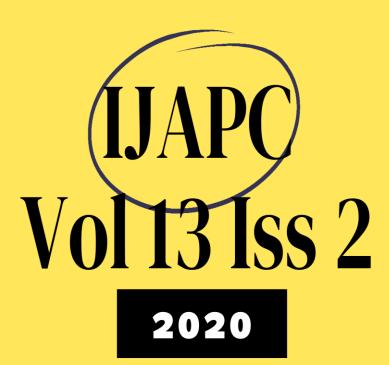


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Role of *Virechana Karma* with *Vyoshadi Yoga* in the Management of Psoriasis

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ABSTRACT

Kustha is considered as a bahudosha avastha janya vyadhi which involves tridosha, rasa, rakta, mamsa, lasika for the manifestation. Psoriasis is one of the most common dermatological disease. It is a chronic inflammatory skin disorder clinically characterized by well-defined erythematous plaques with silvery scale with predilection for the extensor surfaces and scalp and a chronic fluctuating course. The prevalence is approximately 2% in European populations. Hence by considering all these facts acharya's advised repeated administration of various types of Shodhana line of treatment. Virechana is one among the Shodhana procedure, which is explained in classics for expulsion of vitiated pitta dosha. Here vyoshadi yoga was selected for virechana karma. It is an open clinical study with pre-test and post-test design; where in minimum of 20 patients diagnosed as psoriasis fulfilling the inclusion criteria will be subjected to Virechana Karma. Multidimensional assessment of psoriasis was done, before and after the treatment with psoriasis area severity index (PASI), Auspitz sign, and candle grease sign. Results obtained were analysed for the statistical significance using Wilcoxon signed rank test for qualitative data and paired t- test for numerical or qualitative data. The statistical analysis showed that there was statistically significant improvement in parameters like Erythema, Scaling, and Itching. Hence, Vyoshadi yoga can be effectively used in management of psoriasis for shodhana karma.

KEYWORDS

Virechana, Kustha, Vyoshadi yoga, Psoriasis, PASI Score



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INTRODUCTION

Skin is the mirror which reflects the harmony of internal functions of body. Any change in skin colour disturbs the patient both mentally and physically.

Psoriasis non-infectious chronic is inflammatory disease of skin characterized by well-defined erythematous plaques, with silvery scales which have a predilection for extensor surface and chronic fluctuating course. It is one of the most common dermatological disorder affecting up to 1-2 % of the world's population. In psoriasis, the keratinocytes multiply very rapidly and travel from the basal layer to the surface in about 4 days. The skin cannot shed these cells quickly enough, so they build up leading to thick, dry patches or plaques, silvery flaky areas of dead skin build up on the surface of the plaques before being shed. The underlying skin layer (dermis), which contains the nerves and blood, lymphatic vessels, becomes red and swollen.1

Word *Kushta* means a pathological condition which despises the skin. It is an important organ of communication with the external world. It is one of the five *gyanendriyas* which is responsible for *saprsha gyana*. Majority of the dermatological disorders have been described under the context of *Kushta*.

Psoriasis is considered as one type of *kushta* and may resemble *Ekakushta*, *Kitibha* and *Mandala kushta*. *Kustha* is *bahudosha avastha janya vyadhi*, has tridosha involvement along with *sapta dhatu* as its *dushya*.³

Shodhana is considered as best treatment modality because it will expelled out the doshas from the body. Virechana karma is one of the shodhana procedure explained for kustha and which is primarly advised in pitta dosha vitiation. As tvacha is jyanendriya, through virechana indriya shudhi takes place.

Hence with this idea in backdrop, *vyoshadi yoga* has been selected for the study, *Vyoshadi* Yoga contain *Pippali*, *Maricha*, *Shunthi*, *Danti*, *Haritaki*, *Nilani* etc. are indicated in *kushtha*. Hence to evaluate the efficacy of *virechana karma* with *vyoshadi yoga*, present study was taken.

MATERIALS AND METHODS

Institutional ethical committee approval number:

Ref. No. SDMCAU/ACA-49/ECH23/17-18

In the present study, the methodology adopted in the clinical study is:

- **Source** of the data:
- Drug Source



Vyoshadi yoga was prepared in S.D.M. Ayurveda pharmacy, kutpady, Udupi.

> Patient Source

A minimum of 20 Patients diagnosed as Psoriasis were selected for the study from IPD/OPD of Shri Dharmasthala Manjunatheshwara Ayurveda Hospital Kutpady, Udupi

Method of collection of data:

Study Design: It is an open clinical study with pre and post-test design,

Sample Size: Minimum of 20 patients diagnosed as psoriasis, fulfilling the inclusion criteria was taken for the study.

A detailed proforma will be prepared considering all the points pertaining to history, signs, symptoms and examinations as mentioned in ayurvedic classics and allied sciences to confirm diagnosis.

Diagnostic criteria:

1.The clinical signs and symptoms of psoriasis like:

- Itching
- Scaling
- Erythema
- Positive Auspitz sign
- Candle grease sign

Auspitz sign-

It is the appearance of punctate bleeding spots when psoriasis scales are scraped. This happens because there is thinning of the epidermal layer overlying the tips of the dermal papillae are dilated and tortuous, which bleed readily when the scale is removed. This is a characteristic feature of psoriasis and is known as Auspitz sign.

Candle grease sign-

On scratching the psoriatic eruption with a pointed tool, a candle -grease -like scales can be repeatedly produced even from the non-scaling lesions. In psoriasis candle grease sign is a confirmatory sign.

Inclusion criteria:

- 1. Patients diagnosed with psoriasis
- 2. Patients fit for virechana karma
- 3. Patients of either sex of age group between 16-70 years

Exclusion criteria:

- 1. Patients suffering from other major systemic disorders such as Hypothyroidism, ulcerative colitis.
- **2.** Patient not fit for virechana karma

Duration:

Duration of treatment :10-14 days

Investigations:

To evaluate the other pathologies and to avoid possible complications during *virechana*, the following laboratory investigations are carried out.

Haematological examination: -

- Hb%, TLC, DLC,
- ESR, Blood Sugar
- Skin Biopsy if required.



Intervention:

Poorva Karma:

A) Deepana, Pachana:

Panchakola phanta⁴ was given to the patients ,50 ml BD before food till ama pachana and agnideepana takes place (3-7 days)

B) Snehpana:

• Abhyantra snehapana with Murchita Ghrita⁵ (with ushna jala as Anupana) till samyak snigdha lakshana arises. (minimum 3 days -Maximum 7 days).

C) Swedana:

Parisheka Method

The patient was subjected to *parisheka* with *Karanja Qwath*⁶ for 4 days i.e. next day after the completion of *snehapana* for 3 days and at morning time on the day of *virechana*.

Duration of *Parisheka*:

Parisheka was administered to the patients till the attainment of samyak swinna lakshanas.

PRADHANA KARMA:

On the 4th day after *karanja kwath parisheka* followed by *ushna jala snana* in the morning, ascertain the patient for proper digestion of previous night meal. Then patient was administered with *vyoshadi yoga* in empty stomach at around 9:30 am with milk as a*nupana*. Dose was decided on

the basis of Rogi bala, Rog bala, koshtha and Agni of patient.

Paschat Karma:

Based on *shuddhi lakshanas Samsarjana krama* was advised (3-7 days)

Assessment Criteria:

Each patient was assessed before, after the treatment based on subjective and objective parameters. The observations and assessment were recorded in specially prepared case performa.

Subjective Parameters

- 1. Symptoms of psoriasis
- -Erythema
- -Scaling
- Itching

2.Symptoms of samyak Virechana Lakshanas i.e. Laingiki and Antiki.

Objective Parameter

- Sign of samyak virechana lakshnas
 vegiki and maniki.
- 2. P.A.S.I(Psoriasis area and Severity Index) before after treatment.

OBSERVATIONS:

In the present study 20 patients of psoriasis were treated with virechana with vyoshadi yoga.

Total number of patients registered for the study: 30

Number of patients completed the study :30

Drop out: nil

Some of the observations are given as in the table 1,2and 3



Table 1 Demographic observations

Parameters	Observation in each parameter	Maximum no of patients	percentage
Age	21-30 yrs		
	31-40 yrs		
	41-50 yrs	6 each	30 %
	51-60 yrs		
Gender	Male	17	85%
Marital status	Married	13	35%
Occupation	Businessman	7	35%

Table 2 Observation related to the disease

Symptoms	Maximum observations	Number of patients	Percentage
Desha	Anupa	11	55%
Age of onset	31-40 yrs	7	35%
Chronicity	5-10yrs	9	45%
Pattern of lesion	Generalised	13	65%
Associated symptom	Scaling	19	95%
	Erythema	17	85%
	Thickness	19	95%

Table 3 Amount of sneha consumed

Amount of Sneha consumed	Maximum no of subjects	Percentage
100-200ml	8	40%

This may be indicative of agni and kostha

RESULTS

In this, *virechana* with *vyosahdi yoga*⁷ was done in 20 patients of psoriasis. The relevant data were collected before the treatment and patient were assessed on first day of treatment (BT), after the treatment (AT). The collected data were analysed using paired -t Test for quantitative data

whereas Wilcoxon Signed Rank Test was used for ordinal data i.e. qualitative data .After the virechana with vyosahdi yoga the analysis of the patients showed that there was statistically significant improvement observed in scaling, erythema, itching as shown in figure 1 and 2. The different statistical values are given in table 4 and 5.





Figure 1 Before treatment Figure 2 After treatment

Table 4 Statistical values

Symptoms	E	BT		AT				
	MR	SR	MR	SR	Ties	TOTAL	Z-value	p-value
Scaling	9.50	171.00	.00	.00	1	19	-4.146	. 00
Erythema	7.00	91.00	.00	.00	4	17	-3.606	.00
Thickness	8.00	120.00	.00	.00	4	19	-3.873	.00

Table 5 PASI Score

PASI	Mean scored	Difference in mean	%change		Paired t -test		
BT	17.65	.65	3.68%	S. D	S,E,M	T value	P value



AT	17.00	10.24	2.29	5.66	.00
		10.04	2.24		

DISCUSSION

Kustha is considered as santarapanotta dhirghakalina vyadhi and it is krichra sadhya because of this all acharyas has emphasis on repeated shodhana to be done in all types of kustha. virechana is one among them the shodhana line of treatment. In kushtha rakta dhatu is considered as one of the main dhatu is responsible for prasarna stage of kushtha samprapti, pitta dosha and rakta dhatu have ashyreya ashyreyisambandha and treratment modality of pitta and rakta complementing to each other.

Prior to virechana karma pachana and deepana was done with panchakola phanta it contains laghu ushna drugs which enhance the digestive power and bring niramavastha, followed by arohana snehpana with moorchita ghrita till attainment of smayak snigdha lakshana as shown in table 6.

Table 6 Samyak snigdha lakshana

Samyak snigdha lakshana	No o subjects	of Percentage
Asamhata	18	90%
Varcha		
Gatra mardavata	18	90%
Vatanulomna	17	85%
Twaksnigdhata	16	80%

Parisheka is one variety of swedna which should be used in vata associated with pitta disorder. In this study Karanja kwath

parisheka was done for 4 days it is selected because it is vata kapha shamka and rakta prasadana. Gourava nighra, stambha nigrha, laghuta, is attained by 85% of patients.

Virechana was administered with vyoshadi yoga with combination of trikatu, danti, trivrut, haritaki, trijataka, and guda. Shuddhi in virechana karma is as shown in table 7.

Table 7 Criteria for Shuddhi in virechana karma

Shudhhi		Vegas	No of subjects
Veigiki	Avara	1-10	6
	Madhyama	11-20	12
	Pravara	21-30	22
Antiki			
	Kaphanta		17
	Pitanta		3

All acharyas have mentioned that trikatu is best for deepana and pachana. This yoga contains Trivrut which is considered as best sukha virechana along with this Danti was also taken both are the best drugs to administered virechana in any form of kustha. Along with trivrut and danti in yoga haritaki was also mentioned which is best known for their anulomana and nilani is best for *krimighana* actions, respectively. In this yoga Guda was also mentioned. It is mentioned by all acharyas that purana guda is considered to be best because it pacifies pitta. Based on shuddhi Samsarjana Karma was advised.



Hence as there was statistically significant improvement in all the parameters, *virechana* with *vyoshadi yoga* can be effectively used in the management of psoriasis.

CONCLUSION

On the basis of the present study, the following conclusion were drawn: -

- In the present study, the symptoms like erythema, itching, scaling, thickness, was present in 100% patients. Joint pain was not seen in any patient.
- The overall effect of the therapy showed marked improvement in maximum patients, *Kushta* is considered as *santarpanotta*, *Dhirghakalina vyadhi* and it is *kricchrasadhaya*, repeated *shodhana* to be done in all type of *kushta*.

197



REFERENCES

- 1. http://en.m.Wikepedia.org| Psoriasis.
- 2. Agnivesh "Charaka Samhita", Revised by Charaka and Dridabala with Ayurveda Dipika Commentary of Chakrapani Dutta, Reprint -2017, Chaukhambha Sanskrit, Varanasi Up, Pp -738, page no-125.
- 3. Agnivesh "Charaka Samhita", Revised by Charaka and Dridabala with Ayurveda Dipika Commentary of Chakrapani Dutta, Reprint -2017, Chaukhambha Sanskrit, Varanasi Up, Pp -738, page no-451.
- 4. Bhavamishra, "Bhavparaksha Nighantu'' Brahmashankar Mishra and sri Rupalji Vaishy, Volume 1, Chaukhamba Publications, Varanasi, edition 8, 1993, Pp-959, page no -24.
- 5. Mishra Siddhi Nandan, editor. Commentary Siddhi Prada on bhaishajya Ratnavali of Kaviraj Govindas Sen, Jwara Adhikara: Chapter -5, Varanasi chaukhamba Surbharti Prakashan 2005, Pp-1266, page no -206.
- 6. Sushruta Acharya, 'Sushruta Samhita'' with Nibandha Sangraha Commentary of Dalhana and Nyayachandrika Panjika of Gayadasa on nidana sthana .edition : reprint- 2017, chaukambha orientealia-Varanasi UP, Pp-824, page no-503.
- 7. Vaidya Shodala, "Gadanigraha", with vidyotini Hindi Commentary by Sri Indradeva Tripathi, Vol 3, Reprint 2011,

Chaukambha Sanskrit Samsthana, Varanasi UP, Pp-807, Page no -774.