

Synergistic Management of hypertension with Triphala, acupuncture (Liver 3), and yoga: A Novel Integrated Case Report

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Abstract — Background: A 42-year-old male with a documented history of uncontrolled hypertension despite consistent Telmisartan 40mg (Telma 40mg) use for three years presented with additional complaints of breathlessness. This case report explores the management approach and outcomes of a 12-day integrated intervention combining Triphala decoction and acupuncture (Taichong point) for this patient. Methods: The patient participated in a 12-day trial receiving Triphala decoction twice daily and daily acupuncture sessions targeting the bilateral Taichong (Liver 3) points. Blood pressure, weight, and body mass index (BMI) were monitored throughout the intervention. Results: Following the intervention, the patient exhibited significant improvements in blood pressure control, with systolic blood pressure decreasing by 20% and diastolic blood pressure by 13%. Additionally, weight and BMI demonstrated a 5% reduction. Notably, the patient achieved medication independence, discontinuing Telma 40mg by the 8th day. Conclusion: This single case report presents a patient with uncontrolled hypertension who experienced substantial improvements in blood pressure control, weight management, and medication independence following a 12-day integrated intervention using Triphala and acupuncture. While these findings are preliminary and require further investigation with larger studies, this case contributes to the growing exploration of integrative approaches for managing hypertension.

Keywords: *Triphala; Acupuncture; Taichong.*

1. Introduction

Hypertension, a major risk factor for cardiovascular disease and stroke, presents a significant health burden globally and within India. India faces a rising epidemic of hypertension, with the latest estimates showing a prevalence ranging between 25-30% in urban areas and between 10-20% in rural settings (Anchala et al., 2014; Gupta, 2016; Li & Kelly, 2014). This chronic condition demonstrates complex patterns of prevalence influenced by age, gender, and socioeconomic status, ultimately contributing substantially to India's disability-adjusted life years (DALYs) (Gupta et al., 2024; Prabhakaran et al., 2018).

Conventional treatment regimens often involve anti-hypertensive medications; however, adherence to these therapies and their associated side effects continue to pose challenges. This has prompted exploration into complementary and alternative medicine (CAM) approaches for managing hypertension. Triphala, a traditional Ayurvedic formulation composed of three fruits (Amalaki, Bibhitaki, and Haritaki), has garnered attention for its potential anti-hypertensive effects (Peterson et al., 2017). Its antioxidant, anti-inflammatory, and cardioprotective properties may contribute to the reduction of blood pressure (Baliga et al., 2012; Rana et al., 2022).

Acupuncture, rooted in traditional Chinese medicine, involves the stimulation of specific acupoints in the body. One such point, Liver 3 (Taichong), has been traditionally used in the management of various disorders, including hypertension (Zhao et al., 2015). Research suggests acupuncture may promote vasodilation, influence autonomic nervous system activity, and modulate neurohormonal factors involved in blood pressure regulation (Man et al., 2023).

There is a growing interest in integrating CAM approaches with conventional medicine for managing chronic conditions like hypertension. This single case report explores the potential benefits of a multimodal intervention program utilizing Triphala and acupuncture (Liver 3) in managing hypertension. The presented case aims to contribute to the expanding body of research investigating the efficacy of CAM approaches for hypertension management.

2. Case

A 42-year-old male patient, referred to as Mr. X, presented to Naturopathy Hospital In-Patient Department with a documented history of hypertension for over three years. Despite consistent use of Telmisartan 40mg (Telma 40mg) for the past three years, his blood pressure remained

uncontrolled, consistently hovering around 150/92 mmHg. Additionally, he reported experiencing breathlessness, particularly during physical exertion, for the past six months. Initial evaluation revealed a complex interplay of factors contributing to Mr. X's health concerns. His uncontrolled blood pressure despite medication adherence suggested potential medication resistance or underlying physiological mechanisms requiring further investigation. This case report explores the comprehensive management approach undertaken to identify contributing factors, optimize his medication regimen, and address his symptoms.

3. Intervention

The patient participated in a 12-day trial combining Triphala decoction and acupuncture treatment. Triphala, a herbal blend known for its antioxidant and anti-inflammatory properties, was administered twice daily – before breakfast and after dinner. Each dose was prepared by boiling 5 grams of Triphala in 150 ml of water for 3 minutes. Acupuncture sessions were performed daily, targeting the Taichong (Liver 3) points on both feet. Filiform needles were inserted to a depth of 15 mm and retained for 30 minutes to stimulate potential therapeutic effects. This combined approach aimed to assess the effectiveness of Triphala and acupuncture in managing the patient's hypertension and potentially offer a complementary and holistic approach to their overall well-being.

4. Result

Following the 12-day intervention program involving Triphala decoction and acupuncture, the patient exhibited significant improvements in blood pressure control. Systolic blood pressure decreased from 150 mmHg to 120 mmHg, reflecting a 20% reduction. Similarly, diastolic blood pressure showed a 13% improvement, dropping from 92 mmHg to 80 mmHg. Additionally, the patient experienced a 5% decrease in body weight (from 104 kg to 98 kg) and a corresponding improvement in BMI (from 41.7 to 39.3). Notably, medication independence was achieved by the 8th day of treatment, allowing the patient to discontinue Telma 40mg completely.

It is important to acknowledge that these findings are based on a single case and cannot be generalized to the broader population. Further research with larger sample sizes is necessary to confirm the efficacy and safety of this specific intervention for managing hypertension.

5. Discussion

This single case report presents the experience of a 42-year-old male with uncontrolled hypertension despite

consistent medication use. Following a 12-day intervention program combining Triphala decoction and acupuncture, the patient demonstrated significant improvements in blood pressure control, weight reduction, and medication independence. While acknowledging the inherent limitations of a single case study, these findings contribute to the growing body of research exploring the potential of complementary and alternative medicine (CAM) approaches for managing hypertension.

The observed reduction in blood pressure in this case aligns with findings from some previous studies investigating the use of Triphala for hypertension management. A randomized controlled trial involving 60 individuals with prehypertension and stage 1 hypertension reported a significant decrease in systolic and diastolic blood pressure following Triphala consumption compared to the control group (Phimarn et al., 2021). The potential anti-inflammatory and antioxidant properties of Triphala components, including gallic acid and ellagic acid, have been proposed as contributing mechanisms for its hypotensive effects (Jantrapirom et al., 2021).

Acupuncture has also shown promise in managing hypertension, with several studies reporting modest reductions in blood pressure following treatment (Lai et al., 2019). The specific mechanisms by which acupuncture exerts its effects remain under investigation, but potential pathways include vasodilation, modulation of the autonomic nervous system, and regulation of neurohormonal factors involved in blood pressure control (Lin et al., 2022). The present case utilized acupuncture targeting the Liver 3 (Taichong) point, which has been traditionally used in Chinese medicine for various conditions, including hypertension (Zhao et al., 2015).

It is essential to emphasize that the findings of this single case report cannot be generalized to the broader population. Additionally, the observed improvements might be attributed to a combination of factors, including potential placebo effects or lifestyle modifications not reported in this case. Future research should involve well-designed clinical trials with larger sample sizes, control groups, and standardized interventions to evaluate the efficacy and safety of specific CAM approaches, like Triphala and acupuncture, for managing hypertension.

6. Conclusion

This single-case report described a patient with medication-resistant hypertension who achieved significant improvements in blood pressure control, weight management, and medication independence following a 12-day intervention combining Triphala decoction and acupuncture. These findings, while preliminary and requiring confirmation through larger studies, contribute

valuable insights into the potential of integrative healthcare approaches for managing hypertension.

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