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CASE STUDY

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A Success Story of Ayurvedic Management a Case of Psoriasis (Ekkushtha)

Drashty D Kambad^{1*}, Tejal J Ganvit², Binal Gondalia³, Radhika A Gurjar⁴, Surendra A Soni⁵

¹⁻⁵PG Department of Kayachikitsa, GAAC, Ahmedabad, Gujarat, India

ABSTRACT

Psoriasis is an auto-immune disease in which there is scaling and itching in the papulo squamous lesions of skin which disturbs the daily routine of the patients. Because of recurrent nature of the disease, it remained a great problem since past many decades. Modern medicine provides temporary & symptomatic relief but also has many side effects. In Ayurvedic context, this condition can be considered as "Ekakushtha".

In current case study, A sixty years aged male diagnosed as a case of Psoriasis (*Ekakushtha*) was treated on *Ayurvedic* Principles of *Kushthachikitsa* viz. *Dipan, Pachana, Sneha-pana* and *Virechana karma* and patient showed marked symptomatic improvement with the treatment.

KEYWORDS

Psoriasis, Ekakushtha, Dipan-Pachana, Sneha-pana, Sodhana karma



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INTRODUCTION

Ayurvedic text does not give a direct reference towards a single disease which can be compared with modern disease Psoriasis. Many entities like Kitibha, Charmadala, and Ekakushtha are compared with it. Psoriasis is a long-lasting autoimmune disease characterized by patches of abnormal skin. This skin patches is typically red, itchy and scaly. The diseases Kitibha do not have scaling as such but Shyavavarna and Khara sparsh can be noted. Charmadala on the other hand has Sphota and Ruja as the important signs along with scaling. Ekakushtha consist of the signs and symptoms i.e. Aswedana, Mahavastu and Matsya-shakalopam which can be compared with Psoriasis and hence it has been taken as the analogue to psoriasis in the present clinical study.

Psoriasis is considered as a genetic, immunological and systemic disorder. With a prevalence of 1-3% and its socio economic impact is remarkable¹. Recently developed and upcoming biological treatments after therapeutic new approaches². All the skin diseases in Ayurveda have been discussed under the broad heading of "Kushtha" Almost all skin diseases can be categorized under 18 subtypes of Kushtha ('MahaKushtha' and KshudraKushtha'³.

In Ayurvedic line of treatment, Acharya Charaka has given most importance to Sodhana Chikitsa and then Shamana Chikitsa⁴. So here we choose to give first Virechana Karma as Shodhana Chikitsa and after that Patoladi Kwathaas Shamana Chikitsa.

LITERARY REVIEW

The word *Kushtha* means which make ones skin look disgraceful or ugly. In *Ayurvedic* classics, *Kushtha Roga* is divided into two groups. *Mahakushtha* and *Khudrakushtha* which are again classified into seven types and eleven types respectively. Due to *mithyaahara vihara* and *karma*, *Tridosha* get vitiated affecting the *Twak*, *Rakta*, *Mamsa* and *Ambu* which resulted in *kushtha*. It is classified as one of the "Ashthamahagada"⁵.

Ekakushtha is one of such disease explained under the heading of Khsudrakushtha. According to AcharyaCharak, Ekakushtha is due to vitiation of Vata and Kapha⁶. The clinical feature of Ekakushtha described by Acharya Kashyap represents remission, relapse and seasonal variation which are present in psoriasis.

In this present study, a patient who visited OPD of PG Department of *Kayachikitsa* GAAC, Ahmedabad was diagnosed as



Psoriasis (*Ekakushtha* as per *Ayurved*), and he has been treated on *Ayurvedic* Principles and got remarkable relief.

CASE STUDY

A 60 year old Indian, married, non-Alcoholic male patient (OPD number:18036IPD Number:760) consulted in Out Patient Department of *Kayachikitsa* Govt. Akhandanand *Ayurved* College, Bhadra, Ahemdabad with complains of gradually progressive red, scaly pathches all over the body since 5 years along with excessive burning sensation, which is more in summer season.

PAST HISTORY

From the early age,patient had habit of chewing tobacco occasionally (4-5 time/week). He took treatment from an *Ayurvedic* Physician where his *virechana* karma had been done 2 years back, but 6 months after *virechana*he again suffered from same problem. Then he took medicines for same for many years but did not get any relief.

Operative history: Patient was operated

Family History: Nothing Specific.

Personal History:

for fistula in 2002.

Diet: Vegetarian Appetite: Good Bowel: 1 time / day (Normal Consistency

bowel)

Micturition: Samyaka

Sleep: Disturbed due to itching.

Addiction: Tobacco chewing (4

times/week) Tea (4-5 time/day)

Patient having no any history of hypertension, DM or any other major

illness.

AsthaVidhaPariksha

Naadi:VataKapha

Mootra: 4-5 times/day, 1-2 times/ night,

Samyaka

Mala: 1 time / day (Normal Consistency)

Jihwa: Sama Shabda:Samyak

Sparsha: Anushnasheeta, Rukshata

Drik: Samyak

Aakriti:-Avsada, Udvigna

DashvidhaPariksha

Prakriti – VataPaittika

Vikriti:-Lakshananimitta

Saara –Mamsa Sara

Samhanana- Madhyama

Pramana – Madhyama

Saatmya: Madhyama

Satva: Pravara

Aaharashakti:

Abhyavarana Shakti: Pravara

Jaran Shakti: Madhyama

Vyayamashakti:Pravara



Reviewing his condition following "Samprapti-Components" were

considered:

Dosha: Vata, Kapha Dominant(Pitta

Anubandha)

Dushya: Rasa, Rakta, Mamsa, Lasika.

Srotas: Rasa, Rakta, Mamsa

Udbhavsthana:Amashaya

Adhisthana: SarvangSarira

RogaMarga:Bahya

StotoDustiPrakara: Sanga

Sama/Nirama:Sama

VyadhiPrakari: Chirkari Sadhya-Sadhyata: Yapya.

Treatment

The treatment as per instructed in Table number 1 was continued for 31 days in IPD and then patient discharged after advice of taking above oral medications and to turn up for follow up after every 15 days. Till the date of writing this case study patient is quite well with no any specific symptoms or recurrence.

Table 1 Treatment of Ekakushtha in Present study

Date	Medicine	Ausadhi Karma	Time And	Observation on	Guna
	Given		Anupana	Symptoms	
	AvipattikaraC hurna 5gm		BD with cow <i>ghrita</i> just before meal.	-Red scaly Patches on all over the body -kandu and Burning	Agnidipana, Amapachak, Vataanulomaka,
10/6/2019 to 14/6/2019		Dipan- Pachan		sensation all over body -JatharagniVridhhi	Strotoshodhaka.
	HaritakiTablet 4 Tablet(500 mg= 1 Tablet)		At bed Time with hot water.	_	Vrushya ,Vataanulomaka, Laxative, KoshthaSodhak
	Karanj Tail		For Local Application		Kandughna, Twaksothahara.
15/6/2019 To 20/6/2019	PanchatiktaG hrita(Increasin g dose day by day)	Ghritapana Day1-40 ML Day2-70 ML Day3-105ML Day4-190ML Day5-250ML	In Morning (In between 6.00 to 6.30 Am) Followed usnodak.	Red scaly Patches on all over the body(60% Relief) -almost relief in c/o burning and itching Slakshana Skin and loose stool pass.	Abhyantarasnehana, to help body forutkleshadoshaand bringdoshashakhato koshtha.
21/6/2019 To 23/6/2019	SarvangaAbhy angaand Swedanawith Nadisweda	Vishramkala	In Morning.	Red scaly Patches on all over the body(70% Relief)	Bhayasnehana,
24/6/2019	Virechanawith Kalyanak guda-150 gm	Virechana Karma	SleshmaGata kale.	-Lightness in body and mindOther symptoms relieved as above mention	
25/6/2019 To 1/7/2019	Sansarjana karma.	3Annakala-Peya 3Annakala-vilepi 3Annakala-Akrita rasa 3Annakala-Krita rasa	Whole Day	-Agni dipti -UtsahVridhhi	



7th day-	
Samanyabhojan.	

		•			
2/7/2019 to 9/7/2019	Patoladikwath a 40 ml	Shaman Aushadhi	Empty stomach in morning and evening	Red scaly Patches on all over the body(70% Relief) -Other symptoms relieved.	Sothahar,Tridoshash amak.
	Arogyavard- hini Vati-2 TDS	-	After Food	_	Strotosodhan, Pittavirechana, Anulomaka
	KaishorGuggu lu 2 TDS	-	With kwatha	_	Kaphghan, Strotoavarodhanasha Vata-kaphanashak
10/7/2019	Khadirashta- kakwatha- 40 ML	Samanausadhi	Empty stomach in morning and evening	Red scaly Patches on all over the body(80% Relief) -Other symptoms relieved.	-Anulomaka, kushthagna,kandughn a,Raktasodhak.
	KaishorGuggu lu 2 TDS	-	With kwatha.	-	Same as above.
	Karanj Tail	=	Locally	_	Same as above.



Figure 1 Before Treatment Fig 2 During treatment



Figure 3 After treatment Above figures shows the result of all over treatment. Figure 1 and 2 shows the phenomena of before treatment and Figure 3 shows phenomena of After treatment.

DISCUSSION

In this patient, Irregular food habits, consumption of incompatible food like dairy products with fish, excessive intake of yogurt, paneer, black gram, excessive salty

and sour items etc. were found to activate the pathogenesis. The *dosha* and toxins accumulated in *Dhatus Rasa*, *Rakta*, *Mamsa* and *Lasika* lead to manifestation of psoriasis.

Psoriasis is believed to occur due to vitiation of all the other dosha (Vata, Pitta, kapha) mainly vata and kapha predominance. The prominence of vata causes dryness and scaling of skin in this patient. Pitta vitiation leads to burning sensation and redness, kapha causes itching, discharge and thickening of skin.

As per Ayurvedic management, Virechana karma is one of the best treatment modality for this type of aliments. Proper planning of Purvakarma, Pradhana karma, Paschat karma during Virechana karma is most important to yield better outcome.

In *Ekakushtha*, *Agni* is also deranged and *srotas* are obstructed. Therefore *Deepan*-



Pachan medicines prior to Snehapana is important, which helps in Ama-pachana and normalizing the agni.

PanchtiktaGhrita was chosen due to specific affinity of the drugs present in the panchatiktaghrita towards the Raktavahastrotas along with helping in proper doshautklesha during snehapana.

Here, the medicine for *virechana karma* used is *KalyanakGuda*. *KalyanakGuda* has been advised as *Virechaka Yoga*in the management of *kushtha*². The outcome of the *Virechana karma* is also dependant on proper *samsarjana karma*, which helps in correcting the agni, also helps to break the pathogenesis of disease.

After sansargajanya karma, samana drug patoladikwatha, kaishoorguggulu, Arogyavardhinivati are advised for better result. Nirgundipatrapindasweda with karanjoil, the mode of action of rhese has been described in above table.

So it is clear that the adviced drugs and procedures have the properties to treat the manifestation of Psoriasis.

CONCLUSION

This combined *Ayurvedic* treatment of above mentioned oral *Ayurvedic* drugs and *Sodhana*procedures were helpful in treating the patient of Psoriasis(*Ekakushtha*). If we assess the patient with their proper *Rogi* and

Rogaparikshalike Dosha, Dushya, Kala etc. with following proper pathyapathyathan we get remarkable improvement without any remission. This approach may be taken into consideration for further treatment and research work for Psoriasis (Ekakushtha).



REFERENCES

- 1. Dogra S, Yadav S. Psoriasis In India: prevalence and pattern. Indian J Dermatol Venereol Laprol [serial online] 2010 [cited 2010 Dec 6]; 76:595-601. Available from: https://www.ijdvl.com/text.asp?2010/76/6/595/72443.
- 2. Feldman SR, Fleishcher AB, Reboussin DM, etat: The economic impact of psoriasis severity. J Am AcadDermatol 1997;37:564-569.
- 3. Susrutasamhita of Maharasi-Susruta Edited with Ayurveda-Tattva-Sandipika, Hindi Commentary, Scientific Analysis, Notes etc. By Kaviraja Ambikadutta Shastri, A.M.S. Part 1. Chaukhambha Publication Varanasi, reprint 2016, Nidanasthana 5/5 page no 320.
- 4. The Caraka Samhita (Ayurveda Dipika's Ayusi Hindi Commentary) Second part, Preface Acarya Siddhi Nandan Mishra, Editor by Vd. Harish Chandra Singh Kushwaha, Chaukhanbha Orientalia, Varanasi, Reprint addition 2012. Chikitsa sthan 7/39 page no 201.
- 5. Susrutasamhita of Maharasi-Susruta Edited with Ayurveda-Tattva-Sandipika, Hindi Commentary, Scientific Analysis, Notes etc. By Kaviraja Ambikadutta Shastri, A.M.S. Part 1. Chaukhambha Publication Varanasi, reprint 2016, Sutrasthana 33/5 page no 163.

6. The Caraka Samhita (Ayurveda Dipika's Ayusi Hindi – Commentary) Second part, Preface Acarya Siddhi Nandan Mishra, Editor by Vd. Harish Chandra Singh Kushwaha, Chaukhanbha Orientalia, Varanasi, Reprint addition 2012. Chikitsa sthan 7/29 page no 119.

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