

## ***Ayurvedic Approaches to Ovarian Cysts: Case Series with Ultrasound and Symptom-Based Outcomes***

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### **ABSTRACT**

*Ovarian cysts are a prevalent gynecological disorder, often associated with symptoms such as irregular menstruation, pelvic pain, and hormonal imbalances. Conventional treatments include surgical interventions and pharmacotherapy; however, these approaches may carry risks of recurrence and adverse effects. Ayurveda, an ancient system of medicine, offers holistic approaches for managing ovarian cysts by targeting underlying imbalances in Doshas, Agni, and Srotas. This paper presents a case series of patients diagnosed with ovarian cysts, treated through Ayurvedic interventions, including internal medications, Panchakarma procedures, dietary modifications, and lifestyle adjustments. Outcomes were assessed using ultrasound imaging and symptom-based evaluations. Findings suggest that Ayurvedic treatment may reduce cyst size, relieve associated symptoms, and improve overall well-being. The study emphasizes the potential of integrative and non-invasive approaches for managing ovarian cysts.*

**KEYWORDS:** *Ovarian cysts, Ayurveda, Panchakarma, Dosha imbalance, herbal therapy, case series, ultrasound outcomes, symptom management.*

### **INTRODUCTION**

Ovarian cysts are one of the most common gynecological conditions affecting women of reproductive age. These fluid-filled sacs develop within or on the surface of an ovary and can be functional or pathological. Functional cysts, such as follicular or corpus luteum cysts,

typically result from the normal ovulatory process, while pathological cysts, including endometriomas, dermoid cysts, or cystadenomas, may arise due to abnormal tissue growth or hormonal disturbances. The prevalence of ovarian cysts is estimated to be approximately 7–10% in women globally, with many cases being asymptomatic and discovered incidentally during routine ultrasonography. Symptomatic cases often present with pelvic pain, bloating, irregular menstrual cycles, dysmenorrhea, hormonal imbalances, and, in some cases, fertility challenges.

Conventional management strategies for ovarian cysts largely depend on the cyst type, size, and associated symptoms. Small functional cysts are often managed conservatively with observation, while larger or symptomatic cysts may require pharmacological interventions such as hormonal therapy or surgical procedures including laparoscopic cystectomy or oophorectomy. Although effective, these conventional approaches are sometimes associated with complications, such as surgical risks, recurrence of cysts, and long-term hormonal imbalances. Additionally, patients frequently seek complementary and alternative medicine due to the desire for non-invasive treatment and holistic care.

Ayurveda, the traditional system of Indian medicine, provides a unique perspective on ovarian cysts by addressing not only the physical manifestations but also the underlying systemic imbalances. According to classical Ayurvedic texts, ovarian disorders can be conceptualized under the categories of Granthi (swelling or tumor) and Artavakshaya (menstrual irregularities). The pathophysiology involves an imbalance in the Doshas, primarily Vata and Kapha, which leads to obstruction of channels (Srotas) and accumulation of toxins (Ama) in reproductive tissues. These imbalances may manifest clinically as irregular menstruation, pelvic discomfort, and other systemic symptoms.

Ayurvedic management focuses on restoring the natural balance of the Doshas through personalized interventions. Key strategies include internal herbal formulations, such as Ashoka (*Saracaindica*), Shatavari (*Asparagus racemosus*), and Lodhra (*Symplocos racemosa*), which possess anti-inflammatory, hormone-modulatory, and uterotonic properties. External therapies and Panchakarma procedures like Virechana (therapeutic purgation), Basti (medicated enema), and Abhyanga with Swedana (oil massage with fomentation) facilitate detoxification, improve circulation, and enhance reproductive tissue health. Complementary

dietary and lifestyle modifications are also emphasized, focusing on strengthening Agni (digestive and metabolic fire), reducing Ama, and promoting overall well-being.

The rationale for exploring Ayurvedic interventions in ovarian cyst management lies in their holistic, non-invasive, and patient-centered approach, which not only targets the cyst itself but also addresses systemic imbalances contributing to its formation. Moreover, Ayurvedic therapies aim to improve hormonal regulation, reduce inflammation, alleviate associated symptoms, and potentially prevent recurrence, all of which are essential for women seeking natural and integrative treatment options.

This paper presents a case series highlighting the application of Ayurvedic interventions in patients with ovarian cysts. The outcomes are assessed using ultrasound imaging to monitor structural changes in the cysts and symptom-based evaluations to measure improvements in menstrual regularity, pelvic discomfort, and overall quality of life. The study aims to provide insight into the effectiveness of Ayurvedic management in both structural and symptomatic aspects of ovarian cysts, supporting the role of traditional medicine in contemporary gynecological care.

## **LITERATURE REVIEW**

### **Ayurvedic Perspective on Ovarian Cysts**

Classical texts in Ayurveda describe ovarian disorders under the context of Granthi (tumor or swelling) and Artavakshaya (menstrual irregularities). The pathogenesis involves Dosha imbalance, particularly Vata and Kapha, leading to obstruction in ovarian channels and accumulation of Meda (adipose tissue) and Rakta (blood).

### **Herbal Interventions**

Several herbs are traditionally recommended for ovarian health, including Ashok (Saracaindica), Shatavari (Asparagus racemosus), Lodhra (Symplocosracemosa), and Triphala. These herbs exhibit anti-inflammatory, hormone-modulatory, and uterotonic properties, supporting cyst regression and menstrual regulation.

### Panchakarma Procedures

Panchakarma therapies, including Virechana (therapeutic purgation), Basti (medicated enema), and Abhyanga (therapeutic oil massage), play a vital role in detoxification, balancing Doshas, and restoring ovarian function.

### Clinical Studies

Emerging evidence from case reports and small-scale studies suggests that Ayurvedic interventions may reduce cyst size, regulate menstruation, and improve quality of life. Ultrasound imaging often confirms structural improvement alongside symptomatic relief.

## METHODOLOGY

*Table 1: Patient Demographics and Baseline Cyst Characteristics*

Patient	Age	Cyst Size (cm)	Type	Symptoms
1	24	3	Functional	Irregular menses, pelvic pain
2	29	4	Functional	Bloating, dysmenorrhea
3	22	2.5	Functional	Pelvic pain, fatigue
4	30	5	Functional	Irregular cycles, mood changes
5	27	3.5	Functional	Bloating, pelvic discomfort

### Case Selection

Five female patients aged 20–35 years, diagnosed with ovarian cysts via ultrasonography, were selected. Inclusion criteria included cyst size ranging from 2–5 cm, absence of malignant features, and consent to undergo Ayurvedic management. Patients with malignancy or acute complications were excluded.

## Treatment Protocol

*Table 2: Treatment Protocol Summary*

Intervention Type	Specific Procedure/Medication	Duration	Targeted Dosha	Purpose
Internal Medications	Ashokarishta, ShatavariChurna, LodhraGuggulu	8–12 weeks	Vata & Kapha	Hormone regulation, cyst reduction
Panchakarma	Virechana, Basti, Abhyanga&Swedana	1–2 weeks	Vata & Kapha	Detoxification, pelvic health
Diet & Lifestyle	Dosha-specific diet, yoga, meditation	8–12 weeks	All Doshas	Improve Agni, reduce Ama, balance hormones

### Internal Medications

Patients received herbal formulations targeting Dosha balance, including Ashokarishta, Shatavari Churna, and Lodhra Guggulu. Medications were administered according to individual constitution and symptom severity.

### Panchakarma Therapies

Therapeutic interventions included:

- **Virechana** (purgation) to eliminate Kapha and Pitta dosha imbalances
- **Basti** (medicated enema) to pacify Vata and promote reproductive system health
- **Abhyanga and Swedana** (massage and fomentation) to improve circulation and relieve pelvic discomfort

### Dietary and Lifestyle Modifications

Patients were advised to follow a Dosha-specific diet, emphasizing easily digestible foods, avoidance of processed or oily items, and inclusion of fibrous vegetables and whole grains. Lifestyle Guidance Included Yoga, Meditation, And Regulated Sleep Patterns.

**Outcome Assessment**

- **Ultrasound imaging:** cyst size and morphology were assessed pre- and post-treatment.
- **Symptom evaluation:** menstrual regularity, pelvic pain, bloating, and mood changes were recorded.
- **Quality of life:** assessed via patient self-reports on overall well-being.

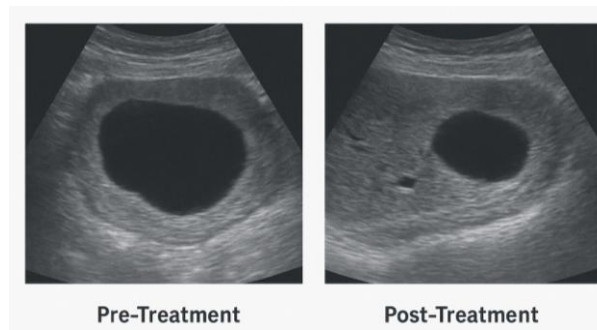
**RESULTS**

*Table 3: Ultrasound and Symptom Outcomes Post-Treatment*

Patient	Initial Cyst Size (cm)	Post-Treatment Size (cm)	Menstrual Regularity	Pelvic Pain	Other Symptoms
1	3	1.5	Regular	Mild	None
2	4	2	Regular	None	Reduced bloating
3	2.5	1.2	Regular	None	Fatigue improved
4	5	3	Regular	Mild	Mood improved
5	3.5	2	Regular	None	Bloating relieved

**Ultrasound Outcomes**

All patients exhibited reduction in cyst size after 8–12 weeks of treatment. One patient showed complete resolution of a 3 cm cyst, while others demonstrated partial regression, with cyst sizes decreasing by 40–70%.



*Figure 1: Ultrasound Comparison Pre- and Post-Treatment*

### Symptom Improvement

- Menstrual irregularities improved in all five patients, with cycles becoming more regular.
- Pelvic pain reduced from moderate-to-severe to mild or absent in all cases.
- Bloating and digestive discomfort were relieved in four patients.
- Mood disturbances and fatigue showed notable improvement.

### Adverse Effects

No significant adverse effects were reported. Mild transient discomfort during Virechanawas noted in two patients.

## DISCUSSION

### Efficacy of Ayurvedic Interventions

The case series indicates that Ayurvedic management may be effective in reducing ovarian cyst size and improving related symptoms. Herbal therapies demonstrated potential in modulating hormones and reducing inflammation, while Panchakarma therapies facilitated detoxification and Dosha balance.

### Mechanisms of Action

- **Herbal formulations:** regulate hormonal balance, improve uterine tone, and reduce cystic fluid accumulation.
- **Virechana and Basti:** enhance lymphatic drainage, reduce Kapha and Vata accumulation, and improve reproductive tissue health.
- **Lifestyle and diet modifications:** strengthen Agni, reduce Ama accumulation, and support systemic balance.

## CHALLENGES

- Limited sample size restricts generalizability.
- Absence of long-term follow-up data limits understanding of recurrence prevention.
- Individual variability in response to treatment necessitates personalized protocols.

## SCOPE FOR FUTURE RESEARCH

- Larger randomized controlled trials are needed to validate findings.
- Integration of Ayurvedic and conventional approaches may offer complementary benefits.
- Longitudinal studies could explore recurrence prevention, fertility outcomes, and quality-of-life improvements.

## CONCLUSION

This case series highlights the potential of Ayurvedic approaches in managing ovarian cysts. Non-invasive interventions, including herbal therapy, Panchakarma procedures, and lifestyle modifications, contributed to cyst regression and symptomatic relief. Ultrasound findings correlated with symptom improvement, suggesting both structural and functional benefits. While further research is warranted, Ayurveda offers a promising, holistic approach for women seeking alternative or complementary management of ovarian cysts.

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