

Case Report

Restoring Thyroid Balance: A Naturopathic Case Study

Krishnapriya R

From, Chief Medical Officer, Om Sree Narpavi Naturopathy and Yoga Center, Karur, Tamilnadu, India.

ABSTRACT

Hypothyroidism is a common endocrine disorder resulting from inadequate production of thyroid hormones, typically presenting with symptoms such as fatigue, constipation, dry skin, weight gain, hair loss, and psychological stress. This case report describes the impact of a 21-day naturopathic detoxification program, based on the Panchamahabhoota concept, on a 45-year-old woman with established hypothyroidism. She reported leg and knee pain, low back discomfort, generalized itching, dry skin, skin dryness, constipation, excessive stress, and hair loss. Her baseline thyroid-stimulating hormone (TSH) level was 18.50 μ IU/mL. The intervention comprised dietary changes, probiotic and herbal supplementation, yoga, pranayama, hydrotherapy, and external therapeutic applications. The therapeutic aim was not limited to alleviating symptoms but also to improving digestion, metabolism, and stress resilience, while promoting elemental balance. By supporting gut function, reducing systemic stress, and enhancing neuroendocrine stability, these measures may positively influence the hypothalamic–pituitary–thyroid axis and contribute to improved thyroid regulation. At the end of the program, the patient's TSH level decreased to 3.07 μ IU/mL, falling within the normal reference range. She experienced marked relief of fatigue, constipation, and skin complaints, as well as an overall sense of well-being. No adverse effects were noted. This case illustrates the potential role of naturopathic therapies in restoring thyroid balance through systemic regulation rather than symptomatic management alone. Although a single observation cannot establish causality, this case highlights the need for further clinical research into the complementary role of naturopathy in hypothyroidism management.

Key words: Hypothyroidism, Naturopathy, Detoxification, Panchamahabhoota therapy, TSH

Hypothyroidism is a common endocrine disorder that occurs when the thyroid gland fails to produce sufficient amount of thyroid hormones, mainly thyroxine (T4) and triiodothyronine (T3). These hormones are essential for metabolic regulation, cardiovascular function, and neurological as well as emotional balance [1]. The condition is particularly prevalent among middle-aged women and often has a gradual onset. It is a challenging to detect at its early stages. Signs and symptoms include persistent fatigue, weight gain, constipation, hair thinning, dry skin, cold intolerance, and emotional disturbances such as anxiety or depression [2, 3]. Diagnosis is typically based on elevated serum thyroid-stimulating hormone (TSH) level with low T4 [4]. In many cases, it remains undiagnosed due to its nonspecific clinical presentation.

Conventional management of hypothyroidism typically involves lifelong hormone replacement therapy with levothyroxine. Although it effectively normalizes serum hormone levels, many individuals continue to experience persistent symptoms despite achieving biochemical

euthyroidism [5]. Some patients also require frequent dosage adjustments or experience side effects. Others seek non-pharmacological alternatives for long-term management.

These limitations have encouraged the exploration of complementary approaches that address lifestyle, metabolic, and stress-related contributors to thyroid dysfunction. This has further increased interest in integrative healthcare approaches, particularly naturopathy, which aims to address not only the symptoms but also the underlying functional and energetic imbalances contributing to thyroid dysfunction [6].

Naturopathy is a holistic medical system that employs natural therapies—including diet, detoxification, herbal medicine, yoga, and hydrotherapy—to stimulate the body's vitality and healing ability. Unlike conventional therapy, which focuses primarily on hormone replacement, naturopathic interventions target multiple pathways. These include improving gut health, reducing systemic inflammation, enhancing stress resilience through mind–body practices, and restoring neuroendocrine balance—all of which are closely linked with thyroid function. The central framework of naturopathic practice is based on the Panchamahabhoota

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Correspondence to: Dr. Praveena J, Chief Medical Officer, Arokiya Lakshmi Divine Health Care, Dindigul, Tamilnadu, India.

Email: drpraveena1997@gmail.com

theory, which views the body as an interplay of five fundamental elements: Earth (Prithvi), Water (Apas), Fire (Tejas), Air (Vayu), and Ether (Akasha). Disease is considered the result of an imbalance among these elements, accumulation of morbid matter, and reduced vitality; restoration of equilibrium is the primary therapeutic goal [7].

Therapies based on this five-element concept have been increasingly applied in chronic endocrine disorders. Recent clinical research supports yoga as an effective adjunct therapy in thyroid care. Studies have shown reductions in TSH levels, oxidative stress, and symptom burden among patients with hypothyroidism [8, 9]. Likewise, naturopathic detoxification therapies—such as the use of fermented bioenzymes, internal oil therapies, herbal steam inhalation, mud applications, and plant-based treatments—are believed to support gut health, metabolic detoxification, and systemic hormonal balance [10].

This case study documents the effects of a structured 21-day naturopathic detoxification protocol based on the Panchamahabhoota model in a 45-year-old woman with hypothyroidism and elevated TSH. The treatment combined internal and external naturopathic therapies, including herbal bioenzymes, virgin coconut oil, sun-infused oil massages, hydrotherapy, yoga, and pranayama. The clinical outcomes are discussed in terms of both biochemical improvements and symptomatic relief, demonstrating the potential role of naturopathic interventions in the management of thyroid disorders.

CASE PRESENTATION

A 45-year-old woman, presented to the Outpatient Department of Om Sree Narpavi Naturopathy and Yoga Center, Karur, Tamil Nadu, India, with a known history of hypothyroidism. Her chief complaints included generalized body itching, persistent pain in the legs and knees, low back pain, constipation, dry and rough skin, hair loss, and increased psychological stress. She also reported a past history of wheezing episodes. At baseline, her thyroid function test revealed a markedly elevated thyroid-stimulating-hormone (TSH) level of 18.50 $\mu\text{IU/mL}$, indicating insufficient thyroid hormone regulation and ongoing dysfunction despite previous conventional medical interventions. After the 21-day naturopathic program, repeat thyroid testing showed normalization of thyroid parameters: TSH reduced to 3.07 $\mu\text{IU/mL}$, Free T4 was 1.34 ng/dL , and Free T3 was 3.56 pg/mL , confirming biochemical improvement alongside symptomatic relief.

She reported chronic fatigue, irritability, low motivation, and a feeling of heaviness in her body and mind, suggesting systemic metabolic and emotional stagnation. From a naturopathic standpoint, the case was evaluated through pulse diagnosis and a Panchamahabhoota-based assessment of her clinical history. This traditional framework analyzes the imbalance among the five fundamental elements—Earth

(Prithvi), Water (Aapah), Fire (Tejas), Air (Vayu), and Space (Akasha)—which are considered the foundation of physiological and psychological health in naturopathy and traditional Indian systems of medicine.

The therapeutic goal was to restore thyroid equilibrium by addressing these elemental imbalances through a tailored regimen involving holistic detoxification, rejuvenation therapies, dietary modifications, internal oil therapies, stress reduction practices, and lifestyle adjustments. . This integrative approach aimed to support the body's innate healing processes and re-establish metabolic harmony. Informed consent was obtained from the patient for participation in this case study, including permission to publish de-identified information for academic purposes.

On examination, the patient presented with classic symptoms of hypothyroidism. These included generalized body itching, low back and joint pain, constipation, dry and rough skin, diffuse hair loss, fatigue, and psychological symptoms such as irritability, low mood, and mental fog. Pulse diagnosis revealed a deep, slow, and weak pulse, particularly notable at the Chi positions of both wrists. The right Chi pulse, corresponding to Kidney Yang, was deep and feeble, indicating reduced metabolic activity and core vitality. The left Chi pulse, reflecting Kidney Yin, was thin and weak, suggesting a combined deficiency of Yin and Yang energies. The Guan positions showed a soft and slightly slippery pulse, consistent with Spleen Qi deficiency and dampness accumulation. The Cun pulse, particularly on the left side, was thready and weak, indicating Heart Qi deficiency influenced by emotional stress.

Tongue examination supported the pulse findings, showing a pale tongue body with a thin white coating, slightly thicker at the root. The tongue appeared swollen with scalloped edges (teeth marks) and was mildly moist. These findings indicated Yang and Blood deficiency, internal cold, and impaired transformation associated with Spleen Qi deficiency. These diagnostic signs corresponded with symptoms such as cold intolerance, hair loss, constipation, and emotional imbalance.

From a Panchamahabhoota perspective, the Fire element (Agni) was deficient, evident through signs of low metabolism, cold extremities, and fatigue. The Earth element (Prithvi) was excessive but poorly functioning, manifesting as heaviness, joint discomfort, and sluggishness. The Water element (Jala) was stagnant, leading to fluid imbalance, paradoxical dryness, and damp retention. The Air element (Vayu) appeared obstructed, contributing to constipation and irregular nervous function. The Space element (Akasha) was compressed or imbalanced, as reflected in mental fog, emotional isolation, and throat-related disturbances. This was an important observation considering the thyroid's anatomical location. These clinical and energetic findings formed the basis for an individualized detoxification

and rejuvenation protocol aimed at restoring elemental balance and supporting thyroid health.

Table 1 – Timeline

Time Point	Clinical Events and Interventions
Day 0	Baseline assessment conducted; symptoms recorded; thyroid profile showed TSH = 18.50 μ IU/mL. Pulse and tongue examinations completed.
Day 1-7	Initiated internal oil therapy (virgin coconut oil – 6 to 8 drops, 6 times/day). Herbal decoctions and dietary modifications were introduced. Alternate-day full-body massages with herbal oils and fermented bioenzymes were started.
Day 8-14	Detox phase intensified. Plantain leaf baths given twice. Mud baths administered three times during this phase. Herbal steam therapy continued on alternate days. Yoga therapy (thyroid-specific asanas, pranayama, yoga nidra) was practiced daily.
Day 15-21	The rejuvenation phase began. Internal oils, sunbathing, mud packs, and hydrotherapy were continued. A diet rich in wholesome vegan foods and fresh juices was added. Emotional well-being and energy levels improved.
Post Day 21	Treatment was completed. Follow-up thyroid testing was planned. The patient reported symptom relief in digestion, skin texture, and energy.

The diagnostic approach in this case combined conventional laboratory analysis with traditional naturopathic and integrative assessments. The laboratory report revealed an elevated TSH level of 18.50 μ IU/mL, confirming hypothyroidism. This biochemical indicator was consistent with the patient's persistent symptoms—namely fatigue, dry and scaly skin, hair loss, joint stiffness, constipation, and low mood—despite prior conventional care.

From a traditional diagnostic perspective, pulse examination revealed a slow, deep, and weak quality at the Chi positions of both wrists. The right Chi pulse, linked to Kidney Yang, was diminished, indicating compromised metabolic heat and vitality. The left Chi pulse, associated with Kidney Yin, was thin and feeble, suggesting depletion of vital fluids and nourishment. The Guan positions showed a soft and slippery pulse, indicating Spleen Qi weakness and digestive sluggishness. A thready and weak Cun pulse on the left indicated Heart Qi depletion, likely contributing to emotional fatigue [11]. Tongue observation revealed a pale, swollen tongue body with scalloped edges and a thin white coating, especially prominent at the root. This pattern was suggestive of Yang deficiency, weak digestion, and internal accumulation of cold and dampness [11, 12].

In the Panchamahabhoota framework, this case reflected a clear elemental imbalance. The Fire element (Agni) was depleted, correlating with low thyroid activity and impaired digestion. This depletion of Agni reflected reduced metabolic drive, which in modern terms parallels the underactive thyroid state seen in hypothyroidism. The Earth and Water elements were excessive, evident through weight gain tendencies,

heaviness, and fluid stagnation. These manifestations were consistent with the fluid retention, weight gain, and lethargy often reported in hypothyroid patients. The Air element (Vayu) was disrupted, leading to sluggish elimination and nervous system stagnation. This disturbance mirrored the constipation and slowed neural activity commonly associated with low thyroid function. The Space element (Akasha) was compressed, presenting as mental dullness and throat-related dysfunctions—both closely associated with thyroid imbalance. Since the thyroid gland is anatomically located in the throat region, this imbalance in Akasha directly corresponded to dysfunction at the thyroid level [11, 13]. This integrated diagnostic picture supported the need for a naturopathic intervention addressing metabolic activation, elemental correction, and emotional well-being.

Therapeutic Intervention

A structured 21-day naturopathic detoxification protocol was implemented to restore thyroid balance by enhancing metabolic activity, supporting detoxification, and correcting elemental imbalances. The internal detox component centered around the administration of a fermented bioenzyme, prepared using traditional methods. This enzyme was prepared by fermenting cooked rice water for 24 hours, covered with a cotton cloth, and enriched with green chili pedicels, okra, and fenugreek seeds. After 10 hours, the mixture was strained, and indigenous rock salt (Indhu Uppu) was added until saturation. The solution was then filtered again through a cotton cloth and stored in an airtight glass container. The homemade bioenzyme was ready for use. Two drops of the enzyme were added to the patient's drinking water. Continuous hydrotherapy with bioenzyme was encouraged to facilitate toxin elimination and maintain hydration.

Virgin coconut oil was also administered internally—6 to 8 drops taken six times daily—to support cellular metabolism, reduce internal dryness, and alleviate systemic inflammation. Externally, therapeutic oil applications and partial body massages were performed on alternate days using a base oil mixture containing gingly oil, neem oil, castor oil, pongamia (Punga) oil, and mahua (Ilupa) oil. These base oils were infused with decoctions of selected medicinal herbs, including Velparuthi (*Calotropis gigantea*), Modakathan (*Cardiospermum halicacabum*), Seenthil Kodi (*Tinospora cordifolia*), Nochi (*Vitex negundo*), and Vetpalai (*Wrightia tinctoria*). The infused oils were exposed to sunlight for 12 hours before being filtered and applied, thereby enhancing their therapeutic potency.

Therapies alternated between mud baths (administered five times during the course), plantain leaf baths (conducted twice), and supportive treatments on the remaining days. Herbal steam inhalation was provided using a blend of Tulsi (*Ocimum sanctum*), Karpooravalli (*Coleus amboinicus*), Vetrilai (*Piper betle*), and Nochi, supporting both respiratory function as well as skin detoxification. Yoga and pranayama were incorporated

daily, with practices including supine, prone, sitting, and standing postures, along with Surya Namaskar and guided breathwork, all adapted for thyroid regulation and overall vitality. Hydrotherapy sessions featured hip baths, neck packs, spinal sprays, and foot baths, with select applications infused with bioenzyme solutions for approximately 15–20 minute. Mud therapy was administered through full and partial body mud packs to enhance grounding, promote skin detoxification, and restore elemental balance.

All interventions were designed in alignment with the Panchamahabhoota theory, systematically addressing imbalances across the five elements—Agni (Fire), Prithvi (Earth), Jala (Water), Vayu (Air), and Akasha (Space)—to restore systemic and energetic harmony. To strengthen reliability, therapy frequency was expressed as the number of sessions over the 21-day program, and biochemical changes were presented as absolute values and percentage change. TSH decreased from 18.50 μ IU/mL to 3.07 μ IU/mL, reflecting an 83.4% reduction, while free T3 (3.56 pg/mL) and free T4 (1.34 ng/dL) normalized within reference ranges.

Follow-up and Outcomes

Upon completion of the 21-day Panchamahabhoota-based detoxification program, the patient showed significant clinical and functional recovery. Her primary symptoms—including persistent leg and knee pain, low back discomfort, generalized itching, constipation, and dry skin—had notably improved. She also reported smoother and more regular bowel movements, reduced hair loss, improved sleep quality, and enhanced physical energy throughout the day. Subjectively, she experienced a positive shift in emotional well-being; chronic fatigue, irritability, low motivation, and a sense of bodily heaviness gave way to mental clarity, improved stress resilience, and emotional stability.

Biochemical evaluation after treatment revealed a substantial decrease in serum thyroid-stimulating hormone (TSH) levels from 18.50 μ IU/mL to 3.07 μ IU/mL, indicating a return to euthyroid status and corresponding with her clinical improvement. Traditional diagnostic techniques also reflected systemic rebalancing: pulse diagnosis revealed increased strength and balance in the *Chi* (Kapha) positions, while tongue examination showed a healthy pink hue, reduced scalloping, and a thinner coating—markers of improved digestive activity (*Agni*) and elemental harmony. The detoxification regimen was well tolerated with no adverse effects reported. The patient adhered well to the therapeutic schedule and expressed satisfaction with the integrative naturopathic care received.

She was advised to continue internal use of virgin coconut oil (6–8 drops six times daily), engage in daily yoga practice—including *Bhujangasana* (cobra pose), *Trikonasana* (triangle pose), *Setu Bandhasana* (bridge pose), and *Surya Namaskar* (sun salutation)—and maintain a clean plant-based diet rich in seasonal produce and fresh juices. Additional

recommendations included regular hydration with bioenzyme-infused water, periodic herbal oil massages, and steam therapy to sustain detoxification benefits. Follow-ups at one-month and three-month intervals were scheduled to monitor thyroid parameters and overall well-being.

DISCUSSION

This case highlights the potential benefits of a Panchamahabhoota-based naturopathic detoxification protocol in addressing hypothyroidism and related systemic symptoms. The patient presented with elevated TSH (18.50 μ IU/mL), alongside classic symptoms such as fatigue, constipation, hair loss, dry skin, and emotional disturbances—all of which aligned with a traditional understanding of metabolic insufficiency and elemental imbalance. From a naturopathic perspective, the case reflected a profound Agni (fire element) deficiency, manifesting as impaired metabolism and detoxification. Conventional medicine views hypothyroidism as a deficiency of thyroid hormone synthesis or action, while traditional models—including Siddha, Ayurveda, and naturopathy—conceptualize it as a systemic imbalance involving not only glandular function but also digestion, elimination, and mental clarity [14, 15].

The internal administration of virgin coconut oil aimed to enhance lipid-based metabolism and promote anti-inflammatory effects. Emerging research supports the role of its medium-chain triglycerides (MCTs) in improving lipid profiles, modulating gut microbiota, and producing potential thermogenic effects, all relevant to thyroid function [16, 17]. Likewise, fermented bioenzymes—rich in probiotics and organic acids—are believed to support gut-mediated detoxification and modulate immune function. This is consistent with emerging data linking gut dysbiosis to autoimmune thyroid conditions and metabolic disorders [18].

The external therapies used in this protocol, such as herbal oil massage, mud packs, and herbal steam inhalation, may have contributed to lymphatic stimulation, improved peripheral circulation, and enhanced parasympathetic activation. Several studies have reported the impact of massage therapy in reducing stress, improving circulation, and regulating autonomic nervous function—all essential for addressing fatigue and mood-related symptoms [19–22].

Yoga therapy, including asanas such as *Matsyasana*, *Bhujangasana*, *Sarvangasana*, and *Simhasana*, along with pranayama and yoga nidra, may have contributed to improved neuroendocrine integration. A growing body of evidence demonstrates that yoga modulates the hypothalamic-pituitary-thyroid axis, reduces cortisol levels, and improves subjective well-being in individuals with thyroid dysfunction [23]. Elemental analysis based on the Panchamahabhoota model further helped personalize the detoxification sequence. For example, balancing Prithvi (Earth) and Jala (Water) through mud therapy and hydrotherapy aimed to reduce stagnation,

while enhancing Agni (Fire) through internal oils and sunbathing promoted metabolic reactivation.

Post-intervention, the patient's TSH levels decreased to 3.07 $\mu\text{IU/mL}$ —within the normal reference range—suggesting a significant biochemical response. While this cannot be attributed solely to one component of the protocol, the multimodal and integrative nature of the treatment aligns with the naturopathic principle of *Tolle Totum*—treating the whole person rather than isolated symptoms. Importantly, these outcomes support the hypothesis that comprehensive, personalized detoxification—when structured holistically—may correct subtle thyroid imbalances and improve systemic energy metabolism. Nevertheless, as this report represents a single patient, the findings cannot establish causality and must be interpreted with caution. Validation through larger, controlled clinical studies is essential to confirm these effects, establish reproducibility, and clarify the mechanisms through which naturopathic approaches may complement conventional thyroid care.

CONCLUSION

This case report highlights the clinical effectiveness of a Panchamahabhoota-based naturopathic detoxification protocol in the management of hypothyroidism. The patient showed significant symptomatic relief by the end of the 21-day intervention, with marked improvement in fatigue, constipation, cold intolerance, and emotional well-being. Objective biochemical evidence indicated normalization of thyroid function, with serum TSH levels decreasing from 18.50 $\mu\text{IU/mL}$ to 3.07 $\mu\text{IU/mL}$ after treatment. These changes were achieved through a personalized regimen involving internal bioenzyme and virgin coconut oil therapy, herbal oil massages, mud and plantain-leaf baths, yoga, pranayama, and hydrotherapy—each component corresponding to the correction of underlying elemental imbalances according to the Panchamahabhoota model.

This case supports the hypothesis that elemental detoxification, when combined with dietary and lifestyle interventions rooted in naturopathic tradition, can facilitate endocrine regulation and systemic homeostasis without pharmaceutical intervention. However, as this is a single case study, broader clinical validation through controlled trials is warranted to substantiate the reproducibility, safety, and long-term sustainability of such integrative treatment strategies.

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