



AYURVEDIC MANAGEMENT OF KAPHAJ SHOTH/ HYPOTHYROIDISM - A CASE STUDY

Dr. Priyanka Adhav^{*1}, Dr. M. S. Nawkar² and Dr. Shailesh Nawkar³

¹PG scholar Department of Ayurved Samhita and Siddhant, RTAM Akola, Maharashtra.

²HOD Department of Ayurved Samhita and Siddhant, RTAM Akola, Maharashtra.

³HOD Department of Rasashastra and Bhaishajyakalpana, RTAM Akola, Maharashtra.

***Corresponding Author: Dr. Priyanka Adhav**

PG scholar Department of Ayurved Samhita and Siddhant, RTAM Akola, Maharashtra.

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ABSTRACT

Introduction: Hypothyroidism refers to any state that results a deficiency of thyroid hormone, including hypothalamic or pituitary disease and generalised tissue resistance to thyroid hormone and disorder that affects thyroid gland directly. Any defects in stages of synthesis a transport of thyroid hormones will eventually results in hypothyroidism. In ayurveda there is no direct explanation of hypothyroidism. So its become comprehend to compare with modern term. But acharya charaka has explained trishothiya adhyay in sutrasthana in view of shotha lakshana. The presented case In article can be diagnosed as Kaphaj shoth in the perspective of ayurved and it's modern diagnosis is hypothyroidism and the case is successfully treated with ayurvedic shaman chikitsa. **Materials and methods:** A case study observed in Ayurved Samhita OPD. **Observation and Results:** Tha said patient had improved with her symptoms by ayurved shaman chikitsa. **Discussion and Conclusion:** As acharya charaka rightly said that it is more important to understand pathogenesis rather than naming the disease, so on that parallence the case was diagnosed as strotojanya Kaphaj vataj vikar i.e Kaphaj shoth in modern view of hypothyroidism.

KEYWORDS: Hypothyroidism, Kaphaj shoth, medodhatwagni mandya, shaman chikitsa.

INTRODUCTION

Hypothyroidism refers to any state that results in a deficiency of thyroid hormone, including hypothalamic or pituitary disease and generalized tissue resistance to thyroid hormone and disorders that affects thyroid gland directly. The synthesis of thyroid hormones includes,

1. Thyroglobulin secretions
2. Iodide pump
3. Oxidation of iodide
4. Iodination of Tyrosine
5. Iodothyronines

The 80% of thyroid hormones are transported by Thyroxine binding globulin and 10% by albumin and transthyretin i.e thyroxine binding pre albumin respectively. Any defects in stages of synthesis a transport of thyroid hormones will eventually results in hypothyroidism.^[1]

• Functions of Thyroid hormone

1. Growth and development – for normal axonal and dendritic development myelination and linear growth with maturation of growing epiphyseal end plates.
2. Energy metabolism – stimulates BMR, oxygen consumption and heat production.
3. Nervous system – It regulates nervous system

activity by exerting effect on adrenergic receptors.

4. Heart- T3 maintains normal myocardial contractility.
5. Muscle – Normal skeletal muscle function is regulated.
6. Respiratory system – Lung volume and breathing capacity is maintained.
7. Skin- Normal cutaneous circulation and secretion of glands.
8. Colon – helps in controlling normal bowel movements.
9. Vitamins – Increases utilisation and clearance of vitamins.
10. Carbohydrate metabolism – stimulates absorption of glucose from intestine.
11. Protein metabolism – Increases the synthesis of proteins in the cells.
12. Fat metabolism – Decreases fat storage by mobilizing it and converting into free fatty acids.
13. Action on sleep- hyposecretion of hormone causes excess sleep and hypersecretion causes sleeplessness.
14. Action on sexual function – helps in normal sexual development and reproductive function.^[2] This is how thyroid hormone metabolism and functions are important in modern view.

- **Level of TSH**

0.0 – Hyperthyroidism

0.4 - 2.5 – Normal Range

2.6 – 4.0 – At risk

4.1 – 10.0 – Hypothyroidism

In charak samhita Acharya charaka has mentioned 'Ashtanindit purushas' in sutrasthana chap 21. This chap can be taken as functional disorders of endocrine glands.^[3]

In ayurveda there is no direct explanation of hypothyroidism. So its become comprehend to compare with modern term. But Acharya charaka has explained trishothiya adhyaya in sutrasthana in view of shotha lakshana. According to ayurvedic literature shotha is mainly classified into 3 categories viz, Vataja, Pittaja & Kaphaja and also classified differently as exogenous i.e Aagantuj, endogenous i.e Nija, Ekangaj i.e located in only one limb and sarvaja i.e swelling all over the body.^[4]

The endogenous and exogenous oedema are of 3 types viz, Sarva gatra – oedema pervading the whole body.

Ardha gatra – oedema pervading the half of the body.

Avayava Ashraya – oedema afflicting only one limb of the body.^[5]

As kapha, blood and pitta enter the external vessels and afflict the vata dosha, As a result, the channel of circulation gets obstructed which spreads to the nearby areas leading to shotha. Shotha shvayathu is characterized by swelling.^[6]

When these afflictions take place in the whole body then swelling occurs in the entire body. This can be located in any particular viscera, such as throat and palate then oedema takes place in that local area.^[7]

Shotha samanya lakshanas are mentioned as follows,

- Heaviness in body
- Instability
- Swelling
- Rise in temperature
- Discoloration of the skin
- Horripilation
- Thinning of vessels^[8]

But Kaphaja shotha has specific lakshanas mentioned in samhitas are as follows,

- Heaviness in the limbs
- Oedema remains stable
- Patient suffers from anemia and anorexia
- Excessive salivation
- Excessive sleep
- Suppression of power of digestion^[9]

Kaphaja type of shotha takes longer time to appear and it also takes long time to cure.^[10]

AIM: To study case of hypothyroidism/ Kaphaja shotha

through ayurvedic management.

OBJECTIVE

To manage the case through Ayurvedic Sahaman Chikitsa

CASE REPORT

A female patient with 39 years of age visited ayurved samhita OPD of R T Ayurved rugnalay, Akola, Maharashtra on 28/2/2022 with following complaints,

1. Glani
2. Sarvangshotha
3. Sandhishoola
4. Shwaskashtata
5. Asane-gamane kashtata
6. Panduta
7. Sthulata

Patient was suffering from the above same complaints since 4 years.

Past History: Patient was already k/c/o Hypertension on regular allopathy medicine i.e Tab. Amlodipine 5 mg once a day since 4 years.

- No any history of drug allergies or any past surgery noted.
- No any specific family history noted.

On examination

- Nadi - 60/ min
- Mala – Niram & once a day
- Mutra – Samyaka & 4-5 times a day
- Jivha – Saam
- Shabd – Swarbheda
- Sparsh – Ushna
- Druk - Prakrut
- Akrti – Sthoola

Systemic examination

- BP – 140/90 mmhg
- P – 60/min
- CVS – S1S2 heard and normal
- CNS – Concious and oriented
- RS – B/L clear
- Weight – 94 kgs

Local examination

- Dryness of skin
- Peripheral oedema

Lab investigation

Patient represented with lab reports

07/01/22 : T3 – 1.86, T4 – 11.7, TSH – 4.86, Hb – 9.4, TLC – 6600, RBC – 3.97, Platelet – 2.66

Chief complaints

Glani Sarvangshotha Sandhishoola Shwaskashtata
Asane-gamane kashtata Panduta
Sthulata

Nidan panchak

1. Hetu – Aniyamit ahar
2. Purvaroop – Glani, shwaskashtata
3. Roopa – panduta, sandhishoola
4. Anupashaya – Snigdha Ahar
5. Samprapti – Hetusevan – Vat kapha vrudhhi – medodushti - shotha utpatti.

generalized aches, puffiness, anemia, menstrual disturbances

2. Rakta – Dry skin, lethargy, anemia
3. Maas – heaviness in body, muscle ache
4. Meda – Tiredness, sleepiness, sluggishness, DOE
5. Asthi – Osteoporosis, osteoarthritis
6. Majja – Osteoporosis

Involved Tridoshas

1. Weight gain – Kaphavrudhhi, pittakshya
 2. Puffiness of body – Kaphavrudhhi
 3. All joint pain, bodyache – Vatavrudhhi
 4. Anemia – kapha Vatavrudhhi, pittakshya
 5. Hoarseness of voice – Kapha Vatavrudhhi
 6. Muscular cramps – Vatavrudhhi
- The above symptoms shows that it mainly includes Kaphavrudhhi, Vatavrudhhi, and pittakshya.

Involved strotasas

1. Rasavaha – Weight gain, lethargy, heaviness in body, generalized aches, puffiness, anemia
2. Raktavaha – Lethargy, anemia
3. Maasvaha – Oedema
4. Medovaha – Tiredness, DOE
5. Asthivaha – Osteoporosis, osteoarthritis
6. Majjavaha – Osteoporosis

Involved Dhatus

1. Rasa – weight gain, heaviness in body, lethargy,

Drug profile

Drug	Dose	Anupan	Duration
1. Goksuradi Guggul	2 tabs BD	Lukewarmwater	30 days
2. Ampachak vati	2 tabs BD	Lukewarmwater	30 days
3. Punarnavaghanvati	2 tabs BD	Lukewarmwater	30 days
4. Medohar guggul	2 tabs BD	Lukewarmwater	30 days
5. Chandraprabhavati	2 tabs BD	Lukewarmwater	30 days

OBSERVATION

Name of c/c	Day1 F/U	Day7 F/U	Day15 F/U	Day30 F/U	Day45 F/U	Day60 F/U
1. Glani	++	+	+	0	0	0
2. Sarvang shoth	++	+	+	+	0	0
3. Sandhi shoola	+++	+	+	+	0	0
4. Shwas kashtata	+	+	0	0	0	0
5. Aasanegamane Kashtata	++	+	+	0	0	0
6. Panduta	++	+	+	+	0	0

RESULTS

On the first day the above said patient represents with lab reports. At that time TSH was 4.86 and Weight about 94 kgs. Above ayurvedic shaman chikitsa given to patient according to chief complaints.

On follow up, it found patient is improving as per her symptoms. So on follow up of Day30, Lab investigation repeated. That time TSH was 2.69 and weight also dropped to 89kgs. So asked patient to continue above said ayurvedic shaman chikitsa.

DISCUSSION AND CONCLUSION

The present case can be diagnosed as Kaphaja shotha in the perspective of ayurveda and its modern diagnosis is hypothyroidism.

As Acharya Charaka rightly said that it is more important to understand pathogenesis rather than naming the

disease, so on that parallel the case was diagnosed as strotajanya kapha-vataj vikar i.e shotha.^[11]

Dushyas involved in this disease are rasavaha, raktavaha, mansvaha, medovaha, asthivaha as mentioned earlier.

In present case study, the causative factors found are excessive intake of snigdha ahar and unscheduled diet i.e Aniyamit ahar.

The patient clinically diagnosed as case of hypothyroidism was treated with the specific regimen in the base of Ayurveda for 30 days i.e,

1. Gokshuradi Guggul
2. Ampachak vati
3. Punarnava ghanvati
4. Medohar guggul
5. Chandraprabha Vati

Gokshuradi guggul contains gokshur, guggul, triphala, shunthi, marich, pippali, musta. Mainly it is used as vata kaphaghna. Gokshuradi guggul has property of kledshoshana. So it was beneficial in view of shothghna in respective case.^[12]

Ampachak vati contains shunthi, chitrak, hingul, sajjikshar, shankha bhasma, shuddha gandhak, saurvachal and amalaki. Though ampachak vati mainly used for Agni. In present case, it is used to treat agnimandya and Its action suggest digestion of ama.

Punarnava ghanvati contains shunthi, pippali, maricha, haritaki, darvi, amla, gokshur, kantakari, Sita, draksha, brihati, vasaka, katuki, punarnava, gajapippali, guduchi, patola, durlabha, dhataki. It is used as shothghna. Punarnava ghanvati is an excellent anti inflammatory and diuretic remedy which provides relief in heart, kidney and liver disorders.^[13]

Medohar guggul contains amalaki, guggul, maricha, musta, pipali, erand oil. It helps to stimulate fat metabolism, helps to burn excess body fat and helps to improve digestive function. In view of respective case, kapha and meda has ashrayashrayi bhava. Hypothesis is considered as medodhatwagni mandya janit vikara hence medohar guggul is used here.

Chandraprabhavati contains chandraprabha, vacha, musta, bhunimb, sudarav, haridra, ativisha, Darwin, pippali mula, chitrak, shilajatu, loha, guggul, triphala, suvarnamakshika etc It has various actions. Mainly loha, shilajatu and guggul act on meda and Maas dhatu also helpful to reduce Pandu.^[14]

In present case study, the causative factors found are excessive intake of snigdha ahara, and unscheduled diet i.e aniyamit ahara. A patient is clinically diagnosed as a case of hypothyroidism was treated with the specific regimen in the base of Ayurved that are gokshuradi guggul, ampachak vati, punarnava ghanvati, medohar guggul and chandraprabha vati for 30 days.

In respective case, though in medodhatwagni mandya janit vikaras samprapti includes factors such as vata kapha medodushti due to hetusevan and has sarvang sandhi sthanasanshraya which represents by shotha utapatti.

In above case Medodhatwagni mandya and kaphapradhan shoth are important factors. Rogmarg is bahya and Agni is manda, which is leading to increase in Ama and increase in kleda hence kledshoshan, maasmedpachan, agnideepan and shothghna treatment is advised which has also shown effective result in reducing the TSH level of same patient.

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