

Hypothyroidism Treated Through Ayurveda- A Clinical Case Study

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ABSTRACT

Background- *Ayurveda* (*Ayus*- life or Longevity& *Veda* – Knowledge) is a life science which has resolutions for all health difficulties. Thyroid disorders are the most frequent endocrine condition in India. One of the most prevalent endocrine disorders seen in everyday practice is hypothyroidism. Hypothyroidism is classified as *Anukta Vhadhies* in the *Charak Samhita*. The two main *Doshas* engaged in this *Vhadhies* are *Vata* and *Kapha*. Hypothyroidism is an endocrine condition caused mostly by insufficient thyroid gland stimulation or primary gland failure by the pituitary or hypothalamic glands. Hypothyroidism symptoms include fatigue, gastric discomfort, facial puffiness with edematous eyelids, slowed nail growth, put on weight, cold intolerance, mood disturbances, hoarseness of voice, decreased erotic desire, paleness, dry rough skin, dry brittle hair, alopecia, constipation, irregular menstrual cycle, muscle spasms cramps, myalgia, and so on. **Case report** - In this study, a female patient aged 29 years with Symptoms of hypothyroidism for 1 year was treated with *Rasayana*, *Shaman aushadhi*, and followed *Pathya* diet. **Result**-After four months of treatment, there was a considerable reduction in disease signs and symptoms, with a 60% improvement in the condition.

Keywords – *Ayurveda*, *Shaman aushadhi*, *Rasayana*, Hypothyroidism.

Introduction- The thyroid gland, the most vascularized organ in the body, developed first in humans and is located in the neck anteriorly between the C5 and T1 vertebrae and deep in the platysma, sternothyroid, and sternohyoid muscles. It is a soft reddish bilobular organ with an H-shaped configuration. The isthmus connects the right and left lobes. Thyroid weighs about 15-20g and is typically heavier in males than females¹. The gland is well-known for its hormones, which are generated by the hypothalamus or pituitary gland and include tri-iodothyronine (T3) and tetra-iodothyronine (T4), with T3 being more functionally active. There are two types of thyroid gland pathology. The first are structural pathological disorders such as colloidal goitre, abscess, and malignancy, while the second are functional pathological illnesses such as hyperthyroidism and hypothyroidism. There may be a third category which is blend of both structural and functional pathological conditions with a complication in all the above conditions as graves disease². Hypothyroidism affects 3.8-6% of the general population³. Thyroid dysfunction is classified into two types: over activity and underactivity⁴. Hypothyroidism is defined as an underactive thyroid. The most common complications of hypothyroidism include infertility, weight difficulties, depression, and persistent weariness⁵. The *Ayurvedic Samhita* describes an enlargement of the thyroid gland known as *Galganda*, which has symptoms similar to hypothyroidism⁶. In the *Samhitas*, there is no direct description of hypothyroidism. *Anukta vikar* refers to several ailments that are not explicitly listed in *Ayurvedic* texts⁷. The fundamental cause of disease emergence in modern times is severe changes in lifestyle and nutritional patterns, such as sedentary lifestyles combined with bad eating habits.

Case Presentation-

A Female patient of 29yr old, Married, hindu housewife visited OPD of Dr Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur On 2nd August with major grievances, since one year with compliant of Weight gain associated with increased tiredness, *Daurbalya* (weakness), *twak rukshata* (dry skin), *kesh patana* (hair loss),

malavashtmbha (constipation), *amalapitta* (acidity), facial puffiness associated with complaints of ten kg weight gain in the last four months. She also complained about mood fluctuations, weariness, and drowsiness. There is no family history of thyroid abnormalities, nor is there a history of diabetes or hypertension, heart problems, or any other severe diseases. The appetite is reduced, sleep is restful, bowel movements are regular, and micturition occurs 4 to 5 times per day. All vital signs and the systemic examination were normal.

History of Present illness-

Patient has symptoms of hypothyroidism since 1yr and she does not take any kind of medicine for this.

Past History –

NO H/O –HTN/DM/PTB/BA/Epilepsy/or any other serious medical illness.

NO H/O- Any surgical illness

Family history – NAD

Clinical Findings

Clinical examination reveals that her TSH levels were abnormal. All other clinical findings were also noted.

- B.P. - 120/78 mm of Hg
- PULSE: 89/min
- R/R: 15/min
- HEIGHT: 164 cm
- WEIGHT: 65 kg
- SYSTEMIC EXAM: Systemic examination reveals no abnormality.
- Thyroid local Examination-
 - ✓ On Inspection - there is no evidence of localized swelling.
 - ✓ On Palpation
 - Size - Normal
 - Shape – Normal
 - Localized temperature- Not Raised
 - Tenderness – Absent

Clinical Assessment

The Patient was clinically assessed by Jeebhpariksha (tongue examination), Naadipariksha (pulse examination) and Dashvidh Pariksha. Jeebha Pariksha (Tongue examination)

1 st Month	2 nd Month	3 rd Month	4 th Month
2/7/2023	9/10/2023	7/12/2023	10/1/2023
Pinkish cracked lines appeared	The crack line reduced	Slightly pinkish color appeared	Slightly pinkish color appeared

Dashvidh Pariksha Prakriti

- *Prakriti* (Physical constitution) - *Vatapitta*
- *Vikruti* (Pathological condition) - *Vyadhimadhyambala*
- *Dosha* (Deranged regulatory functionl factors of the body) – *Vatapitta*
- *Dushya* (Deranged major structural components of the body)-*Rasa* and *Rakta*
- *Sthana* (site of localization)- *Amashyagata*

- *Agni*(digestive /metabolicfactor)- *Mandagani*
- *Srotas* (site of structural and functional channels)- *Annavahasrotas*, *Raktavahasrotas*
- *Avastha* (stage of Disease)- *Jirnavastha*
- *Rogamarga*(Pathway of disease manifestation – *Abhyanttramarga*
- *Sadhyaasadyata*(Prognosis)- *Sadhyaawastha*
- *Sara*(excellence of tissue)- *Raktasara*
- *Samhanana*(body compactness)- *Madhyamsamhanna*
- *Pramana*(Measurement of body parts)- *Madhyampraman*
- *Satmya*(Homoloagation) –
- *Sattva*(Mental Constitution) - *Avara sattva*
- *Aharashakti* (Capacity to ingest food and capacity to digest and assimilate the food – *Madhyamshakti*
- *Vyayamashakti*(Capacity to exercise)- *Avara* (poor)
- *Vaya* (Age) – *Yuvawastha*

Materials and Methods

The treatment was prepared based on the state of *Rogabala* (the disease's strength) and *Aturabala* (the patient's strength). The patient is given the following medications for a period of two months. The patient was recommended to eat a light diet, barley, *Dahniya* water in early morning and exercise.

TABLE NO.1 Intervention

S.NO.	Name of Drug	Dose	Time of administration	Frequency and Anupana
1	<i>GandmalakandanRas</i>	1-1 vati	before food	Twice a day with luke warm water
2	Tfn 34	2-2 tab	before food	Twice a day with luke warm water
3	<i>Kanchnar Kashaya</i>	10-10 ml	before food	Twice a day with luke warm water
4	<i>Kanchnar Guggulu</i>	2-2 tab	after food	Twice a day with luke warm water
5	<i>Arogyavardhini Vati</i>	2-2 vati	after food	Twice a day with luke warm water
6	<i>Agnikumar Ras</i>	1-1 vati	after food	Twice a day with luke warm water

Results-

Date	T3	T4	TSH
05/08/2023	0.28ng/ml	3.89ug/dl	45.70uIU/ml
08/10/2023	0.54 ng/ml	4.70 ug/dl	21.08uIU/ml
06/12/2023	0.78 ng/ml	6.10 ug/dl	7uIU/ml

Discussion

Gandmalakandan Ras - *Gandmala Kandan Ras* is an *Ayurvedic* preparation of herbs and minerals which is helpful in lymphadenitis. Other than that, it is also helpful in loss of appetite and indigestion. On the basis of ingredients, it is a rejuvenator and *Tridoshar*. *Gandamala Kandan Rasa*'. Ingredients such as *Kajjali*, *Tamra Bhasma* prove it *Yogavahi*, *Rasayan*, *Medopachan*, *Lekhan* and helpful in proper secretion of *Pachak Pitta*. The rest ingredients like *Mandoora Bhasma*, *Trikatu* (*Shunthi*, *Maricha*, *Pippali*) prove it *Pachak*, *Raktashodhak* and *Rasayan* as well. *Gandamala Kandan Rasa* is useful in relieving the *Agnimandya* and *Malavashtambha* associated with *Galaganda* and *Gandmala*.

Tfn 34 - It works by nourishing the thyroid gland and managing the symptoms such as tiredness, weight gain, mood swings etc. It also works by regulating the production of thyroid hormones and treats hypo and hyperthyroidism.

Kachanar kashaya/Kachanar guggulu - *Kachanar* has a balancing activity on the thyroxin production, increasing any deficient production and decreasing any excess. It also clears swellings in the neck and goitre. It helps to correct thyroid imbalances by removing *Kapha* from the body and *Guggulu* has *Rukha*, *Laghu*, and *Sukhma* (minute) *Guna*, *Ushna Virya* (hot potency), *Katu Vipaka* and *Lekhana* (scraping properties with thermogenic activity), so it is useful in the treatment of *Kapha Meda* predominant disorders in hypothyroidism. As a result, it aids in the reduction of excess body weight. Overall, *Kanchanar Guggulu* balances the *Kapha* and *Medadushti*, supports proper function of the lymphatic system, balances *Kapha Dosha*, promotes elimination of inflammatory toxins, reduce thyroid gland swelling, and supports the *Jatharagni*.

Arogyavardhini Vati - *Arogyavardhini vati* as suggested by its name "*Arogya*- good health, *Vardhini*- improves that helps to improve overall health. It improves immunity which is helpful to reducing clinical features of Hypothyroidism. It is used in excessive swelling especially at face, throat, ankle and wrist, loss of appetite and low pulse rate. *Arogyavardhini vati* works on *Dhatwagnivardhana*, *malashodhaka*, *Pakwashyadushti nashka*.

Agnikumar ras- *Agnikumar ras* contains *Dipana*, *Pachana* and *Agnivardhana dravyas*. All the references given in the text shows that they mainly act on *Annavaha strotasa*. They commonly present *dravya Maricha* which does *Pachana karma*. *Shankha bhasma* is *Uttam Deepan*, *Paachana dravya* and *Amlapittanaashak kalpa*. *Kapardik Bhasma* is *Ushna*, *Deepan karyak* does the action of *Vaatanuloman* and thus, used in *Grahani* disease. *Bachnaag* is toxic drug but when used after purification acts as *Vyavayi*, *Vikasi*, *Kledashoshak* and *Aampaachak*. *Tankan* is a *Kshaariya dravya* which acts as *Aampaachak*. *Kajjali* here acts as preservative to increase shelf life of this drug and even act as catalyst.

Conclusion- From the above study it can be clearly concluded that *Kanchanar guggulu*, *Kanchanar kashyam*, *Gandmalakandan Ras*, TFN 34, *Arogyavardhini Vati*, *Agni kumar ras* combinedly effective in the management of primary hypothyroidism without apparent evidence of side effects or any complications. This medicine showed encouraging results in this case. The results need to be studied in more numbers in the early stage of the disease for the better assessment.

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