



Case Study

SHODHANA KARMA: A HOLISTIC APPROACH TO STHANA ROGA

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ABSTRACT

The strength of a nation is deeply rooted in the health of its women, making it fundamental step towards national prosperity. Apart from undergoing natural processes of menstruation, pregnancy etc. *Sthana Roga* is a common condition seen in a woman comprising of lump or palpable mass in the breast. It is computed that about 30% of women are suffering from benign tumors of breast at any age and if not addressed on proper time it may have risk of malignancy. **Methods:** A case report of a female aged 46-years presented with the complaints of lump with tenderness in the breast it was diagnosed as *Sthana Roga*. Based on *Nidana Panchaka*, *Chikista* was planned and *Shodhana Karma* was done based on Ayurvedic principles to manage the *Sthana Roga*. **Results:** *Shodhana Karma* led to significant improvement in overall patient's condition by notable decrease in discomfort, pain, tenderness, reduction in the size of the lump pertaining to the disease and was assessed through necessary investigations. **Conclusion:** As per this case study, the efficacy of age old Ayurvedic treatment modalities has demonstrated its effectiveness in managing symptoms of *Sthana Roga* which was confirmed by the investigations before and after the treatment.

INTRODUCTION

A women's health reflects both her individual biology and her socio - cultural, economic and physical environments. These factors affect both duration and quality of her life. When women try to meet their needs for reproductive health care and other health care services, they often face fragmentation in health care system itself and develop many of the disorders, *Sthana Granthi* is one among them.

Granthi can be understood as a swelling which may be hard or soft, lump or knot. According to *Acharya Sushruta* '*Granthi*' is defined as '*Vrittonatam Vigrathitam Tu Sopham Kurvantyato Granthiri Pradisthaha*' which means a swelling is typically rounded and protrudes above the skin's surface and resembles like a knot.^[1] *Granthi* is a *Kapha Pradhana Tridoshaja Vyadhi*. In Ayurvedic texts, many types of *Granthi* have been mentioned depending on the pathological factor and body tissues involved.

It is also mentioned that when *Vata Dosha* vitiates and affects the *Mamsa* it can lead to the formation of *Saruja Granthi* whereas if *Vata Dosha* vitiates *Meda* it tends to produce *Alparuja Granthi*.

Granthi are present in different parts of the body and are many in number due to their different location, clinical features, types and names. So, this type of growth when developed in *Sthana Pradesha*, it is known as *Sthana Granthi*.

This condition in current era resembles to the most common benign lesion called as fibrocystic breast disease. It is generally observed between 20-50 years of age. The underlying cause is unknown. It could be due to an altered estrogen-progesterone ratio, a relative decrease in progesterone, or the breast tissues being more sensitive to prolactin. Stress can sometimes be associated.

Histologically a fibrocystic mass is characterized by adenosis, fibrosis, ductal epithelial proliferation and papillomatosis. Two types are observed: localized and diffuse. Vast majority (70%) are non-proliferative lesions. Of the proliferative lesions only few (4%) presents with cellular atypia where the risk of breast cancer is high (five-fold). Risk factors are nulliparity and delayed menopause.

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The patients are usually premenopausal. The patient complains of breast pain present throughout the cycle but aggravated pre menstrually (cyclic). The pain is either dull continuous or intermittent and severe.^[2]

The above-mentioned benign lesions are not associated with an increased risk for malignancy; however, it associates with an up to 50% risk of developing breast cancer under certain histopathological and clinical circumstances.^[3]

Hence to avoid the risk of cancer, on a preventive note the management of this problem is possible on the basis of Ayurvedic fundamental principles. Hence to find a long-lasting solution without any adverse effects is the need of the hour. Considering the above facts, it is necessary to pay attention to this most troublesome disease. Only after removal of vitiated *Doshas* through *Shodhana*, the signs and symptoms of the disease can be managed. Hence this holistic approach has been selected to pursue its perfect cure through Ayurveda.

AIMS AND OBJECTIVES

1. To understand the clinical aspects of *Sthana Granthi*.
2. To assess the efficacy of *Shodhana Karma* and *Shamana Chikista* in management of *Sthana Granthi*.

MATERIALS AND METHODS

A female patient aged 46 years, visited to the OPD of dept. of Prasuti Tantra and Stree Roga of SSCASRH on 22 February 2023 with a complaint of palpable mass in both breasts which was associated with dull pain and tenderness from the past 8 months.

Case Report

Patient was apparently normal 8 months ago with a regular menstrual history and without any breast discomfort and then later she noticed a palpable mass in both the breasts and gradually associated with dull pain and tenderness. And occasionally she also noticed that pain was continuous in nature and the intensity increases at the time of menstruation and also aggravates on coughing. Patient had taken analgesics for the same but did not find much relief. Hence patient came to our hospital for the further management.

Poorva Vyadhi Vrittanta

H/o Hypertension for 6 years and diabetes mellitus for 5 years and on medication.

- ✓ Tab Amlong 5mg (1 – 0 – 0) After food for 6 years
- ✓ Tab Gluconorm (1 – 0 – 1) Before food for 5 years

Vaiyaktika Vrittanta

Ahara: Vegetarian - 3 times a day (regular intervals)

Vihara: *Avyayama, Vegadharana*

Nidra: Disturbed (7 to 8 hours), no day sleep

Vyasana: Nil

Manasika Bhava: *Dukha, Chinta*

Agni: *Mandaagni to Vishmagni*

Koshtha: *Madyama*

Rajo Vrittanta

Age of menarche: 15 years of age

LMP: 15/02/2023

Menstrual cycle: regular - 5 – 6 days flow/28-30 days interval.

Amount: Moderate

Day 1-2 (3 pads – 70 to 80% soakage)

Day 3-5 (2 pads – 60 to 50% soakage)

Day 6 (spotting)

Foul smell: Absent

Color: Dark red

Clots: Absent

Pain: Present (mild pain on 1st day) VAS: 1

Anubandi Vedana: Pain and tenderness in breasts during menstrual cycle for 8 months. VAS: 8

Martial Life: 21 years (separated in the past 4 years)

Coital history: 4 years back

Contraceptive history: Nil

Obstetric History: POA1L0D0, A1 – MTP (at 8 weeks of gestation) in 2015

Ashta Sthana Pareeksha

Nadi: 82 bpm, *Pitta – Vata Pradhana*

Mala: *Prakruta*, once a day

Mutra: *Prakruta*, 5-6 time a day

Jiwha: *Ishat lipta*

Shabda: *Prakruta*

Sparsha: *Anushna Sheeta*

Drik: *Prakruta*

Akruti: *Madhyama*

Dashavidha Pareeksha

Prakruti: *Pitta - Vata*

Vikruti: *Vata – Pitta Pradhana Tridosha*

Sara: *Madhyama*

Satmya: *Mishra Rasa Satyma*

Samhanana: *Madhyama*

Vaya: *Madhyama*

Pramana: *Madhyama*

Ahara Shakti: *Abhyavarana Shakti – Madhyama*

Jarana Shakti: *Avara*

Vyayama Shakti: *Avara*

Satwa: *Madhyama*

Manasika Sthithi: *Chinta, Dukha- (Rajo Guna Pradhana)*

General Examination

Temperature: 98.1°F

Pulse: 82 bpm

BP: 130/80 mmhg

Weight: 68.5 kg

Height: 155cm

BMI: 28.9kg/m² (Over weight)

Pallor, icterus, cyanosis, clubbing, edema, lymphadenopathy: Absent

Samsthanika Pareeksha

CNS: Patient is conscious and well oriented to time, place and person.

CVS: S1 S2 heard, no murmurs.

R/S: No vesicle breath sounds heard, no added sound.

Local Examination

Breast Examination: Bilaterally symmetrical.

Left breast: Palpable mobile mass measuring about 2-3cm in upper outer and lower inner quadrant with tenderness present.

Right breast: Palpable mobile mass about 3-4cm in lower outer quadrant with tenderness present.

P/A Examination: Soft, non tender, bowel sounds present.

P/S Examination – Mild cervical erosion present, no discharge, no polyp, vaginal wall healthy.

P/V Examination: Normal size/anteverted/free fornices/ cervical motion tenderness absent.

Nidana Panchaka

Nidana

Aharaja: Ati Ruksha, Sushka, Katu Ahara Sevana.

Viharaja: Avyayama, Vegadharana

Manasika: Dukha, Chinta

Poorvaroopa: Shula

Roopa: Sthana Shula, Raga, Granthi.

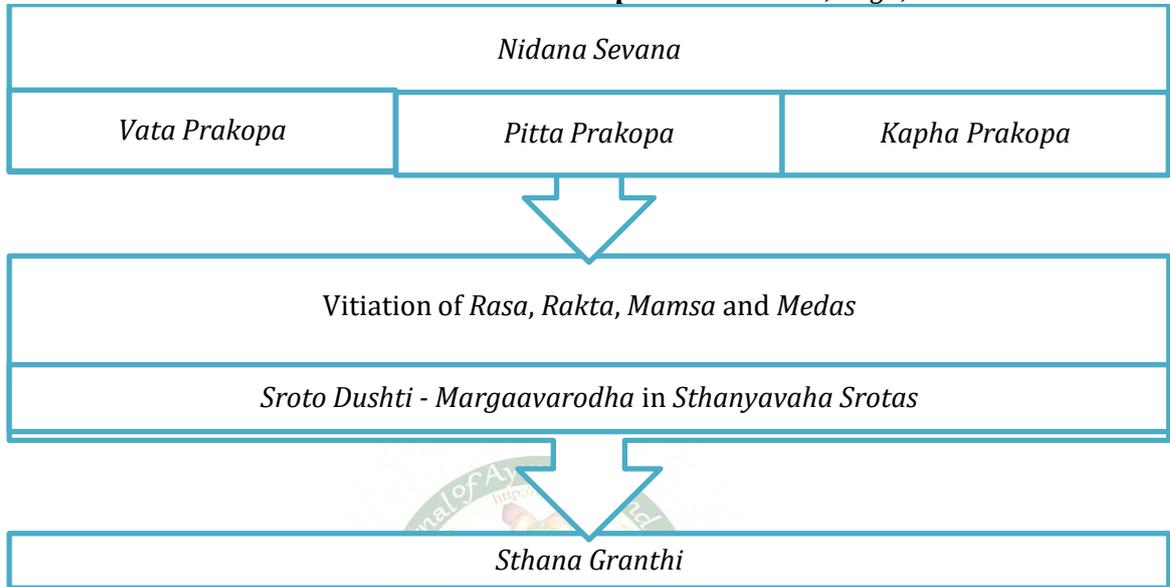


Fig 1: Samprapti

Samprapti Ghataka

Dosha: Vata – Pitta Pradhana Tridosha

Dushya: Twak, Rasa, Shonita, Mamsa, Meda

Agni: Vishamagni

Srotas: Rasavaha, Raktavaha, Mamsavaha, Medovaha

Sroto Dushti: Sanga, Vimarga Gamana

Udhabhava Sthana: Amashaya

Sanchara Sthana: Sarva Shareera

Vyakata Sthana: Sthana

Chikitsa

Rogamarga: Bahya

Sadyasadhyata: Krchrasadhya

Vyadi Vinishchaya: Sthana Granthi (fibrocystic breast disease)

Chikitsa Sutra ⁽⁴⁾

ग्रन्थिर्महान्मांसभवस्त्वनर्तिर्मेदोभवः स्निग्धतमश्चलश्च॥८१॥
संशोधिते स्वेदितमश्मकाष्ठैः साङ्गुष्ठदण्डैर्विलयेदपक्वम्।
(Ch.sa.ch 12/82)

Table 1: Planned for Sthana Lepana, Classical Virechana, Yoga Basti

Date	Treatment given	Medicines
22/2/23 to 24/2/23	Deepana – Pachana	Chitrakadi vati (1-1-1) Before food
22/2/23 to 24/2/23	Sthana Lepana	Panchavalkala Churna and Shatavari Churna
25/2/23	Snehapana	Guggulu Tiktaka Ghrita
26/2/23 to 28/2/23	Sarvanga Abhyanga and Bashpa Sweda	Dhanwantaram Taila
28/2/23	Virechana Karma	Trivrut Lehya – 60gm Triphala Kashaya – 100 ml Total no. of Vegas – 16
1/3/23 to 7/3/23	Samsarjana Krama	Peya, Manda, Vilepi
8/3/23 to 12/3/23	Yoga Basti followed by Samsarjana Krama	Niruha Basti – Dashamoola Kashaya Basti (530ml) Anuvasana Basti – Sahacharadi Taila (60ml)

Shamana Aushadhi – For 2 months

Tab. *Kanchanara Guggulu* (1 – 0 – 1) after food with *Jala* as *Anupana*.

Tab. *Gomutra Haritaki* (1 – 0 – 1) after food with *Jala* as *Anupana*.

Tab. *Nityam* (0 - 0 – 2) after food with *Jala* as *Anupana*.

Tab. *Nishamalaki* (1 – 0 – 1) after food with *Jala* as *Anupana*.

Yashtimadhu Rasayana (1tsp – 0 – 1tsp) with *Jala* as *Anupana*.

Tab. Gluconorm (1 – 0 – 1) before food

Tab. Amlong 5mg (1 – 0 – 0) after food

OBSERVATION AND RESULTS

Table 2: After 2 months

	Before Treatment	After Treatment
Pain - VAS scale	Present - VAS scale 8	Absent - VAS scale 0
Tenderness	Present	Absent
On examination - Breasts	Palpable mass in left breast measuring about 2*3 cm and in left axillary region – upper and lower inner quadrant Palpable mass in right breast about 3*4 cm in lower outer quadrant.	Palpable mass in left breast and axillary region – absent Palpable mass in right breast – size has been reduced to 1*2 cm in lower outer quadrant.
Mammogram	Right Breast: Simple cysts of size 3.5 x 4 mm in 10 o clock. Another simple cyst of size 3.3 x 3.7 mm at 8 o'clock. Left Breast: Simple cysts of size 3.4 x 3.8 mm in 10 – 11 o' clock. Few prominent retro areolar ducts noted, maximum diameter measures 2mm Impression: Bilateral breast cysts as described.	Right Breast: Heterogeneous fibroglandular. Tiny enhancing measuring 4.8 x 4.5 mm noted in lower outer quadrant of right breast. Left Breast: Heterogeneous fibroglandular. No enhancing focal lesions noted. Impression: Tiny enhancing focus in right breasts – BIRADS II No other significant abnormality detected
FNAC	Impression: suggestive of benign cystic lesion.	
Blood investigations	Hb – 12.5 gm% Total count – 11,900 Platelet count – 3.6 lakhs/cumm FBS – 101 mg/dl PPBS – 230 mg/dl	
Urine test	Normal Parameters	

DISCUSSION

While reviewing this case study, several factors have been considered, including patient’s medical history, preexisting factors, life style choices and environmental influences.

Understanding Menopause through Ayurveda

Menopause is permanent cessation of menstruation at the end of reproductive life due to loss of ovarian follicular activity, where perimenopause is the period of time during which a woman passes from the reproductive to the non reproductive stage when the menstrual cycle is likely to be irregular.^[5] In Ayurveda *Rajonivritti* which is not described separately as a pathological condition or severe health problem in Ayurvedic classics.^[6] According to *Acharya Sushruta*, the age of *Rajonivritti* happens at *Panchakshatam Kshayam* that is at 50 years of age. Since *Rajonivritti* is a naturally occurring phenomenon in a female body, it can be categorized under

Swabhavika Vyadhi mainly as *Jara Avastha*. The various symptoms of early stage of *Jara Avastha* are observed in *Rajonivritti Janya Avastha* also. Hence the patient’s age is near to *Rajonivritti Kala* and *Rajonivritti Anubanda Lakshanas* seen in this patient based on *Dosha* predominance are, due to *Vata* – anxiety, difficulty in getting sleep, due to *Pitta* – irritability and due to *Kapha* – weight gain, depression, *Granthi* formation that is fibrocystic changes in breast.

Relationship between Menopause and Breast disorders: Menopause does not cause cancer, but the risk of developing fibrocystic changes or benign lesions which may in turn increase the chances of malignancy as a woman ages. Although many risk factors may increase the chance of having breast cancer, it is not yet known just how some of these risk factors cause cells to become cancerous.^[7] In this case, benign

lesions with fibrocystic changes have been seen and it is confirmed through the mammogram.

Role of Pre - existing factors (Diabetes mellitus and hypertension): The systemic disorders seen in this patient like diabetes and hypertension acts as a pre - existing causative factors for the development of breast disorder to some extent. In diabetes breast is also affected in many ways, but it is still not decisively established as a complication of diabetes. With this co - existence association between diabetes mellitus and fibrocystic changes in breast can be called as Diabetic Mastopathy. This condition is poorly diagnosed and not conclusively established as a complication of diabetes. Breasts, as expected, are neglected in the routine clinical examination of diabetic patients and therefore, the prevalence of this complication is unknown, although it has been estimated to represent a very small proportion of benign breast lesions. Diabetic mastopathy is an uncommon proliferation of fibrous tissue in the breasts that mimics tumour. This condition commonly seen in perimenopausal and menopausal women.^[8] Other factor is hypertension, so several mechanisms can be seen in the relationship between hypertension and breast disorders. Firstly, disorders in the breast and hypertension may share common pathophysiological pathway mediated by adipose tissue, which could cause chronic inflammation and further increased the risk of both breast cancer and hypertension. Another possible explanation is that hypertension may increase breast cancer risk by blocking and subsequently modifying apoptosis, thereby affecting the regulation of cell turnover.^[9] Hence these systemic disorders might be one of the key contributors to the development of breast disorders. The above said preexisting conditions are responsible for formation of Ama and are majorly contributing in *Dosha Samprapti* and complicating the disease further making it *Krichra Sadhya*.

Analyzing Nidana Panchaka: *Nidana Panchaka* is indeed a fundamental tool in Ayurveda for diagnosing *Vyadhi*.^[10] Combining all five *Nidana Panchaka* provides a comprehensive understanding of the *Vyadhi*. *Nidana Panchaka* identified in this patient gives a direct idea of *Nimittakarana* and an inference about *Dosha Dushya Sammorhana*. *Nidanas* like *Ati Ruksha*, *Sushka*, *Katu Ahara Sevana*, *Avyayama*, *Vegadharana*, *Dukha*, *Chinta* leads to *Tridosha* vitiation with preexisting *Dosha Dushti* where *Vata* does the disruption of normal movement and function with the breast tissues, increase *Pitta* leads to the heat and inflammation causing changes in the breast tissue and *Prakupita Kapha* causes excessive accumulation of fluid leading to stagnation and growth of abnormal tissue in the *Sthana* causing *Sthana Granthi*. Comparing to the modern science, this patient is in premenstrual

tension syndrome have estrogen predominance over progesterone and more likely to develop fibrocystic breast disease. Similarity of symptoms has been seen in fibrocystic breast disease as well as in this patient. As patient experience cyclically each month, near the time of menstruation, estrogen induced symptoms like irritability, anxiety, depression, breast pain and tenderness.^[11]

Role of Shodhana in Sthana Roga: Based on these above-mentioned factors *Shodhana* was planned to remove the vitiated *Doshas*. So here *Virechana* helps in expulsion of *Pitta Dosha* out of the body. Apart from *Pitta* it is also useful in disorders in which *Pitta* is associated with *Vata* and *Kapha Dosha*. *Virechana* helps in *Indriya Shuddhi* and *Dhatu Shuddhi* and promotes metabolism and assimilation by stimulating the *Dhatwagni* while simultaneously eliminating the metabolic products specially *Pitta*. In this case, to reduce *Pitta*, *Virechana* was planned to pacify inflammation and tenderness.

Basti is the best therapy to regulate the *Vata Dosha* mainly associated with pain which is governing force behind all the physiological and pathological processes both in the body and mind. It acts as both *Samshodhana* and *Samshamana*. It provides immediate strength; hence it is considered as *Ardha Chikista* - supreme line of treatment particularly in aged persons. As patient is in *Rajonivriiti Kala*, *Vata* is in predominant stage and *Shula* is one of the complaints in this case. So, to pacify *Vata*, *Yoga Basti* was planned with *Dashamooladi Niruha Basti*, and *Sahachardi Anuvrasana Basti*.

The medicines used in *Shodhana Chikista* in this case have ultimate effect on the *Sthana Granthi*. *Guggulu Tiktaka Ghrita* helps in treating the condition *Shophya*, *Arbuda*, *Gulma* and *Meha*. *Dhanwantaram Taila* acts on *Sarva Vata Vikaras*, *Gulma* and *Yoni Roga*. *Sahacharadi Taila* acts as *Vatahara*, *Gulma* and *Yoni Roga*. *Dashamoola* comes under *Shothahara Dashemani Gana* and acts as a *Vatahara* and *Rasayana* in turn tackling *Sthana Granthi*, *Shula* and acting as a *Rasayana* in *Rajo Nivriti Avastha*.

Sthanika Chikista: *Sthana Lepana* with *Panchavalkala Churna* and *Shatavari Churna* which has the properties like *Shophahara*, *Vranaropana*, *Vedanasthapana*, and *Tridoshashamaka* helps in this disease.

Shamana Chikista: *Nishamalaki* has the *Rasayana* effect which is very useful to control the blood glucose levels having properties like *Pramehaghna*, *Vayasthapana*, *Sarvadosha hara*, *Daha hara*. *Yashtimadhu Rasayana* acts as antioxidant, immune modulator and antidepressant agent, *Pitta Anila Asrajit*. *Gomutra Haritaki* is a *Vatahara* and indicated in *Gulma*, *Meha*, *Granthi*, *Arbuda*, *Aadhya Maruta* and *Shvayathu Roga*.

Hence *Sthana Granthi* presenting with the symptoms palpable lump, pain and tenderness can be effectively treated with *Shodhana Karma* and helps in reducing symptoms.

Pathya: Ahara – Purana Shali, Yava, Godhuma, Mudga, Kulattha, Rakta Shigru, Patola, Punarnava.

Vihara - Walking, physical exercise, meditation.

Apathya: Ahara - Mamsa, Guda, Dadhi, Amla and Katu Rasa Pradhana Ahara, Vidhai Anna Sevana.

Vihara - Vegadharana, Ratri Jagarana, Diwaswapna.

Aachara Rasayana has to be followed which is related to lifestyle management. It is important to follow the regimens such as *Sadvritta*, *Dinacharya*, *Ratricharya* and *Ritucharya* because they help to relieve stress, delay in aging process and symptoms associated with menopause can be minimized.

CONCLUSION

As science progresses, treatment methods undergo constant refinement, to provide patients with the most effective and personalized care possible. So, the treatment having maximum benefits with fewer side effects is well anticipated by Ayurveda management. As per this case study, the efficacy of age old Ayurvedic methods has once again demonstrated in *Sthana Roga* is very effective which has confirmed by the clinical features and investigations before and after the treatment by remarkable reduction in symptoms in both breasts and disappear of lump in left breast. The proper *Ahara Vihara*, *Shodhana* and the *Aushadha Sevana* with along with diagnosing the disease in appropriate time helped to cured this condition effectively.

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