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Effect of Unani Formulations on Ovarian Cyst (*Keesa-e-Khusyat-ur-Rehm*) – A Case Report

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ABSTRACT

Ovarian cyst (*Keesa-e-Khusyat-ur-Rehm*) is a fluid-filled sac; develop on one of the ovaries. Many women will evolve at least one cyst during their lifetime. *Ali Ibn-e-Abbas Majusi* (930-994 AD), defined it under the topic of *Warm-e-Balghami*; as it is a swelling filled with viscid phlegm (*Balgham-e-Ghaleez*). In modern medicine, ovarian cyst requires removal with operation, if it not resolved on its own over the course of days to months. Present paper deals with a case study in which a 32 years old female patient of left ovarian cyst of 4 centimeter and 8 millimeter in size was treated with unani drugs; *Majun Dabeedulward*, *Arq Kasni*, *Niswani*, as oral administration, with the aim to evaluate the efficacy of drugs and to avoid Surgery. Patient has shown excellent and admirable result in post treatment investigation and finally patient got free from cyst without operation.

KEYWORDS: Ovarian cyst, *Keesa-e-Khusyat-ur-Rehm*, Unani Drugs, Anti-inflammatory, Emmenagogue.

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INTRODUCTION

The ovary is one of a pair of glands and apart of reproductive system in women that are located on both sides of the uterus, in the pelvis. The ovaries produce eggs as well as the hormones estrogen and progesterone, which control the development of female body characteristics such as the breasts, body shape, body hair, and also regulate the menstrual cycle and pregnancy.

Ovarian cyst (*Keesa-e-Khusyat-ur-Rehm*) is closed, sac-like structures within the ovary that are filled with a liquid or semisolid substance. It is very common and it can vary in size - from less than the size of a pea to the size of a large melon. Many women will develop at least one cyst during their lifetime. In most cases, cysts are painless and cause no symptoms. There are various types of ovarian cysts, such as dermoid cysts, Cystadenoma cyst and endometrioma cysts. However, functional cysts are the most common type, which include follicle and corpus luteum cysts. Dermoid cyst (benign mature cystic teratomas) occurs in younger women. It develops from cells which make eggs in the ovary, and grow quite large - up to 15 cm across. It often contains odd contents such as hair, parts of teeth or bone, fatty tissue, etc. Cystadenomas develop from cells which cover the outer part of the ovary. It has different types like serous cyst adenomas and mucinous cystadenomas. Some grow very large. They are usually benign but some are cancerous. Endometrioma cyst (Chocolate cysts) develops one or more on ovaries of women who have endometriosis; the tissue that lines the womb (uterus) is found outside the uterus. It is benign. Follicular cysts form when the follicle grows larger than normal during the menstrual cycle and does not open to release the egg. It is most common type. Usually, it may contain blood (hemorrhagic cysts) from leakage of blood into the egg sac. Corpus luteum cysts form when Follicle sac doesn't dissolve after releasing an egg. Usually, this cyst is found on only one side, produces no symptoms and resolves spontaneously. Follicular & Corpus luteum cysts can grow up to about 6 cm across. They normally resolve on their own over the course of days to months. Many ovarian cysts usually do not need any treatment as many go away on their own or cause no problems. Some ovarian cysts may need removal with an operation.¹

According to Unani medicine cyst is considered as a type of *Sul'ah* (tumor). It is viscid inflammation, enveloped by a sac of membranous tissue.²

Ali Ibn-e-Abbas Majusi (930-994 AD), illustrated it under the heading of *Warm-e-Balghami*; as it is a swelling filled with viscid phlegm (*Balgham-e-Ghaleez*). It is classified into 4 types; *Shahmiyah*, *Asliyah*, *Ard'haliyah*, *Sheeraziyah*. It is treated by adopting of concoction and expulsion of the abnormal phlegm (*Nuzj-o-Tanqiyah-e-Balgham-e-Ghair Tab'yiah*) along with anti-inflammatory drugs (*Muhallil-e-Warm Advia*) orally as well as topically in the form of *zamad* (paste) and *Marham* (ointment).³

Ibn-e-Sina(980-1037 AD) described it under the topic of *Sul'ah* (tumor); known as *Dunbula-e-Balghami*, characterized by a lump filled with abnormal phlegm (*GhairTab'yiKhilth-e-Balgham*), which may be bloody or honey like viscid.⁴

CASE PRESENTATION

A married female patient aged 32 years old having two kids, suffering from ovarian cyst, visited to Govt. Unani Dispensary, Bheemganj Mandi, Kota, Department of Unani Medicine, Rajasthan, India, for treatment. She complained about pain and fullness in lower abdomen associated with per vaginal painful unusual bleeding, low back pain, and urinary urgency since 2.5 years. The diagnosis was confirmed by Ultrasonography (USG) of abdomen and pelvis. Findings showed as a cyst of 4 centimeter and 8 millimeter size in left ovary.

The patient has been prescribed to take 5 gram of Majun Dabeedulward, and 50 ml of Arq Kasni with plain water on empty stomach at morning & evening, and 10 ml of Niswani syrup after meal twice a day orally. Majun Dabeedulward and Arq Kasni are pharmacopeal, marketed from GMP certified company Hamdard and prepared according to Bayaz-e-Kabeer Volume-2, while Niswani syrup; a patent Unani drug marketed from Dawakhana Tibbiya College, Aligarh.^{5,6}

The ingredients of Majun Dabeedulward are (Each 5g contains) Izkhar Makki (*Cymbopogon jwarancusa*), 33.24mg, Agar Hindi (*Aquilaria agallocha*), 33.24mg, Balchar, (*Nardosachys jatamansi*), 33.24mg, Banslochan, (*Bambusa arundinacea* Retz.), 33.24mg, Tukhm Kanshi (*Cichorium intybus*), 33.24mg, Tukhm Kassos (*Cuscuta reflexa*), 33.24mg, Tukhm Karafs (*Apium graveolens*), 33.24mg, Taj Qalmi (*Cinnamomum cassia*), 33.24mg, Darchini (*Cinnamomum zeylanicum*), 33.24mg, Zarawand Madharaj (*Aristolochia rotunda*), 33.24mg, Qustshirin (*Saussurea hypoleuca*), 33.24mg, Gule Surkh (*Rosa damascena*), 498.6mg, Gule Ghafis (*Gentiana dahurica*), 33.24mg, Luk Maghsool, 33.24mg, Majeeth (*Rubia cordifolia*), 33.24mg, Qiwam Shakar (*Saccharum officinarum*), 3.989g, Zafran (*Crocus sativus*), 4.82mg, Gawzaban (*Borago officinalis*), 0.05ml, Mastagi (*Pistacia lentiscus*), 33.24mg, Ghee, 8.31mg, Preservative: Sodium benzoate.^{7,8}

The constituent of Arq Kasni is (Each 125 ml contains) aqueous distillate from *Tukhme Kasni* (*Cichorium intybus*) (Sd.) (Dst.) 15.60 gm.^{7,8}

The ingredients of Niswani Syp are (Each 10 ml contains); *Vitis vinifera* (*Munaqqasiah*) 400 mg, *Curcuma longa* (*Haldi Zard*) 128 mg., *Post-e-Amaltaas* (*Cassia fistula*) 76 mg., *Berg-e-Suddaab* (*Rutgraveolens*) 38 mg., *Mushk Tara Mashie* (*Menthapulegium*) 38 mg., *Revand Chini* (*Rheum emodi*) 38mg., *Ab'hal* (*Juniperus communis*) 38mg., *Tukhm-e-Gazar* (*Daucus carota*) 38mg., *Tukhm-e-Shibt* (*Anethum sowa*) 38mg., *Tukhm-e-Turab* (*Rhaphanus sativus*) 38mg., *Tukhm-e-Hulba*

(TrigonellaFoenum-graecum) 38mg., Shoneez (Nigella sativa) 38mg., Majeeth (Rubiaccordifolia) 38mg., KunjadSiyah (Sesamumindicum) 38mg.,Baobarang (Embeliaribes) 38mg., InderjauShirin (Wrightiatinctoria) 38mg.,Sheetraj Hindi (Plumbagozeylanica) 38mg., Luk-e-Maghsool (Coccuslacca) 38mg.,Zanjabeel (Zingiberofficinalis) 38mg.,UoodKhaam (Aquilariaagallocha) 38mg., Saleekha (Cinnamomum cassia) 38mg., Khulanjan (Alpiniagalanga) 38mg., Heel-e-Kalan (Amomumsubulatum) 38mg., Tukhm-e-Qurtum (Carthamustinctorius) 38mg., Beikh-e-Izkhar (Cymbopogonjwarancusa) 38mg., FilfilSiyah (Piper nigrum) 38mg., Pakhan Bed (Berginiaugulata) 38mg., AsgandNagori (Withaniasomnifera) 38mg., Sumbul-ut-Teeb (Nardostachysjatamansi) 38mg., Asrol (Raulfiaserpentina) 38mg., Sibr-e-Zard (Aloe barbadensis) 19 g., KhurmaKhushk (Phoenix dactylifera) 200 mg., Post-e-Arjun (Terminaliaarjuna) 200 mg., Post-e-Ashoka (Saracaindica) 104 mg., Heera Kasees (Ferrous sulphate) 23mg.,JawaKhaar(Potassium carbonate) 6 mg., Sugar q. s.⁶

RESULTS AND DISCUSSION

The clinical improved response was excellent and cyst of left ovary completely dissolved after 9 weeks of Unani treatment. The follow-up observation was made on 3rd weeks of treatment. During treatment, the patient did not develop any other complaint. She reported that after treatment, all complaints like lower abdominal pain, per vagina bleeding, low back pain, and urinary urgency are disappeared and got relieved significantly. Ultrasonography is the only diagnostic tool which is being used for the confirmation of diagnosis of ovarian cyst and to assess the results of management. So it was performed after 9 weeks of treatment, findings suggested as normal left ovary. All prescribed Unani medicines were found to be safe, effective. The beneficial actions of these Unani medicines can be attributed to the presence of complex spectrum of actions including, *Munzij-e-Balgham* (concoctive of phlegm), *Mus'hil-e-Balgham* (purgative of phlegm), *Muhallil-e-warm* (anti-inflammatory), emmenagogue (*Mudir-e-haiz*), activities in their ingredients.

Majun Dabeedulward is recommended in ascites, hepatitis, gastritis, and the swelling of uterus.^{7,8} Arq Kasniis indicated in swelling of liver and other visceral organ of the body.^{7,8} Niswaniis highly efficacious in the irregularities of menstrual cycle, leucorrhoea, ovulatory disorder and other disorders of uterus. It tones up the nerve and regulates menstrual functions. It removes pelvic inflammatory disorder.⁶ Pharmacologically, mostly ingredients in these medicines, having *Muhallil-e-warm* (anti-inflammatory), and *Mudir-e-haiz* (emmenagogue), *Munzij-e-Balgham* (concoctive of phlegm), and *Mus'hil-e-Balgham* (purgative of phlegm) properties.

Munaqqa (*Vitisvinifera*), Izkhar Makki (*Cymbopogonjwarancusa*), Agar Hindi (*Aquilariaagallocha*), Darchini (*Cinnamomumzeylanicum*), Qustshirin (*Saussureahypoleuca*), Khulanjan (*Alpiniagalanga*) and FilfilSiyah (*Piper nigrum*) referred as *Munzij-e-Balgham* (concoctive

of phlegm) drugs, as these cause softening of the swelling which contains viscid or abnormal phlegm, by making it able to expel out from the body.^{9,10}

Sibr-e-Zard (Aloe barbadensis), Haldi Zard (Curcuma longa), Revand Chini (Rheum emodi) act as *Mus'hil-e-Balgham* (purgative of phlegm) drugs; cleanse or evacuate of the body from viscid or abnormal phlegm which is the main cause of cyst as per description of *Ali Ibn-e-Abbas Majusi*.^{3,9,10} Gule Surkh (Rosa damascene), Zafran (Crocus sativus), Izkhar Makki (Cymbopogon jwarancusa), Gule Ghafis (Gentiana dahurica), Haldi Zard (Curcuma longa) and Shoneez (Nigella sativa) obtained as *Muhallil-e-waram* (anti-inflammatory) drugs; resolve the swelling by reducing inflammation.^{9,10}

Balchhar (Nardosachys jatamansi), Zarawand Madharaj (Aristolochina rotunda), Gule Ghafis (Gentiana dahurica), Foh (Rubia cordifolia), Post-e-Amaltaas (Cassia fistula), Mushk Tara Mashie (Mentha pulegium), Abhal (Juniperus communis), Tukhm-e-Gazar (Daucus carota), Tukhm-e-Shibt (Anethum sowa), Tukhm-e-Turab (Raphanus sativus), Tukhm-e-Hulba (Trigonella foenum-graecum), Shoneez (Nigella sativa) and Jawa Khaar (Potassium carbonate) act as emmenagogue (*Mudir-e-haiz*) drugs; hastens menstrual flow by regulating estrogen and progesterone hormones.^{9,10}

Gul-e-Surkh (Rosa damascene) is the major constituent of Majun Dabeedulward, which possess anti-inflammatory activity. It was evaluated that carrageenan induced rat paw edema, was significantly reduced, which acted by inhibiting the mediators of acute inflammation, including histamine, serotonin, bradykinin and prostaglandins.¹¹ It also possesses analgesic and antioxidant activities.¹² It has been reported that antioxidants reduce pain.¹³ It has been screened out that Petals of *R. damascena* contain several flavonoids; three flavonol glycosides including quercetin-3-O-glucoside, kaempferol-3-O-rhamnoside and kaempferol-3-O-arabinoside have antioxidant activity.^{12,14} Other chief constituent is Zafran (Crocus sativus) shows antioxidant activity which was mainly attributed to carotenoid and flavonoid compounds, notably glycosides of crocin and kaempferol. Crocin and kaempferol in dried petals were 0.6% and 12.6 (w/w).¹⁵

The major components of Niswaniare Munaqqa (Vitis vinifera), Haldi (Curcuma longa), Post-e-Amaltas (Cassia fistula), Khurma (Phoenix dactylifera), Post-e-Arjun (Terminalia arjuna), Post-e-Ashoka (Saraca indica). Haldi (Curcuma longa) has strong anti-inflammatory action.⁹ It is reported that it contains Curcumin 95%, which modulates the inflammatory response by down-regulating the activity of cyclooxygenase-2 (COX-2), lipoxygenase, and inducible nitric oxide synthase (iNOS) enzymes; inhibits the production of the inflammatory cytokines tumor necrosis factor-alpha (TNF- α), interleukin (IL) -1, -2, -6, -8, and -12, monocyte chemoattractant protein (MCP), and migration inhibitory protein; and down-regulates mitogen-activated and Janus kinases.^{16,17} Post-e-Amaltas (Cassia fistula bark) possesses anti-inflammatory and antioxidant activities. It is reported that the aqueous

(CFA) and methanolic extracts (CFM) of the Cassia fistula bark extracts showed significant radical scavenging by inhibiting lipid peroxidation; may be due to presence of polyphenolic content.¹⁸ Post-e-Arjun (Terminalia arjuna bark) also possess antioxidant, anti-inflammatory and immunomodulatory activities. It is studied that aqueous extracts of T. arjuna showed significant inhibition activity of CYP3A4, CYP2D6 and CYP2C9 enzyme.¹⁹ Ashoka (Saraca indica) dried bark is used as a tonic or stimulant to the endometrium and ovarian tissue.²⁰ Khurma (Phoenix dactylifera) also has anti-inflammatory and anti-oxidants activities. It is demonstrated that Oral administration of the methanolic and aqueous extracts of edible portion of Phoenix dactylifera fruits suppressed the swelling in the foot significantly by 67.8 and 61.3% respectively, while the methanolic extracts of date seeds showed significant reduction by 35.5% in adjuvant arthritis in rats by mechanistically reducing ESR and plasma fibrinogen and normalizing the plasma level of antioxidants.²¹

CONCLUSION

It is concluded that Unani compound drugs; Majun Dabeedul ward, Arq Kasni and Niswani are safe and effective in the treatment of ovarian cyst (*Keesa-e-Khusyat-ur-Rehm*), as these resolve the ovarian cyst with significant improvement in symptoms associated with ovarian cyst, and induce menstruation regularly. Hence Unani drugs could be useful in ovarian cyst (*Keesa-e-Khusyat-ur-Rehm*) as alternative therapy to avoid surgery. Further clinical study is needed to evaluate the efficacy of the drugs at large sample sizes.

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