



Journal of Ayurveda and Integrated Medical Sciences

www.jaims.in

Indexed

An International Journal for Researches in Ayurveda and Allied Sciences





CASE REPORT October 2022

Ayurvedic management of Systemic Lupus **Erythematosus - A Single Case Study**

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ABSTRACT

Systemic lupus erythematosus (SLE) is a chronic autoimmune inflammatory disease. SLE is the disease with unknown etiology in which organs and cells undergo damage initially mediated by tissue-binding autoantibodies and immune complexes. In this paper, a patient diagnosed as SLE, which was managed successfully by Ayurveda treatment was discussed. A 39yr old female patient, visited OPD, with the complaints of rashes all over the body specially over the hands and legs and swelling all over the body specially on feet and hands and face since 6 years and mouth ulcers since 1 year. She was diagnosed as SLE from a higher medical centre with relevant investigations 6 years ago. And she was put on oral medications and steroids. As patient was not willing to continue with steroids any further, she alternatively opted for Ayurveda treatment. The condition was managed as per the principle of Vatarakta line of treatment. Manjishtadi Basti and other external therapy along with oral ulcer management have done for 15 days with oral medication prescribed during and after the treatment. The results of the treatment sustained almost for a year without any complications and flare up of symptoms.

Key words: Systemic lupus erythematosus (SLE), Vatarakta, Basti, Maniishtadi Kshara Basti

INTRODUCTION

Systemic lupus erythematosus (SLE) is a chronic autoimmune inflammatory disease. SLE is the disease with unknown etiology in which organs and cells undergo damage initially mediated by tissue-binding autoantibodies and immune complexes. It is characterized by the production of auto antibodies resulting from the dysfunction of 'T' cells and 'B' cells

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and dendritic cells. Dendritic cells activation and unabated secretion of IFN-alpha are the key features of the disease through their involvement in the capture and presentation of nuclear material to the auto reactive adaptive arm (T and B) lymphocytes leading to the subsequent production of anti-nuclear antibodies.^[1] A person is said to have SLE if any 4 or more of the following symptoms are present - Malar rash, Discoid rash, Photosensitivity, Oral ulcers, Nonreactive arthritis, Pleuritis/pericarditis, Renal Disorders Neurological Nephritis), manifestation, (Lupus Haematological manifestation and positive ANA tests.^[2]

Kandu (itching), Daha (Burning Sensation), Ruk (Pain), Toda (pricking pain), Sphurana (throbbing sensation) and Syava, Rakta, Tamra Twak (discolouration of skin) are clinical feature of Uttana Vatarakta.^[3] In Gambhira Vatarakta symptoms like Stabdhata with Shotha, Daha-Toda-Sphurana- Paka in Sandhi are present.^[4]

Based on the sign and symptoms and dosha involved in SLE in this present condition is similar to that of

ISSN: 2456-3110

Vatarakta, so it is managed with the line of treatment of *Vatarakta*.

CASE REPORT

Patient information and findings

A 39yr old female patient visited OPD on 19th January 2021, with the complaints of rashes all over the body specially over the hands and legs and swelling all over the body specially on feet and hands and face since 6 years and mouth ulcers since 1 year. Associated with blackish discolouration over the palm and the feet, general fatigue and occasional itching all over the body. She also presented with the history of pneumonitis 5yr ago.

The investigation done in November 2018 showed positive SLE-Alpha, and she was diagnosed with SLE, for which she was advised to take steroids orally, which she stopped taking from November 2020. Her MRI Brain (10-12-2020) reports - MR angio brain normal. CT renal angio - Showed minor lesions. Mild short segment stenosis of the renal artery at origin with normal distal opacification and calibre. Normal left renal artery and normal bilateral kidneys.

Consciousness	Intact		
Orientation	Well		
Nourishment	Moderately nourished		
Pallor	Present		
lcterus	Absent		
Cynosis	Absent		
Clubbing	Absent		
Lymphadenopathy	Absent		
Pedal oedema	Present		
ВМІ	27.68 kg/m ²		
Vitals			
Heart rate	86b/min		
Respiratory rate	14/min		

Table 1: General Examination

ВР	120/80 mm of Hg		
Temperature	97°F		
Systemic Examination			
CVS	NAD		
RS	NAD		
CNS	NAD		
GIT	Mouth ulcer – present		
Skin	Blackish discolouration and dryness on the dorsum of the palm and the fingers and toes of the feet		

CASE REPORT

Patient got admitted on 19th January 2021 and was started with Sadyo Virechana for the purpose of Koshta Shuddhi for one day with Trivrut Lehya and Triphala Kashaya, she had 13 Vegas, and followed by one day gap other treatments were started. Since Ama represents and inflammatory changes in the body, and looking the chronicity of the disease's treatments were divided into 2 phases. Teekshana Basti with *Manjishtadi Kshara* was planned in the 1st phase of the treatment due to the chronicity of the diseases along with Sarvanga Dhara with Panchavalkala and Dashamoola Ksheera Kwatha with Gomutra for 8 days. 2nd phase was Bruhmana line of treatment were Manjishtadi Ksheera Basti with Sarvanga Sashtika Shalli Pinda Sweda was given for 6 days. Throughout the course of the treatment Gandusha was advised to the patient for the management of oral ulcer. Combined with oral medications like tab Pravala Pancha Amrutha, Sinus 44 and Laghusoota Mishrana plus Avipattikara churna.

After 15 days of treatment the patient got discharged. Oral medications including *Amrutha Bhallataka Sarpi*, *Pravala Pancha Amrutha*, *Sinus 44*, *Sukumara Ghritha* with *Yashtichurna* for oral application and *Ora T*, *Jatyadi taila* and *Yashtimadhu Phanta* for *Gandusha* morning and evening respectively were advised as discharge medicines, along with *Pathya-Apathya* (do's and don'ts) were explained.

October 2022

ISSN: 2456-3110

Table 2: Treatment time line

Date	Days	Treatment	Medicine	Results
19/1/21	1days	Virechana	Trivrit Lehya (50g) and Triphala Kashaya (100ml)	(Koshta Shuddhi)
21/1/21- 27/1/21	2- 8days 7 days	Mild Abhyanga Sarvanga Seka	Chandanadi Taila + Manjishta Taila Panchavalkala Kwatha + Dashamoola Ksheera Paka Gomutra	Rash reduced Swelling & itching reduced about 30%
21/1/21- 27/1/21		Basti	Niruha Basti - Majishtadi kshara (6 Basti), Madhu – 80ml Lavana – 5g Brihat Saindhavadi Taila – 60ml Manjishtadi Kalka – 40g Kanji (80ml) + Chincha Swarasa (20ml) + Manjishtadi Kashaya (100ml) Gomutra –	
			Gomutra – (100ml) Anuvasana Basti - Brihat Saindhavadi – 90ml (7 Basti)	
28/1/21- 3/2/21	9- 15days	Mild Abhyanga	Chandanadi Taila +	Rashes, Swelling and itching

		Sarvanga Shashtika Shalli Pinda Sweda (SSPS)	Manjishtadi Taila	reduced more than 70%
28/1/21- 3/2/21		Basti	Manjishtadi Ksheera (3 Basti) Pancha Tikta Guggulu Ghrita (6 Basti)	
20/1/21- 31/1/21	2- 13days	Gandusha	Jatyadi Taila (morning) Yashtimadhu Phanta (evening) Application of Yashti Churna + Sukumara Ghrita after	Oral ulcer reduced within 6 days of traetment

CASE REPORT

DISCUSSION

Discussion on diseases

The common Symptoms of SLE includes chest pain when taking deep breathing, Fatigue, Fever with no other cause, General discomfort, uneasiness, or ill feeling (malaise), Hair loss, Sensitivity to sunlight, butterfly rash, swollen lymph nodes.

Gandusha

If we see specific symptoms^[5]

- Cutaneous manifestation Rashes, small ulcers over oral and nasal mucosa, lupus dermatitis and discoid lupus erythematosus.
- Renal Manifestation Nephritis,
- Nervous system manifestation cognitive dysfunction, including difficulties with memory and reasoning, headache.
- Digestive tract: Abdominal pain, Nausea, and Vomiting
- Heart: Abnormal heart rhythms (Arrhythmias), pericarditis

October 2022

CASE REPORT October 2022

ISSN: 2456-3110

 Lung: Coughing up blood and difficulty in breathing, pleural effusion.

Vatarakta in Ayurveda is explained as one of the example of Avarna Vyadhi. It could be understood based on the severity as Uthana and Gambhira Vatarakta, which gives the idea about the progression of the Vyadhi and involvement of different tissues and organ. Uttana Vatarakta involves Twak and Mamsa, Gambhira Vatarakta involves Rakta, Mamsa, Meda etc. Dhatu.^[6] While considering the symptoms of Vatarakta, Jwara, Trushna, Shyava-Tamra Twak, Shotha, Sandhi Daha-Toda-Sphurana, Raga Paka Bheda, Kandu, Kledayukta Shotha, Vedana Yukta Sandhi Shotha, Sphota and Shwasa and many other symptoms develops.

As the signs and symptoms and *Sthana* (Skin, connective tissue, renal, lungs etc.) and *Dosha* are more relatable to that of *Vatarakta*, treatment protocol is adopted accordingly. Importance is given for *Basti Chikitsa* which is said to be best in treatment of *Vatarakta*.^[7]

Discussion on the treatment

At first, for the purpose of *Koshta Shuddhi, Sadyo Virechana* was given. After doing *Sarvanga Abhyanga* and *Bashpa Sweda* in the morning, *Trivrit Lehya* was given followed by *Triphala Kashaya*. It is attributed with the property of *Virechana*, thus helps in clearing out the mala from the *Koshta*, thus helps in *Koshta Shuddhi*.

After *Koshta Shuddhi* considering the chronicity of the disease, *Niruha* with *Manjishtadi Kshara Basti*^[8] and *Brihat Saindhavadi Taila*^[9] *Anuvasana Basti* was administered along with Sarvanga Abhyanga followed by Sarvanga Dhara.

Lavana in the Basti due to its Teeshana and Suskshma Guna helps in taking the other drugs from the Basti directly into the systemic circulation and helps in clearing the channel due to its Margavishodhana property. Honey in the Basti due to its Yogavahi (without changing its own properties, carries the effect of drugs added to it) nature helps in enhancing the properties and action of the substances used in the Basti. Manjishta in the Basti has Raktashodhaka and Rakta Prasadaka properties which in turns helps in reducing the inflammation and purifies the blood. Gomutra is Katu Rasa, Katu Vipaka, Ushna Virya, Laahu Ruksha Tikshna Guna, has Kaphavata Shamaka Lekhana. Pachana. Anulomana. Deepana, Malashodhaka and Amapachana properties. Due to which it helps in reducing the inflammation and is also considered oedema. It as good immunomodulator. Chincha Swarasa and Kanji both has Amla Rasa, Ushna Virya and Amla Vipaka and considered as best for Vatanulomana. In Brihat Saindhavadi Taila majority of the drugs are having Ushna Virya. Ushna Virya helps in Sweda-Avarodh, Shotha and Vibandha. Rasna is having Vatashamaka, Amapachaka, Vedanashamak, Shothagna properties. The base of oil is Eranda Taila having Vatakaphahara, Deepana, Bhedana, Amasodhana, Srotovisodhana, Sothahara, Kusthaghna etc. properties.^[10]

After doing Amapachana and Vataanuloma, Bruhmana Chikitsa was adopted by means of Niruha Basti with Manjishtadi Ksheera Basti. Ksheera is considered to be Bruhmana, Snigdha, Balya and Ojovardhaka and Vata Pitta Shamaka in nature. Anuvasana with Panchatikta Guggulu Ghritra^[11] which has Nimba, Guduchi, Kantakari, Guggulu, Amalaki, Pippali Moola etc. drug which are anti-inflammatory in nature and works on urinary system thus helps in removing swelling from the body.

Mode of Action of Basti

From the above-mentioned *Guna Karma* of the drug used in *Basti* probable mode of action can be understood as, *Kshara* used in *Basti* does the *Srotoshodhana* and *Vataanulomana*. *Ksheera* with its *Guna* does the *Vata*, *Pitta* and *Rakta Shamana*. *Manjishta* helps in purifying the *Rakta*. *Brihat Saindhavadi Taila* and *Panchtikta Guggulu Ghrita* does the *Vatanulomana* and *Shothahara* action. Thus, it helped in breaking the *Samprapti* of the *Vyadhi* by removing the *Avarna* and correcting vitiated *Vata*, *Pitta* and *Rakta* with the anti-inflammatory, immunomodulatory and *Raktaprasadana* effect.

ISSN: 2456-3110

CASE REPORT October 2022

Dhara and *SSPS* after application of *Candanadi* and *Manjishtadi Taila*, reduced swelling, itching and discolouration of the skin.

CONCLUSION

SLE is a chronic autoimmune inflammatory disease, which could affect different system in the body, here based on the *Doshas* involved and *Adhisthana* of the *Vyadhi*, it's been corelated with the *Vatarakta*. *Manjishtadi Kshara* and *Ksheera Basti* along with other external treatment helped in attaining *Srotoshuddhi*, *Raktaprasadana* and clearing out the *Dosha*. After the treatment and oral medication patient felt relief from her symptoms for about a year after which she had flare up of the symptoms and got admitted again on 21st December 2021 for the treatment again.

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How to cite this article: Riddhi Sangani, Prajwal Narayan, Ganesh Puttur. Ayurvedic management of Systemic Lupus Erythematosus - A Single Case Study. J Ayurveda Integr Med Sci 2022;9:206-210.

Source of Support: Nil, **Conflict of Interest:** None declared.

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