



A REVIEW ON DIAGNOSIS AND MANAGEMENT OF MULTIPLE SCLEROSIS – A CASE REPORT

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ABSTRACT

Multiple Sclerosis is a chronic, immune-mediated inflammatory disease characterized by lesions in the central nervous system that leads to muscle stiffness, loss of balance, numbness and vision problems. Although the aetiology of Multiple Sclerosis remains unclear, the present documents illustrate that the cause of Multiple Sclerosis is multifactorial and includes environmental factors such as exposure to infectious agents and vitamin deficiencies. These factors trigger the immune system which leads to neuronal cell damage and dysfunction. The presentation in the patient resembles *Avruta Vata vyadhi*. The forthcoming paper will discuss the case report of Multiple Sclerosis.

Keywords: *Avarana*, *Vata*, *Basti*⁷, Multiple Sclerosis⁸, Demyelination.

INTRODUCTION

Multiple Sclerosis is a chronic inflammatory demyelinating disease of the brain and spinal cord. Inflammation occurs in spots that are scattered in the brain and spinal cord which are called plaques. The causes remain unclear, but it likely involves environmental factors and vitamin deficiencies that together result in a self-sustaining autoimmune disorder that leads to recurrent immune attacks on the Central Nervous System. The hallmark of Multiple sclerosis is symptomatic episodes that occur months or years apart and affect different anatomical locations. Eventually, the disease can cause permanent damage to the nerves causing numerous physical and mental symptoms, and often progresses to physical and cognitive disability.

In Ayurveda, any physical disability/inability of movements indicates the disorders related to *Vata* (*Va Gati Gandhanayoho*). In the development of *Vata Vyadhi*, there can be 2 causes i.e., *Avarana* and *Dhatu Kshaya*. As it is known that the *Tridoshas* always circulate throughout the body channels. The aggravated *Vata* owing to its characteristics is the impeller of the other two *Doshas*. The aggravated *Vata* propels the other two *Doshas* and dislodges them about everywhere and causing various diseases. Due to *Avarana*, it further reduces the body fluids and other *Dhatu*s.

Ayurvedic concept of Multiple Sclerosis can be understood accordingly as the *Avruta Vata Vyadhi* i.e., *Pranaavruta Vyana Vata* which is characterized by loss of sensory functions and loss/reduced strength. In another way, Multiple sclerosis can also be understood as the condition arising due to *Majja Dhatu Kshaya*¹ which is characterized by tiredness, hair fall, looseness of joints, weakness of joints and frequent affliction with *Vata Vyadhis*.

CHIEF COMPLAINTS

The patient complains of numbness and weakness of both lower limbs, tingling sensation in both arms, weakness and reduced strength in both lower limbs for 1.5 years.

CASE REPORT

A 28-year-old female patient, not a K/C/O Diabetes Mellitus and Hypertension came to OPD with complaints of numbness and weakness of both lower limbs which was more in right lower limb along with tingling sensation in both arms for 1.5 years which was insidious in onset. The patient complains that she was not able to do her routine activities on her own. After 1 month, the patient developed pain and numbness in the foot and reduced strength in both upper and lower limbs. When the investigations were done, through an MRI scan she was diagnosed to have Multiple Sclerosis along with deficiencies of vitamin D and vitamin B12. Accordingly, the treatment was planned and started. After 2 months of treatment during the follow-up, the patient found slight relief from the symptoms and was advised to continue the same medications with regular follow up. During the second follow up, the patient complained of numbness and tingling sensation in both the palms along with reduced strength in both lower limbs.

PAST HISTORY

The patient was administered with Prednisolone at the beginning which was withdrawn gradually.

EXAMINATION

General Examination

Built – Normosthenic Built

Appearance – Healthy

Pallor - Absent

Icterus – Absent

Cyanosis – Absent

Clubbing – Absent

Lymphadenopathy – Absent

Oedema – Absent

Systemic Examination

Cardiovascular system – S1S2 Heard

Respiratory System – Normal Breath sounds Heard

Gastrointestinal System – P/A Soft and No Organomegaly felt.

Central Nervous System

Conscious and Oriented

Sensory Perception – Normal

Motor Functions - Normal

Musculoskeletal System

Gait – Normal

Muscle Stiffness - Felt in both upper and lower limbs

Muscle Power – Normal

Muscle Tone – Norm tonic

DIAGNOSTIC ASSESSMENTS**INVESTIGATIONS:**

Haematological investigations:

Sl.no	INVESTIGATIONS	04/01/2021	11/08/2021
1.	Haemoglobin	12.3 gm. %	12.5 gm. %
2.	ESR	45 mm /1hr	80 mm /1hr
3.	Vitamin D	21.18 ng/ml	38.32 ng/ml
4.	Vitamin B12	422 pg./ml	207 pg./ml

Impression of MRI of Brain and Spinal Cord:

- Short segment cord lesions at C2-C3 vertebral level (posterior cord) and CONUS at T12 level (right anterior cord). The cervical lesion shows contrast enhancement while the CONUS lesion is non-enhancing.
- Features suggestive of pathology related to Multiple Sclerosis.

Haematological investigations revealed that her ESR was raised and Vitamin D and B12 were below the

normal limits. MRI of the brain and spinal cord revealed the demyelinating pathology isolated to the cord suggestive of Multiple Sclerosis.

TREATMENT

The treatment was administered accordingly. Various procedures like *Alepa*, *Dhanyamladhaara*, *Rajayapana Basti*, *Udwartana* and *Pizichil* were implemented. The line of treatment was flexible and modified according to the tolerance level and necessity of the patient.

Internal medications given are:

MEDICINE	DOSAGE	FREQUENCY
<i>Brihat Vata Chintamani Rasa</i> with Gold	1 Tablet	2 times a day
Nuro XT	1 Tablet	Once a day (afternoon)
<i>Indukantha Gritha</i>	10ml	Once a day (morning)
<i>Dhanadanayanadi Kashaya</i>	15ml	3 times a day
<i>Dashamoola Qwatha</i>	50ml	3 times a day

SEVERITY OF COMPLAINTS BEFORE AND AFTER TREATMENT

0-Not Present, 1- Mild, 2- Moderate, 3- Severe

SL.NO.	Symptoms	31/10/2020 (Before Treatment)	04/01/2021 (After-Treatment)	11/08/2021 (After-Treatment)
1.	Numbness	3	2	1
2.	Muscle stiffness	3	2	1
3.	Weakness	3	2	2
4.	Tingling Sensation in Arms	3	1	0

The patient was advised to do regular follow up.

Presently the patient is having relief from all the symptoms.

LITERARY REVIEW

Features of *Majja Dhatu Kshaya*¹ such as *Parva Rujja*, *Bhrama*, *Murcha*, *Sarvanga Saada* and *Tamo*

Darshana are mentioned in *Vividhashitapeetiya Adhyaya of Charaka Samhita*.

In *Vata Vyadhi Chikitsa Adhyaya of Charaka Samhita*, *Dhatu Kshaya* and *Marga Avarana*² are mentioned as the two main reasons for the occurrence of *Vata Prakopa*.

In *Vata Vyadhi Chikitsa Adhyaya of Charaka Samhita*, it is mentioned that due to *Avarana*, there will be *Rasaadi*³ *Dhatu*⁴ *Kshaya*.

Lakshanas of Pranaavruta Vyana Vata such as *Sarvendriya Shoonyatva*, *Karma Kshaya*, *Bala Kshaya* is mentioned in *Vata Vyadhi Chikitsa Adhyaya of Charaka Samhita*.

DISCUSSION

Multiple sclerosis is a potentially disabling disease of the Central Nervous system affecting the brain, spinal cord and optic nerves. Medications such as steroids and glucocorticoids are advised in Multiple Sclerosis followed by its adverse effects like fluid retention; weight gain and hepatotoxicity are observed. Since there will be demyelination in Multiple sclerosis, it can be correlated to *Pranaavruta Vyana Vata Vyadhi* associated with *Dhatu Kshaya (Majja Dhatu)* based on the symptoms seen in the patient such as *Bala Kshaya*, *Tamo Darshana*, *Sarvendriya Shoonyata*, *Parva Ruja*. As Multiple Sclerosis is an autoimmune and neurological disorder, the main cause for this can be taken up as *Ama* (junk foods, decreased level of vitamin D and B12 and the increased level of ESR) which in turn does the *Avarana of Dosha* and may end up with *Dhatu Kshaya Janya Vata Vyadhi*. Thus, neurological pathologies cause symptoms commonly associated with *Vata* such as pain and alteration in movements. Hence, the treatment protocols like *Basti Chikitsa* helps in correcting the *Avarana* and *Avruta Dosha* which in turn helps in improving the afflicted *Dhatu*s in the body.

CONCLUSION

As the definite cause of Multiple Sclerosis is not known, it can be understood as one of the autoimmune disorders and there is no proper treatment for Multiple Sclerosis in contemporary science as they

will be managing the disease symptomatically by administration of steroids and there will be high chances of relapse and recurrence of the disease condition in the severe form which may even lead to permanent physical and cognitive disabilities. In Ayurveda, based on symptoms it can be correlated to *Avruta Vata Vyadhi* associated with *Majja Dhatu Kshaya*. But some patients will be having symptoms like *Agnimandhya*, *Aruchi* associated with other symptoms like *Bala Kshaya* as mentioned previously. So, from patient to patient the *Lakshanas* presented will differ and so the involvement of *Doshas*. In this patient since there are *Vata* predominant features, by adapting the *Vata Vyadhi Chikitsa*^{5, 6} and by treating the *Avarana* and *Avruta Doshas* which in turn corrects the afflicted *Dhatu*s, the physician will be able to prevent the further aggravation of the disease condition and help in improving the life expectancy of the patient.

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