



Case Report

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Ayurvedic Management of Sub Clinical Hypothyroidism - A Case Report



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Abstract

Hypothyroidism is one among the threatening problems in today's modern world. Most studies indicate the prevalence in adults as falling within range of 10% to 15%, with greater prevalence at higher ages. Hypothyroidism is a clinical syndrome resulting from deficiency of thyroid hormone. This condition affects on the metabolism of the whole body up to the cellular level so, the multi-system involvement and their signs & symptoms occurs as well as the mental status of the patient is also disturbed. Lifelong treatment with modern drugs (levothyroxine) does solve some of the issues, but does not cover the entire spectrum of disease

A Hindu, married, 46yr old Female patient visited the outpatient department of the institute, Mumbai with complaint of k/c/o Hypothyroidism with Sudden Weight gain, hair fall, Anxiety. The patient was diagnosed as of Hypothyroid. Tablet Ashwagandha (Withania somnifera) 500mg/ 2 Tablet Twice a daily with warm water were administered for 3 months. After the 3 months treatment, a significant response in relief from symptoms such as Anxiety, Fall of hair, High TSH level was found, but no any improvement was found in high weight.

Keywords: Sub clinical Hypothyroidism; Ashwagandha; TSH; Levothyroxine; Anxiety; Fall of hair

Introduction

A milder form of hypothyroidism, sub clinical hypothyroidism, also known as mild thyroid failure, is characterized by normal level of T4, but an elevated TSH. Sub clinical hypothyroidism is diagnosed when you have no obvious symptoms or mild symptoms of hypothyroidism. Sub clinical hypothyroidism affects 3% to 8% of the world population. It affects 6% to 10% females & 2.4% to 3% male globally. Sub clinical hypothyroidism may aggravate other serious diseases. Lifelong treatment with Modern drugs does solve some of the issues, but does not cover the entire spectrum of disease. In classics of Ayurveda this ailment has been described as Galagand, in Atharva veda it is describe under the heading of Apachi. According to ayurved initially derangement of doshas takes place after that dhatu & strotas get affected. Only in the later stages of the disease ojevimsrasa & vyapat (Hypothyroid states) gets affected. So if we break this pathology with effective ayurvedic herbs then we can control the elevated level of TSH with improvement in signs & symptoms.

Case Report

A Hindu, married, 46yr old Female patient visited (Nov 15, 2017) the outpatient department of the institute, Mumbai with OPD Number 201717019 as a Previous diagnosed as of

Hypothyroidism. A history of the present illness revealed that the patient was apparently normal 2 year back. Gradually he experienced the above said symptoms. The problem increased day by day, and the patient consulted his family physician & was on internal medicine which relieved the condition for a time being. After 1 month, the patient experienced Sudden Weight gain, hair fall, Anxiety Hence, the patient consulted MD (Medicine) where the patient was diagnosed as Hypothyroidism disease through Thyroid Profile, USG Neck & clinical examination. The patient was on Thyroid supplement treatment for last 16 months (Tb. Thyronorm 100mcg once in mornng, Tb. Shelcal 500mg once a day) where the patient had some part of relief.

The personal history revealed that the patient is vegetarian (spicy & sweet food). Patient has no addiction. There was genetic linkage of the disease observed in the family (Patients Mother has hypothyroidism). Patient is House wife having limited strenuous household work. The general examination of patient showed pulse rate of 67/min, respiratory rate of 20/min, blood pressure of 140/80mm of Hg & body weight of 62kg. Thyroid profile shows borderline T3 & T4 Level, TSH shows 8.56ug/dl.

The following oral medicines were administered for 3 months. Tablet Ashwagandha (Withania somnifera) 500mg/ 2 Tablet twice a daily with warm water for 3 months.

The medicines were procured from outside Ayurvedic pharmaceutical shop. Follow up was taken once in 15 days for 3 months. Proper diet regimen was given to patient. Daily 20min of walking or 20min of some form of exercise was advice to patient. During this Study period Modern medicines (Tb. Thyronorm 100mcg once in mornng, Tb. Shelcal 500mg once a day) were stopped.

On the first follow up, the patient has no improvement in any Symptoms. Improvement was observed in Anxiety on second follow up. Improvement was noted in general sound sleep on third follow up. Complete relief was noted in all the signs & symptoms by the patient on the fifth follow up. Thyroid profile was done After 5th follow up, TSH level was found to be markedly reduce in normal range without any abnormal changes in T3 & T4 level. (TSH- 4.2ug/dl)

Discussion

Ashwagandha is an adaptogen or Rasayan that eliminates toxins, stabilizes the the physiologic processes, restore homeostasis and rejuvenate the body. It has anti inflammatory, antioxidant, anti anxiety, immunomodulatory, hypotensive, sedative and hormone balancing properties. In clinical research, Ashwagandha has proven to demonstrate its activity and efficacy, as discussed by our ancient teacher of ayurvedic medicine.

Many previous research studies in animal studies in animal model have shown that Ashwagandha has an effect on thyroid activity. Ashwagandha is known to increase the T3 thyroid hormone, which regulate mitochondrial energy production, giving energy & helping burn fat, there by providing symptomatic improvement hypothyroidism patients. It also increases free T4 levels. Moreover Ashwagandha is especially known to be useful botanical in treating sub clinical hypothyroidism by reducing TSH and bringing it into a normal range.

Ashwagandha increased serum T3 and serum T4, while decreasing serum TSH. These results indicate that Ashwagandha might play a role in regulating the hypothalamic-pituitary-thyroid axis (HPT axis). Ashwagandha is an anti-stress botanical that lowers the hormone cortisol in the body. Chronic stress

activates the hypothalamic-pituitary-adrenal axis (HPA axis) by elevating cortisol, which inhibits the HPT axis, lowering serum T3 and T4 levels in the body. Via lowering cortisol, Ashwagandha down-regulates the HPA axis, up regulating the HPT axis, which normalizes thyroid hormone levels. Other factors that inhibit the HPT axis by activating the HPA axis (reducing serum T3 and T4 as a consequence), are inflammation and dopamine levels. Since Ashwagandha is an anti-inflammatory and has anti-dopaminergic properties, this characteristic of the herb might lead to its thyroid balancing effects.

Conclusion

Based on clinical signs & symptoms, Tablet Ashwagandha was found to be safe & effective in the management of Sub clinical Hypothyroidism. So we may concluded that treating sub clinical hypothyroidism patients with Ashwagandha may be valuable for bringing their thyroid hormone levels into normal range.

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