A Case Study on Ayurvedic Management of Hypothyroidism

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Abstract:

Ayurveda is a living science that contains remedies for betterment of health. Now a days one of the most prevalent metabolic and endocrinal disorder observed in everyday practice is hypothyroidism. Hypothyroidism occurs with derangement of thyroid hormones which has one and only management that is synthetic thyroid hormones supplementation which for long term use cause adverse effect. Hypothyroidism is classified as *Anukta vyadhi* in the *Charak Samhita*. The two primary doshas engaged in this *vyadhi* are *vata* and *kapha*. The current instance is one of the successful hypothyroidism cases. A 46-year-old female patient had suffered from weight gain, puffiness of face, pedal edema, generalized weakness, dryness of skin, hair fall, constipation, hyperacidity, and breathlessness, and these symptoms have increased fast in the last 2 months. Patient was known case of hypothyroidism for 5 years and has been on allopathic medication for the same. After two months of Ayurvedic therapy, the patient received Most of the symptoms of the condition were relieved, and the TSH level was lowered from 10.41 to 4.34. The present case study has focused on effectiveness of Ayurvedic management in primary hypothyroidism.

Keywords: Hypothyroidism, Billewicz diagnostic index, *Kanchanar guggulu*, *Punarnavadi Kashaya*, TSH levels.

INTRODUCTION:

Sedentary lifestyles have been aggravated by globalization, resulting in metabolic problems such as hypothyroidism, diabetes mellitus, hypertension, and coronary vascular disease [1]. Hypothyroidism, as an endocrine condition, causes thyroid hormone derangement [2]. The only option to fix the hormones is to take synthetic thyroid hormone pills like levothyroxine for the rest of your life [3]. To rectify thyroid gland function, an ayurvedic approach to the problem must be established, which can then aid in the preventative and therapeutic management of hypothyroidism [4]. It involves the *kapha* and *vata doshas*, and management approaches such as *shodhana* and *shamana* are necessary for balancing these *doshas*

[5]. Kanchanar guggulu along with other treatment have properties to work on vata and kapha which helps in reducing the symptoms like weight gain, oedema, puffiness etc [6].

CASE REPORT:

A female patient aged about 46 years old presented in the OPD with complaints of weight gain, puffiness of face, pedal edema, generalized weakness, dryness of skin, hair fall, constipation, hyperacidity, and breathlessness. In the last two months the symptoms are aggravating. She has been taking thyroxin hormone in a dose of 75 mcg per day in the last 5 years but her general condition did not improve nor did the level of TSH decrease.

ASTHAVIDHA PARIKSHA:

Nadi: 74/min

Mala: malavasthambha

Mutra: 3-4 times per day

Jiwha: saama Agni: mandya

Shabda: hoarseness of voice

Sparsh: twak rukshata

Druka: upanetra

Akruti: madhyam Bala: madhyam

Blood Pressure: 110/80 mm/hg

MATERIALS AND METHOD:

Materials:

Table 1: showing material used for study.

Sr no.	Dravya	Dose	Duration	Anupana
1	Punarnavadi kashaya	30ml	BD	Fresh prepared
2	Varunadi kashaya	30ml	BD	Fresh prepared
3	Kanchanar guggulu	250mg	500 mg BD	Lukewarm water
4	Arogyavardhini vati	250mg	500mg BD	Lukewarm water
5	Tab eranda brushta haritaki	500mg	1gm OD HS	Lukewarm water

METHOD:

Type of study: single case study.

Criteria for diagnosis: On the basis of TSH derangement levels.

Study duration: 60 days with follow up at 30 days and 60 days.

Assessment of result: on basis of subjective and objective criteria

Subjective parameters: Billewicz diagnostic index [7]

Objective parameters: CHANGES IN T3, T4, TSH LEVELS.

Table 2: billewicz diagnostic criteria (subjective parameter)

Sr no.	symptoms	baseline	30 days	60 days
1	Diminished sweating	+6	+6	-2
2	Dry skin	+3	+2	-6
3	Cold intolerance	-5	-5	-5
4	Weight increase	+1	-1	-1
5	Constipation	+2	-2	-2
6	Hoarseness	+5	+5	-5
7	Deafness	0	0	0
8	Slow movements	+11	-3	+3
9	Coarse skin	+7	+7	-7
10	Cold skin	-2	-2	-2
11	Periorbital puffiness	+4	-6	-6
12	Pulse rate	-4	-4	-4
13	Ankle jerk	-6	-6	-6

Table 3: showing changes in thyroid profile

Thyroid profile	Before treatment	After treatment
T3	1.32	1.26
T4	12.35	9.57
TSH	10.41	4.34

Observation and results:

As per shown in table 3 and 4 improvement of symptoms were observed as a result of our Ayurvedic management. Within 60 days, the patient's symptoms began to improve. After two months of treatment, the patient had recovered both subjectively and objectively.

Discussion:

Hypothyroidism, being a metabolic disorder, causes disturbances in the maintenance of normal body functioning and also slows down activities [8]. In this situation, all *Hetus* like improper diet, *Kapha prakopkara Aahar, Ratri jagarana, Sukhasana, Chinta* are mostly *Vata* and *Kapha prakopak. Aamuttpatti* arises as a result of *Hetu-sevan*, causing *Agnimandya* and constipation [9]. Because of *Hetus*, the initial *Aahar-rasa* is converted into *Aam*, resulting in *Vikrut Rasa Dhatu*. All of this causes additional problems and results in *Vikrut Dhatu-Uttpatti*. It also performs *Dhatu Kshaya* through *Pratilom Gati* and manifests as symptoms.[10]

Table 4: showing diagnosis based on thyroid profile

TSH	T4	INTERPRETATION
NORMAL	NORMAL	Normal thyroid function

ELEVATED	LOW	Over-hypothyroidism
NORMAL	LOW	central hypothyroidism
ELEVATED	NORMAL	subclinical hypothyroidism

Table 5: showing action of drug

Sr no	Drug	Action
1	Punarnavadi kashaya	Mutrala and rechaka [11]
2	Varunadi Kashaya	Gandamala nashaka [12]
3	Kanchanar guggulu	Vata kapha nashaka, galaganda and gandamala nashaka [12]
4	Arogyavardhini vati	Dhatwagnivardhana, malashodhaka, Pakwashyadushti
		nashka [13]
5	Eranda brustha haritaki vati	Nitya virechana [14]

CONCLUSION:

As the number of diseases associated with lifestyle advances, it causes problems. In such instances of *Anukta vyadhi*, Ayurveda provides the most effective alternative. Ayurveda cures these conditions with *doshas vichar* and also provides *apunarbhava*. Among my all-treated thyroid cases, there is one successful case of hypothyroidism. I will conduct further research on the same medical condition.

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