

CASE STUDY

Ayurveda In Oncology: Symptomatic Relief In Recurrent Breast Cancer Lesion

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ABSTRACT

Breast cancer remains the most commonly diagnosed cancer globally, with rising incidence and recurrence rates, particularly in postmenopausal women. In India, projections estimate over 200,000 new cases annually by 2030. Despite advancements in conventional oncology, the recurrence of breast cancer lesions, especially years after initial treatment, continues to challenge long-term survivorship. This case study highlights the integrative potential of *Ayurvedic* treatment in managing recurrent breast cancer lesions. A 52-year-old female with a history of breast carcinoma presented to Jeena Sikho Lifecare Limited Hospital, Lucknow, Uttar Pradesh, India, with a cauliflower-shaped proliferative reddish mass on the left breast, accompanied by white discharge and localized pain. She was undergoing oral chemotherapy and antihypertensive treatment. *Ayurvedic* inpatient management included therapies such as *Snehana*, *Swedana*, *Matra Basti*, *Shirodhara*, *Jalaukavacharana* (leech therapy), *Pichu*, *Rasayana* formulations, and personalized lifestyle and dietary modifications. Following treatment, the patient experienced marked symptomatic relief, with resolution of discharge and pain, no emergence of new complaints, and improved overall health. This case underscores the value of *Ayurveda* as a holistic alternative or complementary therapy for breast cancer recurrence and emphasizes the need for further clinical validation through controlled studies to establish standardized, evidence-based integrative cancer care protocols.

INTRODUCTION

Breast cancer is the most commonly diagnosed cancer worldwide, with over 2.3 million new cases and 685,000 deaths estimated in 2020. The burden of breast cancer is expected to grow to over 3 million new cases per year by 2040^[1]. In India, the incidences of breast cancer are rising, with an estimated 200,000 women expected to be affected

annually by 2030. The highest incidences are seen in postmenopausal women^[2]. Breast tumors most commonly affect the upper outer quadrant of the breast, which is also a common site for benign breast conditions such as fibro adenoma and breast cysts^[3].

The recurrence of breast cancer lesions remains a significant concern for patients, often manifesting years after initial treatment. These recurrences can occur locally in the breast or chest wall, or regionally in nearby lymph nodes, necessitating comprehensive imaging and biopsies for accurate diagnosis and effective management^[4]. Several factors influence recurrence rates, including surgical techniques, genetic mutations, and the efficacy of adjuvant therapies^[5]. For

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instance, subcutaneous and skin-sparing mastectomies are associated with a recurrence rate of approximately 4.1%, though this risk can be mitigated through the use of radiation therapy. Patients harboring BRCA mutations are particularly vulnerable to recurrence, especially in cases involving multiple synchronous tumors. Moreover, tumor characteristics such as higher histological grades and aggressive molecular subtypes—like triple-negative breast cancer—are linked to increased recurrence risks^[5]. In terms of detection, MRI has proven to be more effective than ultrasound in identifying small, asymptomatic recurrences, demonstrating a detection rate of 95.2% compared to 38.1% for ultrasound^[6]. Long-term monitoring is crucial, as recurrences may emerge 10–20 years after initial treatment, particularly in hormone-sensitive cases, underscoring the need for sustained surveillance^[7]. Despite advances in detection and therapy, the threat of late recurrence persists, highlighting the importance of personalized and continuous follow-up strategies for breast cancer survivors.

Ayurvedic treatment for the recurrence of breast cancer lesions has shown promising results through a multifaceted approach involving *Ayurvedic* formulations and dietary modifications. These interventions aim not only to enhance the overall quality of life for patients but also to reduce the adverse effects of chemotherapy and potentially improve treatment outcomes. *Ayurvedic* herbs such as *Ashwagandha* and *Shatavari* have shown potential in inhibiting hypoxia-inducible factors associated with cancer progression^[8]. Improvements in quality of life have also been documented; for example, a study found that *Ayurvedic* medicines significantly reduced chemotherapy-induced side effects, enabling 65% of patients to complete treatment without delays, compared to only 37% in the control group^[9]. Furthermore, the integration of *Ayurveda*, such as the development of *Swarna Bhasma*, has demonstrated effective tumor control in preclinical studies, with clinical trials suggesting substantial benefits when used alongside conventional cancer therapies^[10]. While these findings are encouraging, it remains crucial to pursue rigorous clinical validation and promote the integration of *Ayurvedic* practices with modern oncology to ensure comprehensive and evidence-based care for breast cancer patients.

In *Ayurveda*, the recurrence of breast cancer lesions is interpreted through the concepts of *Dhatudushti* (vitiation of body tissues), *Dosha-Prakopa* (aggravation of bodily humors), and *Ojas-Kshaya* (depletion of vital essence)^[11]. Breast cancer is often correlated with conditions like *Stana Arbuda* or *Stana Granthi*, where *Arbuda* refers to malignant growth^[12]. The recurrence of such lesions suggests that the underlying imbalances in *Doshas* and *Dhatu*s remain unresolved or have been reactivated due to persistent causative factors (*Nidanas*) and weakened metabolic function (*Agni*)^[13]. While *Vata* and *Kapha* are usually predominant in *Arbuda* formation, recurrence may involve all three *Doshas*. *Vata* governs cellular proliferation,

Kapha contributes to abnormal tissue growth, and *Pitta* may cause metabolic errors leading to mutations^[14]. The vitiation of *Rakta dhatu* (blood tissue) and *Mamsa dhatu* (muscle tissue), which are the primary sites of tumor formation, plays a crucial role in recurrence^[15]. Depletion of *Ojas*, the vital essence responsible for immunity, renders the body more susceptible to recurrence^[16]. The chronic presence of *Ama* (toxins formed due to impaired digestion and metabolism) is also believed to trigger malignancy and hinder tissue healing^[17]. Continued exposure to causative factors such as improper diet (*Viruddha Ahara*), sedentary lifestyle, mental stress (*Manasika Nidana*), or suppression of natural urges (*Vegavarodha*) can reignite the pathological process^[18,19]. The *Samprapti Ghataka*^[20] is depicted in **Table 1**.

Table 1 The Samprapti Ghataka

<i>Ghataka</i>	Details
<i>Dosha</i> (Bio-energetic humors)	<i>Vata</i> (especially <i>Vyana</i> and <i>Apana</i>) for recurrence and spread; <i>Kapha</i> for mass formation; <i>Pitta</i> for cellular inflammation and mutation
<i>Dushya</i> (Vitiated bodily tissues)	<i>Rasa</i> (Plasma fluid), <i>Rakta</i> (Blood), <i>Mamsa</i> (Muscle tissue), <i>Medas</i> (Adipose tissue) (Dhatu dushti leads to Arbuda-like manifestation)
<i>Srotas</i> (Body channels)	<i>Rasavaha Srotas</i> (Channels carrying plasma), <i>Raktavaha Srotas</i> (Channels carrying blood), <i>Mamsavaha Srotas</i> (Channels carrying muscle tissue nutrition), <i>Medovaha Srotas</i> (Channels carrying fat or adipose tissue)
<i>Srotodushti Prakara</i> (Type of channel damage)	<i>Sanga</i> (obstruction), <i>Granthi</i> (nodular formation), <i>Vimarga Gamana</i> (metastasis-like spread)
<i>Udbhava Stha</i> (Origin site of the disease)	<i>Rasa Dhatu</i> (initial stage, reflecting improper tissue nutrition and metabolism)
<i>Adhistan</i> (Seat or location of the disease)	<i>Stana Pradesh</i> (breast tissue, primarily a <i>Mamsa</i> -dominant region)
<i>Vyadhi Swabhav</i> (Nature of the disease)	<i>Yapya</i> (manageable), <i>Punaravartaka</i> (relapsing), <i>Kruchchha</i> (difficult to cure), <i>Sadhya</i> (curable)
<i>Rog Marg</i> (Pathway of the disease)	<i>Bahya Rog Marg</i> (External pathways of disease entry)

Ayurvedic management of recurrence focuses on restoring systemic balance through *Shodhana* (purification therapies) like *Virechana* and *Basti*, which eliminate residual *Doshas* and toxins^[21]. *Rasayana* therapy, using rejuvenating *Ayurvedic* herbs such as *Ashwagandha*, *Guduchi*, and *Amalaki*, is employed to restore *Ojas* and enhance immunity^[22]. A disciplined regimen of diet (*Pathya*), seasonal routines (*Ritucharya*), and lifestyle modifications is essential to maintain *Dosha* equilibrium^[23]. *Manasika Chikitsa*, which includes meditation, yoga, and *Sattvic* practices, plays a critical role in managing stress, a significant factor in recurrence^[24]. Overall, *Ayurveda* offers a holistic and

individualized approach that emphasizes detoxification, immune enhancement, dietary correction, and mental well-being, ideally in integration with conventional treatments for comprehensive cancer care.

OBJECTIVE

To examine the impact of Integrated Ayurvedic treatments on a 52-year-old female with recurrence of breast cancer lesions.

MATERIAL AND METHOD

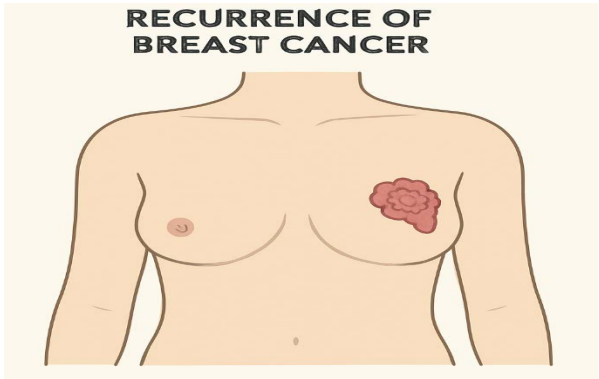
Case Report

A 52-year-old female who was diagnosed with breast cancer in 2023 visited Jeena Sikho Lifecare Limited, Lucknow on April 29, 2025. The major complaints were Cauliflower shaped proliferative reddish mass growth (since 1 month) in left side with white discharge. She has a history of piles, incomplete evacuation and pain in localized area. The patient was diagnosed with recurrence of breast cancer lesions. She was on allopathic medication for hypertension and was taking oral chemotherapy since 1 week. There was no relevant family history but there was a surgical history of post-frequent milk lump over the left breast during 1992. The figure representing the lesion is depicted as Fig 1. The Ashtavidh Pariksha during the treatment period is mentioned in the Table 2.

Table 2. Ashtavidh Pariksha during admission and discharge

Findings	29-04-2025	10-05-2025
Naadi	Vataj Kaphaj	Vataj Kaphaj
Mala (Stool)	Avikrit (Clear)	Avikrit (Clear)
Mutra (Urine)	Avikrit (Clear)	Avikrit (Clear)
Jiwha (Tongue)	Saam (Coated)	Saam (Mildly Coated)
Shabda (Voice)	Spashta (Normal)	Spashta (Normal)
Sparsha (Touch)	Anushna Sheet (Afebrile)	Anushna Sheet (Afebrile)
Akriti (Physique)	Madhyam (Normal)	Madhyam (Normal)
Drik (Eye)	Avikrit (Clear)	Avikrit (Clear)

Fig 1 The diagrammatic representation the lesion



The patient was admitted for IPD from April 29, 2025 and received 12 days of IPD at Jeena Sikho Lifecare Limited, Lucknow, following a comprehensive Ayurvedic treatment plan. The daily vitals during the IPD are mentioned in Table 3. The treatment plan included Panchakarma therapies such as Snehana with Ksheerabala taila, Nadi Swedan, Matra Basti with Ksheerabala taila, Shirodhara with Brahmi taila, Cancer detox therapy, Copper plate therapy with Mahanarayan taila, Leech therapy and Pichu with Jatyadi taila. The patient later discharged on May 10, 2025.

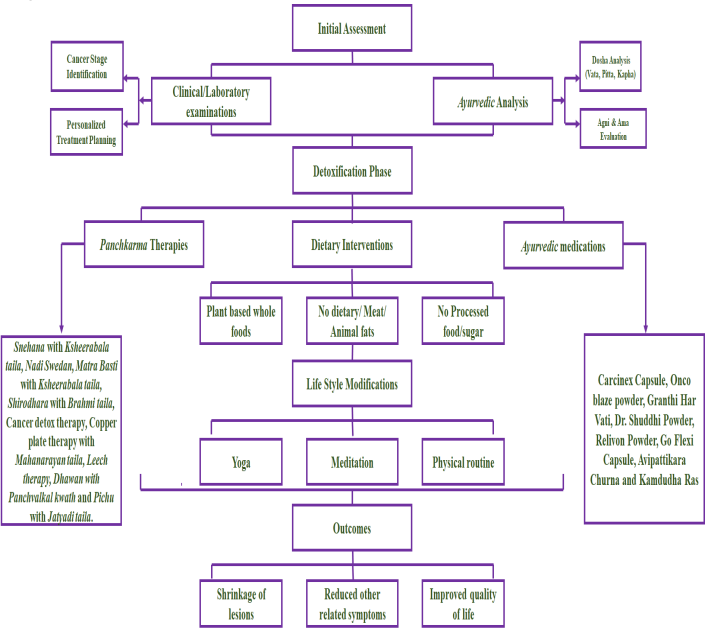
Table 3 The daily vitals during the IPD

Date	Weight	Blood Pressure	Pulse/min	Respiration/min	Pain Score
29-04-2025	58 Kg	130/80 mmHg	86	14	7/10
30-04-2025	58 Kg	110/80 mmHg	80	18	7/10
01-05-2025	57 Kg	110/80 mmHg	76	18	6/10
02-05-2025	56 Kg	120/70 mmHg	73	18	6/10
03-05-2025	56Kg	120/80 mmHg	76	20	5/10
04-05-2025	56Kg	110/80 mmHg	84	20	4/10
05-05-2025	55 Kg	120/80 mmHg	73	18	4/10
06-05-2025	56 Kg	120/80 mmHg	72	18	4/10
07-05-2025	54 Kg	110/70 mmHg	69	18	3/10
08-05-2025	55 Kg	120/80 mmHg	76	18	3/10
09-05-2025	55 Kg	120/70 mmHg	68	18	3/10
10-05-2025	55 Kg	120/80 mmHg	71	18	3/10

TREATMENT PROTOCOL

Patient approached on April 29, 2025 with the above said complaints. After thorough examination, investigations and assessing Dosha-Dushya involvement, Nidana (etiology) and Lakshanas (symptoms) following Ayurvedic treatment was planned which is depicted in Fig 2.

Fig 2 Treatment plan for this case



An accurately designed Disciplined and Intelligent Person's (DIP) and *Ayurvedic* Diet was provided to the patient to complement the *Ayurvedic* treatments administered for Cancer^[25-32]:

Diet Plan

Dietary Recommendations from Jeena Sikho Lifecare Limited Hospital:

Pathya-Apathya Ahara-Vihara (Table 4)

Category	Pathya	Apathya
Ahara (Food)		
Grains & Staples	Millets (<i>ragi</i> , <i>jowar</i> , <i>bajra</i>), red/black rice, old rice, barley, wheat roti (whole grain)	<i>Maida</i> (refined flour), white rice, bakery items, packaged foods
Pulses	Green gram (moong), masoor dal (well-cooked), horse gram (moderate)	<i>Chana dal</i> , <i>urad dal</i> , <i>rajma</i> , soya chunks (heavy to digest)
Vegetables	Bottle gourd, ridge gourd, pumpkin, ash gourd, spinach, drumstick, carrots, beetroot	Potatoes, brinjal, tomatoes, cauliflower, mushrooms, cabbage (gas-forming)
Fruits	Pomegranate, papaya, apple, guava, seasonal citrus fruits (if digestion allows)	Banana, grapes (if <i>Kapha</i> is high), overripe or preserved fruits
Sweeteners	Natural jaggery, honey (in warm water, not heated), dates	White sugar, artificial sweeteners
Spices & Condiments	Turmeric, ginger, black pepper, coriander, cumin, ajwain	Red chili, garam masala, vinegar, MSG (Ajinomoto)
Beverages	Herbal teas (tulsi, ginger, fennel, 32 herbs tea), warm water	Carbonated drinks, iced drinks, alcohol, cold water
Food Habits	Freshly cooked warm meals, light dinner, regular timings	Leftovers, frozen/reheated food, overeating, eating late at night

Routine with Meal Timing and Structure [Fig 3]

Daily Routine (<i>Dinacharya</i>)	Wake up early (<i>Brahma Muhurta</i>), tongue scraping, oil pulling, mild exercise	Waking late, irregular routine, skipping hygiene practices
Exercise	<i>Pranayama</i> , light yoga (like <i>Tadasana</i> , <i>Bhujangasana</i>), walking in fresh air	Heavy gym, vigorous running, strain during fatigue
Mental Health	Meditation, chanting, spending time in nature	Negative news, emotional stress, excessive screen time
Sleep	Sleep by 10 PM, 7-8 hours of rest	Day sleeping (especially post-lunch), sleeping late at night
Work & Stress	Calm, supportive environment, regular breaks	Overwork, toxic emotional atmosphere, multitasking during meals

Morning Routine (6:00 – 8:00 AM)

- Upon Waking (6:00 – 6:30 AM):
- Drink lukewarm water with ½ tsp turmeric or lemon juice.
- *Yoga/Pranayama* (6:30 – 7:15 AM):
- Gentle yoga stretches and breathing exercises like *Anulom-Vilom* and *Kapalabhati*.
- Herbal Tea (7:30 AM):
- 32 Herbs Tea

Breakfast (8:00 – 9:00 AM)

- *Mugda yusha* with coriander-mint chutney
- *Methi/Thepla* with bottle gourd curry
- Fruit bowl (papaya, apple, pomegranate – no banana)
- Coconut water

Mid-Morning (10:30 – 11:30 AM)

- Detox water (fenugreek/coriander seeds soaked overnight and boiled)
- 5 soaked almonds or walnuts

Lunch (12:00 – 1:00 PM)

- Plate 1: Salad; Plate 2: Millet Shake or millet recipes.
- Cucumber-beetroot-carrot salad
- Buttermilk with roasted cumin and mint (avoid curd)

Evening Snack (4:00 – 5:00 PM)

- Herbal Tea (ginger, tulsi, fennel)
- Roasted foxnuts (*makhana*) or puffed lotus seeds
- Steamed *chana* or *Mugda yusha* (light)

Dinner (6:30 – 7:30 PM)

- Plate 1: 4 types of raw vegetables with raw turmeric and ginger.
- Glass of warm turmeric milk

Panchakarma procedures administered to patient

Snehana with Ksheerabala Taila^[33]

- 200 ml of *Ksheerabala Taila* was warmed to body temperature (~38–40°C) before application.
- The patient, in a comfortable position, received full-body massage with the warm oil using gentle, systematic strokes for 40 minutes, starting from the head downward.
- Mild steam therapy (*Swedana*) was provided for 5–10 minutes' post-massage to promote deeper absorption and channel opening.
- After the procedure, the patient took rest for 10–15 minutes, excess oil was wiped off, and instructions for a warm bath after 1 hour and light, warm digestible food were given.

Nadi Swedan with Dashmool Kwath^[34]

- *Dashmool Kwath* was prepared by boiling 10–12 grams of *Dashmool* coarse powder in 400 ml of water, reducing it to one-fourth (approximately 100

ml), then straining and using the warm decoction immediately.

- *Naḍi Swedan* was administered using a steam tube directed at affected body parts.
- Steam was applied for approximately 15–20 minutes until signs of proper sweating (*Swedana Lakshana*) like lightness and relief of stiffness were observed.
- Post-procedure, the patient was gently dried, advised to rest, and instructed to avoid exposure to cold or wind. Light, warm food and hydration were recommended.

Matra Basti with Ksheerabala Taila^[35]

- *Ksheerabala Taila* was warmed to lukewarm temperature (~37–39°C) and 40 ml was measured for administration.
- The patient was positioned in left lateral (left side-lying) posture with right leg flexed.
- Using a sterile syringe or *Basti Netra*, the warmed oil was gently administered into the rectum and the patient was advised to lie quietly for at least 30 minutes to allow retention.
- Post-procedure, the patient was monitored for comfort, advised to avoid immediate food intake or exertion, and light, warm food was suggested after proper assimilation.

Shirodhara with Brahmi Taila^[36]

- 300 ml of *Brahmi Taila* was gently warmed to a lukewarm temperature and poured into the *Shirodhara* vessel.
- The patient was positioned comfortably in supine position on the *Droni* (treatment table), with the head properly supported and eyes covered with cotton pads.
- A continuous stream of warm *Brahmi Taila* was poured rhythmically on the forehead for 30 minutes, maintaining a steady flow and oil temperature throughout.
- After the procedure, excess oil was wiped off, the patient was allowed to rest briefly, and advised to avoid cold exposure, stress, or heavy meals.

Copper Plate Therapy with Mahanarayan Taila

- The affected area was gently cleansed, and a thin layer of warmed *Mahanarayan Taila* was applied to the skin.
- A sterile copper plate was heated to a comfortable, tolerable temperature and then carefully placed over the oiled area.
- The plate was kept in place for 15–20 minutes.
- After removal, any excess oil was wiped off gently, and the patient was advised to rest and avoid exposure to cold air or water immediately after the session.

Leech Therapy^[37]

- The area to be treated was cleaned with sterile water and lightly rubbed to encourage local circulation before application.
- Sterile, medicinal leeches were applied directly to the target site and allowed to attach naturally and draw blood for approximately 20–45 minutes.
- Once the leeches detached on their own, the site was cleaned, and any remaining blood was wiped using sterile gauze.
- Post-procedure care was provided with antiseptic application (like turmeric or neem paste), and the patient was observed for signs of allergic reaction or excessive bleeding.

Dhawan with Panchvalkal kwath^[38]

- *Panchvalkal Kwath* was prepared by boiling 20 grams of *Panchvalkal* bark powder (a mixture of *Ficus benghalensis*, *Ficus religiosa*, *Ficus racemosa*, *Ficus lacor*, and *Ficus glomerata*) in 400 ml of water and reducing it to one-fourth, then straining and using the warm decoction immediately.
- The affected area was cleaned gently using lukewarm *Panchvalkal Kwath* with sterile cotton or gauze to ensure proper cleansing.
- The *kwath* was applied thoroughly to remove impurities, reduce local inflammation, and maintain hygiene of the wound or site.
- After cleansing, the area was patted dry with sterile cloth, and appropriate dressing or follow-up therapy was performed as required.

Pichu with Jatyadi taila

- *Jatyadi Taila* was prepared by boiling a decoction of herbs like *Jati* (Jasmine), *Haridra* (Turmeric), *Daru haridra*, Neem, and others in sesame oil along with a paste of medicinal herbs, then simmering until the oil absorbed the *Ayurvedic* properties and the water evaporated, resulting in a fragrant, therapeutic medicated oil.
- Sterile cotton or gauze pads were soaked thoroughly with warm *Jatyadi Taila* prepared freshly before application.
- The soaked cotton pads (*Pichu*) were carefully placed over the left breast, covering the affected area completely.
- The *Pichu* was retained in place for 20–30 minutes, allowing the medicated oil to penetrate and promote healing and reduce inflammation.
- After removal, the area was gently cleaned, and the patient was advised to avoid exposure to cold and maintain local hygiene.

Medicinal Interventions

Ayurvedic medical regimen

The *Ayurvedic* treatment employed in this case included medications like Carcinex Capsule, Onco blaze powder, Granthi Har Vati, Dr. Shuddhi Powder, Relivon Powder, Go Flexi Capsule, Avipattikara Churna and Kamdudha Ras along with *Panchakarma* therapies. The medications administered

during the treatment period is mentioned in **Table 5** and the description of medicines are detailed in **Table 6**.

Allopathic medicines

The patient was taking previously prescribed necessary allopathic medicines like Dexamethasone (8mg), Gemcitabine (1300mg), Carboplatin (450mg), Paracetamol (500mg), Paclitaxel and Eribulin Mesylate (1.4 mg).

Table 5 The medications administered during the treatment

Date	Medicines	Dosage with <i>Anupana</i>
29-04-2025 to 10-05-2025 (IPD)	29-04-2025 & 30-04-2025	Carcinex Capsule 1 TAB TDS (<i>Adhobhakta</i> with <i>koshna jala</i> - After meal with lukewarm water)
		Onco Blaze Churna Half a Teaspoon TDS (<i>Adhobhakta</i> with <i>koshna jala</i>)
		Granthi Har Vati 1 TAB TDS (<i>Adhobhakta</i> with <i>koshna jala</i>)
	On 01-05-2025	Dr. Shuddhi powder + Relivon Powder 1/2 + 1/4 Teaspoon HS (<i>Nishikala</i> with <i>koshna jala</i> - At night with lukewarm water)
		Go Flexi 1 TAB HS (<i>Nishikala</i> with <i>koshna jala</i>)
	02-05-2025	Carcinex Capsule 1 TAB TDS (<i>Adhobhakta</i> with <i>koshna jala</i>)
		Onco Blaze Churna Half a Teaspoon TDS (<i>Adhobhakta</i> with <i>koshna jala</i>)
		Granthi Har Vati 1 TAB TDS (<i>Adhobhakta</i> with <i>koshna jala</i>)
	On 03-05-2025	Chitrakadi Vati 1 TAB HS (<i>Nishikala</i> with <i>koshna jala</i>)
		Dr. Shuddhi powder + Relivon Powder 1/2 + 1/4 Teaspoon HS (<i>Nishikala</i> with <i>koshna jala</i>)
	04-05-2025	Kamdudha Ras 2 TAB BD (<i>Adhobhakta</i> with <i>koshna jala</i>)
	05-05 2025 to 07-05-2025	Avipattikara Churna 1/2 Teaspoon HS (<i>Nishikala</i> with <i>koshna jala</i>)
Discharge	08-05-2025 to 10-05-2025	Go Flexi 1 TAB BD (<i>Adhobhakta</i> with <i>koshna jala</i>)
	10-05-2025	Onco Blaze Churna Half a Teaspoon BD (<i>Adhobhakta</i> with <i>koshna jala</i>)
		Avipattikara Churna 1/2 Teaspoon HS (<i>Nishikala</i> with <i>koshna jala</i>)

Table 6 The details of medications administered during the treatment

Medicine	Ingredients	Therapeutic Effects
Carcinex Capsule	Guduchi powder (<i>Tinospora cordifolia</i>), Kirattikta powder (<i>Andrographis paniculata</i>), Maricha powder (<i>Piper nigrum</i>), Paneer Dodi powder (<i>Hedychium spicatum</i>), Amlaki rasayan powder (<i>Phyllanthus emblica</i>), Tamra bhasma powder , Swarnamakshik Bhasma , Kalmegha (<i>Andrographis paniculata</i>), Neem powder (<i>Azadirachta indica</i>), Lavang powder (<i>Syzygium aromaticum</i>), Abhtrak Bhasma powder	Used for Arbuda (tumors), Granthi (cysts/nodules), Raktadushti (blood impurity), Shoth har (anti-inflammatory), Vishanashaka (detoxifier/anti-poison), Balya (strengthening), Lekhana (scraping/reducing excess tissue or fat), and Rasayan (rejuvenative).
Onco blaze powder	Guduchi powder (<i>Tinospora cordifolia</i>), Kalmegh powder (<i>Andrographis paniculata</i>), Amalaki powder (<i>Phyllanthus emblica</i>), Kantakari powder (<i>Solanum xanthocarpum</i>), Atasi powder (<i>Linum usitatissimum</i>), Jadaber powder (<i>Curculigo orchoides</i>), Haridra powder (<i>Curcuma longa</i>), Sitaphal powder (<i>Annona squamosa</i>), Magnesium Stearate , magnesium silicate	Supports Arbuda/Granthi (tumors/cysts), Raktadushti (blood impurity), Pramehahara (anti-diabetic/diabetes-controlling), Vishanashaka (detoxifier/anti-poison), Balya (strengthening), Rasayan (rejuvenative), and Lekhana (scraping)
Granthi Har Vati	Kachnar (<i>Bauhinia variegata</i>), Guggul (<i>Commiphora wightii</i>), Amalki (<i>Phyllanthus emblica</i>), Vibhitik (<i>Terminalia bellirica</i>), Haritiki (<i>Terminalia chebula</i>), Shunti (<i>Zingiber officinale</i>), Marich (<i>Piper nigrum</i>), Pippal (<i>Piper longum</i>), Varuna (<i>Crateva religiosa</i>), Sukshamala , Dalchini (<i>Cinnamomum verum</i>), and Tamal Patar (<i>Cinnamomum tamala</i>)	Lekhana (scraping), Stambhana (astringent), Shoth har (anti-inflammatory), Vedanasthapana (analgesic/pain-relieving), Kapha-Vata Shamana (pacifying/balancing Kapha and Vata doshas).
Dr. Shuddhi Powder	Trikatu , Triphala , Nagarmotha (<i>Cyperus rotundus</i>), Vayavidang (<i>Embelia ribes</i>), Chhoti Elaichi (<i>Elettaria cardamomum</i>), Tej Patta (<i>Cinnamomum tamala</i>), Laung (<i>Syzygium aromaticum</i>), Nisothe (<i>Operculina turpethum</i>), Sendha Namak , Dhaniya (<i>Coriandrum sativum</i>), Pipla Mool (<i>Piper longum</i> root), Jeera (<i>Cuminum cyminum</i>), Nagkesar (<i>Mesua ferrea</i>), Amarvati (<i>Achyranthes aspera</i>), Anardana (<i>Punica granatum</i>), Badi Elaichi (<i>Amomum subulatum</i>), Hing (<i>Ferula assafoetida</i>), Kachnar (<i>Bauhinia variegata</i>), Ajmod (<i>Trachyspermum ammi</i>), Sajjikshar , Pushkarmool (<i>Inula racemosa</i>), Mishri (<i>Saccharum officinarum</i>)	Raktadushti (blood impurity), Meda Vriddhi (adipose tissue), Agnimandya (weak digestion/low digestive fire), Mridu Virechan (mild purgation), Shodhana (cleansing), Deepan (digestive stimulant), and Ama Pachana (digestion of toxins).
Relivon Powder	Sawarna Patri (<i>Luffa aegyptiaca</i>), Misreya , Sendha Namak , Sonth (<i>Zingiber officinale</i>), Jang Harar (<i>Chebulic Myrobalan</i>) and Erand Oil (<i>Ricinus communis</i>)	Deepan (digestive stimulant), Pachan (digestive/assimilation), Anuloman (promotes downward movement of doshas), Shodhan (cleansing/purification), Rasayan (rejuvenation), and Balya (strengthening).
Go Flexi Capsule	Paneer Dodi Powder (<i>Caralluma fimbriata</i>), Ashwagandha Powder (<i>Withania somnifera</i>), Amla Rasayan (<i>Phyllanthus emblica</i>), Yograj Guggul Powder (<i>Commiphora wightii</i>), Methi Powder (<i>Trigonella foenum-graecum</i>), Shankh Bhasma Powder , Gokshura Powder (<i>Tribulus terrestris</i>), Punarnava Powder (<i>Boerhavia diffusa</i>), Nirgundi Powder (<i>Vitex negundo</i>), Haldi Powder (<i>Curcuma longa</i>), Neem Powder (<i>Azadirachta indica</i>).	Vata Shamana (pacifying/balancing Vata dosha), Shoth har (anti-inflammatory/reduces swelling), Stambhana (astringent/stopping secretions or bleeding), Snehan (oleation/lubrication), Rasayan (rejuvenation), and Balya (strengthening).
Avipattikara Churna	Ginger (<i>Zingiber officinale</i>), Kalimirch (<i>Piper nigrum</i>), Pippali (<i>Piper longum</i>), Amla (<i>Phyllanthus emblica</i>), Harad (<i>Terminalia chebula</i>), Baheda (<i>Terminalia bellirica</i>), Nagarmotha (<i>Cyperus rotundus</i>), Vidanga (<i>Embelia ribes</i>), Cardamom (<i>Elettaria cardamomum</i>), Tejpatta (<i>Cinnamomum tamala</i>), Clove (<i>Syzygium aromaticum</i>).	Amlapitta Hara (Relieves hyperacidity and acid reflux), Mriduvirechaka (Mild laxative), Pitta Shamana (Balances aggravated Pitta dosha), Agnideepan (Improves digestion and stimulates appetite), Pachan (Promotes proper digestion and prevents Ama accumulation), Udarashoola Hara (Relieves abdominal discomfort and bloating), Yakrit-Shoth Hara (Reduces liver inflammation), Mutrala (Mild diuretic), Raktapitta Hara (Helps manage bleeding disorders associated with Pitta), Hridya (Supports heart health)
Kamdudha Ras	Mukta Pishti (Calx of Pearl), Praval Pishti (Calx of Coral), Mukta Sukti Pishti (Calx of Pearl Oyster Shell), Kapardika Bhasma (Calx of Cowrie Shell), Shankha Bhasma (Calx of Conch Shell), Swarna Gairika (Ferric Oxide), Amrita Satva (Extract of Guduchi – <i>Tinospora cordifolia</i>), Kamdudha Ras	Amlapitta Hara (Relieves hyperacidity and acid reflux), Daha Shamana (Alleviates burning sensations), Raktapitta Hara (Manages bleeding disorders), Pitta Shamana (Pacifies aggravated Pitta dosha), Trishna Nigrahana (Reduces excessive thirst), Chhardi Hara (Controls nausea and vomiting), Hridya (Supports cardiac function), Shoth har (Reduces inflammation), Balya (Improves strength and immunity), Manas Shamak (Calms the mind and reduces stress-related Pitta aggravation).

RESULT

The assessment was done after 12 days and it was found to be very much satisfactory in terms of symptomatic relief and quality of life. The lesion at left breast region was reduced by 90% (**Fig 4**). Other complaints like pain and white discharge was reduced. The condition before and after treatment is mentioned in **Table 7**.

Table 7 The conditions before and after treatment

Conditions	Before treatment	After treatment
Mass growth	Cauliflower shaped reddish mass growth	Reduced to 90%
Discharge	White discharge	Reduced
Bowel	Incomplete evacuation	Normal
Pain	7/10	3/10

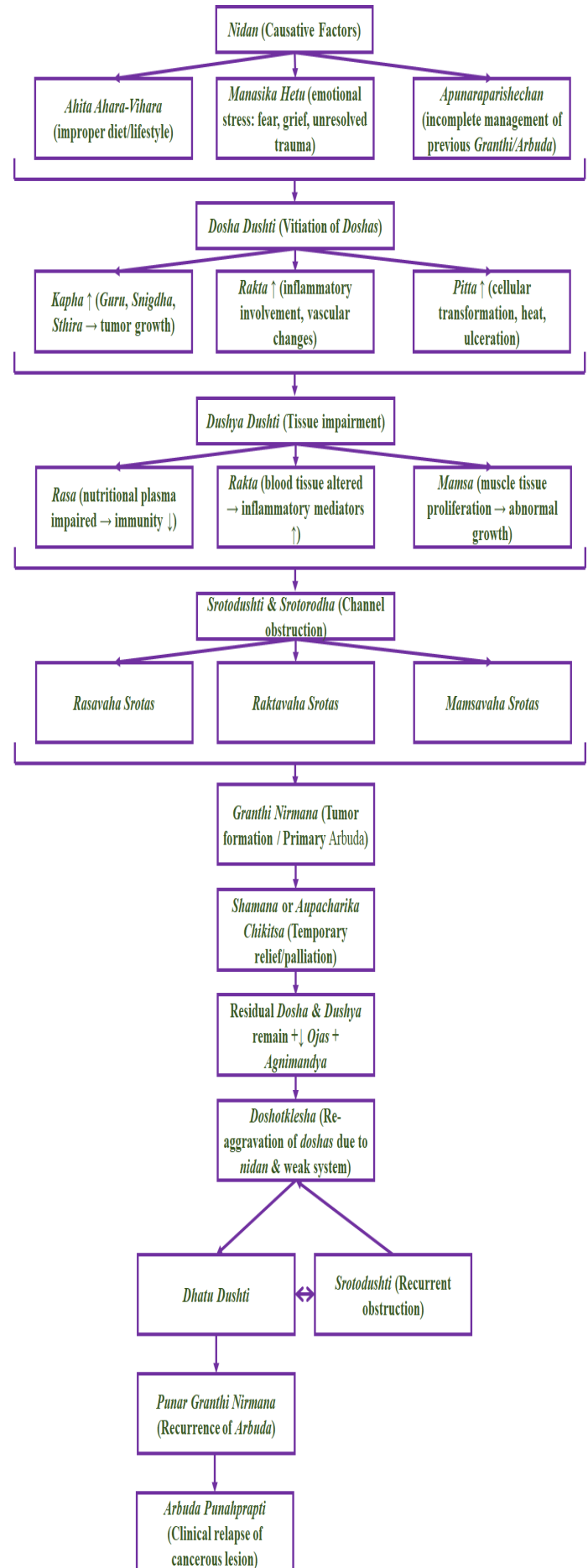
Implications for Future Research

The recurrence of a breast cancer lesion in this *Ayurvedic* case study emphasizes the importance of integrating traditional wisdom with modern oncology for comprehensive patient care. Future implications include the need to refine personalized *Ayurvedic* treatment protocols based on the patient's unique *Prakriti*, *Vikriti*, and *Dosha* imbalances observed during recurrence. This case highlights the potential of *Ayurvedic* therapies, such as *Panchakarma*, *Rasayana*, and targeted *Ayurvedic* formulations to support conventional treatments, enhance immunity, reduce treatment-related side effects, and possibly delay or prevent further recurrence. Also, it calls for systematic documentation and long-term follow-up in *Ayurvedic* practice to better understand the chronicity and progression of cancer through *Ayurvedic* concepts like *Ama*, *Srotodushti*, and *Ojas* depletion. Research integrating *Ayurveda*'s holistic approach with biomedical markers could open new avenues for improving prognosis and quality of life in recurrent breast cancer patients. This case also stresses the importance of patient education on diet (*Pathya*), lifestyle, and mental well-being as vital components of sustained cancer management in *Ayurveda*.

DISCUSSION

The *Ayurvedic* treatment along with previously prescribed allopathic medicines in this case presents a promising alternative approach for managing **recurrence of a breast cancer lesion**. This case study details the application of *Ayurvedic* therapies in a 52-year-old female patient with CA breast, in which **recurrence of a breast cancer lesion was detected**, showed remarkable improvement in symptoms such as reduction in the lesion, white discharge and pain. The *samprapti*^[20,39] for this case study is depicted in **Fig 5**.

Fig 5. The *samprapti* for this case study



Samprapti

In *Ayurveda*, the *Samprapti* of recurrent breast cancer (*Arbuda Punahprapti*) is a chronic and complex pathological process involving repeated vitiation of *Doshas*, primarily *Kapha*, *Rakta*, and *Pitta*, along with *Dhatu Dushti* of *Rasa*, *Rakta*, and *Mamsa*^[40]. The *nidana*, such as improper diet and lifestyle, unresolved emotional stress, and incomplete treatment of the original lesion, initiate *doshic* imbalance^[41]. This leads to obstruction in the channels like *Rasavaha*, *Raktavaha*, and *Mamsavaha Srotas*, resulting in *Granthi Nirmana* (tumor formation)^[42]. Although initial treatments may offer temporary *Shamana* (palliation), the underlying *Doshas* and *Dushyas* often remain unaddressed, and the impaired *Agni* and depleted *Ojas* further weaken systemic resilience^[43]. Over time, this allows for *Doshotklesha* (re-aggravation of *Doshas*), perpetuating the cycle of *Dhatu Dushti* and *Srotodushti*, eventually manifesting as a recurrence of *Arbuda*. Thus, the *Samprapti* reflects a deep-seated, systemic imbalance that demands a comprehensive and sustained *Ayurvedic* approach targeting root-level correction^[44].

Nidan Parivarjana

In *Ayurveda*, *Nidana* refers to the root causes or triggering factors responsible for the initiation and aggravation of disease. In the case of recurrent breast cancer, the *Nidanas* include continuous indulgence in *Ahita Ahara-Vihara* (unwholesome diet and lifestyle), such as consumption of heavy, oily, and processed foods, sedentary habits, chronic exposure to environmental toxins, and suppression of natural urges^[45]. *Manasika Nidanas* like unresolved grief, emotional trauma, chronic stress, and fear significantly contribute to *Dosha* vitiation, particularly of *Kapha* and *Pitta*. Incomplete or improper treatment of the original *Arbuda* also serves as a potent *Nidana*, allowing residual pathological factors to persist in the body. These causative factors collectively lead to *Dosha Dushti*, *Dhatu Dushti*, and *Srotorodha*, creating a fertile ground for recurrence of the lesion^[46].

Nidana Parivarjana is considered the first and foremost principle of treatment in *Ayurveda*, emphasizing the elimination or avoidance of causative factors to break the pathological cycle^[47]. In the context of recurrent breast cancer, this involves adopting a disciplined and customized lifestyle and dietary regimen that avoids previously identified triggers such as *Kapha*-aggravating foods, mental stressors, and environmental pollutants^[48]. Emphasis is placed on *Satmya Ahara* (wholesome and compatible diet), *Vihara*, and *Manasika Shuddhi* (emotional cleansing through counseling, meditation, or spiritual practices). Careful follow-up and complete *Ayurvedic* chikitsa (including *Panchakarma* and *Rasayana* therapies) ensure that the disease is eradicated at its root, minimizing the risk of recurrence. Thus, *Nidana Parivarjana* plays a crucial preventive and therapeutic role in the long-term management of *Arbuda*^[49].

Effects of Ayurvedic medications

The *Ayurvedic* formulations contains several commonly repeated *Ayurvedic* ingredients with significant therapeutic relevance in managing recurrent breast cancer lesions. The *Ras Panchaka* is mentioned in **Table 8**.

Guduchi, renowned as a *Rasayana* (rejuvenative), *Vishanashaka* (detoxifier), and *Balya* (strength-promoting) herb, supports immunity and helps prevent tumor recurrence^[50]. *Amalaki* is valued for its *Rasayana*, *Raktashodhaka* (blood-purifying), and antioxidant properties, aiding detoxification and tissue rejuvenation^[51]. *Kalmegha* and *Nimba* contribute *Raktashodhaka*, *Deepan* (appetizer), and *Jvaraghna* (antipyretic) effects alongside anti-inflammatory and immunomodulatory actions crucial for preventing cancer re-emergence^[52,53]. *Haridra*, due to curcumin, offers *Shothahara* (anti-inflammatory), *Krimighna* (anti-parasitic), and *Vrana-ropaka* (wound-healing) benefits^[54]. *Guggulu* is celebrated for *Lekhana* (scraping), *Shothahara*, and *Medohara* (fat-reducing) properties, helpful in breaking down nodules (*Granthi*)^[55]. *Kanchanara*, highlighted in classical texts, specifically targets *Granthi* and glandular swellings (*Apaci*)^[56]. Spices like *Maricha*, *Pippali*, *Laung*, and *Tejapatra* enhance digestive fire (*Deepan-Pachan*), act as *Yogavahi* (bioavailability enhancers), and provide antimicrobial and anti-inflammatory effects^[57]. These *Ayurvedic* herbs address key pathologies such as *Raktadusti* (blood vitiation), *Shotha* (inflammation), *Ama* (metabolic toxins), and *Dhatu-kshaya* (tissue depletion). Their combined actions of *Lekhana*, *Raktashodhaka*, *Vishanashaka*, *Rasayana*, *Shothahara*, and *Balya* form a comprehensive *Ayurvedic* approach to manage recurrent breast cancer by promoting tumor regression, enhancing immunity, purifying blood, and rejuvenating tissue.

Effects of Ahar-Vihar

The provided *Ayurvedic* regimen emphasizes a structured daily routine and dietary discipline to help prevent the recurrence of breast cancer lesions. The day begins with practices such as drinking lukewarm water with turmeric or lemon, performing gentle yoga and *Pranayama* (like *Anulom-Vilom* and *Kapalabhati*), and consuming herbal teas. Meals are designed to be warm, freshly prepared, and easy to digest, featuring millets, green gram, bottle gourd, papaya, and natural spices like turmeric and ginger^[58, 59]. Processed foods, cold drinks, and heavy-to-digest items such as *maida*, potatoes, and preserved fruits are avoided. Food is consumed at regular intervals with emphasis on light dinners and avoiding overeating or late-night meals^[60].

The lifestyle (*Vihara*) recommendations promote early waking, mild exercise, meditation, and proper sleep, while discouraging emotional stress, overwork, and excessive screen time. This approach aligns with *Ayurvedic Pathya-Apathya* principles, aiming to balance the *doshas*, strengthen *Agni* (digestive fire), and boost *Ojas* (immunity). Such a holistic

regimen not only supports physical detoxification stress and inflammation, factors linked to cancer and metabolic health but also helps reduce oxidative recurrence^[61,62].

Table 8 Therapeutic effects according to *Ras panchaka* of the ingredients

Ingredients	Rasa (Taste)	Guna (Qualities)	Virya (Potency)	Vipaka (Post-digestive effect)	Prabhava	Therapeutic Actions	Medicines Containing
<i>Guduchi</i> (<i>Tinospora cordifolia</i>)	Tikta (Bitter), Madhura (Sweet)	Laghu (Light), Riksha (Dry)	Ushna (Hot)	Madhura (Sweet)	Rasayana (Rejuvenative), Balya (Strength-promoting)	Rasayana, Detoxifier, Immune support	Carcinex Capsule, Onco Blaze Powder, Relivon Powder, Go Flexi Capsule
<i>Amalaki</i> (<i>Phyllanthus emblica</i>)	Amla (Sour), Madhura (Sweet), Tikta (Bitter)	Riksha (Dry), Snigdha (Unctuous)	Sheeta (Cold)	Madhura (Sweet)	Rasayana, Raktashodhaka (Blood purifier), Antioxidant	Detoxification, Tissue rejuvenation	Carcinex Capsule, Onco Blaze Powder, Relivon Powder
<i>Kalmegha</i> (<i>Andrographis paniculata</i>)	Tikta (Bitter)	Laghu (Light), Riksha (Dry)	Ushna (Hot)	Katu (Pungent)	Raktashodhaka (Blood purifier), Jvaraghna (Antipyretic)	Anti-inflammatory, Immunomodulatory	Granthi Har Vati, Dr. Shuddhi Powder, Onco Blaze Powder
<i>Nimba</i> (<i>Acadachta indica</i>)	Tikta (Bitter), Kashaya (Astringent)	Riksha (Dry), Tikshna (Sharp)	Ushna (Hot)	Katu (Pungent)	Vishanahaka (Detoxifier), Krimighna (Antiparasitic)	Blood purifier, Anti-inflammatory	Carcinex Capsule, Granthi Har Vati, Relivon Powder
<i>Haridra</i> (<i>Curcuma longa</i>)	Tikta (Bitter), Katu (Pungent)	Laghu (Light), Snigdha (Unctuous)	Ushna (Hot)	Katu (Pungent)	Shothahara (Anti-inflammatory), Wound-healing	Anti-inflammatory, Wound healing	Carcinex Capsule, Onco Blaze Powder, Relivon Powder
<i>Guggulu</i> (<i>Commiphora wightii</i>)	Katu (Pungent), Tikta (Bitter), Kashaya (Astringent)	Riksha (Dry), Tikshna (Sharp), Laghu (Light)	Ushna (Hot)	Katu (Pungent)	Lekhana (Scraping), Medohara (Fat-reducing)	Breaking abnormal tissue, Anti-inflammatory	Granthi Har Vati, Dr. Shuddhi Powder, Go Flexi Capsule
<i>Kanchanara</i> (<i>Bauhinia variegata</i>)	Tikta (Bitter), Kashaya (Astringent)	Riksha (Dry), Laghu (Light)	Ushna (Hot)	Katu (Pungent)	Granthi treatment	Nodules and glandular swelling reduction	Granthi Har Vati, Dr. Shuddhi Powder
<i>Maricha</i> (<i>Piper nigrum</i>)	Katu (Pungent)	Laghu (Light), Riksha (Dry), Tikshna (Sharp)	Ushna (Hot)	Katu (Pungent)	Deepan-Pachan (Digestive stimulant), Yoganahi (Bioavailability enhancer)	Enhances digestion, Bioavailability of drugs	Carcinex Capsule, Onco Blaze Powder, Relivon Powder
<i>Pippali</i> (<i>Piper longum</i>)	Katu (Pungent), Tikta (Bitter)	Laghu (Light), Snigdha (Unctuous)	Ushna (Hot)	Katu (Pungent)	Respiratory stimulant, Yoganahi	Digestive enhancer, Bioavailability	Carcinex Capsule, Onco Blaze Powder
<i>Lang</i> (Clove)	Katu (Pungent), Tikta (Bitter)	Laghu (Light), Riksha (Dry)	Ushna (Hot)	Katu (Pungent)	Krimighna (Antimicrobial), Deepan-Pachan (Digestive stimulant)	Antimicrobial, Digestive aid	Carcinex Capsule, Relivon Powder
<i>Tejapatra</i> (<i>Cinnamomum tamala</i>)	Katu (Pungent), Tikta (Bitter)	Laghu (Light), Riksha (Dry)	Ushna (Hot)	Katu (Pungent)	Deepan-Pachan (Digestive stimulant), Shoth har (Anti-inflammatory)	Enhances digestion, Anti-inflammatory	Carcinex Capsule, Onco Blaze Powder, Relivon Powder

Effects of Panchkarma Therapies

To address the pathogenesis of recurrent breast cancer lesions from an Ayurvedic perspective, a comprehensive integrative treatment protocol is applied. The initial step involves *Snehana* (oleation therapy) using *Ksheera bala taila*, which is especially effective in pacifying aggravated *Vata dosha*, nourishing the depleted *Dhatu* (body tissues), and preparing the body for further detoxification^[33,63]. This is followed by *Nadi Swedan* (Ayurvedic steam therapy), which induces sweating (*Swedana*) to liquefy and mobilize *Ama* (toxins) lodged in the tissues and open up obstructed *Srotas* (channels), thereby enhancing systemic circulation and elimination pathways^[34,64].

Matra Basti using *Ksheerabala taila* plays a central role in regulating *Apana Vata*, which governs elimination and

reproductive functions. This *basti* therapy facilitates the removal of metabolic waste and strengthens the *Pakvashaya* (colon), thereby improving tissue metabolism and supporting long-term detoxification^[35,65]. *Shirodhara* with *Brahmi taila* targets the *Manovaha Srotas* (mind-body channels) and helps reduce stress, anxiety, and mental *Doshas* (*Rajas* and *Tamas*), which are often implicated in the recurrence and progression of chronic diseases like cancer^[36,66]. Copper plate therapy along with *Mahanarayan taila* is utilized to stimulate local *Rakta dhatu* (blood tissue), resolve *Kapha-Meda* (phlegm and fat) accumulations, and promote rejuvenation (*Rasayana* effect) by improving lymphatic and circulatory function^[67,68]. Leech therapy (*Jalaukavacharana*) targeted *Raktamokshana* (bloodletting), effectively removing *Dushta Rakta* (vitiated blood), alleviating local inflammation, and enhancing oxygen

and nutrient delivery to affected tissues^[37,69]. *Dhavana* with *Panchavalkala Kwatha* helps in *Vrana Shodhana*, reducing *Kapha-Pitta* aggravation, draining discharge, and promoting wound healing by restoring *Srotas* and *Dosha* balance^[38]. *Pichu* soaked with *Jatyaditaila*, a well-known wound-healing and anti-inflammatory formulation, is applied to the lesion sites to promote local tissue regeneration, reduce pain and inflammation, and support epithelial repair^[70,71]. Cancer detox therapy encompasses the use of potent *Ayurvedic* and procedural interventions designed to eliminate deep-seated *Vishas* (toxins) and restore the integrity of the *Agni* (digestive and tissue metabolism) at both systemic and cellular levels^[72]. Together, these therapies form a synergistic approach to *Samprapti Vighatana* (breaking the pathogenesis) by systematically detoxifying the body, restoring *Agni*, unblocking obstructed channels, and reinvigorating the immune and tissue defense mechanisms, thereby preventing further recurrence and promoting holistic healing.

CONCLUSION

This case study underscores the potential of *Ayurvedic* treatment along with previously prescribed allopathic medicines in managing the symptoms of recurrent breast cancer lesions, providing a holistic alternative for patients who are unwilling or unable to pursue conventional therapies. The application of *Ayurvedic* principles can contribute significantly to enhancing patients' overall well-being. Continued research and collaboration between traditional and modern medical systems are essential to further explore and validate integrated approaches for the management of recurrent breast cancer lesions.

Symptoms: At the time of admission, the patient presented with a cauliflower-shaped proliferative reddish mass on the left side, accompanied by white discharge and localized pain, persisting for one month. After undergoing *Ayurvedic* inpatient management, there was marked symptomatic relief. The discharge and pain subsided, no new complaints emerged, and the patient's overall health showed substantial improvement.

In summary, holistic *Ayurvedic* treatment along with previously prescribed allopathic medicines for recurrent breast cancer lesions have demonstrated encouraging outcomes, particularly in symptom relief and overall health improvement. The integration of these traditional interventions contributes to the management of disease recurrence and supports systemic well-being. Nevertheless, rigorous, well-designed clinical trials are essential to validate these observations, develop standardized treatment protocols, and provide robust scientific evidence for the role of *Ayurveda* in managing recurrent breast cancer lesions.

REFERENCE

1. Arnold M, Morgan E, Rumgay H, Mafra A, Singh D, Laversanne M, Vignat J, Gralow JR, Cardoso F, Siesling S, Soerjomataram I. Current and future burden of breast cancer: Global statistics for 2020 and 2040. *The Breast*. 2022 Dec 1;66:15-23.
2. Dash MK, Joshi N, Gautam DN, Jayakumar R, Tripathi YB. *Ayurvedic* supportive therapy in the management of breast cancer. *Journal of Herbal Medicine*. 2021 Oct 1;29:100490.s
3. Aghajanzadeh M, Torabi H, Najafi B, Talebi P, Shirini K. Intermammary breast cancer: A rare case of cancer with origin of breast cells in an unusual location. *SAGE Open Med Case Rep*. 2023 Feb 12;11:2050313X231154996. doi: 10.1177/2050313X231154996. PMID: 36798680; PMCID: PMC9926372.
4. Gooch, J.C., Schnabel, F. (2019). Locoregional Recurrence of Breast Cancer. In: Docimo Jr., S., Pauli, E. (eds) *Clinical Algorithms in General Surgery*. Springer, Cham. https://doi.org/10.1007/978-3-319-98497-1_26
5. Rasskazova, Elena & Zikiryakhodzaev, A.. (2024). Oncological outcomes of stage I-II breast cancer treatment after subcutaneous/skin-sparing mastectomies with reconstruction. *MD-Onco*. 4. 37-44. 10.17650/2782-3202-2024-4-3-37-44.
6. Lee, Jeongmin & Kang, Bong & Park, Ga & Kim, Sung. (2022). The Usefulness of Magnetic Resonance Imaging (MRI) for the Detection of Local Recurrence after Mastectomy with Reconstructive Surgery in Breast Cancer Patients. *Diagnostics*. 12. 2203. 10.3390/diagnostics12092203.
7. Russo, J. (2021). *Breast Cancer Recurrence and Survival. In: The Future of Prevention and Treatment of Breast Cancer*. Springer, Cham. https://doi.org/10.1007/978-3-030-72815-1_2
8. Bhatia, Neela. (2024). Network ethnopharmacological and molecular docking based evaluation of the anti-breast cancer activity for *Ayurvedic* botanicals acting on hypoxia-inducible factor-1. *Journal of Medical pharmaceutical and allied sciences*. 13. 6326-6336. 10.55522/jmpas.V13I1.5888.
9. Deshmukh V, Sardeshmukh S, Patil T, Nagarkar R, Gujar S, Pathak S, Deshpande D, Awalkanthi V, Awalkanthi S, Paleja N, Kate S, Patil P, Shivgankar S, Godse V, Kulkarni S, Sardeshmukh N, Karade D, Gota V, Gupta V, Bendale K, Gandhi K, Chavan S, *Ayurvedic* intervention in breast cancer patients reduces adverse effects of chemotherapy, modulates systemic immune response and improves quality of life: A non-randomised controlled study *JMIR Preprints*. 17/10/2024:67521 DOI: 10.2196/preprints.67521
10. Khoobchandani M, Katti KK, Karikachery AR, Thipe VC, Srisrimal D, Dhurvas Mohandoss DK, Darshakumar RD, Joshi CM, Katti KV. *New Approaches in Breast Cancer*

- Therapy Through Green Nanotechnology and Nano-Ayurvedic Medicine – Pre-Clinical and Pilot Human Clinical Investigations. *Int J Nanomedicine*. 2020;15:181-197. <https://doi.org/10.2147/IJN.S219042>
11. Deshmukh V, Sardeshmukh S, Kulkarni A, Gupta V, Gujar S, Sardeshmukh B, Sardeshmukh N, Deshpande D, Gutte K, Awalkanth V, Deshpande A, Kulkarni S. Adjunct *Ayurvedic* treatment providing more than 10 years of disease-free survival in a rare case of male breast cancer patient with high-grade invasive ductal cell carcinoma - A Case Report. *J Ayurveda Integr Med*. 2025 Jan-Feb;16(1):100982. doi: 10.1016/j.jaim.2024.100982. Epub 2025 Jan 25. PMID: 39864308; PMCID: PMC11802355.
 12. Significance of mammography in the diagnosis and treatment of Stana Arbud Nishita Dama, Pallavi Gune Ayurlog: National Journal of Research in Ayurved Science- 2019; (7) (4): 1-6
 13. Vāgbhaṭa. *Aṣṭāṅgahṛdayasaṃhitā*. Sūtrasthāna, chapter 13, verse 25. Varanasi: Chaukhambha Sanskrit Series; 1999.
 14. Balachandran P, Govindarajan R. Cancer—an *Ayurvedic* perspective. *Pharmacological research*. 2005 Jan 1;51(1):19-30.
 15. Shinde PA, Mane SS. A critical study of Charakokta Māṁsapradoṣaja Vikāra. *Int J Creat Res Thoughts*. 2023 Nov;11(11). ISSN: 2320-2882.
 16. Bhuva AN, Patki PM, Kala K, Parjapati T, Patel MA. A critical analysis on Ojas (immunity) and its clinical importance on human health. *Int J AYUSH*. 2024;13(7):109-122.
 17. Sumantran VN, Tillu G. Cancer, inflammation, and insights from *Ayurveda*. *Evid Based Complement Alternat Med*. 2012;2012:306346. doi: 10.1155/2012/306346. Epub 2012 Jul 4. PMID: 22829853; PMCID: PMC3398688.
 18. Sabnis M. Viruddha Ahara: A critical view. *Ayu*. 2012 Jul;33(3):332-6. doi: 10.4103/0974-8520.108817. PMID: 23723637; PMCID: PMC3665091.
 19. Tomar, Samata & Jawanjal, Pravin. (2021). Viruddhahara Causality in Lifestyle Disorders. 2021. 10.37591/RRJoASYN.
 20. Dr. Seethal Peenikkal, Dr. K. Savitha R. Shenoy, Dr. Sri Nagesh K. A. Formulation of Nidana Panchaka in Breast Cancer. *J Ayurveda Integr Med Sci* 2019;1:81-88. <http://dx.doi.org/10.21760/jaims.4.1.17>
 21. Lakshmi V. *Ayurveda* treatment strategy in management of advanced breast cancer in elderly female- A case report with review of literature. *J Ayu Herb Med* 2023;9(2):40-42. DOI: 10.31254/jahm.2023.9201
 22. Amin, Hetal. (2016). Rasayana therapy: *Ayurvedic* contribution to improve quality of life.
 23. Payyappallimana, Unnikrishnan & M.N.Shubhashree. (1998). RITUCHARYA: A Seasonal Regimen According to *Ayurveda*. 1-25.
 24. Murthy, A. & Singh, Heisnam. (1987). The concept of psychotherapy in *Ayurveda* with special reference to satvavajaya. *Ancient science of life*. 6. 255-61.
 25. Manish A, Chaudhary G, Richa, Garima, Sharma N. Management of early-stage breast cancer with *Ayurveda*: a case study. *Int J AYUSH*. 2025;14(2):89-118.
 26. Sakshi C, Rupali, Sonali T, Indu, Importance of Pathya-Apathya in *Ayurveda* : A Review Article. *J Ayu Int Med Sci*. 2023;8(12):125-129.
 27. Vāgbhaṭa. *Aṣṭāṅgahṛdayasaṃhitā*. Sūtrasthāna, chapter 6, verses 62–63. Varanasi: Chaukhambha Sanskrit Series; 1999.
 28. Agniveśa. Caraka Saṃhitā of Agniveśa, elaborated by Caraka and redacted by Dṛḍhabala. Vol. 1. Shukla V, Tripathi RD, editors. Vaidyamañoramā Hindi commentary with special deliberation. Varanasi: Chaukhambha Sanskrit Pratishthan; Sutrastana, Chapter 25, Verse 38-39.
 29. Dureja, Harish & Vohra, Kripi & Garg, Vandana. (2015). An Insight of Pulses: From Food to Cancer Treatment. *Journal of Pharmacognosy & Natural Products*. 1. 10.4172/2472-0992.1000108.
 30. Agniveśa. Caraka Saṃhitā of Agniveśa, elaborated by Caraka and redacted by Dṛḍhabala. Vol. 1. Shukla V, Tripathi RD, editors. Vaidyamañoramā Hindi commentary with special deliberation. Varanasi: Chaukhambha Sanskrit Pratishthan; Sutrastana, Chapter 27, Verse 21-32.
 31. Sinha, Rajiv & Anderson, D & McDonald, S & Greenwald, P. (2003). Cancer Risk and Diet in India. *Journal of postgraduate medicine*. 49. 222-8.
 32. Agniveśa. Caraka Saṃhitā of Agniveśa, elaborated by Caraka and redacted by Dṛḍhabala. Vol. 1. Shukla V, Tripathi RD, editors. Vaidyamañoramā Hindi commentary with special deliberation. Varanasi: Chaukhambha Sanskrit Pratishthan; Sutrastana, Chapter 27, Verse 102.
 33. Vāgbhaṭa. *Aṣṭāṅgahṛdayasaṃhitā*. Sūtrasthāna, chapter 16, verses 1–6. Varanasi: Chaukhambha Sanskrit Series; 1999.
 34. Agniveśa. Caraka Saṃhitā of Agniveśa, elaborated by Caraka and redacted by Dṛḍhabala. Vol. 1. Shukla V, Tripathi RD, editors. Vaidyamañoramā Hindi commentary with special deliberation. Varanasi: Chaukhambha Sanskrit Pratishthan; Sutrastana, Chapter 14, Verse 39-40.
 35. Agniveśa. Caraka Saṃhitā of Agniveśa, elaborated by Caraka and redacted by Dṛḍhabala. Vol. 2. Shukla V, Tripathi RD, editors. Vaidyamañoramā Hindi commentary with special deliberation. Varanasi: Chaukhambha Sanskrit Pratishthan; Chikitsasthana, Chapter 3, Verse 38-39.
 36. Agniveśa. Caraka Saṃhitā of Agniveśa, elaborated by Caraka and redacted by Dṛḍhabala. Vol. 2. Shukla V, Tripathi RD, editors. Vaidyamañoramā Hindi commentary with special deliberation. Varanasi: Chaukhambha Sanskrit Pratishthan; Chikitsasthana, Chapter 24, Verse 25-26.

37. Suśruta. *Suśrutasaṃhitā* with the Nibandhasaṅgraha commentary of Dalhaṇa. Edited by Yadavji Trikamji Acharya. Varanasi: Chaukhambha Orientalia; 2008. Sūtrasthāna 13/3–8.
38. Pardeshi NN. A case study of Panchvalkal Kwath Dhawan in Dushta Vrana w.s.r. to varicose ulcer. *World J Pharm Res.* 2018;7(10):1040–1045.
39. Sahani R, K Jain H, *Ayurvedic* management of Stangranthi w.s.r. to Fibroadenoma of Breast: A Case Study. *J Ayu Int Med Sci.* 2023;8(8):258-264.
40. Panchaware, Pooja & Shekoker, Sanjivani. (2023). A review on *Ayurvedic* and modern aspects of breast cancer. *World Journal of Biology Pharmacy and Health Sciences.* 14. 359-371. 10.30574/wjbphs.2023.14.3.0282.
41. Raj Kumar Meher, Swapna rani Dora, Preeti Gavali, Surendra Kumar Sharma. Understanding the Concept of Nidana and its Clinical Approach- A Comprehensive View. *AYUSHDHARA*, 2022;9(2):133-137. <https://doi.org/10.47070/ayushdhara.v9i2.875>
42. Meher, Raj & Sharma, Surendra & Gavali, Preeti. (2022). Nidana and Management of Lifestyle Disorders. *International Journal of Ayurveda and Pharma Research.* 98-102. 10.47070/ijapr.v10i5.2344.
43. Ayushi Nigam, Rajesh Kumar Sharma, Komal Chavda. A Conceptual Study on Shamana (Alleviation) and Prakopa (Aggravation) of Dosha is depended on Agni (Digestive Fire). *Ayushdhara* [Internet]. 2024Jan.5 [cited 2025May28];10(6):97-101. Available from: <https://ayushdhara.in/index.php/ayushdhara/article/view/1441>
44. Sharma H, Chandola HM, Singh G, Basisht G. Utilization of *Ayurveda* in health care: an approach for prevention, health promotion, and treatment of disease. Part 1--*Ayurveda*, the science of life. *J Altern Complement Med.* 2007 Nov;13(9):1011-9. doi: 10.1089/acm.2007.7017-A. PMID: 18047449.
45. Agniveśa. Caraka Saṃhitā of Agniveśa, elaborated by Caraka and redacted by Drḍhabala. Vol. 1. Shukla V, Tripathi RD, editors. Vaidyamañoramā Hindi commentary with special deliberation. Varanasi: Chaukhambha Sanskrit Pratishthan; Sutrasthana, Chapter 28, Verse 7.
46. Jat, Dr. Rakesh & Sharma, Shikha & Sharma, Tulika. (2020). REVIEW ARTICLE ON ARBUDA AND ITS AYURVEDIC MANAGEMENT IN VEDIC CONTEXT. *Journal of Biomedical and Pharmaceutical Research.* 9. 10.32553/jbpr.v9i1.714.
47. Agniveśa. Caraka Saṃhitā of Agniveśa, elaborated by Caraka and redacted by Drḍhabala. Vol. 1. Shukla V, Tripathi RD, editors. Vaidyamañoramā Hindi commentary with special deliberation. Varanasi: Chaukhambha Sanskrit Pratishthan; Sutrasthana, Chapter 30, Verse 26.
48. Ergas IJ, Cespedes Feliciano EM, Bradshaw PT, Roh JM, Kwan ML, Cadenhead J, Santiago-Torres M, Troeschel AN, Laraia B, Madsen K, Kushi LH. Diet Quality and Breast Cancer Recurrence and Survival: The Pathways Study. *JNCI Cancer Spectr.* 2021 Mar 2;5(2):pkab019. doi: 10.1093/jncics/pkab019. PMID: 33928215; PMCID: PMC8062847.
49. Rastogi, Sanjeev & Singh, Harsh. (2021). Principle of Hot (Ushna) and Cold (Sheeta) and Its Clinical Application in *Ayurvedic* Medicine. 10.1007/978-3-030-80983-6_4.
50. Lekshmi.R, Krishnakumar, Ratnaprava Mishra, James Chacko. Guduchi as A Rasayana in Infectious Diseases: A Review. *International Journal of Ayurveda and Pharma Research.* 2016;4(4):91-93.
51. Kumar V, Aneesh KA, Kshemada K, Ajith KGS, Binil RSS, Deora N, Sanjay G, Jaleel A, Muraleedharan TS, Anandan EM, Mony RS, Valiathan MS, Santhosh KTR, Kartha CC. Amalaki rasayana, a traditional Indian drug enhances cardiac mitochondrial and contractile functions and improves cardiac function in rats with hypertrophy. *Sci Rep.* 2017 Aug 17;7(1):8588. doi: 10.1038/s41598-017-09225-x. PMID: 28819266; PMCID: PMC5561106.
52. Cirimi S, Maugeri A, Ferlazzo N, Gangemi S, Calapai G, Schumacher U, Navarra M. Anticancer Potential of Citrus Juices and Their Extracts: A Systematic Review of Both Preclinical and Clinical Studies. *Front Pharmacol.* 2017 Jun 30;8:420. doi: 10.3389/fphar.2017.00420. PMID: 28713272; PMCID: PMC5491624.
53. Nerkar, Amit & Badar, Shubhangi. (2022). Ethnopharmacological review of kalmegh for anticancer activity. *Current Trends in Pharmacy and Pharmaceutical Chemistry.* 4. 152-157. 10.18231/j.ctppc.2022.027.
54. Dr. Jai Prakash Pandey. Classical uses of Haridra (*Curcuma longa*). *J Ayurveda Integr Med Sci* [Internet]. 2017Dec.31 [cited 2025May28];2(06):117-9. Available from: <https://www.jaims.in/jaims/article/view/350>
55. Tomar R, Kaur G, Sannd R, Singh H, Sarkar B. A review on Guggulu formulations used in *Ayurveda*. *Ann Ayurvedic Med.* 2014 Jul-Dec;3(3-4):104–9.
56. Tomar P, Dey YN, Sharma D, Wanjari MM, Gaidhani S, Jadhav A. Cytotoxic and antiproliferative activity of kanchnar guggulu, an *Ayurvedic* formulation. *J Integr Med.* 2018 Nov;16(6):411-417. doi: 10.1016/j.joim.2018.10.001. Epub 2018 Oct 4. PMID: 30337271.
57. Turrini E, Sestili P, Fimognari C. Overview of the Anticancer Potential of the “King of Spices” *Piper nigrum* and Its Main Constituent Piperine. *Toxins (Basel).* 2020 Nov 26;12(12):747. doi: 10.3390/toxins12120747. PMID: 33256185; PMCID: PMC7761056.
58. Vāgbhaṭa. *Ashtanga Hridaya* with English Translation by K.R. Srikantha Murthy. Sūtrasthāna 2/1-3. Varanasi: Chaukhamba Orientalia; 2002.

59. Blockhuys S, Wittung-Stafshede P. Yoga as a Complementary Therapy for Cancer Patients: From Clinical Observations to Biochemical Mechanisms. *Complement Med Res.* 2024;31(5):403-415. doi: 10.1159/000540213. Epub 2024 Jul 18. PMID: 38991506; PMCID: PMC11466442.
60. Agniveśa. Caraka Saṃhitā of Agniveśa, elaborated by Caraka and redacted by Dṛḍhabala. Vol. 1. Shukla V, Tripathi RD, editors. Vaidyamañoramā Hindi commentary with special deliberation. Varanasi: Chaukhambha Sanskrit Pratishthan; Sutrasthana, Chapter 29, Verse 349-350.
61. Vāgbhaṭa. *Ashtanga Hridaya* with English Translation by K.R. Srikantha Murthy. Sūtrasthāna 8/21-23. Varanasi: Chaukhamba Orientalia; 2002.
62. Vāgbhaṭa. *Ashtanga Hridaya* with English Translation by K.R. Srikantha Murthy. Sūtrasthāna 2/1-10. Varanasi: Chaukhamba Orientalia; 2002.
63. Parida, Akhilanath & Jena, Satyasmita & Sawant, Varun. (2020). CRITICAL REVIEW OF SNEHANA KARMA (OLEATION THERAPY). *International Journal of Pharmaceutical and Biological Science Archive.* 8. 1-5.
64. Sandipkumar Baheti, Mahesh S. Effect of Nadi Sweda on symptoms of Pain, Swelling and Stiffness in Knee Osteoarthritis - An Open Labeled Single Arm Clinical Study. *J Ayurveda Integr Med Sci* 2023;02:14-19. <http://dx.doi.org/10.21760/jaims.8.2.3>
65. Patidar, Anil & Mangal, Gopesh & Sharma, Siddharth. (2022). Matra Basti-Mode of Action-A Conceptual Study. *International Research Journal of Ayurveda & Yoga.* 05. 130-133. 10.47223/IRJAY.2022.5520.
66. Rawat V, Kumar V, Verma S. Role of Shirodhara by Brahmi Taila in Essential Hypertension: A Conceptual Study. *World J Pharm Med Res.* 2020;6(10):154-158. ISSN 2455-3301.
67. Chaudhari, Swapnil & Ruknuddin, Galib & Prajapati, Pradeep. (2014). Therapeutic potentials of Tamra (copper) and its alloys A review through Brihatrayi. *IJAM.* 2014. 1-10.
68. Kumar, Satyendra & Madaan, Alka & Verma, Ritu & Gupta, Arun & Jatavallabhula, Sastry. (2014). In vitro anti-inflammatory effects of Mahanarayan oil formulations using dendritic cells based assay. *Annals of Phytomedicine.* 3. 40-45.
69. Naringe Seema et al: Jalaukavacharana (Leech Therapy) Its Indications And Complications - A Brief Review. *International Ayurvedic Medical Journal* {online} 2021 {cited January, 2021} Available from: HYPERLINK "http://www.iamj.in/posts/images/upload/_pdf" http://www.iamj.in/posts/images/upload/228_233.pdf
70. Shindhe PS, Killedar RS, Laxmikant SD, Santosh YM, Madiwalar M. Evaluation of wound healing activity of Jatyadi ointment and Jatyadi taila in the management of clean wound (Shuddha Vrana): A randomized controlled trial. *Ann Ayurvedic Med.* 2020 Apr-Jun;9(2):88-94.
71. Sharma Priyanka and Rao K. Shankar. Pharmaceutico-analytical study of Jatyadi Ghrita and Jatyadi Ker Taila with special reference to their HPTLC fingerprints profile. *Int. J. Res. Ayurveda Pharm.* 2020;11(6):22-26 <http://dx.doi.org/10.7897/2277-4343.1106179>
72. *Ayurvedic Treatment for Breast Cancer & Holistic Healing.* <https://jeenasikho.com/Ayurvedic-treatment-for-breast-cancer-holistic-healing/>

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Fig 4. The condition before and after treatment