



AYURVEDIC MANAGEMENT OF FIBROMYALGIA SYNDROME: A CASE REPORT

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ABSTRACT

Fibromyalgia (FM) is a chronic pain syndrome occurs more commonly in women. Its prevalence is estimated around 2% in the general population. Various pharmacological or psychological interventions are of little efficacy and the global prognosis of FM is poor. There was no clarity regarding the concept and management of FM according to Ayurveda. The present article deals with a case of FM managed by Ayurvedic treatment. The Ayurvedic diagnosis of Mamsagata vata with Vishada was made and panchakarma procedures were done. Two assessments were taken before treatment and after follow up on FIQ (Fibromyalgia Impact Questionnaire). There was 6.8% of relief on FIQ with two months of treatment. Ayurvedic panchakarma treatment found to be useful in the management of physical signs and symptoms of FM like pain, tenderness, stiffness, constipation, headache, fatigue etc; but it has not provided relief in psychological conditions like depression and anxiety associated with FM.

Key Words: Fibromyalgia, Ayurveda, Depression, Mamsagata vata, Fibromyalgia Impact Questionnaire, Vishada

INTRODUCTION

Fibromyalgia (FM) is a chronic pain syndrome occurs more commonly in women. Its prevalence is estimated around 2% in the general population. Besides musculoskeletal pain, symptoms like fatigue and sleep disturbances are considered characteristic.¹ FM is considered as multi factorial disorder. Central nervous system sensitization is a major patho physiological aspect of fibromyalgia, while various external stimuli like infection, trauma and stress may contribute to development of the syndrome.² There is no clear demarcation between FM and other functional somatic syndromes (chronic fatigue syndrome, irritable bowel syndrome) and psychiatric disorders (depression, anxiety) with which striking co morbidity found. Various pharmacological (anti depressants) or psychological (cognitive behavior therapies) are of little efficacy and the global prognosis of FM is poor.¹ May be due to this reason, FM patients have been using Complementary and Alternative Medicine (CAM) extensively.³

Unfortunately, there is no clarity regarding the ayurvedic concept or guidelines regarding the diagnosis as well as the management of FM. Studies on FM with Ayurvedic management were lacking. This creates a major dilemma while approaching a case of FM in Ayurvedic clinical practice. Some authors had interpreted the condition of Fibromyalgia syndrome (FMS) as “Vata vyadhi” according to Ayurveda and concluded that vitiation of mamsavaha, asthivaha and majjavaha srotas occurs in this disease.⁴ Here we are reporting a case of fibromyalgia diagnosed as ‘Mamsagatavata’ according to Ayurveda. Written informed consent was obtained from the patient for the publication of this case report.

CASE DESCRIPTION

A 39 years aged female patient came to our care (07.03.2015), with the complaints of pain at multiple joints with swelling, pain at all over body muscles especially at the nape of neck, tempero mandibular joint (TMJ), right arm and right leg, tender nodules at left wrist and at nape of the neck, fatigue, sleeplessness and frequent constipation. Patient also had depressed mood, hopelessness, helplessness, worthlessness, suicidal ideations and difficulty in

remembering. All these problems were gradually developed, progressive and recurrent since last ten years (since 2005). Patient was a diagnosed case of ‘Fibromyalgia syndrome (FMS)’. Patient took allopathic treatment but didn’t get complete relief.

Hematological reports were within normal limits except, Hemoglobin level 11.8 gm / dl (22.01.2015). Rheumatoid factor and serum Anti streptolysin ‘O’ titre reports were negative (29.01.2015). Anti Nuclear Antibody profile (ANA) also found negative (09.03.2015). Serum Vitamin B₁₂ levels was also within normal limit (29.01.2015). Patient’s father had rheumatoid arthritis. Obstetric history was found as G₄ P₂ A₂ L₂. Unsatisfactory marital history, stress because of family problems was found. All vital parameters were within normal limits. Patient was non smoker, non alcoholic and not having allergy to any drug or food item.

Diagnosis, Assessment & Treatment

The patient was diagnosed as having ‘Fibromyalgia syndrome’, based on the ‘2010 American College of Rheumatology (ACR) diagnostic criteria’ for Fibromyalgia syndrome.⁵ To assess the efficacy of therapy patient was initially assessed on FIQ (Fibromyalgia Impact Questionnaire) was used. The FIQ is an assessment and evaluation instrument developed to measure fibromyalgia patient status, progress and outcomes. FIQ is composed of 10 items. The first item contains 11 questions related to physical functioning and each question is rated on a four point likert type scale. Items 2 and 3 deals with number of days patient felt well and the number of days they were unable to work because of fibromyalgia symptoms. Item 4 through 10 are horizontal linear scales marked in 10 increments on which the patient rates work difficulty, pain, fatigue, morning tiredness, stiffness, anxiety and depression. FIQ is scored in such a way that a higher score indicates a greater impact of the syndrome on the person. Each of the ten items has a maximum possible score of 10. Thus the maximum possible score is 100. The average FM patient score about 50, severely afflicted patients are usually 70 plus.⁶ The raw scores of FIQ should get normalized. Total two assessments were carried out before starting treatment (07.03.2015) and after completion of two months of treatment (06.05.2015).

Patient was diagnosed as 'Mamsagata vata' according to Ayurveda. Patient had the all signs and symptoms of Mamsagata vata as explained in Charaka samhita.⁷ Conditions like, 'Amavata', 'Mamsa avrita vata', 'Snayugata vata' and 'Sarvanga vata' were excluded during differential diagnosis. Initially, Snehana, swedana procedures (massage and steam) were done followed by Yoga vasti schedule (total eight enemas including decoction and oil enemas). Patient got discharged on 26.03.2015 and internal medicines were prescribed at the time of discharge (Table 1). Patient came to follow up on 06.05.2015.

DISCUSSION

Fibromyalgia syndromes are common non inflammatory, painful musculoskeletal disorders that vary in the extent and intensity of involvement. The biologic gradient of musculoskeletal pain varies from no or few symptoms and tender points in the majority of persons to generalized fibromyalgia with multiple tender points. The course and prognosis of fibromyalgia syndromes are not known. Clinical data suggest three basic patterns: remitting-intermittent; fluctuating-continuing; and progressive.⁸ In present case, the course of the disease was fluctuating-continuing type and the patient not getting relief since last ten years (2005) with modern conventional medicine. Patient has been suffering with depression features like, crying spells, suicidal ideations, low self esteem and marital disharmony with unsatisfactory sexual history also present.

Due to unsatisfying treatment options for FMS, new therapeutic approaches are essential. At the same time, the majority of FMS patients frequently use CAM methods alongside conventional treatment. Among those, Ayurveda is one of the fastest growing CAM systems. First and small clinical trials have hinted at a possible effectiveness of Ayurveda in the treatment of FMS, yet the available data is too weak to draw definite conclusions as these trials were uncontrolled and included meditation as part of the Ayurvedic treatment. However, to date, no study has investigated an integrative multimodal treatment program for FMS that focuses on Ayurveda. As for FMS (Ayurvedic diagnostic approximation: mamsa-gata-vata), vata and tamas especially are relevant to the interpretation, diagnosis and treatment of the disease entity.⁹

Acharya charaka described the mamsagata vata lakshana's as, heaviness in body parts, different types of muscle aches / pains and fatigue. Virechana (therapeutic purgation), niruha vasti (decoction enema) and vata shamana (pacifying vata dosha) treatments like, snehana (internal and external oleation), swedana (sudation) along with internal medicines are advised for the treatment of mamsagata vata by Charaka Acharya.¹⁰ The treatment protocol adopted in the present case was proved to be beneficial in the management of FMS.

After confirming Niraama avastha, snehana swedana procedure like patra pottali pinda sweda was done to manage the pain related symptoms for the period of three days with dhanwantaram tailam. After that, sarvanga abhyanga (full body oil massage) with karpooradi tailam, bashpa sweda (steam in steam chamber) were done for managing pain. Along with this treatment nasya karma with dhanwantaram 101 avarti tailam has been done for the

management of depressive features, headache and sleep difficulties. At last, Yoga vasti schedule (8 enemas) was followed. Kala vasti schedule starts with Anuvasana vasti (oil enema) followed by six vasti's (three niruha vasti's and three anuvasana vasti's alternatively) and ends with anuvasana vasti. At the time of discharge, mansyadi kwatha was prescribed for managing depression, anxiety and sleep difficulties whereas vidaryadi ghrita was prescribed for vata shaman purpose to the patient and asked to come for follow up assessment on 06.05.2015 (Table 1).

Before starting treatment, on initial assessment, total score on FIQ was '95.3' (normalized score) and it indicates that, patient has been suffering with severe fibromyalgia syndrome. After follow up (06.05.2015), the FIQ score got reduced from '95.3' to '88.8'. It shows that patient got little relief on FIQ with treatment. Improvement was observed in the 'items' like, 'physical impairment (score reduced from '36.3' to '26.6'), great difficulty in doing work (score reduced from '10' to '8'), pain (score reduced from '5' to '3'), fatigue (score reduced from '5' to '4') and refreshing sleep & stiffness (score reduced from '7' to '5'). No change was observed in item like, 'depression', 'anxiety', 'feeling good', and 'work missed'. It indicates that, the treatment was not effective in managing psychiatric symptoms compared to physical signs & symptoms. There was 6.8% of relief on FIQ with two months of treatment (including follow up).

Pain at multiple sites, headache, constipation, stiffness and heaviness in the body were reduced and patients general condition got improved (especially improvement in sleep and mood and reduced fatigue) immediately after snehana, swedana and vasti. During follow up the relief didn't sustained. Patient was happy with the treatment for relief in physical impairment but she didn't get the relief in depression and anxiety features. It indicates that, interventions like, meditation, yoga, stress management, exercise therapies, cognitive behavior therapy are essential to manage the co morbid psychiatric conditions in fibromyalgia along with Ayurvedic regimen. Multi system integrative approach may be suitable for long term management plan for Fibromyalgia syndrome. The treatment protocol adopted in the present study was proved beneficial in the management of physical symptoms of fibromyalgia but there was no relief on psychiatric conditions.

CONCLUSION

Ayurvedic panchakarma treatment found to be useful in the management of physical signs and symptoms of fibromyalgia like pain, tenderness, stiffness, constipation, headache, fatigue etc; but it has not provided relief in psychological conditions like depression and anxiety associated with FMS. Further clinical trials are required on long term management of fibromyalgia syndrome with Ayurvedic treatment including psychological interventions.

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Table 1: Intervention

Panchakarma intervention	
07.03.2015 to 09.03.2015	Patra pottali pinda sweda (massage with bolus prepared with medicated leaves) with Dhanwantaram tailam
10.03.2015 to 18.03.2015	Sarvang abhyanga (full body massage) with Karpooradi tailam Bashpa sweda (steam) in steam chamber Nasya karma with Dhanwantaram tailam - 101 Avarti
19.03.2015 to 26.03.2015 (Yoga vasti schedule)	1. Sarvang abhyanga with Karpooradi tailam 2. Bashpa sweda (in steam chamber) 3. Niruha vasti (A. Saindhava lavana - 6 gm B. Madhu - 200 ml C. Dhanwantaram tailam - 100 ml D. Satapushpa and Vacha kalkam - 25 gm E. Rasna saptaka kwatha & Dashamoola kwatha - 500 ml F. Gomutra arka - 100 ml) (or) 4. Anuvasana vasti with Dhanwantaram tailam - 100 ml
Internal medicines	
07.03.2015 to 18.03.2015 & 27.03.2015 To 06.05.2015	1. Mansyadi kwatha - 80 ml, twice a day before food 2. Vidaryadi ghrita - 10 ml, twice a day, on empty stomach with hot water

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