Considerable Effect Of *Ayurvedic* Intervention In Subclinical Hypothyroidism: A Case Study Of *Anukta Vyadhi* (unsaid disorder)

ABSTRACT:

Ayurveda explained various concepts of treatment both in *ukta* (mentioned) and *anukta vyadhi* (unsaid diseases). For the management of *anukta vyadhi* there should be an accurate observation of sign and symptoms and minute examination of *dosh-dushya* involved in that particular disease. Hypothyroidism can be considered under *anukta vyadhi*. Subclinical hypothyroidism is a mild state of thyroid failure. It may causes due to autoimmune disorder or iodine deficiency mainly. This case is regarding a female patient of age 38 years old who had diagnosed subclinical hypothyroidism 7 years ago and had taking medication for it. Primarily she consulted for hypothyroidism and simultaneously she wanted to treat her psoriatic condition. After treatment her TSH value reversed within normal limit which was elevated by 5 times 5 months ago of treatment. *Ayurvedic* management was included oral medications and lifestyle changes for healthy living. Her symptoms regarding psoriatic condition were also gets subsided after 2 months of treatment.

Key words – *Anukta vyadhi, dosha-dushya*, subclinical hypothyroidism, reversed TSH value, *Ayurvedic* management, healthy living

INTRODUCTION:

Hypothyroidism is now becoming prevalent to worldwide including India among lifestyle disorders and hormonal imbalance disorders. It manifests with very usual symptoms like fatigue, weight, mood alterations, stress etc. Its prevalence in India is around 11 % and it is higher than western countries. In western countries its prevalence is only 2 % to 4.6 %. [1] Although some patients may have minor symptoms, this state is termed as subclinical hypothyroidism (SCH). The mean annual incidence rate of autoimmune hypothyroidism is up to 4 per 1000 women and 1 per 1000 men. It is more common in certain populations, such as the Japanese, probably because of genetic factors and chronic exposure to a high iodine diet. The mean age at diagnosis is 60 years, and the prevalence of overt hypothyroidism increases with age. Subclinical hypothyroidism is found in 6–8% of women (10% over the age of 60) and 3% of men. The annual risk of developing clinical hypothyroidism is ~ 4% when subclinical hypothyroidism is associated with positive thyroid peroxidase (TPO) antibodies. [2] This is a worrying condition among people because now it is affecting in early ages and there are more incidences in female than male. Sub-clinical hypothyroidism is a state of thyroid in which TSH level found increased to a little extent while other thyroid hormone levels (T3 &T4) remain normal which indicates mild underactive thyroid function, generally in mild cases there is no need of treatment but if TSH level is significantly elevated within the sub-clinical range or in pregnancy state or patient suffering from symptoms like fatigue, hair loss, weight gain, depression etc. then there may be need to take treatment. TSH (thyroid stimulating hormone) is the chief hormone for secretion of thyroid gland hormones and is secreted by anterior pituitary gland. There are 2 hormones secreted by thyroid gland named as T3 (tri-iodo-thyronine) and T4 (thyroxine). These 2 hormones increase the metabolic rate of the body. Hyperthyroidism and hypothyroidism are the two main disorders which caused by alteration in thyroid gland hormones. [3]

There is no reference of hypothyroidism and hyperthyroidism in ayurveda. But there is one disease related to thyroid gland referred in avurveda by name galaganda. [4, 5] Acharya Charaka mentioned about anukta vyadhi. Anukta vyadhi means that diseases which are not named or unsaid. But it does not mean that apart from the named diseases there cannot be other diseases. Acharyas have stated that it is not necessary to know the exact nomenclature of the disease even it is not possible always. [6] So hypothyroidism can be included in anukta vyadhi. One can diagnose a condition of disease by knowing nidan-panchak of disease. It includes *Hetu* (etiology), *Purvaroopa* (pre-symptomatic phase), *Roopa* (sign and symptoms), *Upshaya* (relief by) and *samprapti* (pathogenesis). ^[7] For the *Ayurvedic* treatment it is not always compulsory to know the name of disease. For effective Ayurvedic treatment it is important to know the *dosha-dushya* involved in pathogenesis by observing symptoms.

This article is going to present a case study of subclinical hypothyroidism. A female patient who had K/C/O of hypothyroidism since 7 years was taking regular medicine for it. She had consulted to the Jeena Sikho Lifecare Limited Hospital, Pune, Maharashtra for Ayurvedic treatment of subclinical hypothyroidism primarily but along with this she had complaining of psoriatic patches over skin and scalp. Purpose of this case study is to discuss about the Ayurvedic efficacy in hypothyroidism.

CASE REPORT:

A female patient aging 38 years old had consulted to Jeena Sikho Lifecare Limited Hospital, Pune, Maharashtra on 20/10/2024. She was already a diagnosed case of subclinical hypothyroidism 7 years ago. Along with this known case, she had complaining of –

- Patches on skin
- Psoriasis over scalp &
- Hyperacidity

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Following to this her history was taken (table no. 1) and examinations were done (table no. 2) for further diagnosis of the disease.

Table no. 1: Personal history

Assessment	Observation		
Diet pattern	Mixed (vegetarian &		
	non-vegetarian)		
Family history	Mother & maternal		
	grandfather: diabetic		
Procedure	Cesarean section		
history			
Past illness	K/C/O Hypothyroidism		
	since 7 years		
Medication	Tab. Thyronorm 75 mg		
history	OD		

Table no 2: Ashtavidha Parikshan

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Assessment	Observation	
Nadi (pulse)	Vata kapha	
Mala (bowel)	Samyak	
Mutra (urine)	Samyak (Normal)	

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Jivha (tongue)	Sama (White coating)	
Shabda	Spashta (clear)	
(pronounciation)		
Sparsh (touch)	Ruksha (dry)	
Drik (eyes)	Prakrit	
Aakriti (physique)	Madhyam (average)	
_	Weight: 55 kg	

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Laboratory report: Almost 5 months prior to consult she had done her TFT (Thyroid function test). She was also investigated for her hemoglobin on same day. Her T3 and T4 were within normal limits but TSH was increased. Hemoglobin also found in its normal value. Findings of these tests are as like below:

Table no. 3: TFT and Hb report

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Test name	29/05/ 2024	Reference	02/12/2024
		range	
roid stimulating	17.836 micro	0.34 - 5.60	2.982 IU/mL
none (TSH)	IU/mL		
odothyronine	1 35 ng/mL	0.87 - 1.78	1.42 ng/mL

Thyroid stimulating	17.836 micro	0.34 - 5.60	2.982 IU/mL
hormone (TSH)	IU/mL		
Triiodothyronine	1.35 ng/mL	0.87 - 1.78	1.42 ng/mL
(T3)	_		
Thyroxine (T4)	7.04 μg/dL	5.48 - 14.28	9.34 μg/dL
Hemoglobin (Hb)	12.4 gm/dL	12 - 15	13.6 gm/dL

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Diagnosis: Primarily this is a known case of subclinical hypothyroidism and patient had come to the hospital for taking treatment of it. Besides this she had complaining of psoriatic patches over skin and scalp. So the diagnosis could be Psoriasis with K/C/O subclinical hypothyroidism primarily.

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AYURVEDIC INTERVENTION:

90 91 92 In ayurveda, aahara (diet), nidra (sleep) and vyayama (exercise) are mentioned as equally important for the cure of any disease specifically apathyajanya vyadhi (lifestyle disorder). So Ayurvedic management of this case was also included diet, sleep and exercise recommendation together with oral medicines.

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Oral medicines included ayurvedic and herbo-mineral formulations for symptomatic relief and to pacify the dosha-dushva dushti involved in this case. Formulations which can cure both hypothyroidism and psoriasis were prescribed in together. All medicines were told to take with koshna jala (lukewarm water).

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Table no. 4: prescribed medicines on 1st day and in 1st follow-up

Course	Formulation
Day 1	1. Table Rakta care – 1 tablet BD after food (<i>adhobhakte</i>)
20/10/2024	2. Syrup Puroderm-G – 20 ml syrup BD after food (adhobhakte with
	equal amount of lukewarm water)
	3. <i>Charma rog har vati</i> – 1 tablet BD after food (<i>adhobhakte</i>)
	4. Capsule Thyroplus – 1 capsule BD before food (<i>pragbhakte</i>)

	5. Syrup Immune power – 10 ml syrup BD after food (<i>pragbhakte</i>)
1 st follow-	1. <i>Granthi har vati</i> − 1 tablet BD after food (<i>adhobhakte</i>)
up	2. <i>Asthipurak vati</i> – 1 tablet BD after food (<i>adhobhakte</i>)
15/11/2024	3. <i>Dhatu poshak</i> Cap – 1 tablet BD after food (<i>adhobhakte</i>)
	4. Hair oil – apply over hair at least 3 times per week

Diet recommendation:

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• Ayurvedic diet included –

Pathya aahara (to have) – mudga yusha (green gram soup), yavanna (barley food items), bhrushta tandul (roasted rice), jurna (sorghum).

Apathy aahara (to avoid) - masha (black gram), dugdha and dugdhajanya padartha (dairy products), pishtanna (starchy foods, refine flour), stale food, guda (jaggary) and sugar products, *mansahar* (no-vegetarian food)

DIP diet plan: It was included 3 steps of diet plan.

Step 1: In the morning till noon (12.00 pm) eat only fruits of 3 to 4 types like banana, apple, strawberries, grapes etc. Amount of fruits and salads were calculated by formulas of DIP diet plan suitable for that particular weight of patient.

Minimum amount to be consumed for fruits was = 550 grams

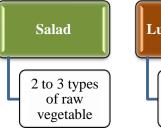
Step 2: She was advised to eat her lunch or dinner always in 2 plates.

• Plate 1 – eat salad in above mentioned quantity just before lunch/dinner. It included 2-3 types of raw vegetables like cucumber, tomato, carrot, beetroot etc. After eating salad take plate 2 for eating.

Minimum amount to be consumed for salad was = 275 grams

Plate 2 – it included multigrain/ millet diet. Eat homemade and fresh vegetarian food according to hunger. It should contain negligible amount of salt and oil. Same rules were to be followed for lunch and dinner.

Lunch time: 1.00 to 2.00 pm Dinner time: 6.00 to 7.00 pm





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Step 3: During snacks time in the afternoon (4.00 to 5.00 pm) if wanted to eat something then advised to eat sprouts, dry fruits, fresh fruits, drink herbal tea/coconut water etc. Dry fruits were told to eat by soaking at least for 3-4 hours.

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Quantity of sprouts = 55 grams

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Water intake recommendation:

Drink *Shritasheet jala* (alkaline water) in low quantity intermittently.

- Avoid more water intake at a time.
 - Drink a little water in between while eating.
 - Don't drink water just before and after eating of food.

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Exercise/ Yogasanas:

- She was advised to do any simple exercise regularly like sun salutations.
- Advised to perform *Vajrasan* (diamond pose) after every meal
- Do shatapavali (100 stepping walk) after lunch and dinner.
- Perform Jalandhar bandh every day.

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Sleeping recommendation: Advised to –

- Sleep on time (before 10.00 pm) and wake up early morning before sunrise
- Avoid day sleeping
- Avoid night awakening
- Take 7 to 8 hours of sleep

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RESULTS:

- Her previous TSH investigation was of 5 months ago. Then she started *Ayurvedic* treatment with healthy lifestyle. After 2 months of treatment her TSH level reduced approximately by 5 times than previous reading and comes within normal limit.
- Before treatment hemoglobin level was already within normal range. Due to intake of blood purifier medicines her hemoglobin positively increased by 1.2 %.
- She had not complaining about symptoms of subclinical hypothyroidism like fatigue, mood swings, irritability, hair loss, feeling of coolness etc. But sometimes when she had missed her dose of medicine she was getting suffered from these symptoms in mild form. These mild symptoms also get subsided after 2 months of treatment.
- Besides this her psoriatic patches also healed nearly about to normal.
- Dry skin became oily and normal after treatment.
- Tongue examination showed normal colour and clear tongue (*niram*).
- Before treatment she was weighting about 55 kg. After treatment due to healthy lifestyle recommendation she lost her weight around 3 kg and it was 52.35 kg.
- Following table no. 6 notified before and after treatment laboratory results:

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Table no. 5: TFT and Hb before and after treatment

Test name	Before treatment 29/05/ 2024	Reference range	After treatment 02/12/2024
Thyroid stimulating	17.836 micro IU/mL	0.36 to 5.60 IU/mL	2.982
hormone (TSH)			
Hemoglobin (Hb)	12.4 gm/dL	12 to 15 gm/dL	13.6 gm/dL

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DISCUSSION:

Generally SCH is asymptomatic. But sometimes it can show mild symptoms like constipation, depression, fatigue, unexplained weight gain, dry and coarse skin and hair,

heavy menstrual bleeding etc. SCH can progress and develop into full blown hypothyroidism. It occurs particularly if the TSH levels are significantly elevated or in the presence of thyroid antibodies. Symptoms of improper functioning of thyroid gland include fatigue and extreme somnolence with sleeping up to 12 to 14 hours a day, tremendous muscular sluggishness, slowed heart rate, decreased cardiac output, decreased blood volume, sometimes increased body weight, constipation, mental sluggishness, failure of many trophic functions in the body evidenced by depressed growth of hair and scaliness of the skin, development of a frog like husky voice, and, in severe cases, development of an edematous appearance throughout the body called myxedema. [2]

Nidan-panchak:

- **1.** *Hetu*: Hypothyroidism shows similar symptoms like *kapha- vata dosh prakop lakshana*. This disease can be included in *santarpan janya vyadhi* which causes due to frequent unhealthy lifestyle. *Acharya Vagbhata* stated that *kapha* and *rasa dhatu* should be considered as similar to each other. ^[8] Besides, symptoms of thyroid dysfunction are somewhat similar to *rasavaha srotoduhti*. So etiological factors may include
 - Vata-kapha prakopak aahar-vihar factors which have same property like prakrut vata and kapha dosha. For example ati snigdha aahar increases kapha dosha, ati sheeta aahar elevates vata dosha etc.
 - Santarpan janya vyadhi hetu mentioned by Charakacharya [9] and
 - Hetu of rasavaha srotodushti: Guru (heavy to digest), sheetam (cooling property food), ati snigdham (more oily food), ati matra (more quantity of food), samashnatam (eating of same food regularly), chintyanam ch atichintanatat (more stress and anxiety) [10]

Some of these causative factors were found in the history of patient exactly.

- **2.** *Purvaroopa* SCH is assumed as an early stage of thyroid disease in its own. Means it may be a pre-symptomatic phase of hypothyroidism ^[11] and it can be a *roopa* (symptomatic phase) of hypothyroidism.
- 3. *Roopa Roopa* is the symptomatic phase of disease. Due to already on medication she had not complained about symptoms of SCH. But sometimes she was getting mild symptoms of it. These symptoms are similar to *rasavaha srotodushti lakshan*, *kapha prakopa lakshan* and *vata prakopa lakshan* in some extent.

Table no. 6: Clinical feature and Avurvedic terminology

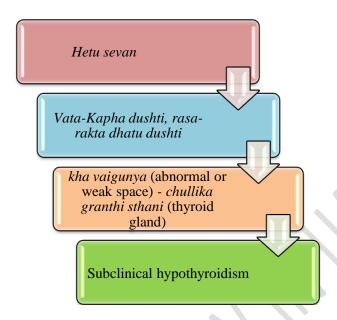
Symptoms of SCH	Ayurvedic terminology	Regarding symptom
Fatigue	Alpa balatva (low	Vata vriddhi
	immunity) [12] / Bala	(elevation)
	bhransha (loss of	
	strength) [8]	
	Sada (fatigue/	Rasavaha
	weakness) [10]	srotodushti
		lakshan
Cold intolerance	Ushnakamitva ^[8]	vata vriddhi

	Shaitya (feeling of cold	kapha vriddhi
	increased) ^[8]	
Dry skin and hair	Khara and parusha	Vata vriddhi
	(very dry skin) [13]	
Constipation	Shakrut graham ^[8]	Vata vriddhi
Unexplained	Gourava ^[10]	Rasavaha sroto
weight gain/		dushti lakshan
heaviness		
Increased sleep	Ati nidrata [14]	Kapha prakopa
_		(elevation)
Symptoms of	Shoka (sad), [15] pralap	Vata vriddhi
depression	(delirium), bhram	
	(confusion), deenata	
	(unhappy) [8]	
Voice changes	Khara (dryness in voice)	Vata vriddhi
Muscle cramps/	Shlathangatva (muscle	Kapha prakopa
muscle	sluggishness) [8]	
sluggishness	Angamarda (muscle	
	pain/ body ache) [10]	

- Menstrual irregularities are sometime due to *vata prakopa* because '*veg pravartana*' is the normal function of *vata dosha* which means regulation of activities in body. ^[8]
 - 4. *Upashaya* Relief by some specific things was not observed by her. But due to cold intolerance she was feeling good in hot weather season.

5. Samprapti of hypothyroidism is being like:

Galagand has vata and kapha dosha predominance along with medo dhatu dushti. [4] Acharya Charaka mentioned one more dhatu dushti in galagand and that is rakta dhatu dushti. Galgand is a structural growth of thyroid gland as like in goiter. So it involves medo dhadtu dushti also. But SCH is a functional abnormality of thyroid gland. So it can be considered as vata, kapha prakopa and rasa-rakta dhatu dushti in SCH.



Ayurvedic intervention:

Acharya Vagbhata also mentioned about unsaid disorders. He has not termed it by specific name like anukta vyadhi but explained about the unknown diseases. He mentioned the concept for how to treat the unknown disorders. He said in each disease at first examine the doshas minutely. Because these vitiated doshas are the only reason to form disease by affecting its place of origin and by circulating to any weak or abnormal space in the body and causes various types of diseases. Shloka regarding this is given below:

"Sa eva kupito dosha samuthan visheshata/ Sthanantarani ch prapya vikaran kurute bahun||" ^[14]

There is no need to think whether to do treatment or not if we don't understand the name of disease. Therefore start their treatment quickly by knowing the nature of disease, their different locations of affecting and causative factor.

"Vikaranam akushalo n jihniyat kadachan| Na hi savra vikaranam namato asti dhruva||" ^[14]

Treatment plan of this case is already stated previously after diagnosis. Here the discussion of *Ayurvedic* management is explained.

Oral medicines: Choice of medicines was made according pathogenic factors involved and manifestation of symptoms. Along with SCH medicines were given for psoriatic complain.

1. Tridosha shamaka:

 Vatahar – to regularize metabolic actions

Pittahar – to reduce hyperacidity and to pacify *bhrajak pitta* in skin, this helps to cure the psoriasis.

Kapha shamaka: detoxifies the body, relieves skin issues like itching, psoriatic patches etc.

2. Rasa dushtihar: Acharya Vagbhata has given a statement about the treatment of rasa dhatu dushti and said that in rasa dushti langhan chikitsa (weight loss) should be applied.

'Rasjanam vikaranam sarva langhanam oushadham|'

3. *Raktashodhak* – blood purifier

- 4. *Langhan chikitsa medo* (fat)-*anil* (*vata*)-*shleshma* (*kapha*) *nashanm kriya* (pacifying treatment)
- 5. Rasayan immunity booster

Following medicines were prescribed to her. They are mentioned here with their key ingredients and their uses in this case.

- 1. Charmroghar vati: Aamalki (Emblica officinalis), Haritaki (Terminalia chebula), Bibhitaki (Terminalis bellerica), Guduchi (Tinospora cordifolia), Guggulu (Commiphora mukul, Shunthi (Zingiber officinalis), Maricha (Piper nigrum), Pippali (Piper longum), Trivrutta (Operculina turpethum), Danti (Baliospermum montanum)
 - **Use:** It was given for psoriasis as it works effectively in skin diseases besides it detoxifies the body. This included *Triphala (Aamalki, Bibhitaki & Haritaki)*. Regarding this *Acharya Vagbhata* mentioned the uses of *triphala*. It is *ropani* (healing property), *twakgada* (skin diseases), *kledo-medo-meha-kapha-asra jit* (pacifies or cures wet metabolic waste, fat/lipid, diabetes, *kapha dosha*, blood disorders). *Triphala* is termed as *rasayani vara* (best tonic). [16]
- 2. Granthihar vati: Kanchnara (Bauania variegate), Guggulu (Comiphora mukul), Aamalki (Emblica officinalis), Bibhitaki (Terminalia bellerica), Haritaki (Terminalia chebula), Pippali (Piper longum), Maricha (Piper nigrum), Shunthi (Zingiber officinalis), Varun (Crateva nurvala), Dalchini (Cinnmomum zeylanicum)

 Use: Trikatu (Shunthi Maricha and pippali) is useful in sthoulva (obesity) and Shleenad
 - **Use:** *Trikatu (Shunthi, Maricha* and *pippali)* is useful in *sthoulya* (obesity) and *Shleepad* (elephantiasis). ^[16] *Kanchanar* is mentioned in *gandamala*. ^[17] *Gandamala* is same as *galgand* affects neck region but the difference is that it has series of swellings in neck. Other herbs have also properties of *lekhana*, *tridoshahar*, anti-inflammatory etc. Therefore this formulation was given for Thyroid dysfunction and to reduce weight.
- 3. Syrup puroderm-G: Nimba (Azadirachta indica), Manjistha (Rubia cordifolia), Guduchi (Tinospora cordifolia), Sariva (Hemedesmus indicus), Khadir (Acacia catechu), Chopchini (Smilax china), Bakuchi (Psoralea corylifolia), Daruharidra (Berberis aristata), Gorakhmundi (Sphaeranthus indicus), Kirattikta (Swertia chirayta), Yashtimadhu (Glycerrhiza glabra), Bhringraj (Eclipta alba), Kutaki (Picrorhiza kurroa), Haridra (Curcuma longa)
 - **Use:** *Yasthimadhu*, *Sariva* and *Manjistha* are the drugs of *varnya mahakashaya* (group of herbs useful in skin disorders). ^[18] Other herbs like *Nimba*, *Haridra*, *Guduchi*, *Kirattikta* also mentioned for their uses in skin disorders. Some herbs reduce itching, some improves skin complexion by pacifying *pitta dosha*, some herbs purifies blood etc. So this formulation was given to reduce psoriatic skin patches and their related problems. Blood purification was useful in both SCH and psoriasis.

- 4. Rakta care tablet: Aamrgandhi haridra (Curcuma amada), Tankan bhasma (ash of borax), Sphatika bhasma (rock crystal), Shuddha gandhaka (purified sulphur), Kutaki (Picrorhiza kurroa), Kirattikta (Swertia chirayta), Manjishtha (Rubia cordifolia), Khadir (Acacia catechu), Sariva (Hemidesmu indicus)
 - Use: Herbs and minerals in this formulation also plays key role in skin disorders, Scalp itching, fungal infection, scalp psoriasis, blood purification etc.
 - **5.** *Dhatu poshak vati: Sudha* (Lime), *Shankha bhasma* (*Turbinella pyrum* ash), *Praval* (*Corallium rubrum*), *Mukta* (pearl), *Shukti* (oysters), *Kapardik* (*Cypraea moneta*), *Loha bhasma* (*Ferrum* ash)

Use: Immunity and hyperacidity

- **6.** Asthi purak vati: Ashwattha (Ficus religiosa), Laksha (Laccifer lacca), Asthishrinkhala (Cissus quandrangularis), Arjun (Terminalia arjuna), Nagbala (Grewia hirsute), Vanshlochan (Bambusa arundinacea), Guggulu (Commiphora mukul)
 - Use: anti-inflammatory, osteoarthritis, blood disorders, gives strength to hair.

- 7. Syrup immune power: Guduchi (Tinospora cordifolia), Nagkeshar (Mesua ferrea), Dashmoola (an Ayurvedic formulation of 10 herbs), Babbula (Acacia babbula), Dhattura (Dhatura metel), Vasa (Adhathoda vasica), Jatiphala (Myristica fragrans), Yashtimadhu (Glycerriza glabra), Lavang (Syzigium aromaticum), Kantakari (Solanum surratense), Kankol (Piper cubeba), Bruhat ela (Amomum subulatum), Maricha (Piper nigrum)
 - **Use:** weakness, immunity booster. *Dashmoola* has *tridoshaghna* property (pacifies *vata*, *pitta* and *kapha*), *Shothahar* (anti-inflammatory) and *aamadoshanashka* (pacifies *rasavaha srotodhushti* and detoxification). [19, 20]

8. Thyroplus capsule: Triphala, Bramhi (Bacopa monnieri), Gokshur (Tribulus terrestris), Punarnava (Boerhavia diffusa), Shunthi (Zingiber officinalis), Ashwagandha (Withania sominfera), Yashtimadhu (Glycerrhiza glabra), Sheelajit (Asphaltum), Kaishora guggulu and Kanchanar guggulu (Ayurvedic formulations)

Use: improves digestion and thyroid dysfunction

Diet recommendation:

• It is essential in all diseases specifically in lifestyle disorders. Reason behind this is, the person who follows healthy diet and activities will never get diseased or if get diseased then can cure easily. [21] Acharya Vagbhata mentioned Kulattha (horse gram), Jurna (sorghum), Shyamaka (Barnyard millet), yava (Hordeum vulgare), mudga (green gram), madhudakam (honey water) in sthoulya vyadhi

(obesity). [22] So the patient was told to add this food in regular diet.

 • DIP diet plan included vegetarian and homemade food based on natural resources and was planned according to after sunrise and before sunset time. It has significant role in lifestyle disorders and can detoxify the body naturally. [23]

Water intake:

- *Koshna jala* was suggested as *anupan* with medicines. *Anupan* is a liquid substance and has to consume with or after intake of medicine or food. ^[24] It improves the absorption and effectiveness of drug into the body. *Koshna jala* is mentioned as best *anupan* for all.
- *Shutasheeta jala* was suggested for drinking. It involves boiling of water and then letting it to cool at normal temperature naturally. This water digests easily and rapidly. [22]
- *Alpa jala pana* was told because in *santarpan janya vyadhi* or in lifestyle disorders like ascites, edema, piles, liver and spleen disorders, diabetes etc. less water intake is suggested by *acharyas*. [22]

Exercise/yogasan:

- Specifically she was told to practice *Jalandhar bandh* regularly. Its effect is mentioned the destroyer of a host of diseases of the throat (*kanth-dukhougha nashana*). [25]
- *Vajrasan* was told to do after every meal for 5 minutes as it detoxifies the body by removing impurities of 7000 *nadi*'s. [25]

FURTHER SCOPE OF STUDY

- 1. The scope can encompass to know its exact patho-physiology along with clinical presentation by the view of *ayurveda*.
- 2. If pre-symptomatic phase is diagnosed earlier it can be easy to treat. For this manifestation of pre-symptomatic phase should be studied.
- 3. In present days it has occurring at early ages and causes mental and emotional disturbance of patient very badly. So other than unhealthy lifestyle, it is necessary to find out that, is there any other underlying cause of its occurrence at early ages.
- 4. A broad scope for research in *Ayurvedic* treatment for hypothyroidism to cure this permanently.

CONCLUSION:

- A fine conclusion of this case study is that, even if a disease is not mentioned in the *Ayurvedic* literature, it can be successfully treated by knowing the *Ayurvedic* pathogenesis of disease.
- Another conclusion is that in unsaid diseases minute study of clinical features and proper history taking can aid to know the *dosh-dushya* involved in the disease. It helps to catch the accurate diagnosis.
- The patient, a 38-year-old female with a 7-year history of subclinical hypothyroidism, presented with dermatological symptoms (skin patches, scalp psoriasis) and gastrointestinal complaints (hyperacidity). Baseline investigations on 29/05/2024 revealed markedly elevated TSH levels (17.836 µIU/mL) with normal T3 and T4 values, confirming ongoing thyroid dysfunction. After initiating a comprehensive *Ayurvedic* treatment protocol, including *Ayurvedic* medications, dietary regulation, and lifestyle modifications, follow-up evaluation on 02/12/2024 demonstrated significant improvement in thyroid function, with TSH reduced to 2.982 µIU/mL (within normal range), T3 and T4 levels maintained in the normal range, and hemoglobin improved from 12.4 g/dL to 13.6 g/dL. The marked normalization of thyroid profile and

- hemoglobin levels indicates the **effectiveness of the** *Ayurvedic* **regimen in managing subclinical hypothyroidism** while also potentially alleviating associated systemic symptoms.
 - Conclusion regarding *Ayurvedic* management is that, precise choice of drugs and following healthy lifestyle regimen by patient can reverse the chronic sub-clinical hypothyroidism just within 2 months of treatment.

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