IAMJ

INTERNATIONAL AYURVEDIC MEDICAL JOURNAL

Case Report ISSN: 2320-5091 Impact Factor: 6.719

A CASE STUDY ON THE COMBINED EFFECT OF AYURVEDIC TREATMENT ALONG WITH *YOGASANAS* AND *PRANAYAMA* IN SUBCLINICAL HYPOTHYROIDISM

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https://doi.org/10.46607/iamj15p7032023

(Published Online: March 2023)

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Article Received: 16/03/2023 - **Peer Reviewed:** 22/03/2023 - **Accepted for Publication:** 30/03/2023.

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ABSTRACT

Hypothyroidism is a commonly prevailing disorder in the adult Indian population. Hypothyroidism is a common disorder in which the gland fails to produce enough thyroid hormone. The prevalence of subclinical hypothyroidism in the developed world is approximately 4-15%. The incidence of hypothyroidism is more in females and elderly patients[1]. The incidence of hypothyroidism is increasing at an alarming rate as people are more exposed to sedentary lifestyles, junk foods, and stressful environments. In the present study, a subclinical hypothyroid case has been treated successfully with a combination of Ayurvedic medicines, *Yogasanas*, and *Pranayama*. After 3 months of treatment, the patient shows a significant reduction in serum TSH level from 9.42 to 2.67. The current case study has focused on the effectiveness of Ayurvedic medicines, *Yogasanas*, and *Pranayama* in treating Subclinical hypothyroidism.

Key words: Subclinical hypothyroidism, Ayurveda, Yoga, *Hamsapathyadi kashaya*

INTRODUCTION

Hypothyroidism is a hypometabolic clinical state resulting from inadequate secretion of thyroid hormones for prolonged periods or rarely from the resistance of the peripheral tissues.[2] Subclinical hypothyroidism is a condition in which thyroid-stimulating hormone [TSH] level is elevated with a normal serum thyroxine level. The symptoms like changes in body weight, fatigue, weakness, and stress-related conditions seen in hypothyroidism often cause a reduction in quality of life. Hypothyroid-

ism may be considered as a *Santarpanajanya vyādhi* with *Kaphavata* predominant vitiation which leads to *Agnimandya* (loss of appetite). *Koshtangnimandya* leads to *Dhatwagnimandya*. Thus causes the formation of *Ama* and finally leads to *Avarana* to the *Srotas*. So, the treatment for hypothyroidism should be focussed on *Amapachana* (helps in digestion), *Agni Deepanam* (increase digestive fire), *and Sroto Shodhanam* (clears microchannels of the body); thereby restoring the functions of the thyroid gland.

Case Report

A female patient of 32 years old, a school teacher by profession came to the clinic on 28.03.2022 with chief complaints of weakness, lethargy, irregular menstruation, puffiness of the face, loss of hair, weight gain, poor memory, stress, etc. for one year. Proper history was taken and the patient was sent for investigations of blood- Hb%, fasting blood sugar, total lipid profile, and thyroid profile. The patient was diagnosed with Subclinical hypothyroidism along with elevated cholesterol levels. The patient opted to continue with Ayurvedic treatment. She had no family history of similar conditions and no significant past history. The patient denies any history of hypertension, diabetes, cardiac problem, or other complicated diseases. She is married and has a six-year-old child.

TABLE 1 LAB VALUES BEFORE TREATMENT

Date 30.03.2022

Hb%	10.6 gm/dl
FBS	83mg/dl
T3	0.96 ng/ml
T4	7.34 ug/dl
TSH	9.42mIU/ml
Cholesterol	244mg/dL
Triglyceride	267mg/dL
HDL	48mg/dL
LDL	143mg/Dl
VLDL	53mg/dL

The following treatment was given:

INTERNAL MEDICINES

1. *Hamsa Pathyadi Kashaya* 15ml with 45ml lukewarm water twice daily before food
2. *Vyoshadi guggulu* 1-0-1
3. *Hinguvachadi churnam* 10g with hot water -noon

YOGA ASANA

1. *Suryanamaskara*
2. *Setubandhasana*
3. *Bhujangasana*
4. *Suptha vajrasana*
5. *Ushtrasana*
6. *Matsyasana*

PRANAYAMA

1. *Surya bhedi pranayama*
2. *Ujjayi*
3. *Kapalabhathi*

TABLE 2- LAB VALUES AFTER TREATMENT
Date 30.06.2022

Hb%	11 gm/dl
FBS	83mg/dl
T3	1.01 ng/ml
T4	7.31 ug/dl
TSH	2.67mIU/ml
Cholesterol	191mg/dL
Triglyceride	148mg/dL
HDL	46mg/dL
LDL	92mg/Dl
VLDL	40mg/dL

DISCUSSION

The symptoms of hypothyroidism may be co-related with *Galaganda, Kapha vridhi, Dhatvagnimandya, Rasadhathu vikriti*, and *Kapha avarana*.

TABLE 3

Vitiated *doshas*	*Kapha* and *Vata*
Mano dosha	*Tamas*
Dooshya	*Rasa dhatu, Medo dhatu*
Type of *Dushti*	*Kapha Avarana*

The treatment for hypothyroidism mainly focuses on vitiated *Kapha* and *Vata* and correcting the *Avarana* and *Dhatvagnimandya*. The treatment adopted here is by considering the principles such as *Aama Pachanam, Agni Deepanam, Vatakapha Shamanam, Srotosodhana,* and *Medo haratwa. Vyoshadi Guggulu* and *Hinguvachadi churna* are having *Deepana, Paachana, Srotosodhaka,* and *Medohara* and *Lekhana* properties. It improves the functions of *Agni* and thereby corrects *Agnimandhya* which is the prime cause of Subclinical hypothyroidism. This in turn corrects the *Dhatwagnimandya* and *Srotodushti*.

Hamsapathyadi Kashaya helps in restoring the functions of the thyroid gland. Yogasanas and Pranayama are mainly intended for *Kapha Vata Samana*, and *Medoharatwa* and improve the functioning of the digestive system and increase absorption; thereby maintaining homeostasis. Moreover, it stimulates the thyroid gland. From the above study, it is seen that Ayurvedic medicines along with yogic interventions can help to normalize the TSH value and restore thyroid functions, decrease cholesterol levels and reduce the symptoms clinically. It is found that Yogic intervention which includes neck extension, flexion or compression, and *Pranayama* are beneficial in thyroid-related disorders.

CONCLUSION

This was a single case study on Subclinical hypothyroidism which was managed effectively with Ayurvedic medications, *Yoga asanas*, and *Pranayama*. Thus, the combined action of Ayurveda medicines along with yogic interventions is found to be effective in restoring thyroid hormone levels and reducing the symptoms clinically. The results need to be studied in more numbers in subclinical hypothyroidism for better assessment.

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Source of Support: Nil
Conflict of Interest: None Declared

How to cite this URL:Nazreen Fathima: A Case Study on the Combined Effect of Ayurvedic Treatment Along with Yogasanas and Pranayama in Subclinical Hypothyroidism. International Ayurvedic Medical Journal {online} 2023 {cited March 2023} Available from: http://www.iamj.in/posts/images/upload/288_291.pdf