

A Case Report On Management Of Sjogren's Syndrome Through Ayurvedic Modalities

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Abstract

Sjögren syndrome is a chronic, systemic, autoimmune disorder of unknown cause. The lymphatic infiltration of salivary and lachrymal glands causes glandular fibrosis and exocrine failure. Being dryness of mouth, eyes, skin, vagina, fatigue and arthralgia are common symptoms, disease may occur either in isolation or in patients with other autoimmune diseases. The present case is attempted to be understood as Mukhashosha variety of VatajaNanatmajaVikara. An intervention with Shodhana and Rasayana Prayoga yielded significant results in managing the condition and improving the quality of life.

Key Words

Sjögren syndrome, Mukhashosha, NanatmajaVikara, Snehapana, Shodhana, Rasayana

Date of Submission: 22-07-2022

Date of Acceptance: 05-08-2022

I. Introduction

Sjögren syndrome usually affects the areas of the body that produce fluids, majorly saliva and tears. The syndrome affects approximately 0.1% to 0.6% of the population. This condition can affect people of any age but symptoms usually appear between the ages of 45 to 55 years. Sjogren has been reported worldwide in adults and rarely in children. There is no racial, or geographic bias in incidence. The disorder has a marked predilection for women with a female: male ratio of approximately 9:1⁽¹⁾. The most common extraglandular manifestations are arthralgia, non-erosive polyarthritis and skin manifestations which occur in approximately 50% of patients⁽²⁾. The present system of medicine can mask the symptoms but reduces the overall quality of life due to the diverse manifestation of the disease. Tumours, lymphoma, cardiovascular disease, infections are some of the major causes of death in this condition. The management in modern science is usually individualised based on the disease activity and extent of the manifestations. To measure systemic disease activity, the EULAR Sjögren's Syndrome Disease Activity Index (ESSDAI) are widely used. Sjögren syndrome can be understood as a Mukhashosha variety of VatajaNanatmajaVikara, and the line of treatment includes Shodhana, Shamana and Rasayana therapies⁽³⁾.

II. Case Report

A female patient aged about 67 years, native of Holland, was complaining of rashes all over her body for two years, associated with generalized weakness and easy fatigability. She was unable to perform her daily activities. The patient was diagnosed with Glioblastoma in the year 2016 for which she underwent Chemotherapy. A ventriculo-peritoneal shunt was placed in-order to drain the excess fluid accumulated in the cranium and release the pressure. She was advised with radiation therapy but she had denied the treatment. The patient had consulted a General Medicine physician for her complaints of rashes and weakness, when she had been for her follow up visit. She also had complaints of dry eyes and dry mouth for which she was diagnosed with Sjogren's Syndrome. After the diagnosis, the doctors in Holland had suggested her to take part in an ongoing drug trial to which she had denied. One of her friends had suggested her to take treatment in India and she had approached our hospital 2 years ago. But due to COVID lockdown she had to go back only with oral medications. She visited our hospital again in the month of April 2022 for further treatment. MRI Brain was suggested in order to decide further treatment protocol. In her MRI, there were no traces of Glioblastoma persisting. The complains of Dry Eyes and Dry Mouth persisted along with Rashes and Generalized weakness. But more than these existing symptoms, her major concern was for her cholesterol levels as her sibling succumbed to Hyperlipidemia and she feared she might suffer the same fate.

General Physical Examination

Built	Normosthenic
Nourishment	Well Nourished
Pallor	Absent
Pulse	78 bpm
Respiratory Rate	20/minute
Blood Pressure	130/80mmHg
Height	5'3"
Weight	61Kg
BMI	23.8

Systemic Examination

Central Nervous System	Higher Mental Functions intact Consciousness- intact Orientation to time, place, person – intact Cranial nerves- within normal limits
Cardio-Vascular System	S1 S2 heard No added sounds
Respiratory System	Normal vesicular breathing sounds heard No added sounds
Gastro-Intestinal System	Per abdomen- soft, non-tender No organomegaly

Personal History

Appetite	Reduced
Bowel	Once per day
Sleep	Disturbed
Micturition	2-3 times/day

AshtaSthanaPariksha

Nadi	Pittakapha
Mutra	Prakruta
Mala	Prakruta
Jihva	Ruksha
Shabda	Prakruta
Sparsha	Parushya
Drik	Ruksha
Aakriti	Prakruta

SampraptiGhataka

Dosha	Rajas, Tamas, Prana, Samana and VyanaVata, Pitta
Dushya	Manas, Rasadhatu
Agni	Vishamagni
Ama	Jatharagnijanya ama – present
Srotas	Manovaha, Rasavaha
Srotodushhti	Atipravritti
Adhishthana	Hridaya, Buddhi
Rogamarga	Madhyama
Vyaktasthana	Sarvasharira

Intervention

The patient was administered the following treatment:

Panchakarma Procedures

S.N.	Panchakarma Procedures	Dose	Duration	Drugs used
1	Snehapana	Arohana Krama based on Agnibala	7 days	GugguluTiktakaGhruta
2	Virechana	50g	1 day	TrivritLehya

Oral Medications Advised

S.N.	Drugs	Dose	Duration	Anupana
1	<i>Kushmanda Rasayana</i>	10g-10g-10g	30 days	Warm milk
2	Cap. <i>Amalaki</i>	2-2-2	30 days	Normal water
3	<i>Haridra Khanda</i>	5g-5g-5g	30 days	Warm milk
4	<i>Gandhaka Rasayana</i> DS	1-0-1	30 days	Normal water

III. Results

The following criteria was used for assessment: ⁽⁴⁾

Symptoms	Before Treatment (out of 10)	After Treatment (out of 10)
Dry Eyes	4	2.5
DryMouth	6	4.5
Skin Rashes	5	2
Fatigue	7	2
Arthralgia	7	3

The therapies resulted in decrease of symptoms by about 30-60% over a period of 15 days.

IV. Discussion

Any *Vataja* disorders can be treated on the lines of general *VataUpakrama*, which are *Snehana*, *Swedana*, *MruduSamshodhana*, *Swaduamlaadibhojana*, *Abhyanga*, *Mardana*, *Veshtana*, *Trasana*, *Seka*, *Paishtika* and *GoudikaMadya*, *Basti*, *DeepanaPachana* processed *Sneha* of different origin, *MedyapishitaRasa*, *TailaAnuvasana* ⁽⁵⁾.

The probable mode of action of the selected treatment is as follows:

1. *Snehapana* with *GugguluTiktakaGhrita* followed by *Virechana-Snehana* is the first line of treatment for any *VatajaVikara* ⁽⁶⁾. Here *Ghrita* was used for *Snehapana* as along with pacification of *Vata*, it also acts as *Rasayana* ⁽⁷⁾. *GugguluTiktakaGhrita* is used in *PrabalaVatajaVikara* where it could be understood to act as *SrotoShodhaka* ⁽⁸⁾. Ideally *Basti* should be the treatment of choice for *VatajaVikara* ⁽⁹⁾. But since there is mild involvement of *Pitta* in this condition, *Virechana* was adopted with *TrivritLehya* ⁽¹⁰⁾. During the *Vishrama Kala*, *Abhyanga* with *MahanarayanaTaila* followed by *BhaspaSweda* was adopted. She had a total of 12 *Virechana Vegas* for which *Samsarjana Krama* of 3 days was carried out.

2. *Kushmanda Rasayana* ⁽¹¹⁾ post *Virechana* and *Samsarjana Krama* – Since she exhibited signs of mild depression due to her brother's sudden demise despite following strict diet, she was administered *Kushmanda Rasayana* as it has *Balya* and *Medhya* properties. It will also help in improving *Agni* by palliating the *Pitta*, which acts as a major cause for auto-immune diseases.

3. Capsule *Amalaki*- *Amalaki* has high concentration of Vitamin C which helps the body to produce norepinephrine and improve brain function. The phytonutrients and antioxidants present in the drug fights against free radicals and improves the cognitive ability, acts as immunomodulator and improved skin condition. ⁽¹²⁾.

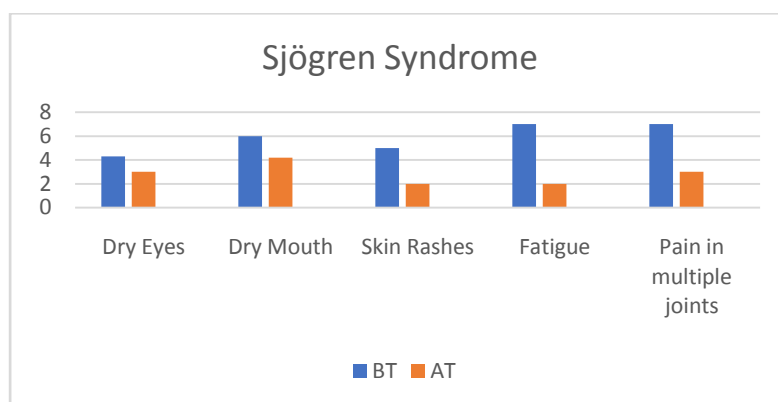
4. *Haridra Khanda* ⁽¹³⁾ - The formulation acts as an anti-allergic and immuno-modulatory preparation. The antioxidant property of the formulation makes it a good healer, especially for conditions of skin and allergies.

5. *Gandhaka Rasayana* ⁽¹⁴⁾ - This formulation helps in balancing the *Tridosha*. It has antibacterial, antifungal, antimicrobial, antiviral, demulcent and antipruritic properties and hence acts as a wonderful choice in skin diseases, and enhances immune potentiality.

V. Conclusion

Sjögren Syndrome is among the most common auto-immune disease majorly affecting middle aged women. Since there is no treatment for symptomatic relief and immune suppressant interventions are associated with various neurological, endocrinal, internal organ neoplastic complications. In Ayurveda *Doshopakrama* has the key role in therapeutic palliation of *Anukta vyadhis*. This condition can be understood as *Mukhashosha*

variety of *VatajāNānatmajaVikāra* and treated on the lines of *VataUpakrama*. The treatment protocol with *Shodhana* followed by *rasayana* measures resulted in good improvement in the Sjögren syndrome patient. Comparison of the results in terms of reduction in the symptoms of Sjögren syndrome Before and After *Ayurveda* treatment is as follows:



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Vijayendra G Bhat, et. al. "A Case Report On Management Of Sjogren's Syndrome Through Ayurvedic Modalities." *IOSR Journal of Nursing and Health Science (IOSR-JNHS)*, 11(4), 2022, pp. 01-04.