Homeopathy treatment for Uterine Myomas and Ovarian Cysts Dr Narendra Kumar H

The disease of uterine fibroid or myomas (tumor) and ovarian cysts is very common in women these days. As a result of these disease so many symptoms are found such as irregular and painful menstruation, vaginal discharge infertility, anemia, pressure in urinary bladder, Abortions etc.

The only treatment in modern allopathy is to remove the uterus which is called medical science hysterectomy in some case only myoma (tumor) are removed called Myomectomy.

In above patient the Homoeopathic treatment has been very fruitful and convenient. These Myomas (Tumor, cyst) can be dissolved during 1-3 months with the help of homoeopathic medicine. While taking homoeopathic medicine women may continue their home work, they may save money and their operation may be avoided as well. As for operation is concerned it make the patient bodily, mentally and economically tensed. They cannot performed there house hold activities for at least above 6 months. It place of looking after member of the family such woman them self looked after by the family members, a part from these they have to under go other physical problems and ailments also. If such patients are given homoeopathic treatment they cannot only be cure from the disease but they can keep them self physically and mentally fit and avoid monetary burden also.

Causes the association of fibroids in women with hyper oestrogenism as evidenced by endometral hyperplasisa, dysfunction, metropethic bleeding and endrometriel carcinoma has also been well documented.

Fairly commonly encountered in gynecological practice 5-20% women in the reproductive age group suffering from uteri an tumors and ovarian cyst 1. Myomas are known to increase in size during pregnancy and treatment with oral contraceptives. 2. Myomas are rerely found before puberty and rarely appear after Menopause. 3.The incidence of myomas in higher amongst woman having granulosa cell tumorus which are oesterogen producing as also in women with poly cystic ovarian disease

Distribution- Distribution of myomas (tumor) in the body of the uterus in broadly as follows.

1. Intramural–75% - myomas (tumor) arise within the myometrial wall-called-intramoral or interasititial.

2. Subserous- 10% of if the tumor grow out wards to wards the peritoneal surface called sub serous

3. Submucous- 15% covered only by thin endrometrium.

It is not only uterus but also arise from the round ligament, the uterovarian and uterosecral ligament, fallopian tubes, ovary and other genital organs as cervix vagina, vulva etc. only 1-4% cases of myomas grow primarily in the cervix .

Cause of myomas (tumors) and ovarian cyst in homoeo view – Sycotic miasm produces pelvic troubles in women ovaritis salpingitis pelvic cellulites ovarian cyst fibroids, sterility or one child sterility.

Symptoms-

1. Menstrual disturbance-Menorrhagia- most common symptoms duration of bleeding is prolonged and discharge is heavy. the menorrhagia is due to increased uterine surface, endometrial hyperplesia increase uterine vascularity. Polymenorrhoe- the menstrual cycle being reduced and the duration of the hemorrhage increased. Mertrorrhagia- women over the age 40 years with uterine tumor complains of irregular or continuous bleeding

2.Pain – Spasmodic dysmenorrhoea, may be sever and acute pain.

3.Pressure symptoms – The pressure symptoms are mainly seen with large tumor situated in certain position.

4.Discharge – Myometous polyp may caused blood strain discharge in to the vagina if it gets infected and its surface gets ulcerated, Blood strain offensive vaginal discharge is noted

5.Infertility - due to several factors -P.I.D., corneal fibroid causing blockage of fallopian tubes.

6.Pregnancy complicated by the presence of tumor (myoma)

7.Abdominal Lump - painless abdominal swelling

8. Abortions - may lead to abortion

9.Urgen of urination. Or acute retention of urine- cervical tumor will press upon the bladder and rectum causing difficulty in micturition and constipation, urinary symptoms are usually most sever. Although broad ligament tumor may cause ureteric obstruction .Hydroureter disappears, after permanent hydronephrosis and irreparable renal damage have already occurred.

10. Anemia. (second.sympt.)

Investigation

- 1. Ultrasound is useful in establishing the diagnosis.
- 2. Hysterosalpingogram is useful mainly to diagnose a small submucous myoma (tumor).
- 3. Hysteroscopy in useful in the diagnosis of submucous myomatous polyp causing menstrual disorder.
- 4. CAT Scan helps to differ enliate a myoma from an adrexal mass.

Allopathy Suggest only operative treatment -

1. The methods available are Myomectomy in which the tumors are removed the uterus conserved

2. Total hysterectomy when the uterus containing myomas is removed.

About Ovarian Cyst- Ovarian enlargements cystic or solid may occur at any age functional and inflammatory enlargements of the ovary develop. Almost exclusively during the child bearing years. They may be a symptomatic or produce local discomfort, menstrual disturbances, may be menorrhagia or amenorrhoea, infertility or rarely cause acute symptoms due to complication like hemorrhage rupture or torsion. Abdominal swelling, and pressure symptoms,

Cysts are not uncommon. They may be single or multiple may be bilateral and vary in size from small profinburence (blebs) to cysts of large size. Small cyst is usually movable from side to side.

They are result of failure of abortion of the fluid in an incompletely developed follicle. Large and multiple cysts may cause pelvic pain dyspareunia and occasionally irregular bleeding. If they are not timely cured complication may arise during conception. Cyst occurs May seen at any age. I am not discussing here cancerous cyst/tumor.

Investigation – It is recognizable clinically or documented on ultra sonography **Diets-** All the patient were provided vegetarian food excluding spices & Khatai(sour).

Classification-

I have classified patient in three groups.

i- Patient suffering from Myomas / Fibroid (tumor)

ii- Patient suffering from Ovarian cyst

iii- Patient suffering from Ovarian cyst and fibroid/myomas (tumor)

1.Patient suffering from Myomas / Fibroid (tumor) (all patient cure).

S.No.	Case No.	Age (Years)	Myoma Size	Treatment duration	Remark
1	106	50	1.2×0.9 cm	48 days	cure
2	103	35	2 Myomas A- 2.2×2.7cm B- 2.4×198cm	82 days	cure
3	109	40	2 Myomas A- 2.0×1.8cm B- 2.1×1.5cm	105 days	cure

4	110	30	1.4×1.5cm	50 days	cure
_	10-		2 Myomas A- 3.7x2.9cm		
5	135	45	_	29 days	cure
			B- 2.0×2.8cm		
			2 Myomas A- 1.77×1.84cm		
6	137	35		35 days	cure
			B- 1.86×1.80cm		
7	102	38	3.7×4.1×2 c m		cure
8	146	36	3.8×2.2 cm.	35 days	cure
9	140	44	3.07x2.99 cm	33days	cure
10	144	46	1.1*1.2cm	31 days	cure

Patient suffering from Ovarian cyst

S.No.	Case No.	Age (Years)	Ovarian Cyst Size	Treatment duration	Remark
1	105	17	Rt. Ov.Cyst. 4x3.9 cm.	30 days	cure
2	107	15	Lt. Tomass. 3.9×2.8 cm.	32 days	cure
3	101	35	Rt. Ov.Cyst. 4.5x3.1 cm.	82 days	cure
4	111	32	Lt. Ov.Cyst. 2.9×2.4 cm.	33 days	cure
5	136	14	Rt. Ov.Cyst. 5×6.4 cm.	30 days	cure
6	127	32	Rt. To.mass 2.52×2.72 cm.	63 days	cure
7	141	26	Lt. Ov.Cyst. 5x3.5 cm.	30 days	cure
8	142	20	Rt. Ov.Cyst 3.1x3.17 cm	31 days	cure
9	138	14	Rt T. O. Mass 6.7 x 6 cm	36 days	cure

Patient suffering from Ovarian cyst and fibroid/myomas (tumor) Both

S.No.	Case No.	Age (Years)	Ovarian Cyst Size	Myoma Size in cm.	Treatment duration	Remark
1	104	46	Rt.Ov.cyst 2.24×2.6cm	3 Myomas A- 2.18×2.45 B- 1.01×1.2 C- 0.99×9.4	77 days	Cure
2	108	28	Rt.Ov.cyst 2.2×2.7cm	Multiple myoma size 2.2 to 2.6 cm.	4 months	Cure

During the treatment it was found that three patient were suffering from uterine tumor along with renal stone/GB stone.

In some case is was found that the myomas and ovarian cyst were enlarge during first month of the treatment but letter on the uterian myomas (tumor) Ovarian Cyst were seen gradually reducing in size and ultimately they were cured.

S.No.	Case No.	Age (Year)	Myomas/ ov. Cyst size	First Month	Second Month	Trearmen duretion	Result
1	109	40	A- 2.0×1.8 cm B- 2.1×1.5 cm	A- 2.1×2.6 cm B 1.8×1.8cm	1.2×1 cm 1 myo Cure	96 days	Cure
2	131	35	Rt. Ov.Cy. 6.5×4.0 cm	6.4×4.4 cm		93 days	Cure
3	132	35	Lt. Ov.Cy. 2.88×2.31 cm	3.5×3.2 cm			
4	143	45	Bilateral ov.cy. 7.9*4.9	11.8*11.6cm Rt.ov.cy ,	Pt unde		
			7.2*6.7 cm	Lt cy is cure	treatment		

Total Case Summary: (Duretion- 09. 02. 2004 to 31. 12. 2004)

Total Case	Cure	Under Treatment	Stop Treatment (with in)			Discontinue
			15 Days 1 month 4		45 days	
57	25	22	2	4	2	2

Total Patient - age group Study with Curable time

S.No.	Age group	Ut. Myomas (tumor)		Ovaria	n Cyst	Both myomas ovarian cyst	
		Pt.Cure	Time	Pt.cure	Time	Pt.cure	Time
1	10 – 25 years			6/9	30 to 33days		
2	26 – 40 years	8/24	35 to 105 days	4/5	33 to 82 days	1/2	4 Month
3	41 – 55 years	2/10	29 to 44 days	2/3		1/2	77 days
4	55 – 70 years	1/2	48 days				

While looking at the above table we have seen that maximum patient of age group 26-40 years suffering from uterine tumors , and age group 10-25 suffering from ovarian cyst.

Conclusion – Concluding while looking at the above treatment it can be said that homoeopathy is well effective in treating uterian moymas / fiborid (tumor) and ovarian cyst (excluding cancer) homoeopathy take comparatively less time, less monetary burden and without physical and mental tension on the part of patient. Homoeopathy is quite and safe, economically, simple effective treatment for uterine moymas / fibroids (tumors) and ovarian cysts.

Dr Narendra Kumar H. M.D. (London)

Kile Ka Maidan (kumar Medical) Tikamgarh(M,P.) 472001 India E mail-1- <u>drnkjain_tkg@yahoo.com</u> <u>drnkjain_tkg@sancharnet.in</u> Ph: 07683 245615 Mob: 07683 214615