



Case Study

AYURVEDA A RAY OF HOPE FOR MULTIPLE SCLEROSIS W.S.R. TO *ASTHI MAJJA GATA VATA*: A CASE STUDY

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ABSTRACT

Multiple sclerosis (MS) is a demyelinating disease in which the insulating covers of nerve cells in the brain and spinal cord are damaged. The course of MS is usually relapsing-remitting and sometimes progressive. It is the commonest inflammatory- demyelinating disease of the CNS and the most frequently occurring cause of non traumatic neurologic disability in young and middle aged adults. Immunosuppressant or cortico-steroids are only available treatments in modern science, Ayurveda only the ray of hope. In Ayurveda, Multiple Sclerosis can be correlated with *Asthi - Majjagatavata*. **Aim:** A case study had been done to find effective management for MS. A 35 year old female patient came to Panchkarma OPD, Dr. S.R. Rajasthan Ayurved University, Jodhpur was suffering from weakness, numbness and burning sensation in both arms or legs and numbness in abdominal region and lack of coordination for 18months. She was diagnosed case of multiple sclerosis (kurtzke disability grade Five) had been given Ayurvedic medicine as well as *Panchkarma* shown encouraging results. **Conclusion:** Patient was observed for symptomatic improvement based assessment done by questionnaire, also observed for clinical examination. Patient was also observed for complication during whole course of treatment, untoward complications were not seen. Conservative management of MS through Ayurvedic principles improved the quality of life and decreased dependency of patient. **Result:** Patient showed improvement kurtzke disability grade five to grade two.

KEYWORDS: Multiple sclerosis, MS, *Asthi - Majjagatavata*, *Panchkarma*.

INTRODUCTION

Multiple sclerosis (MS) is a chronic autoimmune, T-cell-mediated, inflammatory disorder of the CNS. Multiple plaques of demyelination are found throughout the brain and spinal cord, occurring sporadically over years.^[1] Approximately, 350 thousand individuals in the United States of America and 2.5 million individuals worldwide are affected with MS. The occurrence in females is three-fold more vis-à-vis men. Typically, the age of onset is between second and fourth decade (slightly later in men than in women), but the disease can present later too. MS was considered to be uncommon in Indian subcontinent, but the widespread availability of MRI has led to an increased recognition of MS in India.^[2] Multiple sclerosis is a T- cell-mediated autoimmune disease that causes an inflammatory process mainly within the white matter of the brain and spinal cord. The etiology of MS is complex and not yet fully understood. Here is a case of secondary progressive multiple sclerosis (SPMS), diagnosed as *Asthi-majjagata Vata* according to Ayurveda. As far as allopathic treatment is concerned, excess usage of

corticosteroids make the MS patients more ill health. Ayurveda offers the safe and effective form of therapy for Multiple sclerosis. in this case study the patient received Ayurvedic treatment along with *Panchakarma* therapy and showed marked remission in the symptoms.

MATERIALS & METHODS

Case report: A 35 years old female came to our Panchakarma OPD (dated 7/5/18 OPD NO. 20180000110) Dr. S.R. Rajasthan Ayurved university, Jodhpur with complaints of an electric - shock like sensations radiate down the trunk and limbs on neck flexion (Lhermitte's sign).^[3] Pain, weakness, numbness and burning sensation in both arms or legs and numbness in abdominal region and lack of coordination for since last 18months.

Past History: Patient started suffering from numbness and burning sensation in both lower extremities in the last two years for which she taken allopathic treatment for 1 year, But, the symptoms progressed gradually.

1st attacks (dated 22/6/2016) of B/L LL paresthesia present and recover over period of 2 month.

2nd attacks (20/9/2016) of UMN quadriplegia with sensory with bowel/bladder involvement.

Between attacks, symptoms may go away completely, but permanent neurological problems often persist, Attacks and fulfilling Dissemination in space criteria on MRI with positive CSF oligoclonal bands, Patient is diagnosed to have relapsing and remitting MS.

Examination of patient: Physical examination revealed that vitals (patient conscious, well oriented, pulse - 80 beats per minute, blood pressure - 100/80 mm Hg, respiration rate - 16 per minute, respiration and cardio - vascular system within normal limits) were stable. Routine blood and urine investigations were within normal limits (Hb-12 g/dL, WBC- count 7490 / cmm, Random plasma glucose level -110.05 mg/dl). Patient sample is negative for anti nuclear antibody (ANA).

Samprapti (pathology): Acute relapses are caused by focal inflammation causing myelin damage and conduction block. Recovery follows as inflammation subsides and remyelination occurs. When damage is severe, secondary permanent axonal destruction occurs. Progressive axonal damage is the pathological basis of the progressive disability seen in progressive forms of MS.

Diagnosis

MRI of brain and spinal cord is the definitive investigation. Few other neurological diseases have a similar relapsing and remitting course. The diagnosis of MS Requires two or more attacks affecting different parts of the CNS: that is, dissemination in the time and spaces, and exclusion of other possible causes.^[4]

High resolution T1-and T2- weighted Images of magnetic resonance scan (MRI) of brain done 2/5/2018, showed Multifocal asymmetric cerebral lesions in juxta cortical periventricular white matter along Callososeptal margin, brain stem and cord lesions as described, Consistent with demyelinating lesions likely (MS). Subacute lesions at left Periolandic, D4 and D9 cord level.

As compared to previous scan dated 24/10/2016, there is new lesion are seen at right Callososeptal margin, temporal region right side of brain stem, Periolandic region and C3-C4, D1, D4 and D9 level. Few lesion disappeared at D5, D6 and D10-D11 level, suggest progression of disease. Some 75% of patient with relapsing -remitting MS will eventually evolve into a secondary progressive phase by 35 years after onset.^[5] History and support from investigation, particularly MRI it was a case of Secondary progressive MS (SPMS). According to Kurtzke expanded disability status scale (EDSS).^[6] it

was case of grade 5 indicating disability severe enough to impair full daily activities and ability to work a full day without special provision. Able to walk without aid or rest for 200 meter.

In view of Ayurveda it is predominantly a Vata disease. In pathogenesis, systems of *Asthimajjavaha srotas* - central nervous system and muscular system are involved with aggravation of Vata Dosha.^[7]

Treatment Administered

Patient received Ayurvedic treatment like -Powder of *Ashwagandha* -5g with honey twice of daily and *Rasnasaptakwath* twice daily before meal With luke warm water. *Yogarajguggulu* (500mg) with *Balarishta* (30 ml) equal amount of water twice daily after meal both with luke warm water and application of *ksheerbala* and *Dashmooltaila* to the whole body regularly. 1 liter cow milk per day was also advised. Patient received treatment from may 2018 to September 2018. Weakness, numbness and burning problems are totally subside and then patient received Panchkarma therapy for 28 days -

- I. Shirodhara (Ksheerdhara) with (*Dashmoolkwath*-400gm + ksheer (milk)-1500ml) per day 45 mintue continue for 14 days.
- II. Sarvanga abhyanga with (*Ksheerabala tail & Dashmool tail*) per day 45 mintue and Nasya karma with *Anu tail* in dose of 6 drops each nostril for 14 days.

Complete treatment duration - 6 month.

Follow up - every 2 weeks.

Treatment Outcome

After first two weeks of treatment patient showed mild reduction in pain and weakness in both lower extremities and burning sensation, but the other symptoms were similar. After 4 weeks of treatment pain and weakness in both lower extremities were moderately reduced. After 10 weeks of treatment improvement in numbness in abdominal region. After 20 weeks of treatment patient did not suffer from pain, weakness, numbness and burning problems But patient got no relief in electric - shock like sensation that occur with certain neck movements and coordination. So due to above complaint she was admitted in Panchkarma ward. After 30 weeks of treatment electric -shock like sensation was very mild and improvement in coordination. kurtzke EDSS score reduced grade 5 to grade 2.

Grade 5 - Indicating disability severe enough to impair full daily activities and ability to work a full day without special provisions and able to walk without aid or rest for 200 meters.

Grade 2 - Indicating minimal disability in one functional system.

DISCUSSION

Multiple sclerosis (MS) is a potentially disabling disease of the brain and spinal cord (central nervous system). All over the world, various institutes are conducting research for the cure of this dreaded disease. Even though complete cure is not possible, Ayurvedic *Panchkarma* and associated therapies are useful to limit the disease process and give comfort to the patient.^[8]

Role of internal medicine

Aim of treatment in this case was ensure complete recovery from the symptoms caused by the disease condition through cleansing and rejuvenating the body, mind and soul to feel a better individual. *Yograjuggulu* is famous classical medicine useful in *Vata* imbalance disease affecting bone, joints and bone marrow. It increase digestion power, complexion, strength and immunity.^[9] *Balarishta* is a liquid Ayurvedic medicine used mainly in neurological condition. It improves strength of nerves, muscles and bones. It is an effective medicine for tingling and numbness problems.^[10] Both drugs also have rejuvenative and immuno-modulatory properties, which helps in tissue regeneration. Due to anti-inflammatory properties and analgesic action *Rasnasaptakwath* reduces muscle and joint pain. It improves digestion. So, here all drugs are very useful for present case.

Probable mode of action of Panchkarma procedure

The main ingredient of *Ksheera Dhara* treatment is milk. Benefits of *Ksheera Dhara* are for proper blood circulation of the body and relaxation of the mind, as well as lubricating the joints, relieving pain, spasms and stiffness of the muscles and joints *Dasamoolakwath Ksheera Dhara* is one of Ayurveda's best medicines which guarantees the disposal of nervous diseases and it is particularly useful to control the entire issues identified with nerves. *Abhyanga* directly acts on muscles and makes them strong. The root of *Mamsavaha Srotas* is *Snayu* (ligaments), *Tvacha* (skin) and *Raktavahini* (blood vessels). So here, *Abhyanga* is done over *Tvacha* and *Snayu* and also it involves *Raktavahini*. So here, direct benefit is achieved at *Mamsavaha Srotas*. *Abhyanga* nourishes deeper *Dhatu*s also. Here, one thing we can say that *Abhyanga* makes the muscles strong and thus get the stable joint. *Ksheerbala Taila* is indicated in the management of eighty types of *Vata Vyadhi*.^[11] *Dashmool tail* mainly act on *Vata Dosh*a and reduces its aggravation.^[12] In this case *Abhyanga* of *Dashmool* and *Ksheerbala tail* gives relief from pain, stiffness, inflammation and burning problems. *Anutaila* is a very ancient Ayurvedic preparation which is

commonly used for *Nasya karma* i.e. Errhines. Regular practice of *Anutaila Nasya* regains the sharpness of the sense-organs.^[13] *Anutaila* is *Vataghna*, *Bruhana* and *Snehan*. It is *Sukshmasrtotogami*. Profuse secretions occur after administration of *Anutailanasya*. Chest, head, pallet and throat is invaded with *Kapha Dosh*a. *Anutaila* firstly mobilizes the *kaphadi Dosh*as from these *Sthanas* and then it acts there as *Bruhana*. Oil reaches to minute channels and removes all the *Dosh*as. The *Sneha* reaches in the *Srotas*as, oleation and strengthening action takes place on ligaments and tendons of upper part of the body.

CONCLUSION

The strength of Ayurveda in treating neurological disorders is globally appreciated. Ayurvedic treatment for multiple sclerosis takes a comprehensive approach in natural health care to remove the imbalances in the body. Among the various Ayurveda medicine, Various *Panchkarma* procedures such as *Shirodhara*, *Abyanga* and *Nasya* proved to be effective for treating MS patient. Drastic improvement can be seen from the above case study. Both *Samshodana* and *Shamana Chikitsa* play an important role to improve the activities of Daily living of a MS Patient.

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Cite this article as:

Sarlagwala, Mahesh Kumar Sharma, Gyan Prakash Sharma. Ayurveda A Ray of Hope for Multipal Sclerosis w.s.r. to Asthi Majja Gata Vata: A Case Study. International Journal of Ayurveda and Pharma Research. 2019;7(2):76-79.

Source of support: Nil, Conflict of interest: None Declared

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