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### Case report on management of Adenomyosis with Ayurveda

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#### ABSTRACT: -

Adenomyosis is a very common condition of invasion of endometrium into the myometrium with endometrial glands and stroma. It is commonly presented with a benign growth and uterus is enlarged. The patient presents with the symptoms like pain (may be chronic or acute) associated with menstruation and variable bleeding pattern. It is a great challenge to treat adenomyosis and hysterectomy has been the only way to treat it. Ayurveda can give a better relief to patient. In this case study, treatment with *Kanchnar guggulu*, *Patrangasav*, *Ashokaritha* and *Matra basti* has been found useful.

**Keywords :** Adenomyosis, *Kachnar guggulu*, *Patrangasava*, *Matra basti*.



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## INTRODUCTION

Adenomyosis is described as benign invasion of endometrium into the myometrium with endometrial glands and stroma surrounded by the hypertrophic and hyperplastic myometrium [1],[2] Clearest definition of adenomyosis was given by Bird et al in 1972 as “benign invasion of endometrium in myometrium, producing a diffusely ectopic, non-neoplastic endometrial glands and stroma surrounded by hypertrophic and hyperplastic myometrium” [3] Adenomyosis is present in 5 to 70% of population [4]. 70 to 80% cases are found in women of aged 40 to 60 years. 5 to 25% cases are found in women younger than 39 years and only 5 to 10% cases are found in women older than 60 years. [4],[5] It is more common in multiparous women. Some studies suggested that trauma from pelvic surgery may trigger invagination of adenomyotic tissue. [6] Patient complaints of severe menorrhagia 50%, Dysmenorrhea 30% and metrorrhagia 20%. and Dyspareunia and chronic pelvic pain are less common [7],[8].

Treatment of adenomyosis is with long-term GnRH analogues [9],[11]. Hysterectomy is done in patient above the age of 40 years, who have completed their families. Conservative treatment are NSAIDs, hormonal therapy, menstrual suppression with progestin's and uterine mass reduction. [10],[12]

Ayurvedic treatment relieves the symptoms and is very helpful in improving overall health of patient. Based on symptoms of severe pain (*Tivra Ruja*), clotted black is menstrual blood (*Granthil shyava varna artava*) it may be correlated with *Artavaha strotodusti, vatika yoni vyapad* and heavy menstrual flow (*atya artva*) can be *Rakta Mams dushti Janya yoni vyapad*. [13]

Causes according to Ayurveda may be *vata dusti* (*vitiation of vata*) due to *Vishamangshayan*,

*Ativyavaya, Pittavardhak aahar vihar, Divashyan and Ratri Jagran*. [14]

## CASE REPORT:

A 38 year old married female patient, housewife by occupation, came with complaints of excessive blackish frothy bleeding during menstruation for 5 to 7 days, associated with severe pain and cramps for 10 to 15 days before menstruation, fainting due to pain, vomiting and inability to do any work. Her menstrual cycle was disturbed from last six month; length was reduced to 18 to 21 days and bleeding phase prolonged for up to 7 days. She was taking some allopathic drugs from past four months (sources unknown) but she did not get any relief in pain and heavy bleeding. She was advised for USG abdomen and USG report revealed adenomyosis. She was advised for hysterectomy but patient was not willing for hysterectomy, so she decided to go with Ayurvedic treatment in Sangwan Nursing Home Behal on 25 October 2020.

### Personal history :

Diet: *Alpa Aahar*, frequently eating cold food.

Appetite: Reduced.

Bowl: Sometimes regular sometimes no bowl (constipated).

Micturition: 3-4 times a day 1-2 times in night.

Sleep: 5 hours in night (*Ratri Jagran*) and 1/2 to 1 hour afternoon (*Divya Sayan*)

Habits: Tea 2 - 3 times a day, pickle in afternoon.

### Menstrual history:

Menarche: At the age of 12 years.

Menstrual cycle: Regular.

Duration: 18-21 days.

Color : Blackish.

Clots: Present

Bleeding: For 5 to 7 days, heavy (10-12 pads in a day)

**Associated complaints:** Severe pain in lower

abdomen and back, cramps in abdomen and legs, general malaise, vomiting and constipation.

**Marital history:** Got married in the age of 18 years coital frequency 2-3 times in a week.

**Obstetrical history:** P<sub>4</sub>L<sub>2</sub>A<sub>2</sub>

L1 female child of age 18 years

L2 male child of age 15 years A1 A2 patient took

MT Pills and D&C was done later on.

**General examination:**

Built :Moderate.

Prakriti :pitta kaphaja.

Temperature :98.4°F. Respiratory rate :20 p/m.

Pulse rate : 76 Beat per /min.

BP: 100/ 70 mm of Hg.

Height : 5 feet 3 inch.

Weight : 58 kg.

Tongue :Coated.

Chest :clear .

Breast :lump free/NAD

External genitalia : Normal .

Abdomen : tender

**Per-Speculum examination:**

Vaginal discharge: White in colour but no smell.

Cervix : Hypertrophied.

Externals Os: Multiparous Os.

**Per-vaginum examination:**

Uterus : Anteverted ,normal in size, freely movable .

Fornices : Clear.

**Treatment plan:**

*Deepan pachan and vata anuloman*

*Mams rakt medohar chikitsaya*

*Matra basti*

**Treatment given**

**Treatment started from 25/11/2020**

Lmp : 24 november 2020

*Hingoo vachadi gutika* 2 tablet BD with water.

*Arogyavardhini vati* 2 tablet BD with milk.

*Pushyanug churna* with honey.

*Shankh vati* 2 tablet SOS.

*Dashmularishta* 15ml+ *patrangasava* 15 ml with 30 ml of water BD after meal for 5 days.

**From 30/11/2020**

*Matra basti of sahcharadi tailam* 50 ml 5 days.

*Kanchanar guggulu* tablet 2 tablet BD with water.

*Triphala guggulu* 2 Tablet BD with water.

*Patrangasava* + *Ashokarishta* 10 ml and 15 ml respectively with 30 ml of water BD. for 15 days.

**From 14 /11/20**

*Matra basti of sahacharadi taila* 50ml 3 days.

*Kanchanar guggulu* 2 tablet BD with water.

*Arogyavardhini vati* 2 tablet with milk

*Triphala guggulu* 2 tablet BD with water.

*Dashmularishta* 20ml BD with water for 5 days.

Mensuration 19/12/2012 to 24/12/20

**From 20/12/2020**

*Matra basti of Chandan baladi tailam* 50 ml for 3 days.

*Sahacharadi taila* 50 ml for next 2 days.

*Shankh vati* 2 tablet SOS

*Pushyanug churna* with honey for five days.

**From 25/12/2020**

*Ashokaristha and patrangashav* 20 ml and 10 ml respectively with 30 ml of water

*Kanchanar guggulu* 2 tablet BD with water.

*Ashokadi ghrita* 10ml empty stomach for 25 days.

**From 15 January 2021**

Mensuration 18 January 2021 to 23rd January 2021

*Matra basti of sahcharadi tail* 50 ml for 5 days.

*Matra basti of chandanbala tailam* for next 2 days.

Roasted *ajwain* with warm water 3gram BD for 3 days.

**From 25 January 2021**

*Ashokarishta and Patrangasava* 20 ml and 10

ml respectively with water.

*Kanchanar guggulu* 2 tablet BD with water.

*Medohar guggulu* 2 tablet BD with water.

*Shatavari churna* 2 gram with water.

*Ashokadi garit* 10 ml empty stomach x 25 days.

#### From 20 February 2021

Mensuration:- 20 February 2021 to 25 February 2021

*Matra basti of Sahcharadi tail* 50 ml.

Rosted *Ajwain* 2 gram BD for 3 days.

#### From 26 February 2021

*Kanchanar guggulu* 2 tablet BD with water.

*Medohar guggulu* tablet BD with water.

*Ashokarishta* 20 ml and *Patrangasava* 10 ml respectively BD with 30 ml of water for 25 days

#### From 23 March 2021

Mensuration 23 March 21 to 28 March 21

*Matra basti sahcharadi tail* 50ml for 2 days.

*Kanchanar Guggulu* 2 tablet BD with water. X 25 days

*Ashokarishta* 20 ml with *patrangasava* 10 ml with 30 ml of water.

*Chandraprabha vati* 2 tablet BD with water empty stomach

#### Follow up and outcomes:

After two and half month of treatment USG was repeated which shows reduction in size of adenomyosis of uterus. Now adenomyosis is resolved completely (recent reports). Patient was comfortable and pain subsided after first 2 *Matra basti*. Pain was very much reduced and after three months of treatment, Bleeding was reduced and clots were absent. After two months of treatment, appetite increased and *Aama lakshana* were gone. Her bowel was also normal after treatment of 20 days.

## DISCUSSION

As patient come in bleeding phase *Raktastambhaka Chikitsa* was given with *Pushyanuga churna* with honey and *Patrangasava*. Patient was in severe pain so

*Matra Basti Of Sahcharadi Taila And Dashmularishta* was given for *Vataanuloman And Shankh Vati* was added to relieve pain. Later on *Lekhan Of Granthi* was done with *Kanchanar Guggul And Medohar Guggulu*. Later on time to time *Matra basti* was given of *Sahcharadi Taila For Vednahar And Chandanbaladi Taila For Rakta Stambhan*.<sup>[15]</sup>

*Arogyavardhini vati* was given for *Deepana And Pachana*. later on *Ashokadi Grita And Chandraprabha Vati* were added as *Rasayana*. Drugs in this study helped in balancing all three dosha, *Vatanaulomana, Aama Pahchana And Sarotoshodhan*.<sup>[16]</sup>

## CONCLUSION

In the present study, *Kanchanar guggulu, Ashokarishta, Patrangaasav and Matra basti* were used for treatment which were found to be very effective. The treatment given was very effective for pain management and treating the adenomyosis and improved patient's general health.

#### Declaration of patient consent :

The author certify that they have obtained patient consent form, where the patient /caregiver has given his/her consent for reporting the case along with the image and other clinical information in the journal. The patient's caregiver understands that his/her name initials will not be published and due effort will be made to conceal his/her identity, but anonymity can be guaranteed.

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Nil

#### Conflicts of interest

There are no conflicts of interest.

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fig 1 before treatment



fig 2 after treatment

SHRI SWAN NURSING HOME & ULTRASOUND CENTRE  
BUS STAND BAHAL-127028 ( BHIWANI ) PH.NO. 01255-265443

PATIENT: MRS. KIRAN BEHAL D/O, W/O MR. MOTI LAL AGE/SEX: 38 Y/F DATE: 27/12/2020

**ROUTINE OBS FINDINGS**

Normal in outline echo free.

Anteverted normal in size and out line ,AN ADENOMYOMATIC PATH OF SIZE 2.8X2.8 CM SEEN .

ADENOMYOSIS to be co related clinically

SIGNATURE

Before treatment

SHRI SWAN NURSING HOME & ULTRASOUND CENTRE  
BUS STAND BAHAL-127028 ( BHIWANI ) PH.NO. 01255-265443

PATIENT: MRS. KIRAN BEHAL D/O MR. MOTIRAM AGE/SEX: 38 Y/F DATE: 07/03/2021

**USG ABDOMEN FINDINGS**

LIVER	Normal in size and echo pattern, no focal lesion seen.
GALL BLADER	ALREADY REMOVED .
SPEEN	Normal in size and out line.
RT. KIDNEY	Normal in size and out line , no hydro nephrosis seen.
LT. KIDNEY	Normal in size and out line , no hydro nephrosis seen.
URINARY BLADER	Partially filled echo free.
UTERUS	Uterus anteverted normal in size and out line , no space occupying lesion seen , small amount of free fluid seen .
Others	.....
IMP	? P.I.D. findings to be co related clinically

ft reviewed full urinary bladder 2/3/21  
A Adenomatic patch of size 1.8 cm x 1.8 cm is seen

NOTE : This is an opinion not the diagnosis. It should be clinically co-related. Its not for medico legal purpose. Ultrasound has its own limitation.

SIGNATURE

After treatment



**Shubham Diagnostics Private Limited**  
**शुभम् अल्ट्रासाउंड, एक्सरे एवम् कलर डॉपलर सेंटर**  
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 फ़ोन-125001 ॥ 09602-41668 ॥ 01662-239138, 85699-29138  
**डा० राकेश बांडिया**      **डा० राजीव भाटिया**  
 एम० बी० (रेडियोलॉजी)      एम० बी० (रेडियोलॉजी)

Patient identity cannot be ascertained at present, so this cannot be used for MLC Case.

Name of Patient..... **KIRAN** ..... Date ...**5-Jun-21**.....  
 Clo Dr..... **SURENDER SANGWAN** ..... Part Scanned.....

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**WHOLE ABDOMEN**      US OPINION

- Liver : Shows normal outlines with normal echo texture. Intra hepatic biliary radicals are not dilated. Hepatic vasculature is normal.
- Gall Bladder : Not seen (Cholecystectomy done).
- CBD : 6.9 mm in diameter. It tapers normally.
- Spleen : Normal in size and reveals normal echo texture.
- Pancreas : Normal in size, shape and echo pattern.
- Right kidney : Shows normal outlines. It measures 90 x 39mm in size. No calculus. No hydronephrosis. No renal mass.
- Left kidney : Shows normal outlines. It measures 103 x 47mm in size. No calculus. No hydronephrosis. No renal mass.
- Retroperitoneum: No lymphadenopathy.
- U. Bladder : Normal outlines. No calculus. No mass.
- Uterus : Shows normal outlines. It measures 84 x 43 x 48 mm in size. The central echo is normal. A 3 mm sonolucent area is seen in cervical region.
- Ovaries : Normal. No cyst. No mass.

**IMPRESSION** : **NABOTHIAN CYST.**

*(Handwritten signature)*

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DISCLAIMER:  
 \* Renal calculi size and position may differ on different occasions.  
 \* Ureteric calculi may not be visible in absence of hydronephrosis.  
 \* Gallstones may not be visible in contracted state.  
 \* All anomalies may not be detectable on routine obstetric scan.

## Recent reports

