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Sheetpitta and its Management through *Vaman* Therapy - A Case Series

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ABSTRACT

Sheetpitta is disease described as *Tridoshaj and raktavaha srotodushti vyadhi*. Three patients having symptoms of frequent episodes of rashes on the whole body associated with severe itching and burning sensation were diagnosed as *sheetpitta*. It can be correlated with urticaria. These cases were successfully managed by ayurvedic *shodhan* therapy (*Vaman*). Criteria for assessment was gradation of itching (*kandu*), burning sensation (*Vidaha*), rashes (*varatidansh sansthan*) fever (*jwar*) and *chhardi* (vomiting). This study shows the efficacy of *vaman karma* in management of *sheetpitta*. *Vaman* is one of the methods of biopurification. *Vaman* is medicated emesis to evacuate accumulated morbid doshas.

KEYWORDS

Sheetpitta, vaman, shodhan therapy, Urticaria



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INTRODUCTION

In *sheetpitta*, due to altered food habit and life style changes, vitiated *vata* and *kapha dosha* along with *dushta pitta* affect the Rakta dhatu (dushya) producing symptoms on *twacha* (skin) like *kandu* (itching), *Toda* (pain) and *Daha* (burning sensation)¹. Causative factors of *Sheetpitta-udarda-kotha* described in Madhav nidan in detailed. Treatment of *Sheetpitta* mentioned in yogratnakar, chakradatta and bhaishajya ratnavali. Management of *sheetpitta* includes *katu taila abhyanga*, *swedan* by *koshna jal*, *vamana*, *virechana* and *shaman chikitsa*². *Sheetpitta* can be correlated with urticaria. It is a vascular reaction of skin marked by transient appearance of smooth, slightly elevated papules or wheals³.

Panchkarma procedure means five therapies that bring about the homeostasis by the way of evacuation of accumulated morbid *doshas*. The forcible expulsion of undigested *pitta* and *kapha* through the oral route by the way of inducing vomiting is known as *vamana*⁴. Three cases of *sheetpitta*

were treated with *vaman therapy*. *madanphal kashaya* and *yashtimadhu phant* were used for *vamana*. It shows marked effect in *sheetpitta*.

MATERIALS AND METHOD

1. Case description

Case 1

A 38 year old female patient came to panchkarma OPD with the complaints of red rashes over the back and legs, with swelling and itching all over the body since past two months. Symptoms were aggravated more during the night and on exposure to cold climate.

On examination, the lesions were reddish in color, macula-papulo in nature spreading over the back of the body with irregular shape and margins. There was no discharge or exudations. The size varied in measurement from 2 cm to 6 cm.

All routine examinations, ECG and chest x-ray were done before the *vaman* therapy. The assessment score before and after treatment was described in [table 1].

Table 1 Assessment score of Case -1

Parameter	Before treatment score	After treatment score	Difference between BT –AT
<i>Varati dansh santhan shotha</i>	2	0	2
<i>Kandu (Itching)</i>	2	0	1
<i>Toda (pain)</i>	1	0	1
<i>Vidaha (Burning sensation)</i>	2	0	2
<i>Jwar (Fever)</i>	0	0	0



<i>Chhardi</i>	1	0	1
No of wheals	2	0	2
Size of wheals	2	1	1
Duration of wheals	2	0	2
Frequency of appearance	2	1	1
Frequency of use of antihistamine	1	0	1
Total	17	2	15

Case 2

A 38 year old female patient came to panchkarma OPD with the complaints of red rashes over legs and hand with swelling and itching all over the body since past three months. Symptoms were aggravated on exposure to cold wind. The lesions were reddish in color, macula-papulo in nature

spreading over the hand and legs with irregular shape and margins, no discharge and no exudations. The size varied in measurement from 2 cm to 6 cm.

All routine examination, ECG and chest x ray were done before *vaman* therapy. The assessment score of case 2 was described in [table 2].

Table 2 Assessment score of Case 2

Parameter	Before treatment score	After treatment score	Difference between BT –AT
<i>Varati dansh santhan shotha</i>	2	0	1
<i>Kandu (Itching)</i>	3	0	3
<i>Toda (pain)</i>	2	0	2
<i>Vidaha (Burning sensation)</i>	3	0	3
<i>Jwar (Fever)</i>	1	0	1
<i>Chhardi</i>	1	0	1
No of wheals	2	1	1
Size of wheals	2	0	2
Duration of wheals	2	0	2
Frequency of appearance	2	1	1
Frequency of use of antihistamine	1	0	1
Total	21	2	19

Case 3

A 40 year male patient came to OPD of panchkarma department with the complaints of red rashes over legs and hand with itching all over the body since past eight months. Symptoms were aggravated during night. Patient was used to take

antihistaminic [tab cetirizene] regularly once a day. The lesions were reddish in color, macula-papulo in nature spreading over the hand and legs with irregular shape and margins. There was no discharge and no exudation . The size was varied in measurement from 2 cm to 6 centimeter.



All routine examination, ECG and chest x ray were done before *vaman* therapy. The

assessment score of case 2 was described in [table 3].

Table 3 Assessment score of case 3

Parameter	Before treatment score	After treatment score	Difference between BT –AT
<i>Varati dansh santhan shotha</i>	2	0	2
<i>Kandu (Itching)</i>	3	1	2
<i>Toda (pain)</i>	2	0	2
<i>Vidaha (Burning sensation)</i>	3	1	2
<i>Jwar (Fever)</i>	1	0	1
<i>Chhardi</i>	1	0	1
No of wheals	2	1	1
Size of wheals	2	0	2
Duration of wheals	2	0	2
Frequency of appearance	2	1	1
Frequency of use of antihistamine	2	1	1
Total	22	5	17

2 Criteria for assessment

All patients symptoms were assessed on subjective parameters described in ayurvedic text which includes *varati dansh*

*sansthan, kandu, toda, vidaha, jwar, chhardi*⁵. The gradation used for subjective parameter are described in [table 4].

Table 4 Criteria for assessment

Sr no		Grade 0	Grade 1 Mild	Grade 2 Moderate	Grade 3 Severe
1	<i>Varati dansh santhan shotha</i>	Absent	In specific area	Present on some part of body	Present all over body
2	<i>Kandu (Itching)</i>	Absent	Ocasionally	Disturbing the Sleep	Disturbing the sleep and normal activity
3	<i>Toda (pain)</i>	Absent	Ocasionally	Disturbing the Sleep	Disturbing the sleep and normal activity
4	<i>Vidaha (Burning sensation)</i>	Absent	Ocasionally	Disturbing the Sleep	Disturbing the sleep and normal activity
5	<i>Jwar (Fever)</i>	Absent	< 100 ⁰ F	100 ⁰ - 102 ⁰ F	>102 ⁰ F
6	<i>Chhardi</i>	Absent	occasionally	1 – 2 times a day	More than 2 times a day
7	No of wheals	Absent	< 10	11 – 30	>30
8	Size of wheals	Absent	< 1 cm	1 – 3 cms	> 3 cms
9	Duration of wheals	Absent	< 1 hours	1 – 12 hours	> 12 hours
10	Frequency of appearance	Absent	once a week	2-3 time a week	Daily
11	Frequency of use of antihistamine	Absent	once a week	2-3 time a week	Daily

3 Method of drug administration



Vaman therapy was carried out in three steps *purva karma*, *pradhan karma* and *paschat karma*. *Pachan chikitsa* was prescribed for 7 to 15 days. It includes *Aampachak vati*, *shunthi triphal musta kwath* and *gandharv haritaki churna*. After *pachan chikitsa*, *panchtikta ghruta* was started in 30 ml dose as *abhaytar shodhan snehapan*. It was continued till appearance of *samyak snehapan lakshan*. Then two sittings of *sarvang snehan swedan* were

done on *vishrati din* [gap day] and on day of *vaman*. In *Vaman therapy madanphal kashaya* was used as *vaman dravya* and *yashtimadhu phant* was used as *vamanopaga dravya* (Helpful for *swedan*). *Paschat karma* included *nirdhosh varti dhoompan* and *triphala kwath gandush* (gargling). *Sansarjan karma* was advised and explained according to *Shuddhi*. Details of drug administration were mentioned in [table 5].

Table 5 - Method of drug administration

Sr no	Treatment name	Details of intervention	Duration
1	<i>Pachan</i>	- <i>Aampachak vati</i> 500 mg bd (after food) - <i>triphala</i> 5 grams + <i>musta</i> 3 grams + <i>shunthi</i> 1 gram <i>kwath</i> 40 ml bd (empty stomach)	7 days
2	<i>Snehapan</i>	<i>Panchtikta ghruta</i> start with 30 ml and increased each day by 30 ml <i>Snehapan</i> given at early morning empty stomach	7 days
3	<i>Vishranti din</i>	<i>Sarvang snehan swedan</i> On <i>vishranti din</i> and a day of <i>vaman</i> – 2 settings <i>Abhishyandi aahar</i> <i>Dadhi odhan</i> – on <i>vishranti din</i> – <i>ratri bhojan</i> (8 pm)	1 days
4	<i>Vaman</i>	<i>Aakhanth pan</i> – <i>Dugdhan</i> <i>Vaman dravya</i> – <i>Madanphal kashay</i> <i>Vamanopaga dravya</i> – <i>Yashtimadhu phant</i> <i>Lavanodak</i> After completion of <i>vaman</i> procedure- <i>Nirdosh vartidhumpan</i> and <i>gandush</i>	
5	<i>Sansarjan karma</i>	<i>Sansarjan kram</i> explained according to <i>Shuddhi</i>	5 to 7 days

RESULTS

In 1st case about 88.23% improvement was observed. In 2nd case about 90.47% improvement was noted. In 3rd case about 77.27% improvement was observed.

In all cases appetite, sound sleep and skin texture were improved after *vaman* therapy.

DISCUSSION

As per Ayurveda, *Sheetpitta* is a *tridoshaja vyadhi*. *Yog ratnakar* described the *vaman*

therapy as main *shodhan chikitsa* for *sheetpitta*⁶. *Vaman* procedure was carried out in three sequential steps viz., *purvakarma*, *pradhan karma* and *pashchat karma*. *Deepan- pachan*, *snehan*, and *swedan* therapies are enumerated as *purva karma*⁷. *Pachan chikitsa* is indicated prior to the administration of *shodhan* therapy. It helps in transformation of state of *sam* to *niram*⁸. The internal oleation is



consider as a pillar of five *shodhan* therapies. Internal *snehapan* defined as oral intake of fatty substance in a certain dose for a scheduled duration⁹. *Sneha* exhibits four distinct functions in the body like *snehan*, *vishyandan* *kledan* and *mardavata*¹⁰ Administration of *Snehapan* helps in liquefying the *malabhut dosha* (toxins) and detached *doshas* from channels of body (*srotas*). Which means helps in *doshagati* from *shakha* to *koshtha*.

Pradhan karma is *vaman* therapy. It seems that *shodhana* drugs because of their *vyavayi guna* escape the normal digestion by *jatharagni*, reaches to the minute channels of the body and starts acting immediately. *Sukshma guna* helps to reach them up to minute channels. The *doshas* are digested and became able to trickle by the *ushna guna* and then are detached from the channels because of *tikshna* and *vyavayi guna*. It is the *sara guna* which helps the detached *doshas* to reach the *koshtha* from where these are to expelled out. Lastly by *prabhav*, *vamaka* drug eliminates the *doshas* out by the oral route¹¹. *Vamanopag dravya* helps to *vaman dravya*.

Pashchat karma is *sansarjan karma*. The specific prescription of diet following *shodhan* procedure to restore the gastric fire as well as physical strength is defined as *sansarjan karma*. Following the *shodhan chikitsa*, it clears small amount of *doshas*

which is left out after *shodhan* procedure also rectifies damages cause by the disease process.

CONCLUSION

Here we evaluated the efficacy of *vaman* therapy in the management of *sheetpitta*. A case series of three case shows that, *Sheetpitta* was managed by *vaman* therapy by eliminating vitiated *doshas*. Further study is needed in large scale for more evaluation.



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