



Case Study

EVIDENCE BASED CLASSICAL AYURVEDA MANAGEMENT THE EPIDYDIMAL CYSTS

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ABSTRACT

Epididymal cysts are collection of fluid in a single sac (unilocular) or more than one (multilocular) as a result of dilatation of efferent epididymal tubules due to tubular obstruction with benign in nature and often bilateral in nature. It involves the development of fluid-filled sacs or cysts within the epididymis, a coiled tube located behind each testicle. An epididymal cyst, also known as a spermatocele that affects the male reproductive system. If it is not treated it may develop to an abscess and probably the destruction of the epididymis which can lead to infertility. In Ayurveda it can be under the heading *Kaphaja Granthi*. A 27-year-old male patient visited the outpatient department of *Kayachikitsa* with complaints of bilateral scrotal swelling with itching since six months. Patient was diagnosed on the basis of colour doppler of scrotum and it indicates bilateral epididymis head cyst with minimal fluid seen around left spermatic cord with herniation of omental fat on *Valsalva*. The patient was treated with classical management of *Kaphaja Granthi* described in texts, *Vaman* (medicated emesis), *Virechana* (therapeutic purgation) and followed by administered *Arogyavardhini Vati* 2 tablet each of 250mg twice a day in empty stomach, *Kanchanara Guggulu* two tablet each of 500mg twice a day after food with lukewarm water and *Varunadi Kashaya* 40ml once a day in morning empty stomach. After this treatment there was no scrotal swelling also the colour doppler study reveals normal colour doppler study with no significant abnormality noted. This case indicates the Ayurveda classical management given in texts can be helps to manage the condition like epidydimal cyst.

INTRODUCTION

The incidence of epididymal cyst is found in 20 to 40% of male population^[1]. Cyst is the medical term derived from Greek word meaning bladder for a soft, irregular fluid-filled sac with an epithelial or endothelial lining. It involves the development of fluid-filled sacs or cysts within the epididymis, cysts develop within the epididymis, a tightly coiled tubular structure located on the back of the testicle and occur in any part of the epididymis, most commonly found on the head or upper part. Epididymal cysts often have a round or oval shape, with a smooth and firm texture, well-defined and feel like fluid-filled sacs when

palpated, round lumps that vary in size^[2]. The cysts are filled with a clear or slightly cloudy fluid which is similar to the normal secretions found within the epididymis and may contain sperm. Epididymal cysts are usually mobile within the scrotal sac. While gently pressed, manipulated and moved around slightly when. Most epididymal cysts are painless, but larger cysts or those that put pressure on surrounding structures may cause mild discomfort or a dull ache^[3]. Generally, cysts of the epididymis are congenital and produced from an embryonic remnant around the epididymis. It is usually found during middle life. If a duct becomes blocked or partially obstructed, the fluid that would normally flow through it can accumulate, leading to the development of a cyst^[4]. Ducts are responsible for transporting sperm and fluids. If left untreated may leads to abscess and destroy the epididymides which can obstruction or blockage in the tiny ducts within the epididymis and lead to infertility. The blocked duct prevents the fluid from being

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released into the epididymis or vas deferens (the tube that carries sperm from the testicle to the urethra). As a result, the fluid pools within the duct, creating a cystic structure. Trans - illumination Test for epididymal cyst is positive due to presence of crystal-clear fluid and numerous septate^[5]. In Ayurveda cyst can be correlate with the term *Granthi*. It is originated by aggravated *Vata*, *Pitta* and *Kapha* vitiates the *Mamsa*, *Rakta* and *Meda* mixed with *Kapha* gives rise to round (*Vritta*), elevated (*Unnatha*) and consolidated (*Grathitha*) swelling called *Granthi* (cyst)^[6]. In this case report the patient was managed with classical principle given in Ayurveda texts, *Vaman* (medicated emesis), *Virechana* (therapeutic purgation) and followed by administered *Shamana* therapy (conservative drugs) for 12 months of periods of whole management.

Case Report

A 27-year-old, male patient from visited the CBPACS Kayachikitsa OPD with complaints of bilateral scrotal swelling with itching in the last 6 months. After examination, proper history taking and by looking to Colour Doppler Scrotum the patient was diagnosed with epididymal cysts which can be take under *Kaphaj granthi* in Ayurveda. The patient was treated with *Vaman Karma* (medicated emesis) *Virechan Karma* (therapeutic purgation) followed by *Shaman Chikitsha* for 13 months. After that Colour Doppler Scrotum was done for the assessment and with the advice of *Pathya-Apathya* (diet and life style modification) the patient was kept under observation for further period.

Case Presentation

Patient was apparently normal 6 month back but gradually noticed increasing size of his bilateral scrotum associated with discomfort and itching for which patient was approached a nearby doctor and took allopathic medication, but did not get any relief from symptoms, so patient approached Kayachikitsa OPD of CBPACS for further management. The patient have no any past history of type 2 diabetes mellitus/hypertension/thyroid disorder, gonadal trauma, orchitis, mumps, hydrocele, tuberculosis, or any other long-term attenuating diseases or fatal illnesses. The patient had no prior surgical history while asked.

General Examination

On examining the patient revealed that, there was not pallor, icterus, cyanosis, clubbing present. A clear tongue, and a vegetarian diet. The personal history of patient reveals decreased appetite with normal bowel movement, micturition and sound sleep. The patient had habit of smoking in the last 2 years and was also a habit of drinking tea 2 times a day and alcohol occasionally.

Local Examination of Cyst

There is mild swelling over bilateral scrotum while inspection. In ultrasound findings it was described that there was Bilateral Scrotum spherical shaped, Smooth, regular and shiny multiple cyst of size include - Left (4x3)mm, Right (3x2)mm was revealed. While examining the scrotum by Tran's illumination Test the test was positive in addition fluctuation Test was also positive with swelling. On the palpation it was soft in consistency, irreducible was found.

Treatment Plan

Before administration of *Shamana* drugs (conservative drugs), *Sodhana* therapy (cleansing therapy) was advised to the patient including *Vaman Karma* (medicated emesis) and *Virechan Karma* (therapeutic purgation)^[7]. For the *Vaman Karma* (medicated emesis) powder of *Haritaki* (*Terminalia chebula Retz.*) and *Shunthi* (*Zingiber officinale Roscoe.*) 2gm twice a day with lukewarm water before the meal was given for *Deepan-Pachana* (enhancing metabolic fire) for 3 days and for *Apana Vayu Anuloman* (carminatives) *Triphala churna* 5gm at bed time with lukewarm water was given for 5 days. After evaluating the patient condition on the sixth day, 30ml of *Maha Triphala Ghrita*^[8] was administered in the early morning on an empty stomach with 100ml of lukewarm water. By observing the *Sneha Jerna Lakshana* (symptoms appeared after the proper intake of ghee) of patient for the following 5 days, the dose of ghee was given in increased pattern according to *Agni* till the patients achieved proper *Snehana* (internal oleation) features. After completion of *Snehana* (internal oleation), whole-body massage for external oleation with *Bala Taila* and *Vashpaswedana* (sudation) with *Dashmoola Kwatha* was done daily morning for the next one day^[9]. The patient was maintained on a normal diet during this time, with precautions taken to prevent consuming too much oil or heavy foods. On the day of *Vamana Karma* (medicated emesis) after massage and sudation in the morning *Akanthapana* was done with around 2 liters of milk, then after 5 minutes *Madanphala Yoga* which consists of powder of *Madan Phala Pippali* (*Randia spinosa*) 4gm, powder of *Vacha Mula* (*Acorus calamus*) 2gm, *Saindhav Lavana* 1gm, *Madhu* 30ml was given. After 45 minutes *Vamanopaga Dravya* (emesis assisting *Dravya*) *Phanta* (hot infusion) of *Yastimadhu* (*Glycyrrhiza glabra*) 1500ml was given to patient^[10]. As per observations during the *Vamana* process *Pravara Sudhi* (8 *Vegas*) was gained. Then patient was given *Dashamooladi Dhoomapan*. *Samsarjan Karma* (post procedure of dietetics and behavioural restriction) was advised for 7 days. Then for another 7 days the patient was advised for maintaining proper dietary regimen. After the 15 days of *Vamana* therapy patient was

admitted for the *Virechan Karma* (therapeutic purgation). From first day powder of *Haritaki* (*Terminalia chebula* Roxb. 2gm) and *Shunthi* (*Zingiber officinale* Roscoe) 2g twice a day with lukewarm water before the meal was advised for *Deepan-Pachana* (enhancing metabolic fire) for 5 days and for *Apana Vayu Anuloman* (carminatives) powder of *Triphala* 5gm at bed time with lukewarm water was given for 5 days. After evaluating the patient condition on the sixth day, 30ml of *Maha Triphala Ghrita*^[11] was administered in the early morning on an empty stomach with lukewarm water. By observing the *Sneha Jeerna Lakshana* of patient for the following 5 days, the dose of ghee was given in increased pattern according to *Agni* (digestive fire) and *Kostha* (nature of bowel) till the patients achieved proper *Snehana* (internal oleation) features. After completion of internal *Snehana*, (oleation) whole-body massage with *Bala*

Taila and *Vashpaswedana* (sudation) with *Dashmoola Kwatha* was done daily morning for the next 3 days^[12]. The patient was maintained on a normal diet during this time, with precautions taken to prevent consuming too much oil or heavy foods. On the day of *Virechana* (therapeutic purgation), after massage and sudation in the morning, *Virechana Yoga* of *Triphaladi Kwatha* which consists of *Triphala Yavakuta* 50gm, *Ttrivrita Yavakuta* 25gm, *Dantimula Churna* 2-10gm was given^[13]. *Madhyam* type of *Shudhi* (16 Vegas) was gained and according to that *Samsarjan Karma* (post procedure of dietetics and behavioural restriction) was advised for 5 days. The patient was advised to shaman therapy (conservative) with *Arogyavardhini Vati* 2 tab each of 250mg twice a day in empty stomach, *Kanchanara Guggulu* 2 tab each of 500mg twice a day after food and *Varunadi Kashaya* 40ml twice a day in empty stomach for 12 months. (Table no-1)

Table 1: Timeline of the event

February 2021	Mild bilateral scrotal swelling
April 2021	Size of scrotal swelling gradually increases associated with discomfort and itching for which he approached a nearby doctor and took allopathic medication but did not get any relief from his symptoms
27 May 2021	Colour Doppler Scrotum of patient reveals bilateral epididymis head cyst with minimal fluid seen around left spermatic cord with herniation of omental fat on <i>Valsalva</i>
August 3 2021	First visit in CBPACS, Kayachikitsa OPD, therapy explained, suggested for admission
August5 2021	Patient was admitted in indoor department of CBPACS
	Treatment started with 5 days of <i>Deepana - Paachana</i> with powder of <i>Haritaki</i> (<i>Terminalia chebula</i>) and <i>Shunthi</i> (<i>Zingiber officinale</i>) 2gm before food with lukewarm water and for <i>Apana Vayu Anuloman</i> powder of <i>Triphala</i> 5gm at bed time with lukewarm water was given for 3 days
August 10 2021	<i>Snehapan</i> (internal administration) started with <i>Mahatriphala Ghrita</i> for 5 days in increasing dose as per <i>Agni</i> (digestive fire) and <i>Kostha</i> (nature of bowel) of patient
August 15 2021	<i>Sarvang Abhyang Swedan</i> was done with <i>Bala Taila</i> for 1 day
August 16 2021	<i>Vaman</i> (medicated emesis) was done with <i>Madanaphala Yoga</i> . <i>Pravara</i> type of <i>Sudhi</i> (8 Vegas) was obtained, followed by <i>Samsarjana Karma</i> (post procedure of dietetics and behavioural restriction) done for 7 days
August 17, 2021	For next 15 days the patient was advised for maintaining proper dietary regimen for <i>Parihara Kala</i>
September 3, 2021	Again treatment started with 5 days of <i>Deepana - Paachana</i> with powder of <i>Haritaki</i> (<i>Terminalia chebula</i>) and <i>Shunthi</i> (<i>Zingiber officinale</i>) 2gm before food with lukewarm water and for <i>Apana Vayu Anuloman</i> powder of <i>Triphala</i> 5gm at bed time with lukewarm water was given for 3 days
September 8, 2021	<i>Snehapan</i> started with <i>Mahatriphala Ghrita</i> for 5 days in increasing dose as per <i>Agni</i> (digestive fire) and <i>Kostha</i> (nature of bowel) of patient
September 13 2021	<i>Sarvang Abhyang Swedan</i> was done with <i>Bala Taila</i> for 3 days
September 16, 2021	<i>Virechana</i> (therapeutic purgation) was done with <i>Triphaladi Kwatha</i> 100ml, <i>Madhyam</i> type of <i>Shudhi</i> (16 Vegas) done at the day of <i>Virechana</i> (therapeutic purgation) followed by <i>Samsarjana Karma</i> (post-procedure of dietetics and

		behavioral restriction) done for 5 days
September 21, 2021		Administration of <i>Shaman</i> therapy <i>Arogyavardhini Vati</i> 2 tab twice a day in empty stomach, <i>Kanchanara Guggulu</i> 2 tab twice a day after food and <i>Varunadi Kashaya</i> 40ml twice a day after food
March 2022		Bilateral scrotal swelling mildly reduced with no itching
August 2022		Bilateral scrotal swelling completely reduced with no itching
August 18 2022		Colour doppler study reveals no significant abnormality noted

Pathya (Wholesome) and Apathya (Unwholesome)

The patient was advised to take dietary items such as *Rakta Shali* (red variety of rice) *Yavak* (barley), *Shyamak* (barnyard millet), *Godhum* (Triticum sativum); legumes such as *Mudga* (green gram), *Adaki* (split pigeon peas), *Chana* (brown chick peas), *Kulath* (horse gram); Vegetables such as *Patola* (*Tricosanthes dioica*), *Karabellaka* (*Momordica charantia*), *Shigru* (*Morianga oleifera*). The patient was asked to avoid milk, curd, cheese and dairy products; heavy foods and fried preparation, fermented and bakery items, avoid jaggery and carbonated drinks, canned juices specially sugarcane juice, junk food, and caffeine. The patient was instructed to refrain from things like binge eating, sleeping during the day^[14].

RESULT AND OUTCOMES

After the treatment protocol of Ayurveda texts for 12 months followed by bio-purification therapies and conservative medicaments patients asked that bilateral scrotal swelling completely reduced with no itching, also the normal colour doppler study reveals no significant abnormality noted.

Table No-2: Result of the study



DISCUSSION

Accordance to Ayurveda classical texts, the description of *Granthi* (nodular/glandular growth) is coated that the bio humours vitiates the *Mamsa* (fleshy/muscles), *Asrik* (blood), and *Meda Dhatu* (fat/adipose tissue) along with *Kapha*, it produce a structure like circular, raised, inflammatory swellings and *Shotha* (inflammation) is the main clinical feature. In texts, the treatment principles of the *Granthi* is mentioned as *Samshodhana Karma* (bio-purification) specially *Vaman* (medicated emesis) and *Virechana* (therapeutic purgation) using *Purana Ghrita*^[15].

Deepana (enhancing metabolic fire) and *Pachana* (digestion) with *Haritaki* (*Terminalia Chebula*) and *Shunthi* (*Zingiber officinale*) corrects *Jatharagni* (digestive fire) as well as *Dhatwagni* (metabolic fire). Also *Termenelia Chebula roxb.* Have *Tridoshahara* (alleviating bio humors), *Deepana* (enhancing metabolic fire), *Lekhana* (bio-scraping) and *Sotha hara* (anti-inflammatory) properties due to which it corrects vitiated *Dosha* and reduces inflammation^[16]. *Vata Kaphahara*, *Deepana* (enhancing metabolic fire), *Bhedana* (drastic purgatives), *Sothahara* (anti-inflammatory), properties of *Sunthi* (*Zingiber*

officinale) helps in *Sroto Sodhana* (cleaning of channels) as well as reduces inflammation^[17].

Probable mode of action of *Vamana*

Madana Phala Yoga contains *Madana Phala* as key ingredients which are best *Vamaka Dravya*. It expels out the vitiated *Kapha Dosha* from body by emesis due to its properties like *Tikta Katu Rasa*, *Ushna Veerya* (hot potency) and *Vyavayi* (substances with quick spread even without digestion), *Vikasi* (property of substance resulting in quick spread and action), *Laghu Guna*^[18]. It has also contains *Madhu* and *Saindhav Lavana* which helps to remove vitiated *Kapha Dosha* by *Kapha Villayana* (alleviates *Kapha Dosa*) and *Chedana* (detachment of vitiated *Dosha*) properties^[19].

Probable Mode of Action of *Virechana*

According to classics *Virechana* (therapeutic purgation) is indicated in *Granthi* (cyst)^[20]. *Triphala*, *Trivrita* and *Danti* decoction was selected for *Virechana* which has purification property of vitiated *Dhatu* (tissue). After *Virechana* (therapeutic purgation), the effect of *Shamana* (Conservative) drug becomes more potent^[21]. *Triphaladi Kashaya* (Decoction) has properties of *Shothahara* (anti-inflammatory), *Granthihara* (reducing size of cyst), *Kapha-Medohara* (which alleviates vitiated *Kapha Dosha* and *Medo Dhatu*), and *Vatanulomana* (normal movement of *Vayu*) actions^[22].

For removing the epididymal cyst, the drug should possess *Shothahara* (anti-inflammatory) properties, *Kapha-Medohara* (which alleviates vitiated *Kapha Dosha* and *Medo Dhatu*) properties and *Granthi-Vidradhihara* (which resolve cyst and abscess) properties. *Kanchnar Guggulu* was prescribed due to its *Vata-Kaphahara* (which alleviates vitiated *Vata* and *Kapha Doshas*), *Lekhana* (Bio-scraping), and *Shothahara* (anti-inflammatory) properties, *Raktashodhana* (purification of blood), which in turn shows significant effect in *Granthi* (cyst)^[23].

In classics the formulation *Arogya Vardhini Vati* possesses *Medovinashini* and *Malasudhikari* (detoxifying) properties^[24]. *Bhasmas* of *Abhraka* (mica) and *Tamra* (copper) along with *Kajjali* (black mixture of mercury and sulphur) obtains deep penetration which enables *Arogya Vardhini Vati* to reach up to cellular level giving higher efficacy. Other components like *Triphala*, *Chitrak* (*Plumbago zeylanica*), *Shilajatu* (*Asphaltum punjabianum*) with *Bhasma* and *Kajjali* becomes capable of detoxifying due to *Sara Guna* (mobility), *Lekhana* (bio-scraping) *Karma* by removing obstruction in channels^[25]. *Guggulu* has *Medo-Anila hara* (which alleviates vitiated *Medo Dhatu* and *Vata Dosha*), *Sothaghna* (anti-inflammatory), *Lekhana* (bio-scraping) properties there by helping reduction of inflammation^[26]. One of the key elements of *Arogya*

Vardhini Vati is *Kutaki* (*Picrorhiza kurroa*), which is *Pitta Virechaka*, *Deepana* (Enhancing metabolic fire), *Bhedanam* (drastic purgatives), *Lekhana* (bio-scraping), *Shothahara* (anti-inflammatory), which helps in *Rakta Suddhi* (purification of blood) along with reduction of size of *Granthi* (cyst). Additionally, it does the *Pachana* (digestion) of *Drava* (liquid) and *Kleda* (clammy) and does the *Raktasodhana* (purification of blood)^[27].

Varunadi Kashaya herbal formulation reduces the size of epididymal cyst by alleviating vitiated *Kapha Dosha* and *Medo Dhatu* due to *Kaphahara* (alleviates *Kapha Dosha*) and *Medo hara* (Allivates *Medo Dhatu*) properties^[28]. *Varuna* (*Crateva nurvala Buch.Ham*) has an anti-inflammatory property by chemical lupeol. Lupeol decreases myeloperoxidase levels (neutrophil-specific marker), thus causing reduction in cell infiltration into inflamed tissues^[29].

CONCLUSION

From this case study, it can be inferred that combining Ayurvedic modalities with dietary and lifestyle changes for management of epididymal cyst is undoubtedly effective. Additionally, It can be more scientifically prove by the such trial on large scale. Planning such studies in the field of Ayurveda is also beneficial for future.

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