



ISSN (O): 2320-5407
ISSN (P): 3107-4928

Journal Homepage: - www.journalijar.com

INTERNATIONAL JOURNAL OF ADVANCED RESEARCH (IJAR)

Article DOI: 10.21474/IJAR01/22128
DOI URL: <http://dx.doi.org/10.21474/IJAR01/22128>



RESEARCH ARTICLE

REBALANCING REPRODUCTION: AN AYURVEDIC CASE STUDY IN PCOS AND UTERINE FIBROID MANAGEMENT

Acharya Manish¹, Gitika Chaudhary², Richa³, Apurba Das⁴, and Tanu Rani⁵

1. Director, Meditation Guru, Jeena Sikho Lifecare Limited, India
2. Senior Consultant, General Surgeon, BAMS, PGDIP, PGDGS, MS (Ayurveda), Jeena Sikho Lifecare Limited, India
3. Senior Research officer, BAMS, PGDIP, CICR, CAIM, CMW, Jeena Sikho Lifecare Limited, India
4. Consultant, BAMS, Jeena Sikho Lifecare Limited Hospital, Kolkata, West Bengal, India
5. Research Associate, BAMS, Jeena Sikho Lifecare Limited, India.

Manuscript Info

Manuscript History

Received: 06 September 2025
Final Accepted: 08 October 2025
Published: November 2025

Key words:-

Irregular menstrual cycles,
Ayurveda, Apana vayu, Granthi, Artava
Vaha Srotas Vikara, Artava Kshaya

Abstract

Polycystic Ovary Syndrome (PCOS) and Uterine Fibroids are prevalent gynecological disorders that significantly impact women's reproductive and metabolic health, often requiring long-term management. This case study, conducted at Jeena Sikho Lifecare Limited Hospital, Kolkata, explores the effectiveness of Ayurvedic interventions in managing these conditions in a 30-year-old female patient. PCOS, a common endocrine disorder, is characterized by irregular menstrual cycles, hyperandrogenism, and polycystic ovaries, while uterine fibroids are benign tumors causing heavy menstrual bleeding and pelvic pain. The patient presented with irregular menstruation, lower abdominal pain, and heaviness and underwent a four-month personalized Ayurvedic regimen, including Ayurvedic formulations, diet, and lifestyle modifications. Significant improvements were observed, including regularized menstrual cycles, reduced abdominal discomfort, and a decrease in ovarian cyst size. Diagnostic imaging confirmed positive therapeutic effects, suggesting that Ayurvedic treatments contribute to hormonal balance, reproductive health, and metabolic regulation. These findings highlight Ayurveda's potential as a complementary approach to conventional treatments. However, further large-scale studies and clinical trials are necessary to validate its efficacy and establish standardized protocols for integrating Ayurveda into modern gynecological care.

"© 2025 by the Author(s). Published by IJAR under CC BY 4.0. Unrestricted use allowed with credit to the author."

Introduction:-

Polycystic Ovary Syndrome (PCOS) is a common hormonal disorder affecting women of reproductive age [1]. It is characterized by irregular menstrual cycles, excessive androgen levels, and the presence of multiple small cysts on

Corresponding Author:- Gitika Chaudhary

Address:- Senior Consultant, General Surgeon, BAMS, PGDIP, PGDGS, MS (Ayurveda), Jeena Sikho Lifecare Limited, India

the ovaries [2]. Women with PCOS often experience symptoms such as irregular periods, excessive hair growth, acne, and difficulty getting pregnant.

The underlying causes of PCOS include insulin resistance, hormonal imbalances, and genetic predisposition. The condition significantly impacts reproductive and metabolic health, increasing the risk of type 2 diabetes, cardiovascular diseases, and infertility. Uterine fibroids, also known as leiomyomas, are benign tumors that originate from the smooth muscle tissue of the uterus. These growths vary in size and can cause symptoms such as heavy menstrual bleeding, pelvic pain, and reproductive complications. The exact cause of fibroids remains unclear, but hormonal imbalances, genetic factors, and lifestyle influences are considered major contributing factors [3]. Several studies have explored the concept of Artava Vaha Srotas and their role in reproductive health. Research highlights the significance of these channels in the formation and transportation of menstrual blood [4]. Anatomical and physiological aspects of Artava Vaha Srotas have been examined, emphasizing their role in female reproductive health and their dysfunction in conditions such as infertility and menstrual irregularities [5]. Pathological changes in Artava Vaha Srotas have been assessed through clinical, biochemical, and radiological findings, providing insights into their role in maintaining reproductive well-being [6].

Key studies on PCOS and Artava Vaha Srotas have provided valuable insights into the etiology and management of reproductive disorders. The functional anatomy and hormonal regulation of Artava Vaha Srotas have been explored, underscoring their significance in female reproductive health [4]. Additionally, the Ayurvedic perspective on PCOS suggests that factors such as Doshadushti, Dushya, Srotas, Ama, Agni, and Vyadhi Lakshana play a crucial role in disease manifestation and should be addressed for effective management [7]. Clinical features of PCOS have also been correlated with Vata-Kaphaja Artava Dushti and Nashtartava, highlighting the potential of Ayurvedic treatments in managing the condition [8]. Modern research has shown that PCOS is a complex endocrine disorder characterized by irregular menstrual cycles, hyperandrogenism, and polycystic ovaries [7]. It is primarily managed through lifestyle modifications, hormonal therapy, and insulin-sensitizing medications such as metformin. In severe cases, ovarian drilling or assisted reproductive techniques may be recommended for women experiencing infertility due to PCOS. For uterine fibroids, modern medicine offers various treatment options ranging from pharmacological management with hormonal therapy to surgical interventions such as myomectomy and hysterectomy.

Newer treatment modalities, including MRI-guided focused ultrasound and uterine artery embolization, have also been explored to manage fibroid-related symptoms with minimal invasiveness [9]. Modern research on Artava Vaha Srotas Vikara has further emphasized the anatomical and physiological significance of these channels [10]. Studies have shown that disruptions in these channels can lead to infertility, menstrual disorders, and hormonal imbalances, reinforcing the importance of maintaining their proper function [4]. In Ayurveda, PCOS is often correlated with Artava Dushti and Artava Kshaya. Artava Dushti encompasses various menstrual irregularities caused by imbalances in the doshas (Vata, Pitta, and Kapha), while Artava Kshaya specifically refers to conditions like oligomenorrhea and hypomenorrhea, where menstrual flow is scanty or delayed [11]. Ayurvedic principles suggest that improper diet, sedentary lifestyle, and stress contribute to the aggravation of Kapha and Vata doshas, leading to the formation of cystic structures in the ovaries. Treatments involve a combination of Ayurveda medicines, diet, and lifestyle modifications to restore hormonal balance and improve reproductive health.

Ayurvedic management of PCOS differs from conventional treatments, which primarily rely on hormonal therapy and insulin-sensitizing drugs. Instead, Ayurveda emphasizes detoxification, strengthening of the reproductive system, and maintaining hormonal equilibrium through personalized interventions. PCOS has been correlated with Artava Dushti and Artava Kshaya, highlighting the role of impaired reproductive health in its pathogenesis [12]. Furthermore, the relationship between PCOS symptoms and Vata-Kaphaja Artava Dushti as well as Nashtartava (pathological secondary amenorrhea) has been explored, suggesting an Ayurvedic approach to understanding and managing the condition [8]. Uterine fibroids are often correlated with Granthi or Arbuda in the Garbhashaya in Ayurveda. Granthi refers to a knot-like swelling or lump, while Arbuda denotes a tumor or growth. These terms are used to describe conditions that resemble the characteristics of uterine fibroids [13].

According to Ayurvedic texts, these conditions fall under Artava Vaha Srotas Vikara, which are disorders related to the female reproductive system. Ayurvedic management of fibroids includes therapies that aim to balance the doshas, reduce Kapha accumulation, and improve circulation in the reproductive organs. In summary, the Ayurvedic correlation of PCOS with Artava Dushti and Artava Kshaya offers valuable insights into the holistic management of

reproductive disorders. Unlike conventional treatments that primarily focus on symptom suppression, Ayurveda aims at identifying and addressing the root cause through dietary, lifestyle, and therapeutic interventions. Similarly, the Ayurvedic understanding of uterine fibroids as Granthi or Arbuda highlights the importance of a systemic approach in treating fibroids.

By integrating modern research with Ayurvedic concepts, a more comprehensive and effective treatment strategy can be developed for managing PCOS, uterine fibroids, and other gynecological disorders. This study aims to assess the impact of Ayurvedic interventions in managing Uterine fibroids and PCOS in a 30-year-old female patient.

Case Report:-

A 30-year-old woman visited Jeena Sikho Lifecare Limited Clinic, Kolkata on October 07, 2024. She was confirmed with Uterine fibroid and PCOS. Her primary conditions during the first visit were irregular menstruation, lower abdominal pain, heaviness in lower part of the body and constipation. There was no relevant family history. The patient was advised to take pelvis ultrasound scan and the findings areas mentioned in Table 1. The details of initial assessment are mentioned in Table 2.

Table 1 Pelvis ultrasound scan findings

Date	11-Oct-24	05-Dec-24
Uterus	Normal in size and echotexture, measures 106×37×37 mm. partly subserosal fibroid (16×15 mm) seen in anterior myometrium	Not seen dilated
Right ovary	Normal in size and echotexture measures 3 × 1.2 cm. cyst seen in right ovary (2.6 × 2.7 cm)	Normal in size and echotexture measures 2.1 × 1.9 cm.
Left ovary	Normal in size and echotexture measures 2.8 × 1.2 cm.	Normal in size and echotexture measures 2.0 × 1.5 cm.
Urinary bladder	Partially distended	Optimally distended

Table 2. The details of initial assessment on the visits.

Date	07-10-2024	21-01-2025
Blood pressure	100/60 mmHg	80/60 mmHg
Weight	102.2 Kg	103 Kg
Pulse rate/min	67	73
Nadi	Vataj	Vataj
Jiwha	Snigdha	Saam
Sugar	106 mg/dl	107 mg/dl

The patient adhered to a meticulously designed Disciplined and Intelligent Person (DIP) Diet to complement the Ayurvedic treatments [14,15].

Treatment Plan:-

Dietary Guidelines:-

The following dietary recommendations are provided by Jeena Sikho Lifecare Limited Clinic, Kolkata:

Foods to Avoid:

- Eliminate wheat, processed and refined foods, dairy, animal-based products, coffee, and tea.
- Avoid eating after 8 PM to promote better digestion and metabolic function.

Hydration:

- Consume alkaline water 3-4 times a day, along with herbal tea, "living" water, and turmeric water.

Hydration:

Incorporating Millets:

- Include five types of millets in your diet: Foxtail, Barnyard, Little, Kodo, and Browntop.
- Ensure that millets are cooked using steel utensils to maintain their nutritional value.

Meal Timing & Structure:

- Breakfast (9:00 - 10:00 AM): Steamed seasonal fruits (equal to the patient's weight × 10 grams) and steamed sprouts.
- Lunch (12:30 - 2:00 PM): Steamed salad and cooked millets.
- Evening Snacks (4:00 - 4:20 PM): Light, nutritious snacks.
- Dinner (6:15 - 7:30 PM): Same as lunch. Special Practices:
- Express gratitude before meals to encourage positive energy.
- Sit in Vajrasana after eating to enhance digestion and circulation.

Lifestyle Guidelines

The infographic consists of six vertical panels, each with an oval image at the top and text below. A large orange double-headed arrow is at the bottom. The panels are: 1. Sun gazing: Image of a person with arms raised to the sun. Text: 'Sun gazing. Spend 30 minutes each morning in direct sunlight to absorb vitamin D and promote overall vitality and health.' 2. Yoga: Image of a person in a yoga pose against a green background. Text: 'Yoga: Practice yoga (Sukhasana and Sukshma pranayama) daily from 6:00 to 7:00 AM, focusing on flexibility, strength, and mental clarity to support hormonal balance and general well-being.' 3. Meditation: Image of a person meditating at sunset. Text: 'Meditation: Integrate meditation into your daily routine to reduce stress, increase mental clarity, and improve emotional well-being.' 4. Barefoot Walking: Image of a bare foot on a rock. Text: 'Barefoot Walking: Walk briskly for 30 minutes daily, preferably barefoot on natural surfaces like grass, to improve circulation and connect more deeply with nature.' 5. Sleep: Image of a person sleeping. Text: 'Sleep: Aim for 6-8 hours of restful sleep each night to promote physical and mental recovery and ensure optimal functioning of the body's systems.' 6. Consistent Daily Routine: Image of a clock surrounded by icons of daily activities. Text: 'Consistent Daily Routine: Adhere to a balanced and structured daily routine to create harmony between meals, physical activity, and rest, fostering long-term health and vitality.'

Medicinal Interventions:-

The patient was advised to take Divya Shakti powder, Granthi Har Vati, Aartav Shodhak vati, Raj Pravartini Vati, She capsule, GBS powder, Stoni capsule and liver tonic. A detailed description of the Ayurvedic medications advised are provided during the visit on October 07, 2024 is detailed in Table 3.

Table 3. Ayurvedic medications advised during the visit on October 07, 2024

Medicine Name	Ingredients	Dosage	Therapeutic Effects
Granthi Har Vati	Kachnar (<i>Bauhinia variegata</i>), Gugglu (<i>Commiphora wightii</i>), Amalki (<i>Phyllanthus emblica</i>), Bibhitika (<i>Terminalia bellirica</i>), Haritaki (<i>Terminalia chebula</i>), Shunti (<i>Zingiber officinale</i>), Marich (<i>Piper nigrum</i>), Pippal (<i>Piper longum</i>), Varuna (<i>Crateva religiosa</i>), Sukshamala , Dalchini (<i>Cinnamomum verum</i>), Tamal Patar (<i>Cinnamomum tamala</i>).	1 TAB BD (<i>Adhobhakta</i> with <i>koshna jala</i>)	Supports thyroid dysfunction, enlarged lymphnodes, breast lump, PCOD, weight loss, fibroids, endometriosis and obesity
Divya Shakti Powder	Trikatu , Triphala , Nagarmotha (<i>Cyperus rotundus</i>), Vay Vidang (<i>Embelia ribes</i>), Chhoti Elaichi (<i>Elettaria cardamomum</i>), Tej Patta (<i>Cinnamomum tamala</i>), Laung (<i>Syzygium aromaticum</i>), Nishoth (<i>Operculina turpethum</i>), Sendha Namak , Dhaniya (<i>Coriandrum sativum</i>), Pipla Mool (<i>Piper longum</i> root), Jeera (<i>Cuminum cyminum</i>), Nagkesar (<i>Mesua ferrea</i>), Amarvati (<i>Achyranthes aspera</i>), Anardana (<i>Punica granatum</i>), Badi Elaichi (<i>Amomum subulatum</i>), Hing (<i>Ferula assafoetida</i>), Kachnar (<i>Bauhinia variegata</i>), Ajmod (<i>Trachyspermum ammi</i>), Sazzikhar , Pushkarmool (<i>Inula racemosa</i>), Mishri (<i>Saccharum officinarum</i>).	Half a teaspoon HS (<i>Nishikal</i> with <i>koshna jala</i>)	Enhances overall vitality and energy levels, addressing fatigue and weakness, Detoxification of body
She Capsule	Ashwagandha (<i>Withania somnifera</i>), Ulatkambal (<i>Cissampelos pareira</i>), Ashok (<i>Saraca asoca</i>), Supari (<i>Areca catechu</i>), Bhumi Amla (<i>Phyllanthus niruri</i>), Harmal (<i>Peganum harmala</i>), Lodhra (<i>Symplocos racemosa</i>), Shatpushpa (<i>Anethum sowa</i>), Vansh (<i>Bambusa vulgaris</i>), Ashwath (<i>Ficus religiosa</i>), Jiyapota (<i>Leucas aspera</i>), Shivlingi (<i>Bryonia laciniosa</i>), Bala (<i>Sida cordifolia</i>), Aluva (<i>Alocasia indica</i>), Naag Kesar (<i>Mesua ferrea</i>), Jiwanti (<i>Leptadenia reticulata</i>).	1 CAP BD (<i>Adhobhakt</i> with <i>koshna jala</i>)	Used for the treatment of Hormonal dysfunction, infertility, menstrual disorders, PCOD/PCOS, fibroids, anemia and blood purification
Raj Pravartini Vati	Kanyasara (<i>Aloe barbadensis</i>), Shuddha Kasis (<i>Ferric sulfate - Fe₂(SO₄)₃</i> or <i>Ferrous sulfate - FeSO₄</i>), Shuddha Hingu (<i>Ferula assafoetida</i>), Shuddha Tankan (<i>Sodium borate - Na₂B₄O₇·10H₂O</i>).	1 TAB BD (<i>Adhobhakta</i> with <i>koshna jala</i>)	Maintains Nutritional Balance
Aartav Shodhak Vati	Soya (<i>Glycine max</i>), Carrot Seed (<i>Daucus carota</i>), Ulat Kambal (<i>Abroma augusta</i>), Baanas Ki Jad (<i>Withania coagulans</i>), Heerabol (<i>Commiphora myrrha</i>), Tankan Bhasma (<i>Sodium borate - Na₂B₄O₇·10H₂O</i>), Hara Kashish (<i>Ferrous sulfate - FeSO₄</i>), Musabar (<i>Aloe barbadensis</i>), Hing (<i>Ferula assafoetida</i>), Halon (<i>Salvia aegyptiaca</i>), Kalonji (<i>Nigella sativa</i>).	1 TAB BD (<i>Adhobhakta</i> with <i>koshna jala</i>)	Treats amenorrhea, pcod, scanty flow, oligomenorrhea and premature menopausal

The patient revisited on January 01, 2025 with reduction in her symptoms. She reported regular menstruation, no pain density during menstruation, normal bleeding and the heaviness was reduced. The Ayurvedic medications advised during the visit is described in Table 4.

Table 4. The Ayurvedic medications advised during the visit on January 01, 2025

Medicine Name	Ingredients	Dosage	Therapeutic Effects
Divya Shakti Powder	Trikatu, Triphala, Nagarmotha (<i>Cyperus rotundus</i>), Vay Vidang (<i>Embelia ribes</i>), Chhoti Elaichi (<i>Elettaria cardamomum</i>), Tej Patta (<i>Cinnamomum tamala</i>), Laung (<i>Syzygium aromaticum</i>), Nisoth (<i>Operculina turpethum</i>), Sendha Namak, Dhaniya (<i>Coriandrum sativum</i>), Pipla Mool (<i>Piper longum</i> root), Jeera (<i>Cuminum cyminum</i>), Nagkesar (<i>Mesua ferrea</i>), Amarvati (<i>Achyranthes aspera</i>), Anardana (<i>Punica granatum</i>), Badi Elaichi (<i>Amomum subulatum</i>), Hing (<i>Ferula assafoetida</i>), Kachnar (<i>Bauhinia variegata</i>), Ajmod (<i>Trachyspermum ammi</i>), Sazzikhar, Pushkarmool (<i>Inula racemosa</i>), Mishri (<i>Saccharum officinarum</i>).	Half a teaspoon HS (<i>Nishikal</i> with <i>koshna</i> <i>jala</i>)	Enhances overall vitality and energy levels, addressing fatigue and weakness, Detoxification of body
GBS Powder	Varsabhu (<i>Boerhavia diffusa</i>), Patherchat (<i>Bryophyllum pinnatum</i>), Hajrulyahood Bhasam (<i>Purified Silicate of Lime</i>), Safatika Bhasam (<i>Purified Alum - Potash Alum</i>), Jaunkhar (<i>Calcium carbonate</i>), Kalmishora (<i>Potassium nitrate</i>), Gokshura (<i>Tribulus terrestris</i>).	1 TSF BD (<i>Adhobhakta</i> with <i>koshna</i> <i>jala</i>)	Used for gall bladder stone, kidney stone, UTI and urinary tract blockage
Stoni capsule	Pashan Bhed (<i>Bergenia ligulata</i>), Gokhru Chota (<i>Tribulus terrestris</i>), Kulthi (<i>Macrotyloma uniflorum</i>), Pather Bar (<i>Ficus arnottiana</i>), Ilechi Badi (<i>Amomum subulatum</i>), Jawakhar (<i>Calcium carbonate</i>), Akshar (<i>Natron - Sodium carbonate</i>), Shudh Shilajeet (<i>Purified Asphaltum</i>), Hazral Yahud Bhasam (<i>Purified Silicate of Lime</i>).	1 CAP BD (<i>Adhobhakta</i> with <i>koshna</i> <i>jala</i>)	Helps to manage kidney stone, diuretic, GB stone and UTI
Liver Tonic	Lal Punarnava (<i>Boerhavia diffusa</i>), Safed Punarnava (<i>Boerhavia diffusa</i>), Bala (<i>Sida cordifolia</i>), Atibala (<i>Abutilon indicum</i>), Patha (<i>Cyclea peltata</i>), Giloy (<i>Tinospora cordifolia</i>), Chittrak (<i>Plumbago zeylanica</i>), Kakoli (<i>Lilium polyphyllum</i>), Vasa (<i>Adhatoda vasica</i>), Nagarmotha (<i>Cyperus rotundus</i>), Ajwain (<i>Trachyspermum ammi</i>), Sonth (<i>Zingiber officinale</i>), Kali Mirch (<i>Piper nigrum</i>), Long (<i>Piper longum</i>), Methi (<i>Trigonella foenum-graecum</i>), White Jeera (<i>Cuminum cyminum</i>), Roheda Chhal (<i>Tecomella undulata</i>), Dalchini (<i>Cinnamomum verum</i>), Tejpatta (<i>Cinnamomum tamala</i>), Badi Elaichi (<i>Amomum subulatum</i>), Chotti Elaichi (<i>Elettaria cardamomum</i>), Jaiphal (<i>Myristica fragrans</i>), Nagkesar (<i>Mesua ferrea</i>), Kankol (<i>Piper cubeba</i>), Multhi (<i>Glycyrrhiza glabra</i>), Shekel (<i>Balanites aegyptiaca</i>), Mahua (<i>Madhuca longifolia</i>).	7.5 ml BD (<i>Adhobhakta</i> with <i>sama matra</i> <i>koshna jala</i>)	Helps in improving overall liver health.

Result:-

Effectiveness of Ayurvedic Treatments for Uterine fibroid and PCOS:

After undergoing a comprehensive 4-month Ayurvedic treatment regimen, the patient experienced significant improvements in both clinical symptoms and diagnostic outcomes. These positive results indicate that Ayurvedic interventions may be beneficial in managing Uterine fibroid and PCOS. The patient reported a substantial reduction in symptoms such as irregular menstruation, lower abdominal pain, heaviness in lower part of the body and constipation. Diagnostic tests, including abdominal ultrasonography, also showed notable improvements, with positive changes in the size, shape, and echogenicity of the uterus, ovaries, and urinary bladder. This suggests that Ayurvedic treatments may help alleviate Uterine fibroid and PCOS symptoms by promoting hormonal balance and enhancing ovarian health, which are crucial in the condition's pathophysiology. The Pelvis USG scan reports of October 11, 2024 and the whole abdomen USG scan reports of December 05, 2024 is attached as Fig 1 and Fig 2 respectively. The regular menstruation and improvements in diagnostic imaging underscore the potential of Ayurvedic therapies not only to manage symptoms but also to contribute to the long-term health of patients with Uterine fibroid and PCOS. Given that Ayurvedic treatments typically take a holistic approach, incorporating diet, lifestyle changes, and other traditional practices, they may serve as a complementary method alongside conventional medical treatments, thereby improving the overall quality of life for patients.

Need for Further Research:-

While the findings of this case study are encouraging, it is essential to recognize that they stem from the treatment of a single patient. As a result, the outcomes cannot be broadly applied to all individuals with uterine fibroids and PCOS. To establish the efficacy and safety of Ayurvedic therapies on a larger scale, further research is required. In particular, randomized controlled trials involving diverse patient populations are necessary to assess the consistency and reliability of these results. In-depth studies are needed to elucidate the precise mechanisms by which Ayurvedic treatments influence key physiological processes, such as hormonal balance, ovarian function, and metabolic regulation. The development of standardized treatment protocols and dosage guidelines would facilitate the integration of Ayurvedic interventions into mainstream clinical practice. Until more substantial evidence is available, both patients and healthcare providers should approach Ayurvedic treatments for uterine fibroids and PCOS with a balanced perspective, recognizing their potential benefits while acknowledging the need for further scientific validation.

Discussion:-

In this context, Ayurvedic medicine presents a promising alternative for treating Uterine fibroid and PCOS. This case report discusses the application of various Ayurvedic therapies in a 30-year-old woman diagnosed with these conditions. The patient experienced symptoms such as irregular and heavy menstrual cycles, lower abdominal pain and constipation. The Samprapti and SampraptiGhataka[11,16,17] of this case study is depicted in Fig 3. The image of PCOS is mentioned in Fig 4.

Fig 3. The Samprapti and SampraptiGhataka of this case study

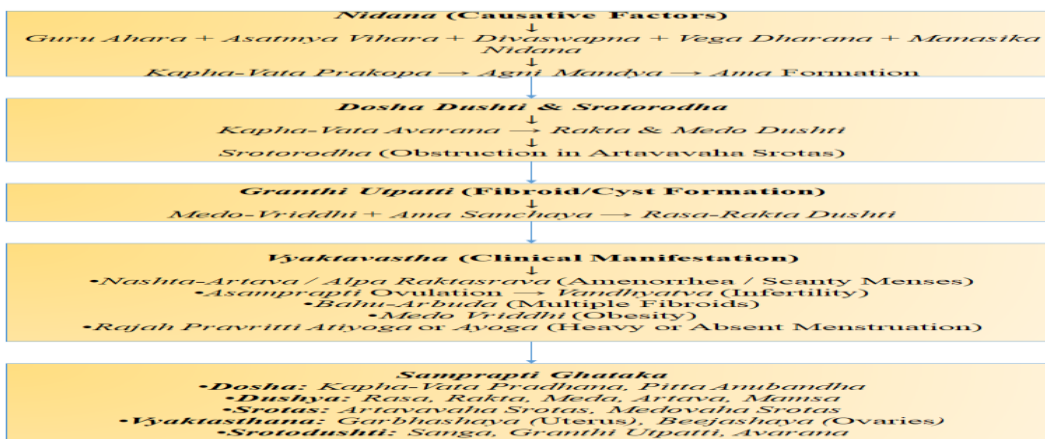
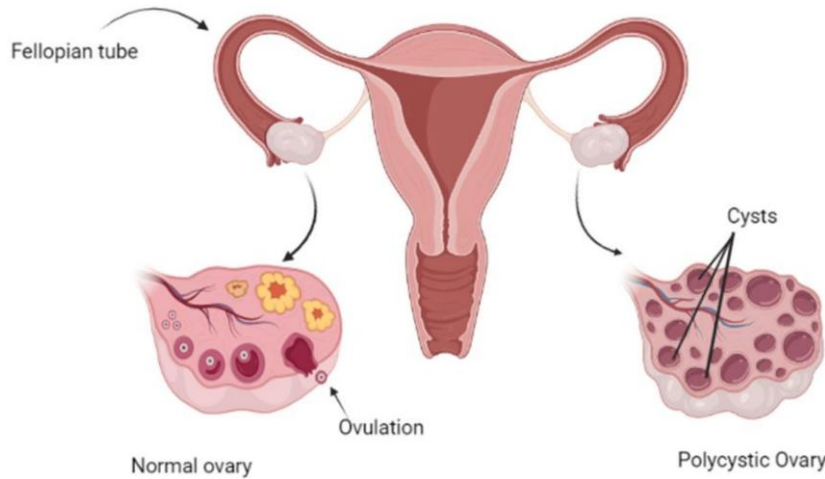


Fig 4. The difference between PCOS ovary and normal ovary

The advised medicines work synergistically to break the Samprapti Ghataka of Uterine Fibroids and PCOS by targeting the underlying Dosha, Dushya, Srotas, and Agni imbalances. Divya Shakti Powder helps balance Kapha and Vata, promotes metabolism, and enhances ovarian function by reducing Avarana and clearing Ama from the system. Granthi Har Vati specifically targets fibroid formation by reducing Medo-Rakta Dushti, shrinking abnormal tissue growth, and purifying Artavavaha Srotas. Aarthav Shodhak Vati detoxifies the reproductive tissues, stimulates Agni, and removes Kapha-Vata Avarana, allowing proper follicular maturation. Similarly, Raj Pravartini Vati plays a vital role in regulating menstruation by stimulating menstrual flow, correcting hormonal imbalances, and alleviating Artavavaha Srotodushiti to restore normal ovulation. She Capsule nourishes the uterus, rejuvenates Rasa&Rakta Dhatu, and reduces inflammation, providing overall support to reproductive health. GBS Powder is particularly beneficial in managing Medo Dhatu Dushti seen in PCOS, improving Agni, reducing Ama, and addressing insulin resistance. Stoni Capsule further aids in metabolic correction, detoxifies Rasa&RaktaDhatu, and clears SrotasSanga (obstruction), ensuring better circulation and hormonal regulation.

Finally, the Liver Tonic supports Pitta Shamana, improves estrogen metabolism, and prevents Raktapradar (heavy bleeding) by enhancing liver function, which is crucial for hormonal detoxification. Together, these medicines effectively reduce Kapha-Vata Avarana, regulate Agni and hormonal balance, clear Artavavaha Srotas obstruction, and purify Rakta&MedoDhatu, addressing both Uterine Fibroids and PCOS at multiple levels. This holistic approach restores normal ovarian function, facilitates menstrual regularity, and prevents excessive tissue growth, ultimately breaking the disease pathology. Ayurvedic treatments provide a comprehensive approach to managing Uterine Fibroids and PCOS by addressing the underlying causes and rebalancing the body's internal systems, including the doshas (Vata, Pitta, and Kapha). These therapies focus on restoring hormonal equilibrium (Sattva), enhancing ovarian health (Artava), and improving overall metabolic processes (Agni). The approach involves Ayurvedic medicines (Aushadhi), dietary adjustments (Ahara), and lifestyle modifications, all aimed at promoting overall well-being (Swasthya). Although further clinical research is needed to substantiate these benefits, Ayurvedic interventions may provide effective Chikitsa for women with Uterine Fibroids and PCOS, supporting both physical health (Sharirik Swasthya) and mental wellness (Manasik Swasthya).

Conclusion:-

The case report on managing Uterine Fibroids and PCOS through Ayurvedic interventions illustrates highly promising results, emphasizing the potential benefits of traditional treatments in managing this complex condition.

Symptoms: Before starting Ayurvedic treatment, the patient was grappling with a range of distressing symptoms. These included irregular menstruation, heaviness in lower abdomen often accompanied by constipation, all of which significantly impacted her quality of life. After four months of Ayurvedic treatment, there was a remarkable improvement in her condition.

Vitals and Investigations:-

Further examination through vital signs and diagnostic investigations supported the positive impact of the Ayurvedic treatment. Between the initial evaluation on October 11, 2024 and the follow-up on December 05, 2024, significant improvements were observed in the patient's condition. The uterus, initially normal in size and echotexture, measuring 106 × 37 × 37 mm with a partly subserosal fibroid (16 × 15 mm) in the anterior myometrium, showed no signs of dilation during the follow-up, suggesting potential improvement in fibroid-related changes. The right ovary, which initially measured 3 × 1.2 cm with a cyst measuring 2.6 × 2.7 cm, demonstrated a reduction in size to 2.1 × 1.9 cm, indicating a significant decrease in the cyst. Similarly, the left ovary, which was initially 2.8 × 1.2 cm, reduced slightly to 2.0 × 1.5 cm, while maintaining normal echotexture. Additionally, the urinary bladder improved from being partially distended to optimally distended, reflecting better functionality. These findings highlight a favorable response to the treatment plan, particularly in reducing the size of ovarian cysts and improving uterine and bladder conditions. Notably, both abdominal pain and bleeding were substantially reduced, suggesting that Ayurvedic treatment played a key role in alleviating the physical manifestations of Uterine Fibroids and PCOS.

Fig 1. The Pelvis USG scan reports of October 11, 2024



DEPARTMENT OF RADIODIAGNOSIS AND IMAGING

Patient Name : Mrs. RADHIKA KOTHARI	Order Date : 11-10-2024 16:12
Age/Sex : 33 Year(s)/Female	Report Date : 11-10-2024 17:36
UHID : AIGG.20866109	Bill No. : AGOCS241035746
Ref. Doctor : Dr.SHRADDHA RAMCHANDANI	Facility : AIG Hospitals, Gachibowli

USG PELVIS

Suboptimal study due to patient's body habitus.

URINARY BLADDER: Partially distended.

UTERUS: Normal in size and echotexture, measures 106 x 37 x 37 mm. Partly subserosal fibroid (16 x 15 mm) seen in anterior myometrium. Endometrial thickness is normal, measures 5 mm.

OVARIES: Normal in size and echotexture.
 Right ovary measures 3 x 1.2 cm. Cyst seen in right ovary (2.6 x 2.7 cm). No internal septation / solid component seen within.
 Left ovary measures 2.8 x 1.2 cm.

No free fluid in abdomen.




IMPRESSION:
 -Small uterine fibroid.
 -Simple right ovarian cyst.

Adv: Clinical correlation and further evaluation.




Dr. JEEL HARISHBHAI LATHIYA
MBBS, MD
 Junior Consultant

Fig 2. The whole abdomen USG scan reports of December 05, 2024

RADIOLOGY REPORT



Name :	Mrs RADHIKA KOTHARI	Patient ID :	41235500433
Gender / Age :	Female / 30 Years	Registration Date & Time :	05-Dec-2024 10:04
Ref id :		Receiving Date & Time :	05-Dec-2024 11:23
Bill Location :	Pulse Howrah	Report Date & Time :	05-Dec-2024 17:44
Ref By :	Dr. Apurba Das BAMS, MD		

USG STUDY OF WHOLE ABDOMEN

LIVER :
Is normal in size (measures 14.3 cm), outline and shows mild diffuse increase in echogenicity. No focal lesion is seen. Intrahepatic biliary radicles are not seen dilated. Hepatic & Portal venous systems appear normal. Portal vein measures 0.96 cm. in calibre.

GALL BLADDER :
Is seen normal in size, shape, outline, position & wall thickness. Few (5-6) tiny calculi noted, largest one measures 0.36 cm. No mass lesion is seen. No pericholecystic fluid collection is seen.

CBD :
Is not seen dilated and measures 0.45 cm.

PANCREAS :
Is normal in size, shape, outline and echotexture. No definite focal lesion is evident. Pancreatic duct is not seen dilated. No tenderness is seen over the region.

SPLEEN :
Is normal in shape, size, position and echotexture. No focal lesion is seen. No abnormal vessels are seen at the splenic hilum. Spleen measures 8.9 cm. in length.

KIDNEYS :
Both kidneys appear normal in size, shape, position and echotexture. Cortico-medullary differentiation is normal. Central echocomplexes of both kidneys appear normal. No focal lesion is seen. No evidence of hydronephrosis or calculus is seen in either kidneys.
Right kidney measures 10.3 cm.
Left kidney measures 10.2 cm.

URETERS :
Ureters are not seen dilated.

URINARY BLADDER :
Urinary bladder appears optimally distended. It appears smooth in outline. No mass lesion or any calculus is seen within the urinary bladder.

UTERUS :
Uterus is anteverted in position, regular in outline and normal in size. Myometrial echotexture is

Page 1 of 2

Pulse Diagnostics Pvt. Ltd.
75, Sarat Bose Road, Kolkata - 700 026 | CIN : U85195WB2001PTC093142

OR suc
ies and
ts over.



RADIOLOGY REPORT			
Name :	Mrs RADHIKA KOTHARI	Patient ID :	41235500433
Gender / Age :	Female / 30 Years	Registration Date & Time :	05-Dec-2024 10:04
Ref Id :		Receiving Date & Time :	05-Dec-2024 11:23
Bill Location :	Pulse Howrah	Report Date & Time :	05-Dec-2024 17:44
Ref By :	Dr. Apurba Das BAMS, MD		

homogeneous & normal. No focal lesion is seen. Endometrial echo measures 0.71 cm. Cervix is normal in size & echotexture.
Uterus measures 9.0 x 3.9 x 2.7 cm.

ADNEXA :

Both ovaries are visualized. They appear normal in size & echotexture. No adnexal mass lesion is seen.
Right ovary measures 2.1 x 1.9 cm.
Left ovary measures 2.0 x 1.5 cm.

No evidence of free fluid in P.O.D.

Retroperitoneum- No abdominal lymphadenopathy is seen.
No evidence of Ascites is seen.

IMPRESSION :

Grade I fatty liver.
Tiny calculi in gall bladder.

Please correlate with clinical findings & relevant investigations.

----- End Of Report -----

Mukesh Kumar Gupta

Jhumpa Halder
Verified BY

Mukesh Kumar Gupta
DMRD, DNB (Radiodiagnosis)
WBMC 68415

Conclusion:-

In conclusion, the Ayurvedic treatments administered in this case led to substantial improvements in the patient's symptoms, vital signs, and diagnostic findings. These results underscore the potential of Ayurvedic therapies to not only relieve the symptoms of Uterine Fibroids and PCOS but also address the underlying physiological disturbances, including ovarian enlargement and hormonal imbalances. The normalization of the ovaries and endometrial cavity suggests that Ayurvedic treatments could potentially support the restoration of reproductive health and improve overall patient outcomes. However, while these results are encouraging, further research is crucial to validate the findings and optimize treatment protocols. Rigorous clinical trials and studies are needed to establish standardized Ayurvedic treatment guidelines for Uterine Fibroids and PCOS. Such research would help in refining treatment approaches, ensuring their safety, and increasing the confidence of both patients and healthcare providers in integrating Ayurvedic therapies with conventional medical care. In summary, while Ayurvedic interventions show great promise, continued exploration into their efficacy and mechanisms is essential to fully integrate them into mainstream Uterine Fibroids and PCOS management.

Reference:-

1. World Health Organization. Polycystic ovary syndrome [Internet]. Available from: <https://www.who.int/news-room/fact-sheets/detail/polycystic-ovary-syndrome?form=MG0AV3>
2. Cleveland Clinic. Polycystic ovary syndrome (PCOS) [Internet]. Available from: <https://my.clevelandclinic.org/health/diseases/8316-polycystic-ovary-syndrome-pcos?form=MG0AV3>
3. Stewart EA, Cookson CL, Gandolfo RA, et al. Epidemiology of uterine fibroids: a systematic review. *BJOG*. 2017 Sep;124(10):1501-12.
4. Ramya R, Rajashekhar KN, Holla G. A pragmatic approach to Artava Vaha Srotas. *Int J Creative Res Thoughts*. 2024;12(1): Article ID: IJCRT2401298.
5. Shinde RS, Pande PP. A study on Artav-Vaha Srotas and its Mulsthana. *Int J Trend Sci Res Dev*. 2022;6(4):1102.
6. Shivakumari et al. A study on Srotodushti with special reference to assessment of Srotoshti Lakshana in Artavavaha Srotas through clinical, bio-chemical, and radiological findings – Survey study. *Int Ayurvedic Med J* [Internet]. 2021 [cited 2021 Oct]. Available from: http://www.iamj.in/posts/images/upload/2339_2346.pdf
7. Choudhary P, Sevatkar BK, Godatwar PK, Sharma S. PCOS: an approach to its etio-pathogenesis in Ayurvedic parlance. *J Ayurveda Hol Med*. 2019;7(1):27-43.
8. Rashmi T, Kumar SS, Choudhary P. An Ayurvedic approach to PCOS. *Int J Ayurveda Pharma Res*. 2024;12(9):119-23. <https://doi.org/10.47070/ijapr.v12i9.3346>
9. Micić J, Macura M, Andjić M, Ivanović K, Dotlić J, Micić DD, et al. Currently available treatment modalities for uterine fibroids. *Medicina*. 2024;60(6):868. <https://doi.org/10.3390/medicina60060868>
10. Pandey S, et al. A detailed study on Artava Vaha Srotas w.s.r. to Artava Dushti and its modern correlation. *Int Ayurvedic Med J* [Internet]. 2023 [cited 2023 Nov]. Available from: http://www.iamj.in/posts/images/upload/2857_2860.pdf
11. Chethanakumari A, Angad JM. Ayurvedic intervention in Artava Kshaya – A case report. *World J Pharm Life Sci*. 2024;10(7):155-7. <https://www.wjpls.org>
12. Singh S, Kavya GM, Sharma KK. Polycystic ovarian syndrome – Its Ayurvedic correlations and management. *J Nat Ayurvedic Med*. Edwin Publishers.
13. Akhila VG, et al. Review article: Ayurvedic perspective of uterine fibroids. *Int J Adv Ayurveda Res*. 2020;4(8):887-92.
14. Chowdhury BR. World's Best, The D.I.P. Diet. Dr. Biswaroop Roy Chowdhury; 2024.
15. Pandey A, Azad AS, Bhardwaj A, Thakur G, Prakash G. Effectiveness of Gravitational Resistance and Diet (GRAD) system in reversing chronic kidney disease (CKD) - among dialysis patients. Dayanand Ayurvedic College, Shridhar University [Internet]. 2022. Available from: <https://davAyurveda.com/wp-content/uploads/2022/10/j-GRAD-System-Paper-FINAL-Mar-27-2.pdf>
16. Mhalank A, Dalvi NS. Ayurvedic Nidana & Samprapti: PCOS; A review. *World J Pharm Med Res*. 2023;9(6):183-5.
17. Kumari S, Siddesh S. PCOS – A critical review through Ayurveda. *Int Ayurvedic Med J* [Internet]. 2017 [cited 2017 Mar]. Available from: http://www.iamj.in/posts/images/upload/882_887.pdf