

Role of Matra Basti and Akshitarpan in the Management of Sjogren's Syndrome W.S.R Vatadhikya Vatarakta: A Case Study

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ABSTRACT

Sjögren's syndrome, characterized by lymphocytic infiltration of salivary and lacrimal glands leading to glandular fibrosis and exocrine failure with Clinical manifestations of keratoconjunctivitis sicca, resulting from inadequate lubrication due to inflammatory infiltration of lacrimal glands, and xerostomia, manifesting as a dry mouth. In Ayurveda patient's symptomatic representation can be correlated with *vataadhikiya vatarakta*. In the present case report, a 50-year-old female Lucy Chaudhary from Noida, Uttar Pradesh with complaints of dry eyes, dry mouth and pain in multiple joints with generalized weakness for the past three years. Previously she had taken allopathic treatment, but she did not have any relief. The patient was managed with *Panchkarma* procedures including *Matra Basti* and *Akshi Tarpan* for 16 days with an interval of 8 days. The therapy got its effective results in treating Sjögren's syndrome which depicts that Ayurveda therapeutic protocols can be successfully adopted in the case of Sjögren's syndrome.

Keywords: *Sjögren's syndrome; vataadhikiya vatarakta; Panchkarma*

INTRODUCTION

Sjögren's syndrome, characterized by lymphocytic infiltration of salivary and lacrimal glands leading to glandular fibrosis and exocrine failure, presents a complex challenge in modern medicine⁽¹⁾. This autoimmune disorder predominantly affects individuals between 40 to 50 years of age, with a striking 9:1 female to male ratio. Clinical manifestations include keratoconjunctivitis sicca, resulting from inadequate lubrication due to inflammatory infiltration of lacrimal glands, and xerostomia, manifesting as a dry mouth. Additionally, patients may experience symptoms such as fatigue, Raynaud's phenomenon, generalized osteoarthritis, polyarthralgia, and skin rashes⁽²⁾. Despite advancements, modern medicine lacks disease-modifying treatments for Sjögren's syndrome, relying primarily on symptomatic management.

However, Ayurveda offers a promising alternative approach for managing Sjögren's syndrome, termed as *vataadhikiya vatarakta* in Ayurvedic terminology. Key *panchakarma* modalities like *Matra basti* and *akshitarpan* play pivotal roles in alleviating symptoms and reversing the underlying pathology. *Matra basti*, using formulations like *Yastimadhuadhi tailam*, and *akshitarpan*, employing *Jeevantiyadhi ghrita*, are particularly effective.

Yastimadhu (*Glycyrrhiza glabra*) exhibits *vata-pitta shamaka* properties, addressing the *vata-pitta adhikiya* and *kapha kshaya* imbalances associated with Sjögren's syndrome. It acts on muscarinic receptors, stimulating gland secretions

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and mitigating dryness. *Jeevantiyadi ghrta* possesses *chakshushya* and *snehana* properties, providing lubrication and nourishment to the eyes. Its anti-inflammatory effects inhibit the release of cytokines by T-cells, thereby attenuating inflammatory changes in dry eye.

In our investigation, we evaluate the efficacy of Ayurvedic interventions in managing dryness of the eyes and mouth, polyarthralgia with stiffness as well as the Schirmer tear test outcomes in patients diagnosed with *vataadhkiya vatarakta* (Sjögren's syndrome). This holistic approach aims not only to relieve symptoms but also to address the root cause of the condition, offering potential long-term benefits to patients.

CASE PRESENTATION

A 50-years-old female Lucy Chaudhary from Noida, Uttar Pradesh, patient consulted in the outpatient department of Panchkarma in the Institute for Ayurved Studies and Research and Hospital, SKAU, Kurukshetra with chief complaints of dry eyes, dry mouth and pain in multiple joints with generalized weakness for the past three years. Previously she had taken Tab. Methotrexate 15mg weekly, Tab HCQS 200 mg OD, refresh tear eye drops 3 times a day and Tab. Folic acid 5mg daily, but she did not have any relief. She had stopped all these medicines 6 month before coming to the Ayurveda hospital. Patient's Appetite, Bowel and urine was normal. She had a little disturbed sleep. There was a family history of Rheumatoid arthritis in her mother. There was no history of hypertension, diabetes mellitus or any other illness. There was no significant past surgical history. Considering the all symptoms, she was diagnosed as a case of Sjögren's syndrome.

CLINICAL FINDINGS

The patient was examined based on *Ashtavidha Pariksha* (~eight fold examination), i.e. Nadi (~pulse) was 83/min, Mala (~stool) was Prakrita (~normal), Mutra (~stool) was Prakrita (~normal), Jihva (~tongue) was Prakrita (~normal), Shabda (~speech) was Prakrita, Sparsha (~touch) was Ruksha (~dry) and Khara (~roughin touch), Drik (~eye) was Ruksha (~dry), and Akriti (~built) was Madhyama (~medium). Blood pressure was 130/70 mmhg, temperature was 97° F and Respiratory rate was 12/min. patients Haemoglobin was 11.2 gm% and ESR was 45 mm/hr. In addition, the patient was also examined on subjective parameters, which include parameters such as *Ruksha Akshi*, *Ruksha Mukh* and Schirmer test. [Table 1]

Table 1: Assessment Parameters:

Parameter	Severity of sign and symptoms	Score
<i>Ruksam Akshi</i> (Dryness of the eye)	No dry eyes	0
	Stickiness in eyes	1
	Mild dry eyes	2
	Moderate dry eyes	3
	Severe dry eyes	4
<i>Ruksam Mukh</i> (Xerostomia)	No dryness in the mouth	0
	A feeling of stickiness in the mouth	1
	Mild dryness in the mouth	2
	Moderate dryness in the mouth	3
	Severe dryness in the mouth	4
<i>Shoola</i> (polyarthralgia)	No Pain	0
	Mild Pain	1
	Moderate Pain	2
	Severe Pain	3
	Very Severe pain	4
<i>Stabdhata</i> (Stiffness)	No Stiffness	0
	Mild Stiffness	1
	Moderate Stiffness	2
	Severe Stiffness	3
	Very Severe Stiffness	4
Schirmer test	Greater than 15mm wetting	0
	10-15mm wetting	1
	5-10mm wetting	2

	0-5mm wetting	3
	No wetting	4

DIAGNOSTIC ASSESSMENT-

The patient was diagnosed on the basis of symptomatic representation and laboratory investigations. Laboratory investigations included Anti-nuclear antibody test (ANA), anti-SSA and anti-SSB antibodies. The test results shows that ANA test was positive and the findings of anti-SSA and anti-SSB positive was also above normal level. which confirms the diagnosis of the patient as Sjögren's syndrome.

THERAPEUTIC INTERVENTION

The treatment provided consists of *Panchkarma* procedures (*Matra Basti and Akshi Tarpan*). The details of the treatments are depicted in table 2. Along with the treatment patient was advised to include *Purana Shali, Mudg, Goghrita, Godugdha, Jangala Mamsa, Patola, Vastuka, Dadima, Amalaki* etc. in her diet and avoid excess *amlā, lavana, Katu, Vidahi, Guru Ahara, Tila, Kulatta* and *Madya*. Patient was also advised to take proper rest.

Table 2: Therapeutic intervention given to the patient

Date	Days	Therapeutic intervention
2/03/2024-9/03/2024	0 th day to 8 th day- First cycle of therapy	<i>Matrabasti</i> with 60 ml <i>Yashtimadhuadi Tailam</i> and <i>Akshi Tarpan</i> with <i>Jeevantyadi ghrita</i> (in required dose) was given
8 days Gap (patient was on observation)		
18/03/2024- 25/03/2024	16 th day to 24 th day – Second cycle of therapy	<i>Matrabasti</i> with 60 ml <i>Yashtimadhuadi Tailam</i> and <i>Akshi Tarpan</i> with <i>Jeevantyadi ghrita</i> (in required dose) was given

FOLLOW UP AND OUTCOMES

The treatment was continued for 16 days with an interval of 8 days. The changes observed at regular intervals are placed in table 3.

Table 3: Assessment of each follow-up

Parameters	Score	First Cycle		Second cycle	
		BT (0 TH day)	AT (8 th day)	BT(16 th day)	AT(24 th day)
<i>Ruksam Akshi</i> (Dryness of the eye)	0-4	4	3	3	1
<i>Ruksam Mukh</i> (Xerostomia)	0-4	2	1	1	0
<i>Shoola</i> (Polyarthralgia)	0-4	3	2	1	0
<i>Stabdhatta</i> (Stiffness)	0-4	2	2	2	0
Schirmer test	0-4	4	3	3	1

DISCUSSION

Sjogren's syndrome can be conceptualized as a *vataadhikya vatarakta*. *Vataadhikya Vatarakta* is characterized by dryness of eyes and mouth which is indicative of *ruksha guna of vata (vataadhikya)*. Lymphocytic infiltration in exocrine

gland represents *rakta dushti* and polyarthralgia represents *shola guna of vatadhikya*. This condition arises from the vitiation of both *Vata dosha* and *Raktadhatu* (blood tissue) in the body⁽³⁾. The aggravated *Vata* becomes obstructed by the vitiated *Rakta*, leading to a cyclical pattern of aggravation where the vitiated blood further exacerbates the imbalance of *Vata dosha*. This continuous cycle of aggravation contributes to the persistence and worsening of symptoms associated with *vatadhikya Vatarakta*. Consequently, manifestations such as joint pain (*Sandhi shool*), stiffness (*stabhata*), dryness (*ruksham*). In addition to symptoms such as dryness of eyes and mouth, polyarthralgia with stiffness, the verse on general symptoms of *Vata* disorders also highlights manifestations like nasal and ocular afflictions, as well as throat complications, indicating a broader systemic involvement in the advanced stages of *Vata* disorders.

Snehana, *Swedana*, and *Mridu sanshodhan* are outlined as initial therapeutic measures for balancing *Vata dosha*. *Basti chikitsa* holds significant importance in addressing *Vata* disorders. Dietary recommendations often include the consumption of foods with a sweet taste (*Madhur rasatmak ahara*) and adherence to warm lifestyle (*ushan vihara*)

When the *Vata dosha* becomes aggravated, it increases the dominance of the *Akash mahabhuta* (space element), leading to obstruction or impairment along the path of tear secretion, known as *Ashru marga awroddh*. Consequently, there's a reduction or dysfunction in tear production, resulting in dryness of the eyes. This vitiated *Vata dosha* contributes to dryness (*Rukshata*), pain (*Toda bheda*), and symptoms like difficulty in opening the eyes (*Kruchlonmilani*).

As *vatadhikya Vatarakta* is primarily a disorder dominated by *Vata* with involvement of *Rakta*, the mainstay of treatment for *Vata dosha* involves *basti* therapy. According to Charaka Samhita, *basti* therapy has a profound effect in addressing *Vata* disorders. It is described that the potency of the administered *basti*, upon entering the *Pakvasaya* (large intestine), draws the vitiated *Doshas* residing in the body upwards, from the feet to the head. This action is likened to uprooting a tree, where the destruction of the root leads to the demise of all its branches, leaves, and fruits. In a similar manner, *basti* therapy is believed to eradicate the root cause of the disorder, thereby alleviating symptoms and restoring balance to the body⁽⁵⁾.

Yastimadhu, also known as *Glycyrrhiza glabra*, possesses properties that effectively balance the *pitta dosha* due to its *sheeta virya* and *madhur vipak*, while also pacifying *vata dosha* with its *guru, snigdha*, and *madhur guna* attributes. Specifically, its constituents, liquiritin and iso-liquiritin alkaloids, target muscarinic receptors, enhancing gland secretions. This action aids in alleviating symptoms and addressing the underlying causes of conditions like Sjögren's Syndrome, which typically arise from an imbalance of *vata-pitta* and diminished *kapha dosha*. *Yastimadhu* is indicated in various yoga prescribed for *Samhita(Vatarakta chikitsa in Charaka)* ⁽⁶⁾

Akshitarpana, a therapeutic procedure, provides exceptional relief and comfort to the eyes. It enhances blood circulation, nourishes the ocular tissues, and effectively balances *dosha* imbalances. Additionally, it serves as a muscle relaxant, further promoting relaxation and rejuvenation of the eyes.

Jeevantiyadi ghruta contains ingredients with sweet (*Madhura*) and cooling (*Sheeta*) properties, making it effective in pacifying both *Vata* and *Pitta doshas*. Similarly, the herbs included in *Jivaniya Mahakashaya*, as described by Charaka, also possess *Vata* and *Pitta* pacifying properties, along with blood purifying (*Raktashamaka*) qualities⁽⁷⁾

The results shown according to the assessment parameters that there is a good symptomatic relief in all the symptoms.

CONCLUSION

In Ayurveda, Sjögren's Syndrome can be correlated with *Vatadhikya Vatarakta*, where the treatment approach primarily focuses on pacifying *Vata* and *Pitta doshas*. This case study highlights the effectiveness of using *Yastimadhuadi tailam* and *Jeevantiyadi ghruta* for *Basti* (medicated enema) and *Akshitarpana* (eye treatment), respectively. The results obtained from this treatment regimen demonstrate promising outcomes in managing Sjögren's Syndrome. This emphasizes the significance of *Panchakarma* procedures in the holistic management of conditions like Sjögren's Syndrome, which involve addressing *dosha* imbalances through therapeutic interventions.

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