

## UNDERSTANDING OF HYPOTHYROIDISM IN AYURVEDA

[Anu P<sup>1</sup>](#), [Veerakumara K<sup>2</sup>](#), [Shrilatha Kamath<sup>3</sup>](#)

<sup>1</sup>PG Scholar, Department of Kayachikitsa and Manasa roga, Sri Dharmasthala Manjunatheshwara College of Ayurveda, Udipi, Karnataka, India

<sup>2</sup>Guide - Associate professor, Department of Kayachikitsa and Manasa roga, Sri Dharmasthala Manjunatheshwara College of Ayurveda, Udipi, Karnataka, India

<sup>3</sup>HOD - Professor, Department of Kayachikitsa and Manasa roga, Sri Dharmasthala Manjunatheshwara College of Ayurveda, Udipi, Karnataka, India

Corresponding Author: [anupzion@gmail.com](mailto:anupzion@gmail.com)

<https://doi.org/10.46607/iamj4110022022>

(Published Online: February 2022)

Open Access

© International Ayurvedic Medical Journal, India

Article Received: 26/01/2022 - Peer Reviewed: 07/02/2022 - Accepted for Publication: 09/02/2022



## ABSTRACT

Hypothyroidism is the most common lifestyle disorder affecting the endocrine system. Hypothyroidism is described as underactive thyroid function mainly affecting the female population. Weight gain, infertility, and depression are some of the symptoms of the disease which may confuse the physician regarding the diagnosis of the disease. As per *Charaka Samhita*, we can categorize it under *Anukta vyadhi*. Proper understanding of the disease in terms of *Ayurveda* is essential for successful management of Hypothyroidism without complications. Modern medicine even though it is well advanced still there is no outright solution for lifestyle disorders like Hypothyroidism and excessive hormone replacement causes serious long-term complications. Here an attempt has been made to understand Hypothyroidism and its management from an *Ayurveda* perspective.

**Keywords:** Hypothyroidism, *Ayurveda*, *Anukta vyadhi*

## INTRODUCTION

Hypothyroidism is one of the endocrine disorders where the thyroid gland doesn't produce enough thyroid hormone. The underactive thyroid function results in multisystem metabolic diseases. The prevalence of hypothyroidism is 10 - 50 patients per thousand population. Women are affected approximately 6 times more frequently than men. <sup>(1)</sup> In *Ayurveda* Hypothyroidism comes under *Anukta vyadhi* <sup>(2)</sup> as there is no direct mention of this disorder in Classics. Based on the clinical presentation it can be interpreted under different diagnoses according to *Yukti* of the physician. The function of hormones can be correlated with the action of Agni. *Jataragni* vitiation leading to a reduction in *Dhatwagni* is the main cause for Hypothyroidism. Proper understanding of *Dosha*, *Dhatu* vitiation, *Nidana* (etiological factors) and *Adhishtana* (site of manifestation) will only help in the management of *Anukta vyadhi*. Hence it is essential to understand the disease from an *Ayurveda* perspective to provide safe and successful management for hypothyroidism through the *Ayurveda* system of medicine.

**AIM AND OBJECTIVES:** To understand the concepts of Hypothyroidism in *Ayurveda* and its management.

**MATERIALS AND METHOD:** The article is based on a review study of *Ayurveda* and Modern texts.

### Thyroid gland

The thyroid gland is one of the largest endocrine glands in the body. It weighs about 15- 20gms in

adults. There are two lateral lobes connected by an isthmus in the middle in front of the trachea. The gland is composed of colloid filled spherical follicles. Follicles are the main functional units of the thyroid gland. Thyroid hormones are classified into three types, triiodothyronine hormone (T3), thyroxin hormone (T4), and calcitonin. This thyroid hormone secretion and regulated by the negative feedback mechanism of the hypothalamic-pituitary-thyroid (HPT) axis. <sup>(3)</sup> Thyroid dysfunction is of two types i.e., over activity - hyperthyroidism and under-activity - hypothyroidism

**Hypothyroidism:** Hypo metabolic clinical state due to the reduced production of Thyroid hormones or may be due to the resistance of peripheral tissues to the effect of thyroid hormones.

**Types & Causes:** Based on causes hypothyroidism can be classified into <sup>(4)</sup>

Primary hypothyroidism: The most common cause is iodine deficiency, autoimmune thyroid disease, iatrogenic causes like thyroidectomy or drug-induced, a congenital, infiltrative disease affecting the thyroid gland. Secondary hypothyroidism: Autoimmune, congenital or infiltrative diseases affecting the pituitary gland and causing deficiency in the secretion of thyroid-stimulating hormone (TSH). Tertiary hypothyroidism: Autoimmune, congenital or infiltrative diseases affecting the hypothalamus and causing deficiency in the secretion of thyroid releasing hormone (TRH).

### Signs & symptoms

**Table 1:** Showing signs and symptoms of hypothyroidism <sup>(5)</sup>

Signs	Symptoms
Dry coarse skin,	Tiredness, weakness
Cool peripheral extremities	Dry skin
Puffy face, hand and feet	Feeling cold
Diffuse alopecia	Hair loss
Bradycardia	Difficulty in concentrating & poor memory
Peripheral oedema	Constipation
Delayed tendon reflex relaxation	Weight gain, poor appetite
Carpal tunnel syndrome	Dyspnea
Serous cavity effusions	Hoarse voice
	Irregular menstruation
	Paresthesia
	Impaired hearing

### Ayurveda perspective of hypothyroidism

There is no exact correlation for hypothyroidism in *Ayurveda*. The function of hormones is better understood in terms of *Agni*. Due to *Atishoulya Nidana sevana Jataragni mandya* occur which in turn leads to *Kapha vata dosha dusti* and *Dhatwagi mandya*. Almost all the *Srotas* get vitiated especially *Rasavaha* and *Mehovaha*. Clinical presentation of the disease

varies according to the *Srotas* affected. Based on that physicians can name the disease may be as *Atishoulya*, *Galaganda*, *Sopha* etc... Rather than naming disease physician should give importance to the treatment. So that *chikitsa* have to planned only after proper understanding of *Nidana*, *Dosha* and *Dhatu* vitiation and *Adhistana* of the disease. <sup>(6)</sup>

### Involvement of Dosha <sup>(7)</sup>

**Table 2:** Showing involvement of Dosha

Dosha	Lakshana
Vata vriddhi	Ushana kamitha (desire for heat), sakrt graha(constipation), balahani(weakness) nidrahani (loss of sleep)
Kapha vriddhi	Agnisaada (dyspepsia), alasya(idleness) gaurava(heaviness) saithya(coldness)
Pitta kshaya	Mandhoanila (reduced digestion), sheetam(coldness)

### Involvement of Dhatu & Srotas

**Table 3:** Showing involvement of Dhatu & Srotas

Dhatu & srotas	Lakshana
Rasa	Angagaurava (heaviness of body), tandra (drowsiness). Angamarda (body ache), klaibya (impotency)
Raktha	Parusha twak (rough skin), sputita (skin crack), rookshata (Dry sin)
Mamsa	Galaganda (goitre)
Meda	Atisthula (obesity), kruchravayavayatha (impotency), Dourbalya (weakness)
Asthi	Katishoola (arthralgia), kesa, Loma, Nakha, smasru dosha (hair loss, brittle nails)
Majja	Alasaka (infertility), Asthitoda (arthralgia)
Shukra	Daurbalyam (weakness), shrama (tiredness), klaibya (infertility)
Purisha	Kruchrena, gratitam (constipation)
Artava	Vadyatwam (infertility), artava nasha (irregular menstruation)
Manovaha	Smriti vibrama (loss of memory), sheela and chesta vibrama (behavioural changes)

### Chikitsa

#### Nidana Parivarjana

*Nidana Parivarjana* is the initial line of treatment in which the etiological factors responsible for the disease manifestations have to avoid. In Hypothyroidism *Kapha medho vriddhikara aahara* and *Vihara* have to be avoided like *Madura*, *Guru*, *Snigdha aahara* and *Vihara* like *Avyayama*, *Divaswapna* and *Sugashayya* etc.

#### Shodhana

In the case of chronic diseases with excessive *Dosha* vitiation, *Shodhana chikitsa* is inevitable. *Vamana* is the best *Shodhana chikitsa* as it expels *kapha Medo-dosha* and does *Srotoshuddhi*. <sup>(8)</sup> If the patient is unfitting for *Vamana*, *Virechana chikitsa* can be adopted.

*Virechana* helps to attain *Agni Deepthi* and does *Vatanulomana*. *Nasya karma* is also beneficial as it is the best treatment for *Urdhwajatru vikara*. <sup>(9)</sup> Medicines used for *nasya* directly act on higher centres of the brain and corrects the HPT axis.

#### Shamana

In *Shamana chikitsa Deepana pachana* medicines should be used to ratify *Agnidusti* and *Kapha vatahara* drugs with *Medohara*, *Srotoshodhaka* properties have to be utilized. *Lakshanika chikitsa* is the best *Shamana chikitsa* that can be adopted to treat Hypothyroidism. Treatment has to be planned according to the clinical presentation of the disease along with treating the Hypothyroidism proper. Patient with *Atishoulya Lakshana*, *Guru* and *Aptarpana* treatment has to be done

and if the patient has excessive swelling, then *Sopha chikitsa* have to do. Infertility patients with hypothyroidism *Klaibya chikitsa* should be adopted. Some may present with memory loss and depression-like psychiatric manifestations there *Kaphaja unmada* line of management have to do.

### Shamana yoga

**Table 4:** Showing **Shamana yoga** according to *Lakshana*

LAKSHANA	SHAMANA YOGA
Atisthoulya	Varunadi kwata, ashtavargam kwata, Asanadi kwata Kanchnaar guggulu, navaka guggulu, Kaishor guggulu, shiva gutika, ushakati vati
Sandhishoola	Guggulu tiktaka kwata, dhanwantara kwata, Yoga raja guggulu. laksha guggulu, simhanada guggulu
Vibhandham	Triphala choorna, avipathikara choorna. abhayarista, dhantyarista, eranda taila with shunti kwata
Sotha	Punarnavadi kwata, punarnavasava, gokshuradi guggulu, gudardraka prayoga, guggulu rasayana
Klaivya	Ashwagandha, kapikachu, shatavari, pushpadhanwa rasa
Nashtartava	Sukumara gritam, chandraprabhavati, rajapravrtivati Varanadi kwata, saptasaram kwata, kumaryasava, darsharista, ashokarista
Vishada	Kalyanaka grita, panchagavya grita, bhrami grita, saraswatarista, ashwagandharista, manasamitra vati Medya rasayana.

### Pathya – Apathya <sup>(10)</sup>

*Pathya ahara* - purana shaali, Rakta shaali, yava, chanaka, kulatha, lashuna, shunti, ardraka, takra, nimba, patola, karavellaka, madhu, shigru, Jangala mamsa. *Pathya vihara*- udwartana, ushna jala snana, vyayama

*Apathya ahara* - Navanna, masha, taila, sheeta jala, Dushita jala, Nava Madya, alike, Dadhi, guda, Anupa mamsa, *Apathya vihara* – Diwaswapna, Avyayama

### DISCUSSION

As *Acharya charaka* explained, if a physician is not able to name a particular disease, he should not feel ashamed on that account because it's not able to name disease in definite terms. <sup>(11)</sup> Hypothyroidism is such an *Anukta vyadhi* with evident *Kapha Medo dusti*, *Dhatwagni mandya* leading to *Srotodusti*. The disease has many folds of clinical presentation depending upon the *Dhatu* and *Srotas* involved. According to the clinical presentation it can be diagnosed *Atisthoulya* if the patient has obesity symptoms, *Galaganda* or *Sotha* if swelling present or as *Kaphaja unmada* if the patient

### Rasayana

*Rasayana* is an inevitable part of *Chikitsa*. To cure and prevent disease *Rasayana chikitsa* is essential. It enhances *Agni*, nourishes the *Srotas* and helps to attain *Dhatusamyata*. *Shilajatu*, *Ballataka* and *Lashuna rasayana* are some of the excellent *Rasayana* that can be used in the management of Hypothyroidism

has depression-like psychiatric manifestations etc... In this account, *Chikitsa* has to be planned by assessing the three-fold diagnostic principles like *Dosha* vitiation, etiological factors and site of manifestation. *Chikitsa* for hypothyroidism should aim at *Agnitundi* correcting *Jataragni* and *Dhatwagni Mandya*. *Sroto-shodhana*, *Kapha vata shamana* and *Medohara* line of management have to be adopted. *Vamana* is the best shodhana therapy as it is removed *Kapha medo dusti*, removes *Avarana* and treats *Srotodusti*. *Lakshanika chikitsa* is a fruitful *Shamana chikitsa* that can be administered according to the clinical presentation of the patient. *Rasayana chikitsa* is inevitable as it does *Srotosuddhi* and helps to attain *Dhatusamyata*. Principles of *Suddha chikitsa* <sup>(12)</sup> has to be followed so that treating hypothyroidism should not end up in other diseases.

### CONCLUSION

*Ayurveda* doesn't give importance to naming the disease, rather insists to understand the factors and processes of disease manifestation and adopt appropriate

treatment. Hypothyroidism is such an *Anukta vyadhi* where there is evident *Kapha medho dusti* and *Dhatwagni mandhya*. *Lakshanika Chikitsa* along with *Shodhana chikitsa* will be fruitful in effective management of the disease rectifying *Agni mandhya* and *Kapha medo dusti*. The curative, as well as preventive aspect role of *Rasayana chikitsa*, is inevitable. *Ayurveda* has a promising solution even for the management of *Anukta vyadhi*.

## REFERENCES

1. Stanly Patrick Davidson, Davidson's principles and practice of medicine, Edited by Nicki R Colledge, Brain R Walker, Stuart H Ralston, 21<sup>st</sup> edition, Vol 3, Chap 20, Churchill Livingstone Elsevier; 2010. P 639.
2. Acharya Agnivesha, Charaka Samhita, revised by Charaka, Compelled by Dridabala, Ayurveda Deepika commentary of Acharya Chakrapanidatta, Edited by Bhagwan Das R K Sharma, Vol 1, Chap 18, Varanasi: Chowkhamba Sanskrit Series Office; 2012. P 345.
3. Stanly Patrick Davidson, Davidson's principles and practice of medicine, Edited by Nicki R Colledge, Brain R Walker, Stuart H Ralston, 21<sup>st</sup> edition, Vol 3, Chap 20, Churchill Livingstone Elsevier; 2010. P 641.
4. Stanly Patrick Davidson, Davidson's principles and practice of medicine, Edited by Nicki R Colledge, Brain R Walker, Stuart H Ralston, 21<sup>st</sup> edition, Chap 20, Churchill Livingstone Elsevier; 2010. P 636.
5. Harrison's principles of internal medicine, Edited by Kasper, Fauci, Hauser, Longo, Jameson, Loscalzo, 19<sup>th</sup> edition, Vol 3, Chap 405, McGraw Hill Education Private Limited; 2016. P 2290.
6. Acharya Agnivesha, Charaka Samhita, revised by Charaka, Compelled by Dridabala, Ayurveda Deepika commentary of Acharya Chakrapanidatta, Edited by Bhagwan Das R K Sharma, Vol 1, Chap 18, Varanasi: Chowkhamba Sanskrit Series Office; 2012. P 345.
7. Vagbhata, Astanga Hr̥daya, Sarvanga Sundara commentary by Arunadatta, Edited by Sreekumar T, 3<sup>rd</sup> edition, Vol 1, Chap 12, Kerala: Harisree; 2011. P 305.
8. Acharya Agnivesha, Charaka Samhita, revised by Charaka, Compelled by Dridabala, Ayurveda Deepika commentary of Acharya Chakrapanidatta, Edited by Bhagwan Das R K Sharma, Vol 4, Chap 1, Varanasi: Chowkhamba Sanskrit Series Office; 2012. P 150.
9. Vagbhata, Astanga Hr̥daya, Sarvanga Sundara commentary by Arunadatta, Edited by Sreekumar T, 3<sup>rd</sup> edition, Vol 2, Chap 20, Kerala: Harisree; 2011. P 107.
10. Govinda Dasji Bhisagratna, Bhisajya Ratnavali, Edited by Bhisagratna Shri Brahmashankar Mishra. Vol 2, Chap 39, Varanasi, Chaukhamba Sanskrit Sansthan; 2009. P 563.
11. Acharya Agnivesha, Charaka Samhita, revised by Charaka, Compelled by Dridabala, Ayurveda Deepika commentary of Acharya Chakrapanidatta, Edited by Bhagwan Das R K Sharma, Vol 1, Chap 18, Varanasi: Chowkhamba Sanskrit Series Office; 2012. P 345.
12. Acharya Agnivesha, Charaka Samhita, revised by Charaka, Compelled by Dridabala, Ayurveda Deepika commentary of Acharya Chakrapanidatta, Edited by Bhagwan Das R K Sharma, Vol 2, Chap 8, Varanasi: Chowkhamba Sanskrit Series Office; 2012. P 10.

Source of Support: Nil

Conflict of Interest: None Declared

How to cite this URL: Anu P et al: Understanding Of Hypothyroidism In Ayurveda. International Ayurvedic Medical Journal {online} 2022 {cited February 2022} Available from: [http://www.iamj.in/posts/images/upload/519\\_523.pdf](http://www.iamj.in/posts/images/upload/519_523.pdf)