



EFFICACY OF SELECTED AYURVEDA TREATMENT IN THE MANAGEMENT OF BARTHOLIN CYST (YONIKANDA): A CASE REPORT

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ABSTRACT

Bartholin's glands are cysts and abscesses in women of reproductive age. Bartholin's cysts form when the ostium of the duct becomes obstructed, leading to distention of the gland or duct with fluid. When cyst is infected it's referred to as an abscess. In modern science use of antibiotics, incision and drainage, marsupialization is advised for this condition. The treatment of Bartholin's gland cyst by surgery is characterized by some disadvantages and complications such as hemorrhage, postoperative dyspareunia, infections and recurrence as the most common complication after incision and drainage. According to Ayurveda, Yonikanda is a disease of lower vaginal canal or vulva that has round or irregular shape. Vataja, Pittaja, Kapaja and Sannipataja are four types of Yonikanda. Here we present a case of a 36-year-old female patient with Bartholin's Cyst who was advised aspiration with needle. The management by use of selected Ayurveda treatment modality has been proved effective results on Bartholin's cyst.

KEYWORDS: Bartholin cyst, yonikanda.

INTRODUCTION

In female reproductive system, Bartholin's glands are one of the essential organs.^[1] Bartholin gland abscess or cyst is a common vulvar pathology affecting the females of reproductive age group. Bartholin gland cyst occurs due to obstruction of the distal bartholin gland duct results in retention of mucus secretions more prone to infection and formation of abscess which may result in vestibular pain and dyspareunia.^[3] The pathogenesis of Bartholin gland cyst starts slowly as the progressive swelling of the labia majora which later becomes painful and finally it is accompanied by fever and massive swelling of the genital vulva on the affected side. If, Bartholin's cysts small and not inflamed, it may become generally asymptomatic and may be discovered while doing routine pelvic examination but when they become significantly enlarged, they can cause discomfort while walking and during sexual intercourse. Infection of the cyst leads to abscess formation which is associated with severe pain, dyspareunia, fever and limitation of physical activity. Complications of Bartholin's gland cysts or Abscesses include recurrence, severe pain, dyspareunia, difficulty in walking, psychological trauma due to stigmatization, marital disharmony and equally those from the treatment procedure such as haemorrhage,

pyogenic granuloma, anaesthetic problems, post-operative infection.

Usually, therapeutic considerations are not complex.^[8] The treatment options of Bartholin's glands are; antibiotics, simple drainage, fistulization, marsupialization or excision of the gland. The preferred treatment Options of Bartholin's glands are; antibiotics, simple drainage, fistulization, marsupialization or excision of the gland. Recurrence is reported in approximately 20% of patients (ranging from 0% to 38% and is more frequent after simple drainage. Fistulization and marsupialization give a very low rate of recurrence although the rate is probably underestimated due to a short follow-up time. And also, complications of the surgical incision are bleeding and pudendal vessels can easily be injured.

Yonikanda

According to Ayurveda^[4], Yonikanda is a disease of Vulva or lower vaginal canal has round or irregular Shape. This disease resemblance with pus or blood is basic clinical features hence it can be equated with Bartholin's abscess.^[2] There are four types of Yonikanda mentioned in ayurvedic text. They are Vataja, Pittaja, Kapaja C Sannipataja. Vataja yonikanda is character-

Ized by dry or rough surface discolored with cracked appearance. Pittaja yonikanda has burning sensation, Redness and fever. Kapaja yonikanda has colour of Atasi flower or tila associated with itching condition.

Sannipataja yonikanda is associated with features of all the three doshas. Vataja yonikanda can be considered as early stage of Bartholincyst, Pittaja yonikanda as acute suppuration stage, Kaphaja yonikanda as chronic Stage and sannipataja yonikanda as acute suppuration.

Were port the case of a 36-year-old female with ar Bartholin's glandcyst where by managed with Ayurvedic medicines.

CASE PRESENTATION

A 36-year-old married female patient presented with a history of swelling in her left labia major a form 30 days which in itially started as a small swelling, then increased in size, and complain of pain, it ching in valve and vagina with mild pain and white discharge.

Shehad taken treatment from Gynaecologist for this but she note donly temporary relief a long with use of long-term antibiotics and was advised surgery.

Local examination

On examination there was a tender medium swelling in volving left labia major a, shiny and smooth surface, with no punctum and measuring 3 cmin length and 2 cmin width. On vaginal examination that revealed in flammatory condition of labia majora and scanty purulent vaginal discharge.

Progress of treatment

Day	Pain	Inflammation	Itching
Day 0	++	+	+
After 15. Days	No	+	No
After 30 Days	No	No	No

RESULTS

Redness and it ching were reduced within seven days and swelling, and vaginal discharge were re-duced at the end of the fifteen days of treatment plan. Patient was completely recovered at the end of the one-month treatment. Follow up of the patient was done on every three months.

DISCUSSION

The Bartholin's glands, also called great ervestibular glands, are two pea-sized glands located at the posterior region of the vaginal opening. They secrete vagin all ubri cating fluid. The fluid helps to protect vaginalt issue during sexual inter course (Kallam, Kanumury, 2017). Cysts are common complications of the Bartholin's Gland, affecting the ductal region due to out let blockage (Antvorskov, Josefsen, 2014). Cysts and abscesses are often clinically dist in guish able.

Bartholin's cysts form when the ostium of the duct

Menstrual history is 2/25-28 days, regular cycle, lower abdominal pain was present during 2nd day of menstruation with reduced menstrual flow without bloodclotsper forming. Patient had history of 3 FTND. Non diabetic, non-hypertensive and no previous history related to drug all ergies.

Asthavidh pariksha

Clinical examination of the patient on Ayurveda perspective related with kaphap it taj nadi, BP: 110/70 mmHg Nadi (Pulse): 70/min Mala (Stool): constipation Mutra (Urine): prakrut, Jivha – saama, Shabda–prakrut, Sparsh – ushna, Druk – prakrut, Akriti–prakrut, weighted 64.50kg with 5'04" height and overall normal findings in systemic examination.

Investigations

Full blood count– Hb%- 11 gm% WBC– 10800/cmm Platelets–315000/cmm HIV–Non reactive VDRL–Non reactive.

The rapeutic intervention

Kanchnaar Guggulu 2 tablets Morning and evening after food With warm water Triphala guggul 2 tablets morning and evening after food with warm water Mahamanj is tha dika dha 20 mldiluted with 30ml water morning and evening after food. Gandhak rasayan 2 tablets morning and evening after food with warm water Gandharva haritaki 2 tea spoon at night with warm water.

becomes obstructed, leading to distention of the gland or duct with fluid. Obstruction is usually secondary to nonspecific in flam mation or trauma. The cyst is usually 1-3 cm in diameter and often a symptomatic (Lee, Dalpia, 2015). When symptoms dooccur, they usually include the pain less, small lump near the opening of the vagina, redness, swelling and discomfort during sexual inter course, walking and sitting. If the cyst become infected additional symptoms can develop. Al though larger cysts may be associated with pain and dyspareunia. These in clude with pusdraining from the cyst, fever and chills. When a cyst is infected it's referred to asan abscess. Yonik and aisa disease of vulva or lower vaginal can al that has round protube rance or resembling lakucha (a fruit with irregularmargins) and containing of pusand blood (Yogaratnakar, 2005).

In our case, patient presented with labial swelling.

The nidana (causes) of this condition was oily and spicy

food frequently, more mistake of nonveg, emotional disturbances, lack of local hygiene.

Samprapti ghataka (pathogenesis) of yoni kanda utpatti as the pittaka phajados has, rakta, mamsa dushya, artavava has rotas and Yonis thani sthaanasanshraya. Oral drugs were prescribed for the patient for and there sults were seen.^[6]

Kanchnar Guggulu exhibitsacy to toxic effect by preventing cell division (antimitotic) Creducing cell Proliferation. In Ayurvedic text also Kanchnaris recommended for Granthi (cyst) Cthyroid disorders etc.

Triphala guggulu in hibits the growth of microorganism and relieves in flammation.^[5]

Gandhak rasayan is considered a wide spectrum antimicrobial agent with antifungal and antibacterial properties. It helps inreducing redness and it ching. It also helps in vulvitis and white discharge. Mahamanj is thadikadh a works on rakta dushti.

CONCLUSION

The management by use of selected Ayurveda treatment modality in oral and local drugs has been proved effective results on Bartholin's cyst.

REFERENCES

1. William A. Lee; Micah Wittler. Bartholingl and cyst, statpearl [internet], statpearl spublishing; Jan., 2023. [PubMed]
2. Ayurvediya Prasuti Tantra Evum Stree Roga, Dvitiya Bhagaby Prof Premavati Tiwari, published by Chaukhamba Publications.
3. Min Y. Lee Amanda Dalpiaz, Richard Schwann, Yimei Miao, Wayne Waltzerand Ali Khan. Clinical pathology of Bartholin's Glands: A Review of the literature; Currurol, 2015 May; 8(1): 22-25. Publishedonline 2015 May20.
4. Dr. Amruta BS, Dr. Padmasaritha K, Yonikanda -A conceptualstudy ISSN. July-Aug., 2020; 5(4): 2456-3110.
5. Reshma MSaokar, R., S Sarashetti, Screening of antibacterial and antifungal activity of Gandhak Rasayan-anayurvedic formulation (Medplus) online article12/10/2016.
6. Prachi Tomaret. Al. Cytot oxic and anti prolifera tive activity of Kanchanar Guggulu Ayurvedic formulation; J Integr Med., 2018.
7. Jyoti Jain, Dr. Poonam Chaudhary and Dr. Hetal H. Dave, Complete cure of re current yonik and a (Bartholin Gland Abscess) with Ayurveda: A case report, World Journal of Pharmaceutical Research, 8(12): 1014-1022. Case Report ISSN 2277– 7105.
8. DC Dutta's Text book of Gynaecology, Edited By Hiralal Konar, Chapter 1, New Central Book Agency (P) Ltd.