

## Management of Hypothyroidism with Ayurveda - A Case Study

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### Abstract

The most common endocrine disorders in this era is Hypothyroidism, One of the important hormone secreted by Pituitary Gland is TSH which plays important role in controlling the thyroid gland secretions. Hence it is the most useful marker of Thyroid gland function. Thyroxine (T4) and Triiodothyronine (T3) are the two hormones secreted by Thyroid gland. Hypothyroidism can be difficult to diagnose, as its signs and symptoms are not too specific also these symptoms are seen in different disease conditions. However, identification of hypothyroidism is important in clinical practice. The symptoms of hypothyroidism include fatigue, weight gain, hair loss, cold intolerance, mood disturbances, indigestion, dry rough skin, heavy or irregular menstrual periods or fertility problems. Sedentary lifestyle and unhealthy food habits, stress and anxiety may be considered as a primary reason of Hypothyroidism. Clinical features of Hypothyroidism shows most symptoms of the Santarpan Vikaras. Hypothyroidism is a condition which require specific Ayurvedic Nidan for treatment. Patient was cured completely with no reoccurrence of symptoms even after 1 year. During subsequent treatments and routine follow-ups, laboratory investigations were done. A case of hypothyroidism was successfully treated with Ayurvedic Chikitsa, resulting in a rapid and significant recovery.

### Introduction

The Thyroid gland disorders are of two types one is structural and another is pathological. Structural conditions includes colloidal goitre, abscess, and malignancy while the pathological conditions includes hyperthyroidism and hypothyroidism. There are many hypotheses formulated regarding the understanding of Hypothyroidism in Ayurveda. Each of the pathology presents with its own signs and symptoms, here in this study the condition hypothyroidism is elaborated which presents itself with tiredness, weight gain, hair loss, cold intolerance, mood disturbances, indigestion, dry rough skin and the treatment to this condition is hormone replacement in modern science. This clinical picture of Hypothyroidism mimics the condition of Santarpanjanya Vikar. The treatment of this condition mainly focus on Shodhana and Shamana, Vyadhihara Rasayana. The present case report shows the successful management of hypothyroidism.

### Case Presentation

A female patient aged 21 years came to Panchakarma Chikitsalaya, Nashik with the following complaints: Increased tiredness, sudden weight gain, puffiness of face, irregular menses and hair loss since 3 months. She also felt swelling over her neck since one week. Her Previous weight was 44 kg now it is 48 kg. There is no history of diabetes or hypertension, cardiac problem or any other complicated diseases and there was no relevant family history of thyroid disorders. The appetite is increased, sleep is sound, bowel is regular and micturition is 4 to 5 times per day. All the vitals and systemic examination were within normal limits. One thing is to be considered here is that patient is under tremendous mental stress because her mother was undergone through MRM surgery with chemotherapy and radiation for CA Breast.

### Thyroid local Examination

- Localized swelling – Present
- On palpation Size - Increased
- Localized temperature - Not Raised

**Astavidha Pariksha**

- a) Nadi - Vata Kapha, Sama, Gatiman
- b) Mutra -10-12 times a day (Increased frequency)
- c) Mala - Avishesh
- d) Jiva - Saama
- e) Shabda - Jadhyata
- f) Sparsha - Avishesh
- g) Drik - Avishesh
- h) Aakriti - Sthula

	Ghana Vati	g	to sleep	m water
6.	Combination of Mahamanjishthadi kadha and Sarivasav	10 ml each	After food two times a day	Lukewarm water
7.	Hinguvachadi choorna	250mg	Before food two times a day	Lukewarm water

**Laboratory evaluation - Thyroid profile**

T3 - 59.24 ng/dL  
 T4 - Below 1 µ/dL  
 TSH - >100.00 µIU/ml

**Table 2: Symptom wise result**

SN	Effect of treatment	Percentage wise results Before Treatment	Percentage wise results After Treatment
1.	Weight	48.2 kg	44 kg
2.	Fatigue	80%	20%
3.	Hair loss	80%	20%
4.	Puffiness of face	80%	10%
5.	Irregular menses	Irregular	Regular

**Materials And Methods**

Treatment protocol - As per clinical presentation and hetu, patient was diagnosed as Atisantaropanjanya Rasavaha-Medovaha Strotas Dushti. With Apatarpana at Manas level. On basis of this diagnosis following line of treatment was planned. Medicines are administered to the patient for a period of 2 months. The patient was advised to hake Laghu Ahar and exercise.

**Table 1: Treatment Given**

Sr. No	Name of Medicine	Dose	Time of Administration	Anupan
1.	Rajapravartani Vati	250mg	Before food two times a day	Lukewarm water
2.	Chandraprabha Vati	250mg	Before food two times a day	Lukewarm water
3.	Rasapachaka Vati	500mg	After food two times a day	Lukewarm water
4.	Medosapachaka Vati	500mg	After food two times a day	Lukewarm water
5.	Gorakhamundi	250mg	Before going	Lukewarm

**Table 3: Thyroid profile report**

S N	Investigation	Before treatment Date	After treatment Date	Biological Reference Interval
		09-07-2020	08-10-2020	
1.	T3	59.24 ng/dL	103.6 ng/dL	80 – 200
2.	T4	Below 1 µ/dL	5.12 µ/dL	5.1 – 14.10
3.	TSH	>100.00 µIU/ml	5.530 µIU/ml	0.54 – 5.30

**Investigation Before treatment 09-07-2020**

Investigation	Observed Value	Unit	Biological Reference Interval
Thyroid panel-1 (T3/T4/TSH) (Serum,ECLIA)			
T3 (Total)	59.24	ng/dL	80-200 First Trimester : 81-190 Second Trimester : 100-260 Third trimesters : 100-260
T4 (Total)	Below 1	µg/dL	5.1-14.1
TSH(Ultrasensitive)	>100.000	µIU/mL	0.54-5.3 First Trimester : 0.1-2.5 Second Trimester : 0.2-3.0 Third trimester : 0.3-3.0

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.

**Investigation After treatment 08-10-2020**

Investigation	Observed Value	Unit	Biological Reference Interval
Thyroid panel-1 (T3/T4/TSH) (Serum,ECLIA)			
T3 (Total)	103.6	ng/dL	80-200 First Trimester : 81-190 Second Trimester : 100-260 Third trimesters : 100-260
T4 (Total)	5.12	µg/dL	5.1-14.1
TSH(Ultrasensitive)	5.530	µIU/mL	0.54-5.3 First Trimester : 0.1-2.5 Second Trimester : 0.2-3.0 Third trimester : 0.3-3.0

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.

**Discussion**

This clinical picture of hypothyroidism resembles with the condition of Santarpan Vikar and hence it was treated in terms of strotoshodhan chikitsa. Suitable Shamanoushadhi was planned in this case, Rajapravartini Vati and Chandraprabha Vati along with Rasapachak and Medopachak Kashaya Vati helps in Medopachan and Rasavah strotoshodhan results in Rajapravartan, Mahamanjishthadi kadha and Sarivasava in combination acts as a Tridoshahara and Rasa-Rakta dhatu poshak. Gorakhamundi Ghana is used by considering the Manas hetu, it is very much beneficial in case of Manas Vikaras. Also Gorakhamundi is use full in Rasavah and Medovah Strotodushti.

Hinguvachadi Churna have property of Anulom. It releaves strotorodh in Apan Kshetra.

**Conclusion**

From the above study it can be concluded that combination of Rajapravartani Vati, Chandraprabha Vati, Rasapachaka Vati, Medosapachaka Vati, Gorakhamundi Ghana Vati, Combination of Mahamanjishthadi kadha and Sarivasav and Hinguvachadi choorna 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.

**Patient Consent**

Written permission for publication of this case study has been obtained from the patient.

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