



Management of *Ekakushtha* (Psoriasis) by *Nidana-Parivarjana*, *Raktamokshan* and *Shamana Chikitsa* - A Case Report

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ABSTRACT

Psoriasis is characterised by well-defined erythematous plaques with silvery scale it is chronic, relapsing inflammatory skin disease. It is one the most dreadful dermatological condition. In India an estimated 1 to 2% of the population is suffering from psoriasis. Due to resemblance of signs and symptoms Psoriasis can be correlated with *EkaKushtha*, which comes under *Kshudra Kushtha* described in *Ayurveda*. According to *Acharya Charak*, *Ekakushtha* is due to vitiation of *Vata & Kapha*. The clinical feature of *Ekkushtha* described by *Acharya Kashyap* represents remission, relapse and seasonal variation which are present in Psoriasis too. It is a chronic *Tridoshaja* disorder with pathological involvement of *Rasa, Rakta, Twak, Lasika* etc. Modern medical science treatment of psoriasis is not satisfactory and drugs used in treatment may have serious side effects. In present case study a 43 years old male patient with chronic relapsing Psoriasis (*Ekakushtha*) was treated through basic ayurvedic principles i.e. *Nidana Parivarjana*, *Shodhana (Raktamokshana)* and *Shamana*. After treatment patient showed marked improvement in his symptoms like itching and discolouration, with resolution of scaly plaques.

Key Words: *Ekakushtha, Psoriasis, Nidana Parivarjana, Shaman, Raktamokshana*

INTRODUCTION

Psoriasis is one of the most common dermatological diseases affecting about 3-10 percent of total skin disorders. About 3% of world population is affected with psoriasis. It usually occurs before age of 40 years, most commonly between the ages of 15 to 25 years. It affects men and women equally¹. It is a chronic inflammatory, immune-mediated, proliferative, non-contagious skin disease, which affects individuals who are genetically predisposed with environment playing a critical role in the pathogenesis². In India

prevalence of psoriasis varies between 0.44-2.88%³. The aetiology of psoriasis is not well understood, but psychological stress has been stated as one of the major triggering factor in the exacerbation of the disease. There have been many evidences indicating the role of T-cells in the pathophysiology of psoriasis and thus it is also stated as auto-immune disorder. Hence briefly the triggering factors which can worsen the disease are stress, injuries on skin, weather influence especially of cold weather, systemic factors like



infections, bowel toxaemia, etc. and immunological factors.

Modern medical science treats psoriasis with PUVA (Psoralen and ultraviolet A) and corticosteroids. But these therapies give serious side effects like hepatotoxicity and nephrotoxicity, bone marrow depletion etc.⁴. Hence for the welfare of psoriasis affected patients it is the need of this hour, to shift to the Ayurvedic treatment for psoriasis which not only treats it but also focuses on eliminating the root cause and rejuvenating the skin tissues so that it does not reoccur. In *Ayurvedic* classics skin disorders are mentioned under the *Kushtha Roga*, psoriasis can be compared to the type of *Kushtha* named as *Ekakushtha*. Psoriasis presents as itchy, deep pink to reddish, well demarcated, indurate plaques with silvery scaling present particularly over extensor surface & scalp. As per *Ayurveda*, the symptoms of psoriasis closely resemble to symptoms of *Ekakushtha* as *Matsyashakalopamam* (Fish like silver white coloured scaling), *Aswedanam* (low or no sweating), *Mahawastu* (covers large surface area of skin)⁵. In *Ayurveda* the treatment for *Kushtha* has proven to be long lasting which consists of *Nidanaparivarjana*, *Shodhana* and *Shamana*. This case report deals with management of psoriasis with *Nidan parivarjana*, *Raktamokshana* and *Shamana Chikitsa*.

CASE REPORT

A 43-year-old male patient came in skin OPD with chief complaints of-Multiple white scaly plaques (*Matsyashakalopam*), covering large surface area

of skin (*Mahawastu*) over both the upper limbs and lower limbs, the back-since 7 years

1. Black discoloration of left leg-since 3 years
2. Severe itching all over the body- since 3 years
3. Dryness of the skin-since 2 years

For the past 7 years he was under steroidal therapy, took a short course of Ayurvedic treatment and later was again under steroidal therapy and phototherapy. But there were relapsing episodes of skin manifestations on discontinuing the treatment.

Medical history- Not a K/C/O Hypertension/ Diabetes mellitus or any other metabolic disorders. H/O Typhoid 15 years ago.

History of Present Illness- According to the patient, he was healthy before 7 years, later (in 2013) he had white scaly patches over his upper limbs, which showed whitish 'dandruff like' scales exfoliating from it. He had been diagnosed with 'Psoriasis vulgaris' by dermatologist and was treated with steroids, all the complaints were relieved within 1 year. But the complaints reappeared in next year (2014). Then the patient went under short duration of *Ayurvedic* treatment but did not get satisfactory results. Since then he was many times treated with anti-psoriatic treatment, and got relief for some time but the skin lesions reappeared again after which he was treated with steroids, folic acid, anti-allergic, topical application of lotion. The results were not satisfactory; hence the patient was given phototherapy treatment (PUVA) for 2 months (in 2017). But after completion of the course of



treatment, patient again had even worse skin manifestations than before with severe itching all over body, this gradually increased in next two years. So he visited the OPD no. 9 Rognidan department of M.A. Podar hospital for *Ayurvedic* treatment.

Family History- No family history of psoriasis

General History-

Occupation: Tailor.

Aahar (Dietary Habits): Non-vegetarian (consumption of fish/ chicken/ meat) almost for all 7 days of week, excessive consumption of pickles, curd, fermented and baked food or food with sour taste and dry in nature (*Amla Rasatmaka* and *Ruksha*), tea with biscuits daily which is an incompatible food (*Viruddha Ahara*), having 2 glass of water empty stomach in the morning daily which extinguishes the digestive fire (*Agnimandya Kaaraka*)

Vihara: *Ratrijagaran* (sleeping around 2 am)

On Examination-

Naadi- *Pitta Pradhan Vata* (pulse- 80/min)

Mala- once a day, unsatisfactory (*Malabaddhata*)

Mutra- *Prakruta*

Jivha- *Saam*

Agni- *Manda*

Shabda- *Spashta*

Sparsha- *Khara*

Druk- *Prakruta*

Akruti- *Madhyama*

MATERIALS AND METHODS

The patient was examined by inspection, palpation and auscultation of necessary systems. Skin

lesions were examined for the texture, discoloration, secretions, etc.

Local Examination-

1. Skin Inspection- Erythematous scaly patches on both the hands and both the legs, Chest, abdomen and on the back. Black discoloration of right leg.

2. Palpation- Patches were dry with rough surface, normal in temperature, firm, minimally elevated from skin surface.

Treatment given to the patient-

The treatment protocol was followed for 2 months as-

1. Nidana Parivarjana- The patient was advised to stop consuming food with excessive sour taste (*Amla Rasatmaka*), the food with properties like *Ushna Tikshna Ahara*, the incompatible food (*Viruddha Ahara*), Non-veg. and improve his sleep cycle, stress and *Adhyashana* (the habit of eating before the previous food is digested).

2. Pachana and Deepana- *Arogyavardhini Vati* 2 tablets twice a day, *Manspachak Churna*- ½ tsp twice a day before meal, which contains- *Triphala* (*Emblica officenalis*, *Terminalia bellerica*, *Terminalia chebula*), *Nimba* (*Azadirachta indica*), *Patola* (*Trichosanthes dioecious*), *Musta* (*Cyperaceae rotundus*), *Manuka* (*Vitis vinifera*), *Kutaja* (*Holerrhena antidysenterica*) 20gm *Churna* each, *Kaishora Guggula* 2 tablets twice a day, *Gandharva Haritaki Churna* 1 tsp only at night bedtime for 2 weeks.



3. Raktamokshana- Two sittings of Raktamokshan were planned with prior Snehapana of Goghrita (Cow's ghee) of 3 tsp daily for 3 days before the procedure including the day of procedure and 3 days after the procedure. The procedure (Bloodletting) was done with the scalp vein set, 20 ml of blood was removed from right hand (cubital region) in first session and from left hand (cubital region) in the second session. These sessions were conducted on interval of 2 weeks.

Shamana Aushadhi were advised along with this as Swayambhuva Guggula 2 tablets twice a day, Mansapachaka Churna (120gm) + Gandhaka Rasayan 20 tabs (crushed) + Guduchi Churna 20gm ½ tsp twice a day, local application of Karanja Tail.

4. Oral medications and Topical application- Arogyavardhini Vati 250mg twice a day after meal, Mansapachaka Churna + Gandhaka Rasayan 20 tabs (crushed) + Guduchi Churna ½ tsp twice a day with lukewarm water before meal, Swayambhuva Guggula 1000mg twice a day after meal, Gandharva Haritaki 5gm only at night with lukewarm water. Mrudu Abhyanga (topical application) with Karanja and Nimba Tail for next 4 weeks.

RESULTS

The patient was called for follow up and observation of his skin patches in every follow up were as-

1. First follow up- On 22-02-2020 after 1 week of Pachana Chikitsa, patient felt a little better in

his bowel clearance (*Mala- Samyaka*), patches on plapating were less rough, complaint of itching persisted, the medicines were continued for 1 more weeks.

2. Second follow up- On 2-03-2020, the patient was called for 1st session of Raktamokshana, the areas of patches were controlled.

3. Third follow up- On 9-03-2020, the scaling was reduced and itching was less severe.

4. Fourth follow up- On 16-03-2020, the patient was called for the 2nd session of Raktamokshana, the erythematous patches had started resolving.

5. Fifth follow up- On 30-03-2020, the scaling was absent, itching was minimally present and the areas of the patches were lessened.

6. Sixth follow up- On 15-04-2020, the skin lesions on the back (as shown in Image 1) were completely resolved (as shown in Image 3), the skin lesions on the hand (as shown in Image 2) were also resolved (as shown in Image 4), itching was absent. Also the area of rest of the skin patches all over body was reduced, except for some discoloration existed. At 6 months follow up, there was no relapse of the scaly plaques and the symptoms.



Image 1 Back of the patient before treatment



Image 2 Left hand of the patient before treatment



Image 3 Back of the patient after treatment



Image 4 Left hand of the patient after treatment

DISCUSSION

According to *Ayurveda*, one of the treatments of *Kushtha* is *Shodhana Chikitsa* (cleansing therapy

for removal of excess of *Dosha* and toxins). *Shodhana* can be adopted by *Vamana*, *Virechana*, *Raktamokshana*⁶.

Samprapti Ghataka of Kushtha Roga⁷- The factors involved in the *Kushtha Roga* is as-
Dosha- Tridosha, Dushya- Twak, Rakta, Mansa, Lasika, Srotas- Raktavaha, Srotodushti- Sanga, Adhishthana- Twacha and Mansa, Swabhava-Chirakari

Here in this case report, *Ekakushtha* having predominance of *Vata- Kapha Dosha*⁸, the treatment was planned accordingly and *Kushtha* being *Raktapradoshaja Vikara*⁹ (disease due to vitiation of blood), *Raktamokshana* (*Siravedha*) i.e. Blood-letting was also planned. In this case study, the treatment protocol was- *Nidana-Parivarjana, Aam Pachana, Raktamokshana (Siravedha)* and *Shamana Chikitsa* with *Mrudu Abhyanga*.

1] **Nidana Parivarjana**- Avoidance of the factors aggravating the vitiated *Dosha* and increasing *Raktavaha Srotodushti* and gradually stopping the consumption of excessive *Amla Ras* (sour taste), Non-veg., etc. was advised. Also *Ratrijagaran* was advised to avoid.

2] **Aam Pachana and Agni Deepana**- After examination and *Agniparikshana*, *Aam Lakshana* was found on *Jivha* (tongue) and *Jaranashakti* (digestive power) was hampered, to combat this, *Aam Pachan* and *Agni Deepana* (improvement of digestion and increment in the metabolising power of the digestive fire) was planned by administering as-



*Arogyavardhini Vati*¹⁰- as it does *Pachana* and *Deepana*, *Vata-Anulomana* (improves digestion, increases metabolism and regularizes the gases), and combats *Gara Visha* (toxins deposited due to the long term steroids and allopathic treatment) also it's the drug of choice in *Kushtha Roga* with predominance of *Vata-Kapha Dosha*.

*Manspachaka Churna*¹¹- as it is useful for proper digestion of unprocessed elements in *Dhatu* metabolism (*Dhatugata Aam-pachana*).

*Kaishor Guggula*¹²- as it is useful in chronic diseases due to vitiation of *Rakta Dhatu* (*Raktapradoshaja Vikara*), and also it combats the aggravated *Vata Dosha*.

*Gandharva Haritaki*¹³- It contains *Erand Tail* (*Ricinus communis* oil extract), *Bal Haritaki* (*Terminalia chebula*), *Sunthi* (*Zinziber officinale*), *Saindhav* (Rock salt) and *Savarchal Lavana* (Black salt). It has purgative and laxative (*Virechaka*). It conducts *Aam Pachana*, *Vata Anulomana* (helps in digestion and regularizes gases), also being *Virechaka* (laxative) is useful in *Pittaja* (*Rakta Vikara*). Hence it is *Tridoshaghna* (combats excess of all the 3 *Dosha*).

3] *Raktamokshana*¹⁴- This being a modality of *Panchakarma*, needs to be conducted with prior *Snehana* (Oleation internally, here with *Goghrita*) and after the blood-letting procedure *Shamana Snehana* (oleation inducing palliation of morbid *Dosha*) was also administered, to combat the outbreak of *Vata Dosha* if any, and also for subsiding the overabundance of *Pitta Dosha*. Here this procedure helped in extraction of vitiated

Rakta from the body and allowed to eliminate the toxins of *Bhrajaka Pitta*.

4] *Shamana Aushadhi*- The medicines which can subside the aggravated *Dosha* and can maintain the normal *Dosha* were given during the course of time between two sittings of *Raktamokshana* and after the procedure as-

Svayambhuva Guggula¹⁵- Consists of many contents mainly *Bakuchi* (*Psoralea corylifolia*), *Shiljatu* (*Asphaltum*), *Guggula* (*Commiphora Mukul*), etc. it reduces *Kapha Dosha* and pacifies *Vata Dosha*. Also acts as *Aam Pachaka*, alongwith *Vata-Kapha Shamaka* drugs it also contains *Loha-bhasma* (Calx of iron) and *Svarna-makshika bhasma* (Chalcopyrite or copper iron sulphide) which pacifies *Pitta Dosha*, hence overall *Svayambhuva Guggula* acts as *Raktaprasadaka*, *Tridoshaghna*, *Rakta Dhatvagnivardhaka*, *Raktashodhaka* (combats excess of *Dosha*, increases metabolism of *Rakta Dhatu*, propitiates blood and also purifies blood), anti-bacterial, anti-inflammatory and anti-helminthic¹⁶.

Combination of *Manspachaka Churna*, *Gandhaka Rasayana* and *Guduchi*

Mansapachaka Churna¹⁷- Based on the action of its contents, it acts as *Tridosha Shamaka* (controls all 3 *Dosha*), *Kandughna* (Antipruritic), *Raktashodhaka* (Blood purifier).

Gandhaka Rasayana (*Sulphurium*)¹⁸- Being *Rasayana* (helps in lengthening the skin life span following the path of essence) and *Kushthaghna* (combatting skin diseases), it is useful in maintaining the balance of *Dhatu* in *Kushtha Roga* (Skin disorders), this reduces the *Tikshna*, *Ushna*



properties of *Pitta* which is to be controlled in *Raktaja Vikara* as *Pitta* is related to *Rakta* by *Ashrayeeashray Bhava* (interdependence of *Pitta* and *Rakta*). Hence, this acts as *Raktaprasadaka* (Blood propitiatory).

Guduchi Churna (*Tinospora cordifolia*)¹⁹- This acts as *Rakta Dhatugami* (acting directly on *Rakta Dhatu*), it reduces burning sensation, acts as *Kushthaghna* (choice of drug in skin disorders), *Tridoshaghna* (combats excess of all 3 *Dosha*), *Raktashodhaka* (Blood Purifier). Also it has immuno-modulating activity, anti-endotoxic effects.

Local application of *Karanja Tail*²⁰- *Karanja* (*Pongamia Pinnata*) acts as *Rakta-prasadaka* and *Kushthaghna* (Blood propitiatory and choice of drug in *Kushtha*) also it combats excess of *Vata* and *Kapha Dosha* and the essential oil has in vitro anti-bacterial activity.

5] *Abhyantar Aushadhi with Mrudu Abhyanga-*

The patient was advised to take orally-

- *Arogyavardhini Vati* 250mg twice a day with lukewarm water after meal.
- Combination of *Manspachaka Churna* (120gm) + *Guduchi Churna* (20gm) + *Gandhaka Rasayana* (20 tabs.)- ½ tsp twice a day with lukewarm water before meal.
- *Gandharva Haritaki Churna* 5gm only at night with lukewarm water after meal.
- *Mrudu Abhyanda* (Topical application)- combination of *Karanja Tail* and *Nimba Tail* (*Azadirachta Indica*)²¹ as this combats excess of *Pitta Dosha*, is *Raktashodhaka* (Blood Purifier), anti-pruritic.

CONCLUSION

In this case report, there was 50% relief recorded in the signs and symptoms after *Raktamokshana*. There was 70% relief in the signs and symptoms after the oral, topical medications and *Nidana Parivarjana*. Hence, it is concluded that the *Ayurvedic* treatment protocol of *Nidana Parivarjana*, *Raktamokshana* and *Shamana Chikitsa* can prove to be very effective in management of Psoriasis (*Ekakushtha*).



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