Ayurvedic Management of Galganda w. s. r. Hypothyroid: A Case Report

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Abstract: Hypothyroidism can result from any of different abnormalities that lead to insufficient synthesis of thyroid hormones. Hypothyroidism is common to the society, more prevalent found in females. Although there is no exact reference of Hypothyroidism in Ayurveda, we get scattered references in the classics text which helps us in knowing the underlying pathophisiology. Acharya Charaka's concept of Asta Nindita Purusha includes endocrinal presentations. Symptoms seen in the Hypothyroid patients are found in the classical description of different conditions such as Amajeerna, Kaphaja Pandu, Kaphaja Shopha, Avarana and Bahudoshavastha. The patient was treated by Ayurvedic medicine and pachakarma therapies and showed marked improvement in symptoms. Observation and results were drawn on the basis of assessment criteria. Discussion was done on the basis of entire observations during research. Conclusion was drawn on the basis of result.

Keywords: Galganda, Hypothyroidism, Panchkarma.

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Introduction

Thyroid problems are among the most common endocrine disorders presently seen in nowadays life. About 1 to 2% of the adult population is known to suffer from thyroid disorders in present era. According to the World Health Assembly report, about 1.5 billion people are threatened with thyroid disorders. It is an endocrine gland located in the neck below the thyroid cartilage (which forms the laryngeal prom-inence or "Adam's apple").

It acts by producing thyroid hormones, the principal ones being triiodothyronine (T₃) and thyroxine (T₄). Because they are the only iodine containing hormones in a careful follow-up and treatment re-assessment should be always considered to avoid the risk of over-treatment. It is important to stress the need of educating the patient for a correct administration of LT4, particularly when poly-therapy is in place, and the importance of a tailored therapeutic approach and follow-up, to avoid overtreatment.

The body, an adequate iodine intake is necessary for the optimum functioning of the thyroid gland. Doctors recommend about 150 mg/day of iodine for normal thyroid function; less than 50 mg/day for a long Period may cause goiter. The disease is more prevalent in females around 6-8 times, between 30-50 years.

Case Report

A 30yrs old male patient came to us with chief complaints of -sthloya (weight gain) and kantha karkashta (irritation in throat) palitya (hairfall), alasya (drowsy), Malavastamba (constipation), anidra (insomnia). All the above complaints were since 3 months. No h/o DM/HTN/Asthma/IHD/PTB/BA/Jaundice/Typhoi.

History of Present Illness

The patient was normal 3 months before, since then patient have suffering from sthloya (weight gain) and kantha karkashta (irritation in throat) palitya (hairfall), alasya...
(drowsy), Malavastamba (constipation), anidra (insomnia). For this patient took treatment from different pathy medicos but got no relief. So he came to our hospital Y.M.T. ayurvedic medical college and hospital gets admitted in kaychikitsa department for ayurvedic management.

**Past Medicine History**

Patient took tab thyronorm 50mcg before

**Personal History**

- Occupation - clerical work (clerk)
- Habit - over eating
- Ashta Vidha Parikshan:
  - Nadi - 78/min
  - Mala - asamyak
  - Mutra - samyak
  - Jivha – alpasaam
  - Shabda – spashta
  - Sparsha- anushnasheet
  - Druk - avishesh
  - Akruti- madhyam
  - Kulaj vyadhivruttanta: avishesh

**On Examination**

- General condition of patient was good and afebrile.
- Pulse: 84/min
- Blood pressure: 130/80 mm of Hg
- Systemic examination: CVS: S1 S2 Normal
- CNS: Well oriented, conscious.
- RS: air entry bilaterally equal
- Local examination: no tenderness at neck region.
- P/A: Soft, non tender; Liver, Kidney, Spleen not palpable.

**Materials and Methods**

**Methods**

**Types of Study**

Simple random single case study. Study center- Y.M.T Ayurvedic medical college and Hospital, Kharghar, Navi Mumbai.

**Materials with Daily Treatment and Prognosis**

Clinical examination of the patient revealed regression of symptoms due to our Ayurvedic Management.

**Table 1: Showing material used in study**

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Dravya</th>
<th>Dose</th>
<th>Duration</th>
<th>Anupan</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Kanchanar guggul</td>
<td>250mg</td>
<td>2BD</td>
<td>Lukewarm water after food</td>
</tr>
<tr>
<td>2.</td>
<td>Arogyavardhini</td>
<td>250mg</td>
<td>2BD</td>
<td>Lukewarm water after food</td>
</tr>
<tr>
<td>3.</td>
<td>Sukshma triphala</td>
<td>250mg</td>
<td>2BD</td>
<td>Lukewarm water after food</td>
</tr>
<tr>
<td>4.</td>
<td>Bramhi vati</td>
<td>250mg</td>
<td>2BD</td>
<td>Lukewarm water after food</td>
</tr>
</tbody>
</table>

**Table 2: Showing panchakarma done in study**

<table>
<thead>
<tr>
<th>Sarvanga udhvarana</th>
<th>With Triphala choorna &amp; kolkulthadi choornafor 14 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Snehapana with guggulu tiktaka ghrita</td>
<td>For 4 days till samyaka snigdha lakshanas are seen</td>
</tr>
<tr>
<td>Vishrana kala</td>
<td>Sarvanga abhyangawith moorchita taila and sarvanga bashpa swedaKaphautkleshakara ahara was advised.</td>
</tr>
<tr>
<td>Akanthapana withsheerat 5.30 am</td>
<td>Aushdhi with madanaphala+yashtimadhu+vacha+ saindhava lavana+ honey at 5.45 am</td>
</tr>
<tr>
<td>Aushdhi darshanaseen</td>
<td>Pittantaseen</td>
</tr>
<tr>
<td>Sarvanga Udvarana</td>
<td>Advised for 5 days with Triphala Churna &amp; Kolakulatadi churna</td>
</tr>
<tr>
<td>Virechana karma</td>
<td>Snehapanawith guggulu tiktaka ghritafor 3days</td>
</tr>
<tr>
<td>Visharana kalafor 3 days –sarvanga abhyanga with moorchita taila+ bashpa sweda</td>
<td></td>
</tr>
<tr>
<td>Virechana karma</td>
<td>Virechana karma= sarvanga abhyanga with moorchita taila+ bashpa sweda</td>
</tr>
<tr>
<td>Virechana with trivrit avlehyn80 gms was given with ushna jala anupana</td>
<td></td>
</tr>
<tr>
<td>Patient got 19 vegas</td>
<td></td>
</tr>
<tr>
<td>Samsarjana karmawas advised for 7 days</td>
<td></td>
</tr>
</tbody>
</table>
On Discharge Treatment
Given same as above internal medicines and follow up after 7 days. While period of panchakarma procedures all internal medications were holded.

Effect of Vamana and Virechan Procedure
- Patient reduced the weight by 5kgs after vamana and 2 more kgs after virechana
- Reduced cramps in the thighs, reduced lethargy

- Puffiness of face reduced
- Reduced tiredness
- Sound sleep

Result
The patient had started improving during hospital stay and at the end of 1st month there was recovery to some extent. TSH levels also reduced after treatment. So we can stated that with Ayurvedic treatment its get dynamic result and get relief of all subjective and objective parameter.

Table 3: showing changes in FREE TSH

<table>
<thead>
<tr>
<th>Before treatment (12/10/2019)</th>
<th>TSH 12 ulU / ml</th>
</tr>
</thead>
<tbody>
<tr>
<td>After treatment (15/12/209)</td>
<td>TSH 0.05 ulU / ml</td>
</tr>
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</table>

Discussion
Hypothyroidism belongs to Santarpannottha vyadhi awasta for which Doshavsechana is indicated. Panchkarma therapy is best for the correction of Agni. In hypothyroidism there is impaired anabolism and catabolism resulting in decreased, assimilation, absorption which leads to lack of nutrition and immunity.

Thyroid hormones increase the excretion of metabolic wastes from the tissues. Thus deficiency of thyroid hormone will impairs excretion of waste products leading to Malasanchaya and malavrodh. All these leads to formation of free radicles, causing tissue damage. In such conditions Srotoshodhana is essential which will be effectively done by Samshodhana therapy.

Role of Vamana Karma in Hypothyroidism
Kapha Sthanapranpurvi Chikitsa
Thyroid gland is situated in the neck region which is Sthana of Kapha Dosha and Kapha dominant symptoms are present in this disease. Thus for the elimination of Kapha Dosha, Vamana Karma is indicated while doing treatment of thyroid disorders.

Role of Virechana Karma in Hypothyroidism
It refers to the under activity of thyroid gland resulting into deficiency of thyroid hormones which may be considered as malfunctioning of Agni (Pitta). So for agni treatment Virechana is the an important treatment for the regulation of Pitta Dosha. To improve metabolism Virechana will be best treatment.

Table 4: Showing action of drug and other procedure done in study

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<th>Sr. No.</th>
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<tr>
<td>3.</td>
<td>Sukshma triphala</td>
<td>shothghna</td>
</tr>
<tr>
<td>4.</td>
<td>Bramhi</td>
<td>Medhya</td>
</tr>
</tbody>
</table>

Conclusion
By adopting Ayurvedic treatment one can not only decrease the level of TSH, but also enhance, stimulate the normal functions of gland. It can be concluded that Ayurvedic treatment modalities with yoga and pranayam can provide satisfactory results in the management of hypothyroidism, if followed as per the prescribed literature of Ayurveda. Awareness regarding such efficacies is to be drawn among the masses so that a more and more number of sufferers can utilize the services and have the benefit of an enhanced quality of life and increase life span.
References