

WOOLLY HAIR SYNDROME -AYURVEDIC MANAGEMENT-A CASE REPORT

Parinita Prakash Kalyani

Associate Professor, Kayachikitsa Department, Sai Ayurved College, Vairag, Solapur

Corresponding Author: drparinitakalyani29@gmail.com

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ABSTRACT

Woolly hair syndrome is most evident in childhood. No treatment for woolly hair is currently available. Physical & chemical cosmetic measures should be avoided per modern medical science guidelines. Hereditary woolly hair is autosomal dominant & familial woolly hair is autosomal recessive. It is a group of disorders involving structural defects in the hair shaft. This rare congenital abnormality of the structure of scalp hair is marked by extreme kinkiness of hair. In *Ashtonindita adhyaya*, Acharya Charak described *Aatiloma* & *Aloma* conditions of hair. A case study was conducted on an 11-year-old female patient diagnosed with short anagen syndrome woolly hair syndrome. In this case, Ayurvedic management, i.e. Panchakarma (tikta Kshirbasti) with shaman chikitsa, was essential in treating this *kashtasadhya* disease.

Key words: Woolly hair, Autosomal, *Ashtoninditeeya*, *Panchakarma*, *Basti*, *Shaman chikitsa*

INTRODUCTION

The phenomenon of woolly hair was first observed and described in a European family by Gossage in 1907.^[1] More and Hoffmann compared this anomaly of the hair shaft to the structure of the curly hair in black people^[2,3] Woolly hair is a congenital structural anomaly of the scalp hair occurring in Caucasians. It is either sporadic or genetic. Woolly hair is a rare congenital abnormality of the structure of the scalp

hair, marked by extreme kinkiness of the hair. Woolly hair can be present at birth or appear in the first month of life. The hair growth rate is usually standard, but the anagen phase may be truncated, resulting in hair not growing long. Woolly hair is extremely curly, and the average diameter is approximately 0.5 cm, which makes the hair difficult to comb. The hair texture resembles sheep's wool, whereas the hair col-

our often shows no unusual characteristics.^[4] The hair is poorly pigmented and lighter than that of unaffected family members. The curled hair of black people typically lies separately, while the curls of woolly hair tend to merge.^[5]

The hair is difficult to comb and often fragile, probably due to the simultaneous occurrence of Trichorhexis nodosa.^[6]

The Various forms of woolly hair

1. Autosomal dominant
2. Autosomal recessive
3. Localised woolly hair in the form of woolly hair nevus.^[7]

1. Autosomal dominant woolly hair

Patients in this form exhibit firmly curled hair at birth. They are difficult to brush. They partially break off. Hair grows only a short time. Body hair is generally not affected.

2. Autosomal recessive woolly hair--

Familial woolly hair is present at birth—tightly curled, thin calibre. Hair mainly grows only 2-3 cm long. Hair is usually lighter than that of unaffected family members.

The body hair is short, light & relatively sparse & rarefaction of the lateral eyebrow is observed.

3. Woolly hair nevus

It occurs on the scalp in one or more circumscribed locations. In some cases, hair colour can be lighter than that of healthy hair. Retinal anomalies, retarded bone growth, teeth anomalies & disturbances in speech development have been described in texts.

AIM AND OBJECTIVES:

1. To study the autosomal recessive woolly hair & treat it with Ayurvedic principles in *Samhita*.
2. To study the relation between Ayurvedic concepts & modern aspects regarding woolly hair.
3. Possible management with *Panchakarma* therapy & *Shaman chikitsa*.

MATERIAL AND METHODS:

- An 11-year-old female child born of a non-consanguineous marriage presented symptoms as short, curly, brittle, hypopigmented scalp hair since birth.

- The scalp hair was short and thinner in diameter. [fig.1] No scalp hair growth.
- A similar history of woolly hair is present in two of her siblings of age 13 years old female & 9 years old male. There were no similar complaints from parents.

On examination, the patient had no systematic abnormality or functional abnormalities found. Routine investigations were carried out & found normal. The patient had a **biopsy report** done previously.

It shows—

- Mild reduction in number of follicles & proportion of intermediate follicles.
- Several hair shafts within the sections show fragility & thin or incomplete cuticles.
- Woolly hair syndrome, short anagen syndrome

Based on history & clinical examination, the patient was diagnosed with autosomal recessive woolly hair. According to Ayurveda, such genetic-related symptoms come under *Ashtoninditeeya*.

Also, while describing Kala

या एव पुरिषधराकला सा एव अस्थीधराकला ।^[8] या एव मज्जाधराकला सा एव पित्तधराकला ॥ इल्हन सु.क.440

As Acharya Dalhana has said *Asthidhara kala* is *Purishdhara kala*. *Purishdhara kala* is nothing but *Pakvashaya* (large intestine). “*Pakvashaya*” is very important *Sthan* (Site) of *Vat Dosh*. Here there is *Nirmiti* (Origin) of *vata dosha*^[9] and *Asthi dhatu*.

Curly hair is a classical symptom of **Vaat Pradhan Prakruti**

In this case

- *Dosha – Vata dosha pradhan dushti*
- *Dushya – Asthidhatu, Majjadhatu*
- *Srotas – Asthivah, Majjavah*
- *Srotodushti – Hinapravruti(kshaya), Sanga*
- *Agni – Dhatwagni*
- *Vyaktisthan - Kapal pradesh (scalp)*
- *Rogamarga – Madhya*
- *Sadhyasadhyatwa - kashtasadhya*

अस्थिश्रयानां व्याधीनाम्पंचकर्माणि भेषजम्।
बस्तयाःक्षीरसर्पिषु तिक्तकोप हितानीच॥ डल्हण

So, it was decided the management for such diseases as —

A. *Shodhan Chikitsa (Panchakarma)*

B. *Shaman Chikitsa*

A. *Shodhan Chikitsa (Panchakarma)*—

a) *Tiktakshirbasti* - (*panchatikta ghruta* 10ml + cow milk 40ml) ^[10] for 15 days First five *basti* daily. The following five *basti* were on alternate days, & the last five *basti* were given every 4th day after that.

b) *Nasya - Shadabindu* tail - BD

c) *Shirodhara & Shirobasti* – with *murchhit til tail* – after each 15 days

d) *Raktamokshan* ^[11] – *Siravedh* ^[12,13]

e) *Keshadhavan* with *Shikekai*

f) *Keshabhyang* – daily with coconut oil processed with *Kumari & Methika*

C. *Shaman Chikitsa* —

a) *Phalatrikadi guggulu* - 200 mg/bd with honey

b) *Padmakitta yoga* - 60mg with *dink -lahi* & milk /*vyanodankal*

c) *Shwandrashtadi guggulu* 60 mg/bd in afternoon & night /after meal

d) *Rajaniyoga* 250 mg, 10 am -2 pm – started after 21 days. i.e. Started after completing *Basti chikitsa*.

The above treatment was continued for three months.

Result: ^[fig.2]

Before Treatment [fig.1]



After Treatment [fig.2]



- With Ayurvedic management, the fragility of hair was no more.
- Hair colour changed from brown/grey to black.
- Hair length increased by 8-10 cm.
- Hair became smooth & silky.
- Curls became a little uncurled.

DISCUSSION

Panchakarma treatment *basti* is considered *param aushadha for vata* ^[14], i.e *Tikta kshirbasti* helps as *snehan, srtotoshodhan, dhatuwardhan & balya*. Mal-nourished *Asthidhatu* since fetal life can lead to diseases of nails, tooth & hair in newborn children. *Tikta kshirbasti* helps in *Asthidhatu kshay*. Hair, teeth and nails are *malas* of *Asthidhatu*. *Tiktakshir basti* can prevent hair greying and hair fall. It also gives *Bal* to hair roots & improves the colour of hair. While observing the family's history, it is clear that *asthidhatu Ksheenata* was in intrauterine life. So, local treatment to strengthen the hair & internal management with *Ayurvedic* medicines helped the patient grow hair.

CONCLUSION

The patient suffering from Woolly hair syndrome was successfully treated with an Ayurvedic *shaman* and *shodhan* therapy. This treatment protocol should be clinically evaluated on many patients to confirm its efficacy.

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