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AYURVEDIC MANAGEMENT OF OVARIAN CHOCOLATE CYST CAUSING INFER-**TILITY: A CASE STUDY**

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ABSTRACT

In the present case study, a 29-year-old woman with complaints of wants issues, pain during menses, pain in the lower abdomen, increase bleeding in menses, and white discharge, visited MMM Govt. Ayurveda College and Hospital's OPD. She came with USG reports suggestive of left ovarian chocolate cyst along with haemorrhagic cyst in both ovaries at different cycles for which she had taken allopathic treatment including ovulation induction drugs. She was advised for ultrasonography (USG) again and the findings were suggestive of a left ovarian chocolate cyst measuring 22×19 mm in size. She was supposed to be treated by an Ayurvedic regime with the goal of achieving pregnancy by relieving the above symptoms and resolving ovarian cyst. She was treated with Ayurvedic formulations such as aloes compound, pushpadhanwa rasa in the follicular phase, ichcha bhedi rasa in mid of cycle (around Lh surge), and leptadene, laghu malini vasant rasa in her secretary phase of menses along with syp evecare forte and falghrita in continuation with whole month. Only Ayurvedic medicines were used during the course of treatment. After three months of treatment, she got pregnant and USG findings were suggestive of single live intra uterine pregnancy of 6weeks and 4days with a completely resolved ovarian cyst. Therefore, this study was conducted to evaluate one of the treatment regimens for ovarian chocolate cyst causing infertility.

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Keywords: Ovarian chocolate cyst, endometrioma, infertility, *pushpdhanva rasa*, *ichchabhedi rasa*, aloes compound, leptaden.

INTRODUCTION

Endometrioma is the presence of endometrial tissue in the ovary. It is the most common form of endometriosis. Endometriosis is a common disorder in which the lining of the uterus called endometrium grows at a site other than uterine mucosa or cavity. The presence of endometriosis can result in the formation of scar tissue, adhesions, and an inflammatory reaction. It usually is a benign growth. This ovarian endometriosis forms dark, fluid-filled cysts.³ These fluid-filled sacs can vary greatly in size and are known as endometriomas, also called "chocolate cysts". The fluid inside the cysts is thick, dark, old blood, giving it a chocolate-like appearance. Ovarian chocolate cyst or endometrioma is a health condition that is becoming increasingly common these days, and it has a direct impact on fertility. Ovarian cysts affect women of all ages, but they are most common in the age group of 25 - 40 years. About 10% of people who menstruate have endometriosis, and between 20 and 40 percent of people with endometriosis develop chocolate cysts. Studies have also found that endometriomas occur two times more frequently in the left ovary (67%) than in the right one (33%), possibly due to the presence of the sigmoid colon on the left side. When symptoms do occur, they're similar to those of endometriosis. They can include:

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- Painful menses with cramps.
- Pelvic pain is not associated with the menstrual cycle.
- Irregular menses
- Dyspareunia
- Infertility for some women

If the chocolate cyst ruptures, it can cause severe, sudden abdominal pain on the side of the body where the cyst is located, or it may lead to twisting of the ovary.

CASE PRESENTATION

A female patient, of 28-year-old, came in OPD of prasuti tantra & stree roga department of MMM government Ayurveda college, Udaipur Rajasthan on 19 September 2021 with chief complaints of wants issue, pain during menses, pain in the lower abdomen, increase bleeding in menses, and white discharge. She bought her previous investigation reports including USG, CBC, USG for follicular study along with a serial allopathic prescription for management of the above-mentioned complaints. She was taking allopathic treatment since 2019 including ovulation induction drug but got no results so she came here for the proper management of her complaints specially infertility. She was diagnosed with primary infertility with a left ovarian chocolate cyst of size 22×19 mm

Menstrual history

The patient said that her duration of menstrual cycle was of 3-4 days with regular intervals of 28 to 30 days with increased menstrual flow associated with lower abdominal pain.

Obstetrics history- nil (G0)

Family history - No relevant family history

Past surgical history – There was not significant history found.

Personal history—Her appetite, sleep, micturition, and bowel habits were all normal.

Clinical findings:

General examinations: Built - Normal, Weight- 56 kg, height-161 cm, pulse rate- 88/min, B.P. -110/70 mm of hg, respiration rate- 16/min, temp.- 98.5 °F

Per abdomen-it was soft, non-tender and no organomegaly was detected.

Physical examination – -

Ashtavidha Pariksha

Nadi- VK

Mutra – Samyakmutrapravriti

Mala- Sama

Jihwa- Sama

Shabda- Samyak

Sparsha- Ushna

Drika-Samanya

Aakriti- Krisha

Dashvidha parik sha Prakriti (nature) - Vata pittaja,

Sara (Purest body tissue) - Madhyama(medium)

Samhanana (Body compact) - Avara(minimum)

Pramana (Body proportion)- Madhyam(medium)

 $Satmya (homologation) \hbox{-} Madhyam (medium)$

Satva (mental strength) - Madhyam(medium)

Vaya(age)-Yuvati

Vyayamshakti (to carry on physical activities) - avara (least capability)

Aharashakti (food intake and digestive power)madhyam

Abhyavaranashakti & Jaranashakti – Madhyam Systemic Examination:

CVS: Heart sounds (S1S2): normal

Respiratory system: normal bilateral air entry, no

added sounds.

No abnormality was found in the other system.

TREATMENT SCHEDULE

Table 01: The treatment was carried out with the following medicines for three months

S. N.	Medicine	Dose	Menstrual cycle
1	Tab Aloes compound	2-tab BID after a meal	Follicular phase D1 to D14
2	Tab pushpdhanva rasa	2-tab BID after a meal	Follicular phase D1 to D14
3	Ichcha bhedi rasa	1tab OD HS	Around LH surge D12 to D16
4	Tab Leptadene	2-tab BID after the meal	Secretary phase D15 to D28 or a day prior to menses
5	Laghumalini vasant rasa	2-tab BID after meal	Secretary phase D15 to D28 or a day prior to menses
6	Syp Evecare	2 tsf BID after the meal	Throughout the menstrual cycle D1 to D28
7	Phala ghrita	1 tsf BID PC	Throughout the menstrual cycle D1 to D28

Result

After a consecutive treatment of three months, the patient got pregnant with positive UPT on 3 Feb. 2021 with LMP 5 Jan 2021. USG findings on 20 Feb. 2021, were suggestive of single live intra uterine pregnancy with normal adnexa suggesting a completely resolved ovarian chocolate cyst. She delivered the healthy female child on 12 Oct. 2021. Her pain and excess bleeding during menses are also reduced, and she is completely cured with Ayurvedic treatment. There is no recurrence of any symptoms and signs until now.

Patient consent:

Written consent for publication of this case study in your journal was obtained from the patient.

Pathya-Apathya:

To avoid psychological stress. To avoid spicy and excessive foods, fast foods (pasta, peaches, pizzas), baked goods, fermented foods, and cold drinks. To consume more green leafy vegetables (spinach, cabbage, capsicum, broccoli), sesame seeds, flax seeds, sunflower seeds, pumpkin seeds, fruits (orange, apple, papaya), and jiggery in the diet.

Aloe's compound⁵

Aloes Compound is a clinically proven non-hormonal medicine that helps regulate menstrual cycles, stimulate ovulation and promote overall menstrual health. Offers benefits for menstrual problems such as menstrual cramps, irregular or scanty periods, delayed puberty, infertility, and counteracting the side effects of contraceptive pills.

- It consists of Aloes Indica, Myrrh (Balsamodendron myrrh, Manjistha, Harmal, Jiwanti, Kasis Bhasma, and Kamboji (Breynia patens). Aloe's compound stimulates physiological and timely ovulation, ensures the right quality and quantity of cervical mucus to facilitate better forward movement of sperms Regulates menstruation.
- Review of the Aloe Compound literature showed that many authors reported favourable conception rates when used in infertility.

Himalaya Evercare Forte Syrup⁶

It has analgesic and estrogenic properties that help repair the endometrium by regulating estrogen levels and help heal inflamed endometrium during menstruation. This formulation improves fertility by regulating ovarian hormones. It helps in hormonal balance in women, so it is useful in the treatment of irregular menstruation. The key ingredients of Himalaya Evecare Forte syrup are Kumari, Jatamansi, Lodhra, Methi, Mundi.

Pushpdhanva Rasa⁷

Most of the ingredients in Pushpadhanva Rasa have Tridosha nashaka properties which act in a targeted way in Samprapti Vighatana. All Bhasmas in Pushpadhanya Rasa have Tridosha shamaka, Deepana, and Pachana properties thanks to which the fundamental passage of Agnimandya involved in Samprapti is relieved. Hence, the Dhatvagni correction occurs which leads to the correct formation of Rasa dhatu. This results in the proper formation of Upadhatu, Artava which can be interpreted as hormones, menstrual blood, and egg. Pushpadhanva ras ingredients stimulate the ovaries and cause the follicles to ripen. The property of Vatashamaka is found in all Bhasmas. Therefore, the Prakrut karmas of Vata are restored resulting in the correct Beejotpatti and Beejotsarga. Along with these other different bhasma properties in the pushpdhanya rasa support Dhatu Poshana and Bala vardhan etc. Therefore, they have a specific effect on the growth, maturation, and rupture of the follicles due to them Prabhava.

Drugs that have the property of Vataniyamana, Pittakapha shamana help to correct an important Kriyatmaka factor in Beejotpatti and Beejotsarga. Hence it can therefore be rightly concluded that Pushpadhanva Rasa is a promising drug in Ayurveda in cases of Vandhyatva anovulatory factor.

Ichhabhedi Rasa⁸

Content of ichchabhedi rasa includes-Shunti, Maricha, Shuddha Parada, Shuddha Gandhaka, Tankana Bhasma & Shuddha Jayapala. Ichhabhedi Rasa helps by removing excess fluid content which helps in the reduction of inflammation. Ichhabhedi Rasa by strong purgation reduces the fluid content of Kapha Doshas which ultimately reduces obstruction hampering rupture of follicles. Along with this, a concept given in ayurveda for indication of virechan in the reproductive cycle i.e., beejam bhavti karmukam it can be concluded that ichchabhedi ras with its strong fluid extraction action by raising pitta dosha helps in LH surge and there by rupture of mature graffian follicle releasing antral fluid from it.

Leptadene¹⁰

Leptaden 2 tabs bd was given during the second half of each menstrual cycle in all cases to improve environmental factors for proper implantation of the fertilised ovum. Laptaden inhibits biosynthesis of PG F 26, by the uterine tissues and thus acts as prophylaxis against abortion, since any increase in PG F2a causes abortion. Leptaden improves environmental factors for proper implantation of the fertilised ovum. It helps in the sustenance of pregnancy to full term.

Laghumalini vasant rasa¹¹

Laghumalini Vasanta Rasa improves the quality and functioning of Rasa Dhatu and thus nourishes the

remaining Dhatu which results in Garbha Poshana. It is an Ayurvedic remedy suitable for coping with the problems that occur during pregnancy, as it is very useful for stabilizing the fetus, thus reducing the tendency to abortion. It is also useful in women's health problems such as menorrhagia, leukorrhea. This medicine has been clinically proven to be effective in increasing the thickness and receptivity of the endometrium based on its content. Its content includes Rasaka Bhasma, Maricha churna, butter, and lemon juice (bhavna dravya). Furthermore, the essential factors necessary for ovarian function, menstrual regulation, and the correction of LPD are vitamin C, vitamin E, L-arginine, zinc, and tamina. Beta carotene. Furthermore, these are important for improving the function of cytokines and chemokines responsible for creating a healthy atmosphere in the uterus for embryo implantation. LMV has been used since ancient times by Ayurvedic Vaidyas, so its chemical composition was studied, and it was concluded that it contains all these essential factors. Hence, in this study, it is shown that LMV is the drug choice in LPD and implant failure.

CONCLUSION

In the modern symptomatic treatment system of medicine, hormonal and surgical interventions are the only options available for endometriotic cysts. Despite the aforementioned treatment, relapse of the disease is very common. Ayurveda offers a wide range of medicines so that a patient can recover completely without the disease returning. This Ayurvedic treatment helps cure patients with endometrioma or chocolate ovarian cysts. From this case study, we can conclude that Ayurvedic medicines are effective in treating chocolate ovarian cysts with success. In addition, there is a further need for studies over longer periods and on a large sample.

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