

Ayurvedic Perspectives and Interventions in the Management of Breast Cancer: A Comprehensive Review

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ABSTRACT

Breast cancer remains the most common malignancy among women globally. While modern medicine offers surgical, chemotherapeutic, and radiological interventions, there is growing interest in integrative approaches. Ayurveda, the traditional Indian system of medicine, provides a unique perspective on the pathogenesis, prevention, and management of breast cancer through the lens of doshic imbalance, dhatu kshaya, and Rasayana therapy. This review article explores Ayurvedic concepts of breast malignancies, evaluates herbal and herbo-mineral interventions, and highlights evidence from preclinical and clinical studies supporting the role of Ayurveda in managing breast cancer. The review emphasizes the importance of integrative oncology in improving quality of life, minimizing side effects, and enhancing outcomes in breast cancer patients.

Keywords: Breast cancer, Arbuda, Granthi, Ayurveda, Rasayana, Integrative oncology, Herbal therapy

1. INTRODUCTION

Breast cancer is a major public health issue, accounting for a significant proportion of cancer-related morbidity and mortality among women. Despite advancements in early detection and treatment, challenges such as recurrence, drug resistance, and adverse effects of chemotherapy persist. As a result, patients and researchers alike are turning to complementary systems of medicine, particularly Ayurveda, for holistic management.

In Ayurvedic literature, malignant tumors are referred to as Arbuda, while benign swellings are termed Granthi. Breast cancer, although not described in its modern clinical form, aligns with several classical descriptions of abnormal growths and vitiated dosha conditions. The integrative use of Ayurvedic formulations and therapies offers promise in reducing disease burden and enhancing the quality of life.

2. AYURVEDIC UNDERSTANDING OF BREAST CANCER

2.1 Nidana (Etiology): According to Ayurvedic texts, Arbuda is caused by prolonged vitiation of Vata, Pitta, and Kapha doshas, particularly when aggravated Kapha and Meda obstruct normal tissue metabolism (dhatu-vyapad).

2.2 Samprapti (Pathogenesis): Breast cancer may be conceptualized as a Kapha-dominant Arbuda localized in the Stana pradesha (breast region), involving Srotorodha (obstruction of channels), Dhatu dushti (tissue degeneration), and Rakta and Meda dhatu predominance.

2.3 Lakshana (Symptoms): Includes painless lump, skin dimpling, nipple discharge, and systemic symptoms like fatigue.

3. AYURVEDIC INTERVENTIONS

3.1 Internal Medications:

Herb / Formulation	Classical Use	Reported Activity
Ashwagandha (<i>Withania somnifera</i>)	Rasayana	Immunomodulatory, anti-cancer
Guduchi (<i>Tinospora cordifolia</i>)	Tridoshahara, Rasayana	Antioxidant, cytoprotective
Kanchanar Guggulu	Granthi, Arbuda	Lymphatic detoxification
Varunadi Kwatha	Medo roga, Arbuda	Lymphatic drainage, detox
Triphala	Rasayana, Lekhana	Antioxidant, gut detox
Turmeric (<i>Curcuma longa</i>)	Shotha hara	Anti-inflammatory, anti-tumor

3.2 Panchakarma Therapies:

Virechana (therapeutic purgation): For Pitta–Kapha vitiation

Basti (medicated enema): Especially Tikta ksheera basti for Rasayana effect

Nasya and Abhyanga: For systemic detox and lymphatic circulation

Raktamokshana: For localized blood detoxification in some Granthi cases

3.3 Rasayana Therapy:

Rasayana herbs like Amalaki, Brahmi, Shatavari, and Pippali rejuvenate dhatus, enhance immunity, and counteract oxidative stress. These agents are vital in post-chemotherapy support and recovery.

4. MODERN SCIENTIFIC EVIDENCE SUPPORTING AYURVEDIC INTERVENTIONS

4.1 Ashwagandha

- Active compound **withaferin A** has shown **apoptotic effects on breast cancer cells** (MCF-7 line).
- Enhances stress resilience and counters fatigue in chemotherapy patients.

4.2 Turmeric (Curcumin)

- Proven to inhibit breast cancer cell proliferation, angiogenesis, and metastasis in multiple preclinical studies.
- Clinical trials suggest improved outcomes in combination with conventional therapy.

4.3 Triphala

- Induces **selective cytotoxicity** against cancer cells without harming normal cells.
- Shown to reduce **chemotherapy-induced mucositis** and oxidative stress.

4.4 Kanchanar Guggulu

- Demonstrated **anti-estrogenic and tumor-reducing effects** in animal models.

5. INTEGRATIVE APPROACH IN BREAST CANCER CARE

Integrative oncology combines modern and Ayurvedic protocols to address:

- Side effect management (nausea, mucositis, neuropathy)
- Mental and emotional well-being (using **Satvavajaya chikitsa**)

- Immunomodulation and prevention of recurrence

Clinical Example: A study at an integrative cancer care center in India showed that patients receiving **Ayurvedic support along with chemotherapy** reported better quality of life, reduced fatigue, and improved immune markers.

6. CHALLENGES AND LIMITATIONS

- Lack of large-scale RCTs evaluating Ayurvedic formulations
- Standardization and quality control issues in herbal products
- Need for stronger collaboration between Ayurvedic and allopathic oncology experts

7. CONCLUSION

Ayurveda offers a valuable perspective and promising interventions in the holistic management of breast cancer. With its emphasis on balancing doshas, rejuvenation, and individualized care, it can complement conventional therapies. Further scientific validation and integrative clinical models are essential to harness Ayurveda's full potential in oncology.

8. REFERENCES

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