ROLE OF PANCHAKARMA AND RASAYANA THERAPY IN HIV DEBILITATED PATIENT: A CASE REPORT

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ABSTRACT

HIV is a retrovirus which weighed down the immunity of a hale and hearty person and causes of a syndrome called AIDS that means acquired immune deficiency syndrome. AIDS is a condition in humans in which progressive failure of the immune system allows life-threatening opportunistic infections. HIV infects vital cells in the human immune system such as T Helper cells (CD4 + T cells mainly), macrophages and dendritic cells. HIV infection leads to low levels of CD4 + T cells through a number of mechanisms. A 43 years, male patient, sale’s man by occupation, known case of retroviral disease admitted in I.P.D of I.P.G.T. & R.A. Jamnagar, Gujarat, with the complains of loss of movement in left half of body, weight loss of 22kg, chronic cough, loss of appetite and deep pressure soars over right Gluteus medius, Constipation & diarrhoea (intermittent) since 4 years. Patient was a treated case of pulmonary Koch’s with tubercular meningitis 4 years back. The patient was treated with 3 courses of Basti therapy and rejuvenating drugs. After the treatment patient’s appetite improved, 12 kg weight gain, improved power grade of limbs, motor function of limbs restored partially, pressure soars absolutely healed, and improvement in total leucocytes count. As absolute cure in the AIDS patients is still an awaited destiny, but with the Panchakarma along with rejuvenating therapy, quality of life of patient improved significantly. Though there is slight improvement in CD4 count and no change in viral overload but with the given remedy, complaints and associated disability treated successfully.

Key words: HIV, AIDS, Basti, Rejuvenation

INTRODUCTION

Newly discovered disease may not be a problem for Ayurveda because it is science which deals not only with disease but also with the pathological events (Sanchayadi Awastha) taking place in the body. HIV1 AIDS2 is a dreadful disease associated with huge social stigma rendering a patient’s miserable physically & mentally. The first case was identified in 1981 and is the most quickly spreading disease of a century3. Modern guideline of treatment like ART4 inhibit only viral load without any improvement in quality of life. In Ayurveda the immune system is denoted by Oja5 which stands for vitality and power, on the basis of etiological factor, sign, symptoms and complications, AIDS may be compared with Ojakshaya6 i.e. loss of liveliness or energy, due to similarity in both conditions such as diminished conditions of the defensive and shielding mechanism of the body. According to Ayurveda treatment of Ojakshaya is focused on improving immunity of the body instead of counteraction of opportunistic infections or other diseases produced due to lower resistance power. As per Ayurveda classics, Acharya has described the many Rasayana7 for promotion and preservation of health. Rasayana or rejuvenation therapy is a unique contribution of Ayurveda which endures body with incredible power and produce optimum quality of Dhatus. Basti (medicated enema) is a self-disciplined line of treatment which has been emphasised as half of the Ayurveda Chikitsa8 (treatment). The cleansing action of Basti is related with the facilitation of excretion of morbid substances responsible for the disease process into the colon, from where it is evacuated9. The net outcome of the disease is Dhatuksaya10 hence the combination of Rasayana and Basti treatment supported by Deepana-Pachana may prove to be beneficial as a supportive therapy in treating retroviral infected case with complication. So in this case the same line of treatment is adopted. Many compound of plant origin that inhibits HIV during various stage of cycle, include alkaloids, carbohydrates, coumarine, flavonoids, lignin, phenolics, proteins, quinines, xanthenes, phospholipids and tannins, plant derived microbiode and plant bodies are some of new approach for prevention of HIV1. So, by the use of these herbal drugs we can develop a new hope for HIV infected patients.

CASE REPORT

A 43 years old patient, known case of retroviral disease, native of Jamnagar, Gujarat residing in Mumbai, by occupation sale’s man was admitted in hospital of I.P.G.T. &R.A. in September 2008 following with presenting complaints: Loss of movement...
left half of body (hemiplegia), Severe weight loss (weight 64 to 42 kg.), Hesitancy in micturition, Loss of appetite, Cough (intermittent), Shurred speech, deep pressure soars over right Gluteus medius (9*8*3 cm), Highly irritative nature and Constipation & diarrhoea (intermittent) since 4 years

AIDS condition can be compared to Ojokshaya in Ayurveda where symptoms like debility, wasting/cachexia, loss of appetite, fear fullness, debility of sensory organ\textsuperscript{17}. Ojokshaya leads gradually to Dhatukshaya and after depletion of Sharira Bala, mental instability ensues in. Hence symptoms like getting conscious, he had loss of movements of left half of extremities, slurred speech, and hesitancy in urination.

A complete course of anti tubercular drugs and other conservative management was given & anti retroviral treatment was started with Lamivudine 150mg, Zidovudine 300mg, Phesyntin 100 mg. B.D.

During this course he was completely bed ridden and developed big pressures soar (9.5*8.5*3.7 cm) in the hip region over right gluteus medius. Pressure ulcer treated with muscle grafting, oral and topical antibiotics but didn’t healed in the last 3 ½ years. Gradually he developed severe loss of appetite & lost 22kg of weight over a period of 4 years and became highly irritative.

**History of present illness**

Patient was healthy 4 years back as per his opinion, then he developed Pulmonary Koch’s & during its treatment he suffered with seizures and went into coma for 2 ½ weeks. Later on he was diagnosed as tubercular meningitis with toxoplasmosis with severe immune suppression due to HIV type 1 infection. After

**RESULT**

By the course of therapy, there was no significant change in CD4 count\textsuperscript{16} & viral overload but moderate improvement in total leucocytes count. Mild improvement in urine hesitancy was observed and Shurrness of speech was almost vanished. Marked improvement was found in the mood of patient. After therapy, Patient, who was not able to turn his self on his own, could walk to 100 steps with the help of walker. Improvement in lower limb was more in comparison to upper limb (hand power grade- 2, leg- 3). Pressure soar healed absolutely. Patient initially took 1- 1 ½ Chaptis (brad) switched to 4-5 twice regularly along with fruits and milk. Total weight gain by patient during 4 ½ months of therapy was 12 kg.

**DISCUSSION**

AIDS condition can be compared to Ojokshaya in Ayurveda where symptoms like debility, wasting/cachexia, loss of appetite, fear fullness, debility of sensory organ\textsuperscript{17}. Ojokshaya leads gradually to Dhatukshaya and after depletion of Sharira Bala, mental instability ensues in. Hence symptoms like irritability & psycho-neuropathy develop. Ayurveda provides a holistic approach to disease & emphasize more on whole body constitution while treating disease rather than an organ /system. Dhatukshaya & Ojokshaya causes Agnimandya (Rasa Pradusti). Hence Deepana, Pancha with Ama Pachana Vati was given. Guduchi is a well-known both Sharira and Medhya Rasayana and proven immunomodulator drug. It also alleviates Agnimandya and causes Rasaprasadana. Further this drug is drug of choice in Jvara, the most common feature in HIV Patients apart from that it is also indicated in Kasa, Atisara & Krumi which are generally seen in retroviral positive cases. Vasanta Kalpa is well-known rejuvenator with Swarna Bhasma as an antioxidant & regenerative property; hence it is used in Kshaya Avasthas (weakness). Initially Madhutailika Basti was not retained adequately up to 4-5 days, after five days he tolerated well and used to retain it for 10-15 minutes in the end of its course. Madhutailika Basti was indicated as Bala, Varna, Mamsa & Ojovardhaka\textsuperscript{18}. Basti is main line of treatment in cases of Pakshaghata (hemiplegia). Therefore, it was applied to treat hemiplegia with added benefits of Rasayana as required in such immuno-compromised patient. Baladi Yapana Basti is indicated best for Sukrakshaya & debility\textsuperscript{19}. The combined

<table>
<thead>
<tr>
<th>Date</th>
<th>Investigation</th>
<th>Finding</th>
</tr>
</thead>
<tbody>
<tr>
<td>14/09/05</td>
<td>Routine Blood</td>
<td>Leucocytopenia, Anaemia, CD4. 82/mm3</td>
</tr>
<tr>
<td>18/10/05</td>
<td>MRI(Head)</td>
<td>Suggestive of infective aetiology like toxoplasmosis with extensive associated vasogenic oedema</td>
</tr>
<tr>
<td>24/06/05</td>
<td>CT(Chest)</td>
<td>Suggestive of disseminated Koch’s</td>
</tr>
<tr>
<td>08/10/05</td>
<td>2D Echo Cardiogram</td>
<td>Normal findings</td>
</tr>
<tr>
<td>19/07/06</td>
<td>US(abdomen and pelvis)</td>
<td>Normal findings</td>
</tr>
<tr>
<td>27/01/07</td>
<td>Viral overload</td>
<td>86,022 IU/ml</td>
</tr>
</tbody>
</table>

**Table: 1 Investigations of patient**

**Treatment:** Month wise schedule of treatment given to the patient is as follows

<table>
<thead>
<tr>
<th>1st Month</th>
<th>2nd Month</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Ama Pachana Vati</td>
<td>1 gm (2 tablet of 500 mg each) Thrice a day before meal with Luke warm water</td>
<td>125mg twice a day.</td>
</tr>
<tr>
<td>Swarna Vasanta Malti\textsuperscript{11}</td>
<td>With Bala Taila\textsuperscript{14} for 30 minutes</td>
<td>Guduchi Swarasa</td>
</tr>
<tr>
<td>Sarvanga Abhayanga</td>
<td>With Bala Taila for 30 minutes</td>
<td>80ml freshly prepared Swarasa twice a day after breakfast</td>
</tr>
<tr>
<td>Nadi Sweda</td>
<td>With Dashamoola Kwatha for 10 minutes</td>
<td>Basti Madhutailika\textsuperscript{13}</td>
</tr>
<tr>
<td>Basti</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Duration of Basti therapy- 15 days
Parihara Kala (precaution time) - 1 month.

**Duration -15 months**
Parihara Kala – 1 month

For **Pressure soar**- Dressing with Jatyadi Taila\textsuperscript{15} & Nimba Taila daily trough out the treatment was done.

**RESULT**

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effect of these rejuvenators led to increase in Rasadi Dhatus and Ojovardhana (immunity booster) and ultimately Balavardhana (increase physical strength). Nimba is well known Vranaropaka39 (bactericidal, antiseptic & wound healing properties). Jatyadi Taila is indicated in Dushta Vrana (infected ulcer). It has Jati, Nimba, Haridra, Tuttha as main contents. All these have proven antibacterial, antiseptic and anti-inflammatory properties. Increased immune status also facilitated in early healing of benign ulcer. The combined effect of these above discussed factors proved beneficial in the improving the quality of life which is main aim of any Medical science.

CONCLUSION

Rasayana Chikitsa assisted with Basti can play an important role as a supportive therapy in the management of various complications of HIV seropositive cases along with anti retroviral treatment. Complication like paresis, ulcers, general debility sensory dysfunction can be overcome with employing various treatment modalities of Ayurveda. For establishment of this line of treatment, needs more patients’ data.

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