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Case Study

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MANAGEMENT OF HYPOTHYROIDISM WITH AYURVEDA- A CASE STUDY

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ABSTRACT

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Due to the non-specific nature of its signs and symptoms and the lack of a worldwide screening protocol, hypothyroidism can be challenging to detect. The best time to test for hypothyroidism can be challenging since patients may have mild symptoms or symptoms that are similar to those of other prevalent illnesses, and there are no clear standards for who should test or when. Nonetheless, in clinical practice, the diagnosis of hypothyroidism is crucial. Hypothyroidism manifests as fatigue, weight gain, hair loss, sensitivity to cold, mood swings, irregular menes in reproductive female, indigestion, and rough, dry skin. Case report: A 32-year-old female patient who has been diagnosed with hypothyroidism was treated with Triphala guggulu, Amalaki, Punarnava churna and a particular Pathya in this study. Outcomes: Following two months of therapy, there were improvement.

KEYWORDS: *Hypothyroidism, Triphala guggulu, Amalaki, Hormonal imbalance.*

INTRODUCTION

The pathology of thyroid gland broadly divided into two types. First one is structural pathological conditions such as colloidal goitre, abscess, malignancy and the second one is functional pathological conditions such as hyperthyroidism and hypothyroidism. There may be a third variety which is blend of both structural and functional pathological conditions and sometimes may also have a complication in all the above conditions as graves' disease.^[1] Each of the pathology presents with its own signs and symptoms here in this study the

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itself with tiredness, weight gain, hair loss, cold intolerance, mood disturbances, indigestion, dry rough skin and the treatment to this condition is hormone replacement. This clinical picture mimics the condition of Sthoulya^[2] and hence, it has to be treated in terms of Sthoulya Chikitsa. The treatment of this condition mainly focus on Shamana, Rasayana^[4] a lot of

functional pathology of thyroid gland is elaborated that is hypothyroidism which presents

clinical studies done on the management of hypothyroidism but less emphasis laid on trying

Shamanoushadhis, so, the present case report shows the successful management of

hypothyroidism.

CASE REPORT

A 32-year-old female patient non hypertensive, non-Diabetic having Come to OPD of Dept. of Kaya chikitsha, Regd. OPD no. -33457/6640 at DVAMCH & RC with complain of Hair fall, generalized weakness, irregular menstruation and Sleep disturbance since 1 year. He also

complained of weight gain since last 2 month.

Past history

Patient was suddenly experienced generalized weakness, hair fall associated with irregular menes, weight gain, and sleep disturbance. She was screened for the Thyroid function test and diagnosed as a case of Hypothyroidism.

Personal History

Patient was mixed diet, having moderate Appetite, irregular bowel habits and disturbed sleep. Patient had no addiction, there was no genetic linkage observed in the family.

General Examination

Blood Pressure: 110/70 mmhg

PR-78/min

RR-18/min

Temp: 96.4 F

Pallor- Absent

Thyroid local Examination- On Inspection

Localized swelling - Absent

On palpation Size - Normal Shape - Normal

Localized temperature - Not RaisedTenderness - Absent

Localized temperature – Absent

MATERIALS AND METHODS

The treatment was planned seeing the state of *Rogabala* (strength of the disease) and *Aturabala* (strength of the patient). The following medicines are administered to the patient for a period of 2 months. The patient was advised to indulge in light diet, barley and exercises. The treatment like amapachak (digestion of undigested food), agnideepan (increasing appetite), Vatanuloman (proper bowel movement), medohara (antiobesity) and vata-kapha nasak properties following medicines were administered to the patient. The treatment was continued for 2 months. The patient was advised as per Ayurvedic fundamental principles to avoid apathy ahara (food) and bihara (daily activities) like fast and junk food, cabbage, cauliflower, soybean, excessive sleep and other sedentary life style etc. she was advised to indulge pathyas like light diet, other green vegetables, sea food, old rice, barley and aerobic exercises etc.

DRUG REVIEW TRIPHALA GUGGULU

Ingredients	Rasa	Guna	Virya	Vipaka	Doshakarma
HARITAKI (Terminalia chebula Retz.)	Panchrasa	Laghu Ruksha	Ushna	Madhura	Tridoshahar esp. Vatahar
VIBHITAK [Terminalia bellirica (Gaertn.) Roxb.]	Kashaya	Laghu	Ushna	Madhura	Tridoshahar esp. Kaphahar
AMALAKI (Emblica officinalis Gaertn.)	Panchrasa (Alavana i.e., saltabsent)	Guru Ruksha Sheet	Sheeta	Madhura	Tridoshahar esp. Pitta-shamak
PIPPALI (Piper longum Linn.)	Katu	Laghu Snigdha Tikshna	Anushna Sheet	Madhura	Kapha- Vatashamaka
GUGGULU (Commiphora wightii)	Tikta Katu	Laghu Ruksha Tikshna Vishad Sukshma Sara Snigdha Pichchila	Ushna	Katu	Tridoshahar, Kapha-Vata har

AMALAKI CHURNA

Latin name: *Emblica officinalis*

Family: Euphorbiaceae

Chemical Constituents: Phyllembin, gallic acid, querecetin, ellagic acid, pectin, palmitic

acid, Leukodelphinidin, tannin etc.

Rasa: amla, madhura, kasaya, tikta, katu

Guna: Guru, Ruksha, seeta

Virya: Seeta

Vipaka: Madhura

Dosakarma: Tridosa Shamak, pitta shamak.

PUNARNAVA POWDER

Latin name: Borhavia diffusa

Family: Nyctaginaceae

Drug	Rasa	Guna	Virya	Vipaka	Dosaghnta	Karma
	Madhura,				Tridosashamaka	Sothahara
						Lekhana
Punarnava	Tikta,	Laghu	Ushna	Madhura		Anulomana
1 unamava	Kasaya	Rukshya	Osilia	Madilula		Deepana
	Kasaya				Rasayna	
						Rechana

Chemical constituents

Punarnavoside, hoeravinones, flavones, boervine, berrberine, berbamine, steros etc.

Pharmacological Action: Diuretic, Anti-inflamatory, Anti-bacterial, Anti-viral, cardiotonic, antihypertensive, hepatoprotective.

Astabidha Prikshya

S. No.	Factor	Observation
1	Naadi	Kapha
2	Mala	Sa-Ama
3	Mutra	Snigdhasheeta (Kaphaja)
4	Jihwa	Sama
5	Shabda	Spashta
6	Sparsha	Ushana-Sheeta
7	Drik	Samanya
8	Akriti	Pitta-Vataja

Dasabidha Parikshya

S. No.	Factor	Observation
1	Prakriti	Kapha-pittaj
2	Vikriti	Pravara Tridoshaja
3	Saara	Twaka
4	Samhanana	Madhyama
5	Satmya	Madhyama
6	Satwa	Avara
7	Aahar Shakti	Madhyama
8	Vayama Shakti	Avara
9	Vaya	Pravara
10	Bala	Madhayama

DIAGNOSTIC METHOD

- Thyroid-stimulating hormone (TSH)
- T4 (thyroxine)

Investigations- Done Before and after completion of Treatment to assess the improvements.

Subjective Parameters- Weakness, Weight gain, Hair fall, irregular menstruation, and Disturbed sleep recorded.

Objective parameters- TSH, T4.

TREATMENT

ORAL INTERVENATION

SL NO	NAME OF DRUG	DOSE	ADMNISTRATION	ANUPANA
1	TRIPHALA GUGGULU	1 GM	AFTER FOOD	LUKE WARM WTER
2	AMALAKI + PUNARNAVA POWDER	3 GM	BEORE FOOD	MADHU

OBSERBATION AND RESULTS

Symptoms wise improvements

SN	Effect of treatment	Percentage wise results		
SIN		BT	AT	
1.	Weight	72 kg	70 kg	
2.	Weakness	+++	+	
3.	Hair loss	++	-	
4.	Irregular Menstruation	Irregular	Regular	
5.	Sleep	Disturb	Sound sleep	

THYROID PROFILE

SN	Investigation	Before	After
		treatment	treatment
1.	T4	0.68 ng/dl	1.20 ng/dl
2.	TSH	28.60 uIU /ml	5.24 uIU/ml

DISCUSSION

Triphala guggulu is an ayurvedic formulation that provides the combined effects of triphala and guggulu. Triphala brings detoxifying and laxative properties associated with Tridosa shamak effects, which balance the dosha in our body and maintain a health. Amalaki is a natural remedy long used in Ayurveda. It contain a number of substances proven to enhance health and immunity, including vit. C and other antioxidants. Amlaki rich in antioxidants that may eliminate free radicals which cause damage to the cells and balancing tridosha. Punarnava is a well known medicinal plant packed with essential nutrients, vitamins such as vit c and other constituents. According to Ayurveda punarnava used in various condition its very effective in liver and kidney disorder and lso sothahara karm and balance doha. By the sothahara properties its act on thyroid gland and may normalize the hormonal imbanace.

CONCLUSION

From the above study it can be concluded that Triphala Guggulu, Amalaki + Punarnava Churna may effective in the management of hypothyroidism. So, there was a significant reduction in the signs and symptoms of the disease, and also in thyroid profile report. The medicine showed encouraging results in this case. The results need to be studied in more numbers of patients for the better assessment.

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