

E ISSN 2350-0204

IJAPC

VOLUME 11 ISSUE 3 2019

www.ijapc.com Greentree Group Publishers (GGP))



Int J Ayu Pharm Chem

CASE STUDY

www.ijapc.com

e-ISSN 2350-0204

Management of Kitibh Kushtha- A Case Study

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ABSTRACT

BACKGROUND Today with changing lifestyle, dietary habits, Pollution, various skin diseases are raising their hands. *Kitibha Kushtha* is one of such skin diseases explained as *Kshudrakushtha* in ayurvedic classics with vata-kapha involvement characterized by skin which is blackish brown in colour (*shyawatwa*), rough in touch (*kharatwa*) & scaly (*Khartwa*), hard to touch (*parushatva*) & dry (*Rukshtwa*). Treatment of skin disease is burning issue in modern medical science due to temporary relief and side effect of steroid therapy. Here Ayurveda plays an important role to find safe and effective alternative. The present work has been undertaken to evaluate effect of *Shodhan* and *Shaman* treatment in *Kitibha Kushtha* hence carried, management of *Kitibha Kushtha*- A case study.

MATERIAL & METHODS For present study, we have reported a 63yr. male patient having symptoms similar to *kitibha kushtha*. He was suffering from scaly lesion over left hand since 1 months with itching, burning and slight watery discharge. The patient was treated with *Shodhan* followed by oral medications with *nidanparivarjan*.

Information collected from reference book, case paper. Present study was carried out in Twacharog OPD of Govt. Ayurveda College, Nagpur.

CONCLUSION Treatment was given according to predominance of *doshas*. In this paper, successful management of this case with shodhan and shaman treatment is being highlighted which will be a documented evidence for the future case studies.

KEYWORDS

Kitibha, kushtha, shodhan, Shaman chikitsa



Received 04/08/19 Accepted 14/10/19 Published 10/11/19



INTRODUCTION

Skin is the organ of *Sparsh* i.e. fundamental energy of sense of touch. Being largest organ of the body¹, proper functioning of skin serves mental and physical health. Skin is not a simple barrier separating body's internal and external environment, but also vehicle for the biological and social communication to the external world. Unhealthy skin or any skin conditions are always hampered mentally, physically and socially.

Today with changing lifestyle, dietary habits, Pollution, poor hygiene, stress factor various skin diseases are raising their hands. In Ayurveda all the skin disorders are have been included under broad heading of Kushtha and further classified into Mahakushtha Kshudrakushtha². and Kitibha Kushtha is one of such skin diseases explained as Kshudrakushtha in ayurvedic classics with vata-kapha involvement³. Tridosh vitiates by above mentioned mithyahar-vihar which further lead to the affliction of Rasa, Rakta, Mansa, Lasika². Kitibh Kushtha characterized by skin which is blackish brown in colour (shyawatwa), rough in touch (kharatwa) & scaly (Khartwa), hard to (parushatva) & dry (Rukshtwa)⁴. Treatment of skin disease is burning issue in modern medical science due to temporary relief and side effect of steroid therapy. Here Ayurveda plays an important role to find safe and effective alternative with unique treatment modality including *Shodhan*, *Pathya-apathya* and genuine ayurvedic medicines. The present work has been undertaken to study- management of *Kitibha Kushtha-* A case study.

AIM AND OBJECTIVES

To evaluate effect of *Shodhan* and *Shaman* treatment in *Kitibha Kushtha*.

MATERIALS AND METHODS

Case Presentation

For present study, we have reported a 63yr. male patient who was apparently normal before one month. Suddenly he developed whitish scaly lesion over left forearm (extensor surface) with itching, burning and slight watery discharge. Patient is retired bus conductor belonging to middle socioeconomic class. On the basis of Nidan (diagnosis), Lakshanas (Symptoms) the case was diagnosed as Kitibha Kushtha and with treated Shaman (suppressive) medicines followed by Sthanik Shodhan (Raktamokshan) with nidanparivarjan.

History of the patient- He is non-diabetic, non-hypertensive with no family history found regarding any skin conditions.

Ashthavidha Pariksha-



Nadi (Pulse)- *madhyam* (74/m)

Jivha (tounge)- saam (coated)

Druk (vision)- *prakrut* (Normal)

Mala (Stool)- samyak

Shabd- prakrut

Aakruti – Madhyam

Mutra (Urine)- samyak

Sparsha- prakrut

Nidan (Diagnosis) Samprapti and

(Pathology)

Irregular food habits in young age, irregular sleep, excessive spicy food (Katu rasa atisevan), excessive tea etc. and in old age, sometimes negligence induced stress acted as triggers for the vitiation of tridosha with, further afflicted Rasa-rakta-mansa-lasika leading to symptoms.

Clinical findings of *Kitibha Kushtha*⁴

Shyawatwa (Blackish/dark discolouration of skin)

Kina Khar sparsh (Rough in touch/scaly) parushatva (Hard), Kandu (Itching).

Treatment Plan

The patient was administered with Shaman externally treatment and internally followed by Sthanik Raktamokshan (Jalaukavacharan)⁵. On 2 feb 2018 patient came for first time. After two settings of Jalaukavacharan, further treatment was given and follow up was taken after 7 days. Likewise, each follow up was taken after 7 days that to previous. In each follow up treatment was given considering sign and symptoms, as shown whole treatment schedule in table no.1.

Date	Treatment		
3/02/2018	Jalaukavacharan (Leech treatment) (Sthanik Shodhan)		
4/02/2018	Jalaukavacharan (Sthanik Shodhan)		
5/02/2018- 11/02/2018 (7days)	Sanjivani Vati 1-0-1 before food with lukewarm water		
	Siddharthak Kwath 40ml BD after meal		
	Siddharthak Snan (Parishek)		
	Tankan+ Kankshi Dhavan		
12/02/2018- 18/02/2018 (7days)	Sanjivani Vati 1-0-1 before food with lukewarm water.		
	Siddharthak Kwath 40ml BD after meal		
	Panchatikta Ghruta 15ml (morning)		
	Siddharthak Snan (Parishek)		
19/02/2018- 25/02/2018 (7 days)	Siddharthak Kwath 40ml BD after meal		
	Panchatikta Ghruta 15ml (morning)		
	Siddharthak Snan Parishek		
	Tankan+ dadhi (Curd) lepa alternate days		
	(3 times a week)		
26/02/2018- 4/03/2018 (7days)	Siddharthak Kwath 40ml BD after meal		
	Panchatikta Ghruta 15ml (morning)		
	Siddharthak Snan Parishek		



Assessment criteria for parameters like burning, itching, discharge, scaling, nature of lesion, colour of lesion etc. was taken according to gradation as shown as table no.

2.

Table 2 Showing gradation for parameter assessment

Parameter	Grade 0	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Burning	No burning	Mild (+)	Moderate (++)	Severe (+++)	-	-
Itching	No itching	Mild (+)	Moderate (++)	Severe (+++)	-	-
Discharge	Dry lesion	Moist but not measurable	Moderate moist	Lesion field with fluid	-	-
Scaling	No scaling	Mild scaling by rubbing	Moderate scaling by rubbing	Severe scaling or without ite	_	-
Nature of Lesion	No lesion	Mild visible	Moderately Visible	Prominent	-	-
Colour	Normal	Near to normal	Blackish	Brownish	Slight pink whitish	White

OBSERVATIONS AND RESULT

Burning, itching, discharge, scaling was decreased gradually after starting treatment and further with each follow up. As shown in table no.3, from mild there was absence

of discharge on 3rd day after two settings of *Jalaukavacharan* (*Sthanik Shodhan*), burning supressed totally on 3rd day from mild.

Table 3 Showing observation after each follow up

Days	Burning	Itching	Discharge	Scaling	Nature of	Colour of
					lesion	lesion
1st day	G1	G3	G1	G2	G3	G5
(2/2/18)						
3rd day						
(4/2/18)	G 0	G 3	G 0	G2	G 3	G 5
10 th day						
(11/2/18)	-	G 2	-	G2	G 3	G 4
17 th day						
(18/2/18)	-	G 1	-	G 1	G 2	G 3
24 th day						
(25/2/18)	-	G 0	-	G 0	G 2	G 2
31st day						
(4/3/18)	-	-	-	G 0	G 1	G 1



Itching subsided gradually from severe on 24th day from starting treatment as shown fig.3.



Figure 3 25/2/2018 (Lesion on 24th day)
There was no scaly appearance over lesion on 24th day which was moderately present before treatment as shown in fig.3. Lesion was mildly smudged from prominent after 31days of treatment. Texture of lesion was improved gradually near about to normal texture of skin after 31st day after treatment as shown in fig.4.

From 1st day, on each follow up, effect of treatment was assessed on the basis of parameters gradation. Thus, the final result showed gradual relief with respect to sign

and symptoms in patient after and before treatment.



Figure 4 4/3/2018 (Lesion on 31th day)

DISCUSSION

Medications were prescribed considering predominance of *doshas*, their probable action on *Kushtha* and properties of their ingredients which contribute towards kushtaghna property. Selected formulations like Siddharthak Kwath, Sanjivani Vati etc are described with their mentioned classical references, ingredients and action as shown in table no.4.

Table 4 Prescribed medications with ingredients and their action.

Medication	Ingredients	Action
Siddharthak Kwath ⁶	Musta, Madanfal, Triphala,	Kushthaghna, twakdoshahar,
(Charak/Kushthachikitsa)	Karanj, aaragwadh, Indrayav, darvi, saptaparna	shopha, Pandu
Sanjivani Vati ⁷	Vidang, Suntha, Pippali,	Pachan-deepan, shoshan
(vaidyamanorama/ agnimandyadhikar)	Haritaki, Bibhitak, Vacha, Guduchi,	• •
Tankan (borax) ⁸	-	Katu, Ruksha, Ushna, Kaphavishleshak, kanduhar, vrana-nashak
Kankshi (Alum) ⁹	-	Kashay, Katu, Ushna, Kanduhar
Panchatikta Ghruta ¹⁰	Guduchi, Nimb, Patol, Kantakari,	Kushtha, Kaphaghna,
(Sharangdhar Samhita) Na	Gokshur	Krumigh



The patient was a retired bus conductor. Due to the occupation he developed irregular food habits, sleep since young age. In old age, sometimes negligence induced stress acted as triggers for the vitiation of tridosha with, further afflicted Rasa-raktamansa-lasika leading to symptoms. Except slight discharge most of the signs & symptoms like scaling, itching, etc in above case were near about similar to that of Kitibha Kushtha. Treatment were given as per Lakshanas and nidanas according to Kushtha Chikitsa. Treatment was started with Jalaukawacharan up to reduced burning. Then oral medications were As Kitibha kushtha started. is Raktpradoshaj vyadhi and was with pittanubandha, Jalaukavacharan was selected as sthanik shodhan considering old age, delicacy of patient. Discharge was totally subsided after given Sanjivani Vati

which was used according to samata & for shoshan karm as it contains Ushna dravya like bhallatak & Vatsanabh etc. Tankan and Kankshi dhawana was used to reduce discharge. Sidharthak Snan is mentioned itself for skin ailments externally as well as according internally to its pharmacodynamic properties. Itching was yet as it is after subsiding discharge. Therefore, Panchatikta ghruta was started to reduce severe itching and dryness through vat-shaman with raktaprasadan, twak-mansa sthirikaran as contain tikta rasa (bitter taste). Itching and scaling also decreased gradually. After enough vatshaman with reducing itching, kshar (Alkali) i. e. Tankan with curd was applied over lesion for scraping of remaining scaly schedule part. Treatment has given gradually symptomatic relief as shown in table no. 5.

Table No. 5: Showing Results BT and AT

Parameters	BT (Before Treatment)	AT (After Treatment)
Burning	Severe	Absent
Itching	Severe	Absent
Discharge	Slightly Present	Absent
Scaling	Moderately Present	Absent
Nature of lesion	Prominently visible	Mild visible
Colour of lesion	Whitish	Near to Normal
Dryness	Present after Jalaukavacharan	Absent

CONCLUSION

Treatment was given according to predominance of *doshas*. Properties of ingredients of selected medicines mostly have *Kapha -Vataghna* and *Kushthaghna*

properties which helps for *Sampraptibhang* (breaking down pathology) of *Kitibha Kushtha*. In this case, significant improvement was seen regarding symptoms like discharge, burning, itching,



scaling with near about normal texture of skin lesion. So, understanding of involvement of Dosha, Dhatu, Mala i.e samprapti vighatan in disease has their own importance for planning of treatment. With proper treatment, patient's co-operation is also another important issue concern with significance results. Patient was advised to follow pathyaapathya (DO's and DON's) and nidanparivarjan (prevention) as kitibha Kushtha is reverting type of skin disease. This case study is evidence for the successful management of Kitibh Kushtha through sthanik shodhan & Shaman Chikitsa.



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