

A case report of connective tissue disorder- an Ayurvedic approach

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Abstract.

Connective tissue disease (CTDs), though rare in kids, is an important cause of morbidity. By general physician mostly misunderstood by rheumatoid arthritis. most of them involve multiple organ systems and are associated with presence of auto antibodies. Systemic lupus erythematosus (SLE) is the most common CTD, the others being Juvenile dermatomyositis, systemic sclerosis, mixed connective disease and Sjogren syndrome. The clinical presentation of CTD in childhood can range from an acute severe illness mimicking a serious infection, to an insidious onset of disease with gradual accumulation of symptoms and signs over weeks to months. The presence of multi-system involvement, evidence of inflammation and lack of any obvious cause should alert a

clinician to the possibility of CTD. Diagnosis is usually clinical and features like malar rash, Raynaud's phenomenon, photosensitivity, oral ulcers suggest a possibility of CTD. Presence of autoantibodies like anti-nuclear antibodies etc. provide supportive evidence to a diagnosis of CTD. Most CTDs are treated with immunosuppressive drugs with good success. The rationale for using Ayurvedic medicines is to restore normal life style and reverse the condition with lesser side effects. Patient of 11 years old was treated with an Ayurvedic formulations to replace the modern drugs. The patient got significant result with the help of Ayurvedic medicines.

Key words:

Collagen disorder, Autoantibodies. Autoimmune diseases. Ayurvedic Treatment.

Introduction---

Connective tissue diseases include conditions where the immune system fails to recognize self-antigens leading to production of “auto antibodies” and subsequent damage to several organs and tissue systems. Connective diseases include SLE, Scleroderma, Dermatomyositis, Polyarteritis Nodosa and MCTD; the most common one being SLE with a prevalence rate of 53/100,000 in USA¹ and 14-60/100000 in India². Autoimmune diseases represent a significant health burden in the developed world affecting 5-10% of the population in the west³.

In India a study shows that 11% of causes for Pyrexia of unknown origin (PUO) as connective tissue disorders which mostly remain undiagnosed⁴. Though infectious disease is a leading cause of PUO, it is being closely followed by CTDs with SLE being predominant followed by Rheumatoid arthritis⁵. India reports much lower survival rates for CTD than the west². Many Indian studies show that the common CTDs like SLE, Sjogren's syndrome, or Scleroderma have a female predominance^(2,6,7). They have also studied the common clinical features and associated autoantibodies for each disease.

Ayurvedic fraternity is using limited ayurvedic drugs for autoimmune diseases and at marginal extent.

CASE HISTORY

This was the case of eleven-year female girl, came to OPD with complaints of fatigue, joint pain, swelling, inability to walk and fever. In history taking she was dependent on steroid Wysolone 5mg daily, Acetoaminophene 250 Mg daily, Folic acid 5mg daily plus immunosuppressant Tablet AZR 25 Mg daily.

On examination features like specially pain and swelling on joints, anorexia was revealed. The patient was asked for the investigations such as Widal test, Complete Blood Count (CBC), ANA (Anti-nuclear antibodies) C. Reactive protein, ASO (Ant Streptolysin titer) and RA factor.

Results of the reports as follows,

- C Reactive protein –16.54 IU/L,
- CBC- Shows Haemoglobin-11.0 gm%, WBC-5.16, Hamematocrit-44.3 %, Platelet count-196000/cum, Neutrophils 63%, Lymphocytes-31%,
- ANA Test-by Elisa method-34.59 AU/ML
- RA factor was 11.10 IU/L,
- ASO (AntiStreptolysin titer) – 67-57 IU/ML
- Widal test-Significant titer more than 1:80 dilution.

Only ANA test and Widal test were on higher side.

In Ayurveda there is no direct reference of Collagen tissue disorder or its related auto immune disorder is identified. But Treatment was designed as per the clinical symptoms explained by patient. The aim of the treatment was to reduce the fever, joint pain, swelling and increased appetite.

The combination of treatment was as follows,

Mahasudarshan kwath⁹ -5ml TDS

Gulvel satva⁹ - 250mg BD

Laghu malini vasant¹⁰ 125mg BD

Akik bhasma +Praval bhasma+

Godanti Bhasma^{11,12,13} 125 mg each BD

Yashtimadhu Churna¹⁴ 500 Mg BD

The above treatment was planned for 3 months period.

The patient was asked for pathyapathya like Pathya - Jwari, Ghee, Bajra Roti. lukewarm water Apathya- Potato, Dal preparations, Curd, Fried items.

The patient was asked to stop modern medications with immediate start of the ayurvedic medications. Only Wysolone was tapered and stopped after 7 days.

Patient started very good improvement after 1 month of treatment. Her joint swelling and pain were reduced remarkably,

body temperature was also coming to normal level. Patient started to feel energetic, her independent movements were also increased. Patient felt good appetite. Her trust on ayurvedic treatment. The above treatment was continued for 3 months.

The patient was asked to do main ANA positive test after 3 months.

The ANA test result was shown --- 25 AU/ML

Widal test was negative.

Discussion-

Use of ayurvedic medicine is increasing by common man day by day. There is a segment called autoimmune disorder is really untouched by ayurvedic vaidyas. Patient receiving treatment from modern doctors having side effects at higher extent. Specially longer use of steroids can create threat to patient's life. Ayurvedic medications not only reduces the symptoms but improve the quality life of the patient. Patient can get relief for longer duration with lesser side effects. Need of hour is to increase the confidence of patients on ayurvedic medications having prominent results in autoimmune diseases. More data on larger number of patients can increase the use of ayurvedic medicines in auto immune

disorders like collagen tissue disorders.

Conclusion-

The present study indicate that the selected Ayurvedic medications were efficacious in collagen tissue disorder. The present medicines doesn't produce any side effects. More clinical trials with bigger sample sizes are required to make concrete decision so that use of such ayurvedic medicines can be increase by ayurvedic vaidyas for beneficial use of these patients.

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Cite this article:

A case report of connective tissue disorder- an ayurvedic approach
 Prashant Sakharam Bhokardankar, Sandeep G. Mane, Bhupendra P. Khairnar
 Ayurline: International Journal of Research In Indian Medicine 2019; 3(4) : 1- 4