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Effective management of Hypothyroidism through Virechana - A Case Study

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ABSTRACT

Thyroid gland is an endocrine gland in neck. It makes two hormones that are secreted into the blood. Thyroxine (T₄), triiodothyronine (T₃), These hormones are necessary for all the cells in body to work normally. Principal function of thyroid gland acts as catalyst for the maintenance of oxidative metabolism. Hypothyroidism is the most common endocrine disorder observed all over the world in present time. The normal and abnormal functions of thyroid gland can be co-related to healthy and altered status of *Agni*. So, hypothyroidism can be considered as a stage of *Agnimandya*, resulting in the formation of *Ama* leading to *Bahudoshavastha*. In the *Bahudoshavastha* condition of *Ama*, *Doshavasechana* is done. In this case study *Virechana* is performed by *Trivriith Lehya* after performing *Deepana-Pachana* and *Shodhananga Snehapana* with *Guggulu Tiktaka Gritha*. This study shows significant improvement in signs, symptoms of hypothyroidism and thyroid function test.

Key words: Hypothyroidism, Panchakarma, Virechana

INTRODUCTION

Hypothyroidism also known as under reactive thyroid disease is a common disorder with hypothyroidism, thyroid gland does not make enough thyroid hormone. Thyroid controls how one's body cells use energy from food, a process called metabolism among other things. Metabolism affects body's temperature, heartbeat and how well one burn calories. If a person doesn't have

enough thyroid hormone body process slowdown that means, body makes less energy and metabolism becomes sluggish.

The prevalence of hypothyroidism was the highest in the age-group of 46 to 54 years (13.11%) and the lowest in that of 18 to 35 years (7.53%). Table 2 Prevalence of thyroid disorders in eight urban cities of India A larger proportion of females than males (15.86% vs. 5.02%; P < 0.0001) were found to be affected by hypothyroidism.^[1]

Main causes of Hypothyroidism

The main causes of hypothyroidism can be classified into:

1. Primary (thyroid failure)

Hypothyroidism, caused by the inability of the thyroid gland to make T₃ and T₄ hormones, is called primary hypothyroidism; Primary hypothyroidism is a condition of decreased hormone production by the thyroid

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gland, it accounts for 95% of hypothyroidism cases; only five percent or less are suprahypoid in origin.

The most common cause of primary hypothyroidism is:

- Iodine deficiency
- AITDs (Autoimmune thyroid diseases)
- Drugs
- Iatrogenic
- Congenital.

Transient hypothyroidism includes silent and part *partum* thyroiditis.

- Secondary (due to pituitary TSH deficit);
- Tertiary (due to hypothalamic deficiency of TRH).

Hypothyroidism is one of the most undiagnosed and misdiagnosed diseases, as its clinical features are notorious. Hypothyroidism doesn't have any characteristic symptoms, and many symptoms of this condition can occur in people with other diseases. Vertigo, mood disturbances, easy fatigability, tiredness, lethargy, slowness of memory, intellect and thought were the early symptoms, and Paraesthesia, muscle cramps, weakness, muscles stiffness and aching were the main complaints of the chronic cases.^[2]

Many of the symptoms of Hypothyroidism can be correlated with *Lakshanas* (Symptoms) mentioned in *Ayurveda*. Excessive accumulation in the body is called *Bahudhoshavastha*. This condition is aptly suitable for *Samshodhana* or *Panchakarma* (detoxification) therapy. In this clinical study management of hypothyroidism done with *Virechana Karma*.

CASE REPORT

Chief complaints

The present case study is on management of Hypothyroidism through *Panchakarma*. A 35-year-old female having Hypothyroidism reported to *Panchakarma* outpatient department (OPD) of SJJIM hospital, Bengaluru with chief complaints of

- Increased weight gain for 6 months
- Constipation in the past 3 months

- Excessive hair falls in the last 5 months
- Generalized debility in the last 6 months.

Associated complaints

Pain in the bilateral knee joint in the past 2 months.

History of present illness

A patient aged about 35 years apparently normal before 2 years, then gradually started generalized debility, tiredness during pregnancy, undergone thyroid check-up diagnosed as hypothyroidism she was on medication for the same during pregnancy. After successful delivery she discontinued medicines. After 4 months of delivery again started weight gain, constipation, mood swings and generalized debility again she undergone thyroid profile. TSH value was high. For better management she approached *Ayurvedic* treatment and admitted in SJJIM hospital on 15/09/2021.

Personal history

Table 1: Showing subject's personal history

Name - XYZ	Bowel habit - Constipated
Age - 35 years	Appetite - Moderate
Marital status - Married	Menstrual history - Regular
Occupation - Research Analyst	Weight - 81 kg
Bala - Madhyamika	Height - 158cm
Sleep - Sound	Addiction - none

Clinical Findings - Physical examinations

Showing subject's *Asta Vidha Pareeksha*

- Nadi* - Kapajjadi, 67/min
- Mala* - Prakruta, 1 time /day
- Mutra* - Prakruta, 4-5 time/day
- Jihva* - Aipta
- Shabdha* - Prakruta

- Sparsha - Anushna Sheetha
- Drik - Prakruta
- Akriti - Sthula

Showing subject's Dashavidha Pareeksha

- Prakriti - Kapha Pitta
- Aharaja Hetu - Anupa Mamsa, Madhura Ahara
- Viharaja Hetu - Avyayama, Diwaswapna
- Dosha - Kapha Pitta
- Dushya - Rasa, Meda And Mamsa
- Desha - Anupa
- Sattva - Madhyama
- Sara - Medosara, Mamsasara
- Samhanana - Madhyama
- Pramana - Sthula
 - Ht - 5.7ft
 - Wt - 81 kgs
- Satmya - Madhyama
- Ahara Shakthi
 - Abhyavarana Shakthi - Uttama
 - Jarana Shakthi - Uttama
- Vyayama Shakthi - Avara
- Vaya - Madhyama/35 Years
- Bala - Madhyama

Systemic examination

CNS - Conscious and oriented to time, place and person.

CVS - S1, S2 heard, no added sounds.

RS - NVBS heard.

P/A - soft, non-tender.

Treatment Schedule

Virechana Karma

Poorvakarma

- Deepana-Pachana with Chitrakadi Vati 2 TID for 3 days.

- Snehana with Guggulu Tiktaka Gritha for 4 days.

Table 2: Showing Snehapana dose schedule

Date	16/10/2021	17/10/2021	18/10/2021	19/10/2021
Time	6:00am	6:00 am	6:00 am	6:00 am
Time taken for digestion	5 hours	10 hours	11 hours	13 hours
Dose	30ml	70ml	100ml	160ml

- Sarvanga Abhyanga with Murchitha Tila Taila followed by Nadisweda for 3 days.

Pradhana Karma

Virechana Karma

- Yoga - Trivrit lehya
- Dose - 60 gm
- Anupana - Warm Milk

Pashchath Karma - Peyadi Samsarjana Karma for 5 days.

Table 3: Showing Assessment

SN	Lakshanas	Before treatment	After Treatment
1.	Increased weight gain	81 kgs	74 kgs
2.	Constipation	++	-
3.	Hair fall	+++	++
4.	Generalized debility	+++	++
5.	Knee joint pain	++	+
(+++) severe presentation of symptoms, (++) moderate presentation of symptoms, (+) Mild presentation of symptoms, (-) no symptoms)			

Before Treatment

REPORT

NAME : DEEPA (31Y/F)
 REF. BY : SANDHYA LAB
 TEST ASKED : T3-T4-TSH

SAMPLE GIVEN BY :
 (94629),SANDHYA LAB,NO 1, OPP. 5TH CROSS BUS STOP,
 MAGADI MAIN ROAD, MASJID STREET GOPAL PURA
 BANGALORE, 560023

TEST NAME	TECHNOLOGY	VALUE	UNITS	REF. RANGE
THYROID				
TOTAL TRIIODOTHYRONINE (T3)	C.L.I.A	90	ng/dl	60-200
TOTAL THYROXINE (T4)	C.L.I.A	5.9	µg/dl	4.5-12
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	8.79 *	µIU/ml	0.3-5.5

-- End of report --

REPORT

NAME : DEEPA (32Y/F)
 REF. BY : DR MISHRIYA
 TEST ASKED : TSH

SAMPLE COLLECTED AT :
 (94629),SANDHYA LAB,NO 1, OPP. 5TH CROSS BUS
 STOP, MAGADI MAIN ROAD, MASJID STREET GOPAL
 PURA BANGALORE, 560023

TEST NAME	TECHNOLOGY	VALUE	UNITS	REFERENCE RANGE
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	2.63	µIU/ml	0.3-5.5

Comments : ***
 Please correlate with clinical conditions.
 Method :
 TSH - SANDWICH CHEMI LUMINESCENT IMMUNO ASSAY

Pregnancy reference ranges for TSH
 1st Trimester : 0.10 - 2.50
 2nd Trimester : 0.20 - 3.00
 3rd Trimester : 0.30 - 3.00

Reference:
 Guidelines of American Thyroid Association for the Diagnosis and Management of Thyroid Disease During
 Pregnancy and Postpartum, Thyroid, 2011, 21; 1-46

-- End of report --

After Treatment

REPORT

NAME : DEEPA (32Y/F)
 REF. BY : DR MISHRIYA
 TEST ASKED : TSH

SAMPLE COLLECTED AT :
 (10263),SANDHYA DIAGNOSTIC LAB,
 OPP. 5 TH CROSS BUS STOP, MAGADI ROAD
 BENGALURU, 560023

TEST NAME	TECHNOLOGY	VALUE	UNITS	REFERENCE RANGE
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	4.72	µIU/ml	0.3-5.5

Comments : ***
 Please correlate with clinical conditions.
 Method :
 TSH - SANDWICH CHEMI LUMINESCENT IMMUNO ASSAY

Pregnancy reference ranges for TSH
 1st Trimester : 0.10 - 2.50
 2nd Trimester : 0.20 - 3.00
 3rd Trimester : 0.30 - 3.00

Reference:
 Guidelines of American Thyroid Association for the Diagnosis and Management of Thyroid Disease
 During Pregnancy and Postpartum, Thyroid, 2011, 21; 1-46

After Follow-Up

REPORT

NAME : DEEPA (32Y/F)
 REF. BY : DR MANISHA
 TEST ASKED : TSH

SAMPLE COLLECTED AT :
 (94629),SANDHYA LAB,NO 1, OPP. 5TH CROSS BUS
 STOP, MAGADI MAIN ROAD, MASJID STREET GOPAL
 PURA BANGALORE, 560023

TEST NAME	TECHNOLOGY	VALUE	UNITS	REFERENCE RANGE
THYROID STIMULATING HORMONE (TSH)	C.M.I.A	4.18	µIU/ml	0.35 - 4.94

Please correlate with clinical conditions.
 Method :
 TSH - Fully Automated Chemi Luminescent Microparticle Immunoassay

Pregnancy reference ranges for TSH
 1st Trimester : 0.10 - 2.50
 2nd Trimester : 0.20 - 3.00
 3rd Trimester : 0.30 - 3.00

Reference:
 Guidelines of American Thyroid Association for the Diagnosis and Management of Thyroid Disease During
 Pregnancy and Postpartum, Thyroid, 2011, 21; 1-46

DISCUSSION

Hypothyroidism is a pathological condition of thyroid gland with deficiency of thyroid gland hormones. On the basis of *Ayurvedic* fundamentals it becomes evident that *Kapha* associated with *Pitta Dushti* and vitiation of *Vayu* result in vitiation of *Agni*.^[3] All these factors finally lead to *Annavaha* and *Rasavaha Srotodushti* predominantly. As there is no direct correlation of hypothyroidism in ayurvedic classics, based on the *Lakshanas* it can be considered under the *Bahudoshavastha*.

Samshodhana is indicated in *Bahudoshavastha* (i.e., when *Doshas* are aggravated some diseases like *Shoulya*, *Tandra*, excess *Kapha* and *Pitta Dosha*, *Santarpana Janya Vyadhi* are included in *Bahudoshavastha Lakshanas*.^[4] As subject suffering from digestive disturbances, constipation, *Mandagni* etc which indicates the involvement of *Pittasthana*.

Virechana is the best treatment for *Pitta* and *Pitta* associated with *Kapha* or *Vata*, and eliminates *Pitta* from *Pittasthana* and *Kaphasthana*.^[5] Production of *Ama* is the result of *Avarana* of *Pittasthana* by *Kledakakapha*, thus hampering the digestive activity of the *Pachaka Pitta*. In this case *Virechana* is preceded by *Deepana-Pachana*, after *Doshas* attain *Niramavastha* and may require elimination from the body by *Shodhana*.

Snehapana is done by *Guggulu Tiktaka Gritha* as it is used in the preparatory procedure of *Panchakarma*

and *Jatru rdhavagata Vyadhis*. And also, it acts on *Tridosha* and bring the *Dosha* from *Shakha* to *Kosta*.^[6]

Mode of action of Virechana Karma

Virechana drug possessing properties like *Ushna*, *Teekshna*, *Sukshma*, *Vyavayi*, and *Vikasi* reaches the *Hridaya* by virtue of its *Veerya* and then following the *Dhamani*, it pervades the whole body through large and small *Srotas* and removes the *Doshas* out of the body. *Virechana* drugs carry out the therapeutic purgation due to their *Prabhava* (potency). As these drugs are having *Jala* and *Prithvimahabhuta* dominancy, they have natural tendency to go downward and thus they can help in induction of purgation.^[7]

CONCLUSION

Thyroid hormones are the hormones that controls body's metabolism, the process in which body transform the food into energy. Purification (*Shodhana*) followed by palliative therapy was found as a suitable treatment plan to manage hypothyroidism. *Virechana* procedure is the common adopted purificatory process with maximum efficacy. The outcome of the study conducted on hypothyroidism had concluded that *Virechana Karma* plays an important role in providing significant relief in the various sign's symptoms and haematological parameters of the disease.

REFERENCES

1. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3743364>.

2. www.positivehealth.com/article/ayurveda/managemen-t-of-hypothyroidism.
3. Prasuna VVL. Textbook of Thyroid in Ayurveda. Part 2, Varanasi, Chaukambha Sanskrit Series. 31/12; 2010, p50.
4. Acharya YT ed. Charaka Samhita of Agnivesha elaborated by Charaka and Dridabala with Ayurveda Dipika commentary by Sri Chakrapanidatta, Sutrasthana, 16th chapter, 13-16th verse, Varanasi: Chaukhamba Sanskrit Sansthan. 2017,p97.
5. Vagbhata, Astanga Sangraha, Shashilekha Sanskrit commentary of Indu; edited by; B Rama Rao, Chaukambha Vishwabharathi, Varanasi. Sutrasthana 27th chapter 5th verse, p384.
6. Pt. Paradakara HSS, ed. Astanga Hridaya of Vagbhata with the commentaries Sarvangasundara Arunadatta and Ayurveda rasayana of Hemadri, Chikitsasthana, 21th chapter, 58-61 verse Varanasi: Chaukhamba Surbharati Prakashana 2020,p726.
7. Acharya YT ed. Charaka Samhita of Agnivesha elaborated by Charaka and Dridabala with Ayurveda Dipika commentary by Sri Chakrapanidatta, Kalpasthana 1st chapter, 5th verse, Varanasi: Chaukhamba Sanskrit Sansthan 2017,p671.

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