JETIR.ORG ISSN: 2349-5162 | ESTD Year : 2014 | Monthly Issue
JOURNAL OF EMERGING TECHNOLOGIES AND INNOVATIVE RESEARCH (JETIR)
An International Scholarly Open Access, Peer-reviewed, Refereed Journal

EXPLORING THE THERAPEUTIC ROLE OF *DRAKSHADI KASHAYA* IN FIBROMYALGIA: A CASE REPORT

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Abstract :

BACKGROUND: Fibromyalgia is a chronic disorder characterized by widespread musculoskeletal pain, fatigue, sleep disturbances, stiffness, paresthesia, and associated functional impairment. It is encountered across diverse populations and predominantly affects women. Despite advances in diagnosis and conventional management, long-term symptom control remains challenging in many patients. From an Ayurvedic perspective, the clinical presentation of fibromyalgia shows similarities with *Vatika Jvara*, particularly with regard to generalized pain, stiffness, fatigue, sleep disturbance, and systemic complaints.**AIM**:To evaluate the effect of *Drakshadi Kashaya* in a patient presenting with clinical features of fibromyalgia.**MATERIALS AND METHODS**:A single-patient case study was conducted in a 27-year-old female diagnosed with fibromyalgia based on the American College of Rheumatology (ACR) criteria. Clinical symptoms, ACR-derived Widespread Pain Index (WPI) and Symptom Severity Scale (SSS), and selected hematological parameters were assessed before and after treatment. The patient was administered *Drakshadi Kashaya* orally at a dose of 48 ml twice daily, one hour before food, for the treatment period. **RESULTS:** Following treatment, an overall reduction in fibromyalgia-related symptom severity was observed. The WPI score decreased from 5 to 4, while the SSS score decreased from 9 to 5. Improvement was also observed in musculoskeletal pain, insomnia, abdominal discomfort, appetite-related complaints, and muscle weakness. ESR decreased from 25 mm/h before treatment to 10 mm/h after treatment. The observed changes suggest a favorable clinical response to *Drakshadi Kashaya*. **CONCLUSION:** This case suggests that *Drakshadi Kashaya* may have beneficial effects in reducing the symptom burden associated with fibromyalgia. Its Ayurvedic properties, particularly *Vata-Pitta Hara*, *Amahara*, and *Jvarahara* actions, provide a rationale for its therapeutic application in presentations resembling *Vatika Jvara*. However, controlled clinical studies involving larger sample sizes are required to establish its efficacy and safety.

IndexTerms **- Fibromyalgia; *Drakshadi Kashaya*; *Vatika Jvara*; Widespread Pain Index; Symptom Severity Scale.**

I. INTRODUCTION

Fibromyalgia (FM) is a chronic pain disorder characterized predominantly by widespread musculoskeletal pain and increased sensitivity to physical stimuli. It is frequently accompanied by fatigue, sleep disturbance, stiffness, paresthesia, mood-related symptoms, and impaired quality of life. The condition affects individuals across different populations and is considerably more prevalent among women. Epidemiological estimates indicate that fibromyalgia affects approximately 2–3% of the general population, with prevalence increasing with age and a marked female predominance[1].

The clinical presentation of fibromyalgia is complex and extends beyond musculoskeletal pain. Patients may experience persistent fatigue, non-restorative sleep, cognitive difficulties, gastrointestinal complaints, mood disturbances, and functional limitations. These diverse manifestations can make diagnosis and management challenging. The diagnostic criteria developed by the American College of Rheumatology have played an important role in establishing a standardized clinical framework for identifying fibromyalgia [2].

The condition has historically been classified among rheumatic disorders, although its contemporary understanding emphasizes chronic widespread pain and altered pain processing. In ICD-11, fibromyalgia is included under chronic widespread pain. Despite improvements in diagnostic approaches and available therapeutic options, many patients continue to experience persistent symptoms, highlighting the importance of comprehensive and individualized approaches to management.

From the Ayurvedic perspective, fibromyalgia does not have a direct one-to-one equivalent with a single classical disease entity. Nevertheless, its clinical manifestations show considerable similarity with the features described under *Vatika Jvara*. Generalized musculoskeletal pain, fatigue, sleep disturbance, weakness, and systemic discomfort can be interpreted within the framework of Vata predominance. Such a comparison should be regarded as an Ayurvedic clinical correlation rather than a direct biomedical equivalence.

Drakshadi Kashaya is described in *Susruta Samhita, Uttara Tantra*, Chapter 39, *Jvara Pratisedha*. The formulation contains *Draksha, Guduchi, Gambhari, Brahmi*, and *Sariva* and is described with properties including *Vata-Pitta Hara, Dipana,* and *Amahara* actions. Based on its classical indication in *Vatika Jvara* and its potential relevance to the symptom complex observed in fibromyalgia, *Drakshadi Kashaya* was selected for the present case[3].

The present report describes the clinical response observed following internal administration of *Drakshadi Kashaya* in a patient presenting with fibromyalgia.

2. AIM

To evaluate the effect of *Drakshadi Kashaya* in the management of fibromyalgia.

3. MATERIALS AND METHODS

3.1 Study Design

The patient was evaluated clinically before and after administration of *Drakshadi Kashaya*. Clinical symptoms, WPI, SSS, and selected laboratory parameters were documented.

3.2 Selection of the Drug

Drakshadi Kashaya, described in *Susruta Samhita, Uttara Tantra*, Chapter 39 (*Jvara Pratisedha*), was selected based on its classical indication in *Vatika Jvara.* The formulation possesses *Vata-Pitta Hara, Dipana,* and *Amahara* properties, which were considered relevant to the clinical manifestations observed in the present case.

3.3 Drug Composition

The formulation used in the present case consisted of:

1. *Draksha*

Figure No 1

2. *Guduchi*
Figure No 2


3. *Gambhari*
Figure No 3


4. *Brahmi*
Figure No 4


5. *Sariva*
Figure No 5


The formulation was administered as an internal medication[4].

3.4 Preparation and Administration

Certified drug samples were washed, shade-dried, and powdered. A total of 48 g of *Kashaya Churna* was prepared for administration. The patient was instructed to prepare the decoction by adding 48 g of the coarse powder to 768 ml of water and reducing it to approximately 96 ml. The prepared decoction was divided into two doses of 48 ml each and administered orally in the morning and evening, one hour before food.

Route: Oral

Dose: 48 ml twice daily

Figure No 6


4. CASE PRESENTATION

A 27-year-old female patient presented with complaints of pain in the cervical and lower back regions for approximately one year. The pain was insidious in onset and persistent in nature. In addition to musculoskeletal pain, she reported loss of appetite, disturbed sleep, generalized muscle weakness, and depressive symptoms for approximately six months.

The symptoms were persistent and adversely affected her daily activities and general well-being. The clinical presentation was evaluated in accordance with the ACR diagnostic framework for fibromyalgia.

4.1 General Examination

- Pulse rate: 70/min
- Blood pressure: 110/80 mmHg
- Temperature: 99°F
- Pallor: Absent
- Icterus: Absent
- Oedema: Nil
- Gait: Normal
- Weight: 58 kg
- Height: 156 cm
- Respiratory system: Bilaterally clear
- Cardiovascular system : S1, S2 normal
- CNS: Conscious and oriented

4.2 *Ashtasthana Pariksha*

- *Nadi :Sadharana*
- *Mala :Abaddha*
- *Mutra :Prakrta*
- *Jihva :Lipta*
- *Sabda :Prakrta*
- *Sparsa :Anushna*
- *Drik :Prakrta*
- *Akriti :Prakrta*

4.3 *Dasavidha Pariksha*

- *Prakriti :Vata-Pitta.*
- *Vikriti :Vata,mamsa,vishamagni*
- *Sara :Tvak,*
- *Satva :Madhyama,*
- *Samhanana :Madhyama,*
- *Satmya :Sarvarasa*
- *Pramana :Madhyama.*
- *Ahara Sakti*
    - *Abhyavahara Sakti :Madhyama*
    - *Jaraṇa Sakti :Avara*
- *Vyayama Sakti :Madhyama.*
- *Vaya :Yauvana.*

5. ASSESSMENT CRITERIA

Assessment was performed before and after treatment using clinical symptoms, laboratory investigations, and ACR-related scoring parameters.

The clinical symptoms assessed included:

- *Usma*/fever or *Ushmano Vaishamyam*
- Musculoskeletal pain (*Angavedana Vaishamyam*)
- Depression (*Visada)*
- Loss of taste/appetite-related complaint (*Arochaka*)
- Abdominal pain (*Udara Nispidanam*)
- Tinnitus (*Karnayoh Svana*)
- Insomnia (*Jagara*)
- Jaw pain (*Hanu Asakti*)

- Muscle weakness (*Uru Sada*)

Symptom severity was graded on a four-point scale:
0 – Absent
1 – Mild
2 – Moderate
3 – Severe

The ACR-derived WPI and SSS were also recorded[5].

6. RESULTS

6.1 Hematological Parameters

Table No 1

Parameter	Before Treatment	After Treatment
Hb (g/dl)	12	11
Total Count (/mm^3)	8500	8700
ESR (mm/h)	25	10

A reduction in ESR from 25 mm/h to 10 mm/h was observed following treatment.

6.2 Clinical Symptom Assessment

Table No 2

Clinical Parameter	Before Treatment	After Treatment
Fever/*Usma Vaishamyam*	1	0
Musculoskeletal pain / *Angavedana Vaishamyam*	3	2
Depression/*Visada*	2	2
Loss of taste/*Arochaka*	1	0
AbdominalPain/*Udara Nispidanam*	2	1
Tinnitus/*Karnayoh Svana*	0	0
Insomnia/*Jagara*	2	1
Jaw pain/*Hanu Asakti*	0	0
Muscle weakness/*Uru Sada*	2	1

The findings demonstrate an overall reduction in the severity of several clinical symptoms, particularly musculoskeletal pain, insomnia, appetite-related complaints, abdominal discomfort, and muscle weakness.

6.3 ACR-Related Assessment

Table No 3

Parameter	Before Treatment	After Treatment
WPI	5	4

SSS	9	5

A favorable change was observed in both WPI and SSS following treatment. The SSS demonstrated a more pronounced reduction, decreasing from 9 to 5.

7. DISCUSSION

Fibromyalgia is a multifactorial chronic pain condition characterized by widespread pain and a constellation of associated symptoms including fatigue, disturbed sleep, mood-related complaints, and functional impairment[6]. The persistence of symptoms despite conventional therapeutic approaches has stimulated interest in complementary and holistic approaches to care.

Ayurveda approaches disease through assessment of *Dosa*, *Dushya*, *Agni*, *Ama*, *Srotas*, and other individual patient factors. In the present case, the clinical presentation was considered to show similarity with *Vatika Jvara*, particularly because of the predominant musculoskeletal pain, weakness, sleep disturbance, and associated systemic manifestations. This correlation provides the conceptual basis for selecting *Drakshadi Kashaya.*

The formulation is described in *Susruta Samhita, Uttara Tantra*, in the context of *Jvara Pratishedha*. Its *Vata-Pitta Hara* properties may be relevant to symptoms predominantly involving pain and systemic discomfort. The *Dipana* and *Amahara* actions may additionally be relevant to the patient's reduced appetite and abdominal discomfort.

In the present case, a reduction in overall symptom severity was observed after treatment. The WPI score decreased from 5 to 4, while the SSS score decreased from 9 to 5. The reduction in SSS is particularly relevant because this measure incorporates important associated manifestations of fibromyalgia in addition to pain. The improvement in sleep disturbance, muscle weakness, appetite-related symptoms, and abdominal discomfort further supports the overall favorable clinical response.

The formulation contained *Draksha, Guduchi, Gambhari, Brahmi,* and *Sariva.* From an Ayurvedic perspective, their combined properties may contribute to the formulation's overall therapeutic action. The formulation's *Vata-Pitta Hara, Amahara,* and *Jvarahara* attributes provide a classical rationale for its use in a symptom complex resembling *Vatika Jvara*[7].

A reduction in ESR from 25 mm/h to 10 mm/h was also observed. The present manuscript attributes this change to possible anti-inflammatory, antioxidant, and immunomodulatory effects of constituents such as *Guduchi* and *Gambhari.*

The reduction in clinical symptom scores, together with favorable changes in WPI, SSS, and ESR, indicates an encouraging therapeutic response in this patient. Nevertheless, the findings of a single case cannot establish efficacy. The observed improvement may also be influenced by the natural course of symptoms, contextual factors, adherence, placebo effects, or other unreported variables.

Therefore, systematic clinical investigation with an adequate sample size, standardized outcome measures, appropriate controls, and longer follow-up is necessary to determine the therapeutic efficacy and safety of *Drakshadi Kashaya* in fibromyalgia.

8. CONCLUSION

The present case report demonstrates a favorable clinical response following internal administration of *Drakshadi Kashaya* in a patient presenting with fibromyalgia. Improvement was observed in overall symptom severity, with reductions in WPI and SSS scores and a decrease in ESR from 25 to 10 mm/h. Several associated symptoms, including musculoskeletal pain, insomnia, appetite-related complaints, abdominal discomfort, and muscle weakness, also showed improvement.

From an Ayurvedic perspective, the therapeutic response may be understood in relation to the *Vata-Pitta Hara, Dipana, Amahara,* and *Jvarahara* properties of the formulation and its classical indication in *Vatika Jvara*. The findings suggest that *Drakshadi Kashaya* may be a promising intervention for the holistic management of fibromyalgia. However, larger controlled clinical studies are required to validate these preliminary observations and establish its efficacy, safety, and mechanism of action.

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