

A CASE STUDY ON ADENOMYOSIS

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ABSTRACT

Adenomyosis is a common condition characterized by invasion of endometrium into the uterine muscle tissue. This results in myometrial hypertrophy and hyperplasia around the ectopic endometrial glands. The most frequent symptoms associated with the condition are dysmenorrhea, menometrorrhagia, symmetrically enlarged tender uterus and chronic pelvic pain. Treating adenomyosis is a challenge and hysterectomy has been the only way to treat the condition. But in such conditions Ayurveda can provide a better treatment on symptoms basis. In this case study, as patient came in bleeding phase *rakta sthambaka chikitsa* was done first and *cheriya madhusnuhi rasayana*, *Sukumara kasayam* and *trayodashanga guggulu* has been used and proved to be effective.

Keywords: Adenomyosis, *Sukumara kasayam* and *Trayodashanga guggulu*.

INTRODUCTION

Adenomyosis is a condition characterized by the benign invasion where there is ingrowth of the endometrium directly into the myometrium of the uterus.¹ This is usually accompanied by a diffuse hyperplasia of the myometrium. An adenomyosis is described as circumscribed nodular aggregate of smooth muscle and endometrial glands with compensatory hypertrophy of the myometrium surrounding the ectopic endometrium. Unlike endometriosis, it tends to occur in multiparous women. Typically, the patient complaints of severe menorrhagia, secondary dysmenorrhea and distended abdomen. Treatment depends on patient's age and desire for future pregnancy. The treatment of

symptomatic adenomyosis in women over 40 who have completed their families is hysterectomy. For all others conservative treatment which includes NSAIDs, hormonal therapy, menstrual suppression with progestins, GnRH analogues and conservative surgery like adenomyectomy, uterine mass reduction be used to treat adenomyosis². Based on the symptoms like *Theevra vedana*, *Shyava aruna varna artava*, *Kati vankshana prusta shroni vedana*, it can be correlate to *Vataja Asrgdhara*³.

It has been clinically observed that Ayurveda helps in case of adenomyosis. It seems to help by not only

treating the diseases but also by strengthening the reproductive system and improving the local cellular immunity.

Case Report:

A 30 years old married female patient, housewife by occupation with the complaints of Excessive bleeding per vaginum which is dark brownish red in colour during menstrual cycle with heavy clots for the 1st 5 days. Severe pain in lower abdomen before the onset of menstruation and during menstruation since last six menstrual cycles associated with low back pain and general weakness.

Intermittent lower abdomen pain starts 2 days before the onset of menstruation and lasts for 5 days during menstruation and, she noticed there is increased in duration of the cycle for 2 to 4 days since last six menstrual cycle. She was unable to perform day-to-day activities during menstrual cycle like household works due to heavy clots and severe lower abdominal pain.

She visited nearby clinic and was prescribed with tablets (Details are unknown). She had taken those tablets for last 4 months only during menstrual cycle. But, she didn't get complete relief. She revisited the clinic for the same complaints and was advised for USG- Abdomino pelvis.

USG- Abdomino pelvis - (12-01-18)

Impression

↔ Findings likely of Adenomyosis changes in the uterus

Patient was advised for hysterectomy. As she was not willing for hysterectomy. On 24/01/18 patient approached OPD of PRASOOTI TANTRA EVAM STRI ROGA department of SKAMCH & RC for the needful.

Past History: No H/O DM/HTN/hypo-hyperthyroidism or any other major medical or surgical history.

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

Personal History:

Diet - Mixed

Appetite - Reduced

Bowel - Regular, once a day.

Micturition - 4-5 times a day, 1 time at night.

Sleep - 5-6 hours in Nighttime

2-3 hours in Daytime

Habits - Coffee / tea, twice a day

Rajo Vrutanta

Menarche - 12 years of age

Menstrual cycle -

Nature - Regular

Duration - 30-35 days

Bleeding phase - 5-7 days

Color - Dark Brownish red

Clots - Present

No. of pads used /day - 7-8 pads/day on 1st 4 days

3-4 pads/day on 5th day

1-2 pads/day on 6th and 7th day

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

Vaivahika Vrutanta

Married life - 12 years

Contraceptive history - Not Tubectomised

H/o using Barrier method for last 12 years (on & off)

Vyavaya Vrutanta

➤ 1-2 times in a week

➤ No Maithuna asahishnuta

Prasava Vrittanta

OH- P₃L₃A₁D₀

➤ L₁- 10-year Female child

➤ L₂- 7-year Female child } All FTND

➤ L₃- 4-year Female child

➤ A1- @ 1 month (MTP by Tablets) } 1 year 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 -152 cms

➤ Weight - 52 Kg

➤ Tongue: Uncoated

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

Systemic examination

CVS: S1 S2 Normal

CNS: Well oriented, conscious.

RS: normal vesicular breathing, no added sounds

Ashta Sthana 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

Dashavidha Pareeksha

Prakruti - Vata + Pitta

Vikruti - Madhyama

Sara - Madhyama

Samhanana - Madhyama

Pramana - Madhyama

Satmya - Madhyama

Satva- Madhyama

Aahara Shakti - Abhyavaharana Shakti -Madhyama

Jarana Shakti - Madhyama

Vyayama Shakti – Madhyama

Vaya -Youvana

Gynecological Examination

- Breast examination- NAD, B/L soft non tender
- External genitalia –

Inspection – Pubic hair - Equally distributed

Clitoris -Healthy, NAD

Discharge per vaginum – Present (Thin Mucous white discharge)

Prolapse – Absent

Pelvic Examination

Chikitsa Vrittanta

LMP – 21-1-18 From 24-1-18	LMP – 21-1-18 Duration of menstrual cycle 21.1.18-30.1.18 From 1-2-18	LMP – 22-2-18- Duration of menstrual cycle 22.2.18-27.2.18 From 28-2-18
Ashoka ghrita- 2 tsp (20ml) BD BF with milk Usheerasava- 3tsp TID AF Cap. Gynovedan- 1 TID AF Tab.posex forte- 1 BD AF For 1 week	Ashoka ghrita- 2tsp(20ml) Morning BF with milk Cheriyam madhusnuhi rasayana- 2tsp BD with milk AF Sukumara kashayam- 2tsp BD with 4tsp of wa- ter AF Trayodashanga Guggulu 2 BD AF Cap. Gynovedan- 1 TID (during menstruation) for 1 Month	Cheriyam madhusnuhi rasayana- 2tsp BD with milk AF Sukumara kashayam- 2tsp BD with 4tsp of water AF Trayodashanga Guggulu 2 BD AF Cap. Gynovedan- 1 TID (during menstrua- tion) for 3 consecutive menstrual cycle

Per Speculum Examination

Vagina- Healthy

Discharge – Mild white discharge
(Thin white discharge, no foul smell)

Cervix – Hypertrophied

External os – Multiparous os

Tear – Absent

Growth – Absent

Erosion – mild on both lips

P/V examination: -

Uterus-

Position – Anteverted

Size- Bulky

Mobility – Mobile

Tenderness – Present

Vagina – Healthy

Cervix – Mid posterior

External os – Multiparous os (Lip of the mouth)

Station – At the level of ischial spines

Texture – Firm

Movement – non tender, freely movable.

Bleeds on touch – Absent

Fornices – Free

Investigation

Hb% (24-1-18) - 8.9 gm%

CA 125- 43.16 U/ml (13-2-17)

RBS – 91mg/dl (4-7-17)

USG- Abd-pelvis on 12-1-18

Impression- Findings likely of Adenomyosis changes
in the uterus

Observation

After 1 Month of Treatment	After 2 Months of Treatment	After 3 Months of Treatment	4 th Month Follow Up Period	5 th Month Follow Up Period
Lmp- 22-2-2018 Duration- 6 Days Pad Used 5- 6 Pads/Day 1 st 3 Days 3-4 Pads/ Day On 4 th Day 2 Pads/Day On 5 th And 6 th Day Clots- Present (Heavy) Color – Dark Brownish Red Severe Lower Abdomen Pain and Low Back Pain On Before 2 Days Of Menstruation And 1 st 3 Days	Lmp- 24-3-2018 Duration- 4 Days Pad Used 5 Pads/Day 1 st 2 Days 2 Pads/ Day On 3 rd And 4 th Day Clots- Present (Reduced) Color – Dark Red Severe Lower Abdomen Pain and Low Back Pain on Before 1 Days Of Menstruation And 1 st 3 Days	Lmp- 25-4-2018 Duration- 4 Days Pad Used 4-5 Pads/Day 1 st 2 Days 1- 2 Pads/ Day On 3 rd And 4 th Day Clots- Present (Mild) Color – Dark Red Lower Abdomen Pain and Low Back Pain On 1 st 2 Days	Lmp- 25-5-2018 Duration- 3 Days Pad Used 4 Pads On 1 st Day 1-2 Pads / Day 2 nd And 3 rd Day Clots- No Color – Reddish Intermittent Lower Abdomen Pain and Low Back Pain On 1 st Day.	Lmp- 25-6-2018 Duration- 3 Days Pad Used 4 Pads On 1 st Day 1-2 Pads / Day 2 nd And 3 rd Day Clots- No Color – Reddish Intermittent Lower Abdomen Pain and Low Back Pain On 1 st Day.

After treatment- USG- Abdomen pelvis – 22.5.18

Uterus – Measures about 7.7*6.3*6 cm

Endometrial thickness – 5mm

DISCUSSION

As patient came in bleeding phase *rakta sthambaka chikitsa* was done first with *ashoka Ghrita*⁴, *usheera asava*⁵, Cap. Gynovedan and Tab. Posex forte for 1 week. Later *lekhana chiktisa* was done with *Sukumara kasayam*⁶, *Cheriyamadhusnuhi Rasayana*⁷ and *Trayodashanga Guggulu*⁸. *Sukumara kasayam* is having *srotoshodhaka*, *vatapitta shamaka*, *shoolahara*, *rasayana* properties and indicated in *gulma roga*. *Cheriyamadhusnuhi Rasayana* is having *deepana*, *lekhana*, *rasayana*, *shoolahara* and *dathu bala vardhaka* properties and by its *lekhana* property removes the ectopic tissue from abnormal sites and by *vata anulomana* prevents *udharvagamana* of raja leading to its proper expulsion. *Trayodashanga Guggulu* having *vedana hara* property is indicated in *vata kaphajanya rogas* and *yonidosha*. *Trayodashanga Guggulu* due to its *vedana hara* and *vatashamana* properties helps in relieving the pain. The drugs used in this study helps in normalizes *doshas* and *Vatavaigunya*, reduces Ama formation, excess *Meda* and remove *Srotorodha / Sanga* and creates

normal functioning of *doshas* and helpful in reduction of symptoms.

CONCLUSION

In the present study, *Cheriyamadhusnuhi rasayanam*, *Sukumara kashayam* and *Trayodashanga guggulu* have been used for the treatment of adenomyosis, which is found to be very effective. Patient is free from all the symptoms and able to perform her daily routine activities without difficulty. Hence the treatment given was not only relieving the symptoms of illness but also increasing the defense mechanism and immunity of patient.

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