

- Last Menstrual Period (LMP): 21/04/2018.
- Patient said that her duration of menstrual cycle lasts 5-6 days with an interval of 30 days, associated with lower abdomen pain.

Family history: No significant history was found.

Past medical history: K/C/O Hypothyroidism (on allopathic medication)

Past surgical history: No significant history was found.

Personal history : The patient consumes a veg diet and has a good appetite. She reports normal bowel & micturition habits and with normal sleep. No addictions are noted, and she has a history of prolonged self-medication with analgesics.

### CLINICAL FINDINGS

#### General examinations:

- Built - Normal
- Height - 5 ft 2 inches,
- Weight - 55 kg,
- B.P. - 110 /70 mm of hg,
- Temp. - 98.6 F
- Pulse rate - 80/min,
- Respiration rate - 18/min.

#### Dashvidh pariksha

- Sara (Tissue essence): Rasa
- Samhanana (Body build): Madhyama (moderate muscle and bone compactness)
- Pramana (Body proportion): Sama (well-proportioned physique)
- Satmya (Adaptability): Madhyama (moderate adaptability to diet and environment)
- Satva (Mental strength): Avar
- Vyayama Shakti (Exercise tolerance): Madhyama (moderate endurance)
- Ahara Shakti (Appetite): Madhyama (regular food intake capacity)
- Jarana Shakti (Digestive power): Madhyama (satisfactory digestion)

#### Ashtavidha Pariksha:

- Nadi (Pulse): Vata, Pitta dominant
- Mala (Stool): Sama, Alpa
- Mutra (Urine): Samanya

- Jihva (Tongue): Aipta (clear)
- Shabda (Voice): Spashta
- Sparsha (Touch/Skin): Mridu/Ushna
- Drik (Eyes): Clear and normal
- Akrti (Appearance): Madhyama

#### Systemic examination

- Gastrointestinal System (GIT):
  - Abdomen: Soft, non-tender
  - Umbilicus: Inverted
  - Organomegaly: Absent
  - Dilated veins: Absent
  - Shifting dullness: Absent
  - Scar: Absent
- Respiratory System:
  - Inspection: Bilateral symmetry with normal chest movement; no abnormal pulsation or scar
  - Palpation: No tenderness
  - Percussion: Normal resonant note
  - Auscultation: Bilateral equal air entry; chest clear
- Cardiovascular System (CVS):
  - Apex Beat: Normal, located in 5th intercostal space
  - Heart Sounds: NAD (No abnormality detected)
  - Murmur Sound: Absent
- Central Nervous System (CNS):
  - Mental Status: Well-oriented to person, place, and time; higher mental functions intact
  - Coordination: Good
  - Motor: Normal deep tendon reflexes (DTR), plantar flexion present - Sensory: All sensory modalities (touch, pain, temperature, pressure) intact
- Urino-genital System:
  - Haematuria: Absent
  - Burning Micturition: Absent
  - Total fluid intake: 4-5 litres/day - Total urine output: ~ 3000 ml/day
- Locomotor System:
  - Joints: NAD (No abnormality detected)

## Ayurvedic Diagnosis (Vyadhi Ghataka)

Factor	Description
Dosha	Kaphaja, Pittaja
Dushya	Māmsa, Rasa, Rakta
Srotasa (Channels)	Ārtavavaha Srotasa
Srotodushti	Sanga (obstruction)
Adhiṣṭhāna (Location)	Yoni
Rogamārga (Pathway)	Abhyantara (internal)

## Clinical Diagnosis

- Provisional Diagnosis: Left ovarian haemorrhagic cyst • Differential Diagnosis: Tubo-ovarian mass, fibroid
- Investigations:
  - USG -Left ovarian haemorrhagic cyst
  - Thyroid - WNL
  - CA125 - WNL
- Final Diagnosis - Left ovarian haemorrhagic cyst
- Prognosis - Sadhya

## Treatment details

The patient was advised:

- Kanchanar Guggulu - 250 mg, 2 tablets twice daily with water
- Dashmularishta - 15 ml twice daily after meals with equal amount of water - Pan-chakarma - Matra basti with Mahanarayan tailam

## OBSERVATION & RESULT

After 4 months of continuous treatment, the patient reported complete relief from the pain. A repeat USG conducted on 17/09/2018 showed no cyst in the left ovary, confirming full resolution. No side effects were observed during or after the course of therapy. The findings of sonography report before and after treatment are :

## DISCUSSION

This case illustrates the successful application of Ayurvedic interventions in resolving an ovarian cyst non-surgically. Kanchanar Guggulu has Lekhana, Granthihara, and Stambhana properties, traditionally used for cysts and glandular swellings<sup>4</sup>. Dashmularishta, known for its Shothahara, Balya, and Yonishuddhikara actions, supports hormonal balance and reduces pelvic inflammation<sup>4</sup>. Basti eradicates morbid Vata from the root along with other Dosha and in addition it gives nutrition to the body tissue. Therefore, Basti therapy covers more than half of the treatment of all the disease. Mahanarayana Taila is a classical Ayurvedic medicated oil recommended for a variety of neuromuscular, reproductive, and degenerative disorders associated with aggravated Vata dosha<sup>3</sup>. The positive outcome supports the therapeutic efficacy of individualized Ayurvedic treatment in gynecological cysts.

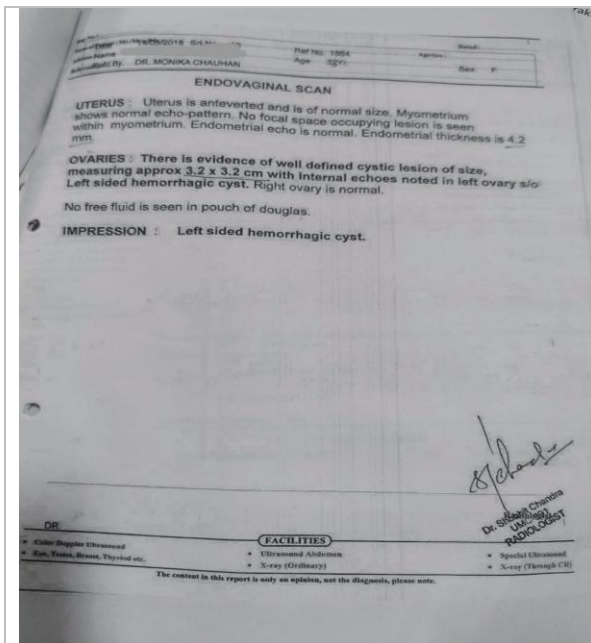
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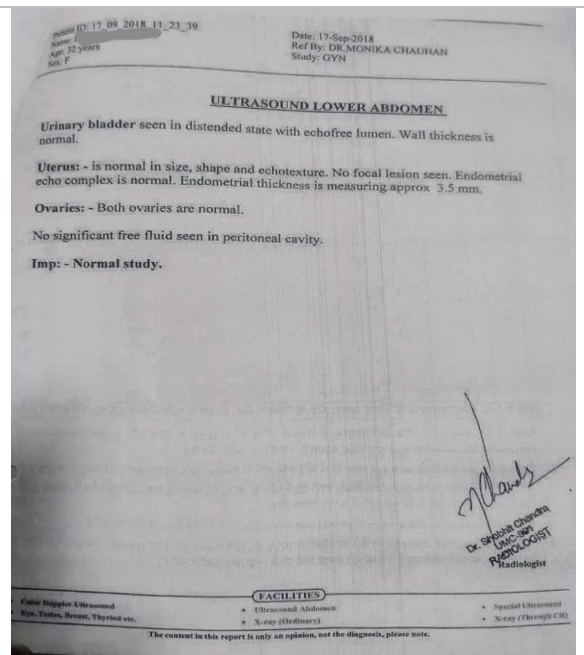
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Before Treatment



After Treatment