

MANAGEMENT OF SYSTEMIC LUPUS ERYTHEMATOSUS (SLE) DISEASE THROUGH AYURVEDIC MEDICINE: A CASE STUDY

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ABSTRACT

Systemic lupus erythematosus is a chronic inflammatory disease of auto immune aetiology which affects multiple organ systems. It is the most common multi system connective tissue disease. People of sex, all ages and all ethnic groups are susceptible. Here, we are reporting a diagnosed case of SLE of a 26 years female patient who came to the OPD of Shree Baba Masthnath Ayurved College and Hospital for getting Ayurvedic management.

Based on *nidan – samprapti- lakshana*, this case was diagnosed as *Raktabrita Vata*. The patient was treated with *Mahatikta Ghrita* 10 ml twice daily before meal along with *muktapisti* 250 mg twice daily for 6 months. *Tab Kaishor guggul* (500 mg) and *Cap Shilajit* 2 caps twice daily were also given after meal for 6 months. After 6 months all sign and symptoms were diminished. After one year of recovery there is no complications and recurrence were observed. Further study should be carried out in large sample to establish the role of said therapy on this particular type of disease.

Keywords: *Raktabrita vata, SLE*

INTRODUCTION

Systemic lupus erythematosus is an auto immune disease. In this disease, the immune system of body mistakenly attacks the healthy tissue. It can affect the skin, joints, kidneys, brain and other organs⁽¹⁾. The prevalence is 50 to 150 per lakh population. 90% affected patients are females with peak onset in second and third decades. Exact aetiology is unknown.

The common features of this disease are -

a) Arthritis

b) Butterfly rash over naso labial fold

c) Discoid rash

d) Vasculitis

e) Palpable purpura

f) Proteinuria

g) Glomerular nephritis

h) Pleuritis

i) Pleural effusion

j) Pancytopenia (Anaemia, Thrombocytopenia, leucopenia, Splenomegaly) ⁽²⁾

According to *Ayurveda*, this disease can be co related with *Raktavrita vata*. The main features of this disease are:-

Daha = Burning sensation

Arti = Pricking pain in joints and in between skin and muscles

Raga = Reddish discolouration

Swaythu = Swelling

Mandala = Discoid rash/ Papular rash (3)

According to modern treatment anti-inflammatory, Glucocorticoids, Methotrexate, Chloroquine, drugs are administered to treat SLE which has much adverse effect particularly in presence of renal insufficiency. Here kidney is the most commonly involved visceral organ in SLE. Therefore, there is definite need to explore more efficacious and radical cure to this illness. With the background present study has been intended to evaluate the efficacy of some *Ayurvedic* formulations in the case of SLE.

Case study:-

A 27 years old female patient came to OPD of Shree Baba Masthnath Ayurvedic College, Asthalbohar, Rohtak, with complaints of multiple joints pain along with urticarial rash (erythomatosus rash) all over skin specially legs and hands for last 2 years. Associated complaints: - Chest pain, weakness, facial puffiness, Respiratory distress, loss of appetite.

Present History

Patient complains of multiple erythematosus maculo papular rash all over body especially both legs and hands along with joints pain (knee and ankle mainly) with swelling for last 2 years. She also complains of breathing difficulty and weakness for same duration. She went to PGI Rohtak for better management. She was diagnosed as SLE on the basis of clinical features and serum Anti Nuclear Antibody test (ANA). Tab Methotrexate, Prednisolone, and Chloroquine drugs were given to treat this case. The symptoms were still persisting was still persisting after 8 - 9 months of

treatment. Then she came to our hospital for *Ayurvedic* management.

Investigation:-

Hb % = 8.3 gm %

C reactive protein = 6.73 mg/l

Coomb test Direct = Positive

Anti nuclear antibody / Factor IFA = Positive

Diagnosis:-

Based on the clinical features and laboratory findings the confirmed diagnosis was SLE.

Treatment:-

Mahatikta ghrita – 10 ml twice daily before meal along with *moti pisti* 250 mg twice daily for 6 months. Tab *Panchatikta ghrita guggul* (250 mg) – 2 tabs and cap *Shilajit* – 2 caps twice were also administered for same duration.

Treatment was initiated on 2/2/2018.

1st follow up: After 2 months of treatment, pain and swelling over joints were diminished. She had no breathing difficulty and physical weakness only maculo papular erythematosus rash were present.

2nd follow up: Patient was advised to take same medications for another 4 months. After 6 months patient was free from all sign and symptoms.

Treatment was completed on 10/08/2018

After one year of recovery there is no complications, side effects and recurrence were found.

Results and observations:-

Table – 1: Showing the effect of treatment on Hb%

Hb%	BT	AT
	8.3 gm %	10 gm %

Table – 2: Showing the effect of treatment on Anti nuclear antibody

ANA	BT	AT
	Positive	Negative

Figure - 1: Showing the effect of treatment on skin rashes

Before Treatment



After Treatment



DISCUSSION

- SLE is the classic prototype of multisystem disease of auto immune origin characterised by producing antibody ANA. So immune-modulatory drugs proved to be effective in this case.
- Proteinuria is another complication of this case which suggests significant kidney damage. So the aims and objectives of this treatment are *Srota sodhan*, *Amapachan* and Nephro protective *Rasayan* drugs.
- On the basis sign and symptoms, this disease can be compared with *Raktavrita Vata*. According to *Charak*, uses of *rasayan Shilajeet*, *Suddha guggul* are highly effective in *Avaran Chikitsa* as well as *Raktavrita vata chikitsa* ⁽⁴⁾.
- Pancytopenia and splenomegaly is another complication of this disease. So treatment should be adopted on the basis of *chikitsa* sutra of *pandu – kamlā*.

Mode of action of *Mahatikta ghrita*:-

It is *tikta rasa*, *sheeta veerya*, and having *pitta shamak guna*. Specifically it has *rasayan* quality as it contains 50% *amlaki*. The other ingredients of these drugs are *saptaparni*, *parpatak*, *vasa* etc.

which are immunomodulatory, *rakta-pitta shamak*. So it is good for all skin disease ⁽⁵⁾.

Mode of action of *moti pisti* :-

Moti pisti has *madhur rasa*, *sheeta veerya*, *madhur vipak*, and it pacifies *pitta kapha*. Recent research says that *mukta pisti* has special role in related to immune dysfunction specially autoimmune disorder ⁽⁶⁾.

Mode of action of *kaisora guggul*:

It is *tikta –kashya rasa*, *sheeta veerya*, and *pitta samana*, *rooksha guna (virechan yuktam)*. The main ingredients of this drug are *guduchi*, *guggul*, *triphala*, which are *sroto –sodhak*, *rakta pradushak*, *ama pachak*, *tridosha shamak* and *rasayan* also ⁽⁷⁾.

Mode of action of *shilajeet* :-

There is no disease on earth which cannot be cured by *shilajeet* ⁽⁸⁾. It is specially having anti-oxidant property and increase immune booster. Recent analysis of the raw material has shown it contains high percentage of *tifolium repens* (White) and *trifolium pratense* (red) which have found dramatic effect of cancer, blood purification, asthma, skin problems, and ulcers ⁽⁹⁾.

CONCLUSION

- a) SLE (*Raktravrita vata*) can be efficiently and effectively managed by *Ayurvedic* medicines.
- b) The complications of this disease can be prevented by these medicines.
- c) Study has not shown any side effect.

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