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## Ayurvedic Management of *Morphea* - A Case Report

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### ABSTRACT

Ayurvedic medicines are often considered effective for chronic and lifestyle disorders. Morphea also known as localised scleroderma is a rare, fibrosing skin disorder caused by the dysregulation of collagen production. Scleroderma comes in two main forms – systemic and localised. It is a disease of unknown origin that affects the microvasculature and loose connective tissue disease. In Ayurveda, this can be considered under the heading Uttanavatarakta. A Conventional therapy used in this condition is unsatisfactory and is not free from side effects. A case of long-standing systemic steroid-dependentitis presented here which was intervened successfully with Ayurvedic modalities.

### KEYWORDS

*Morphea, Scleroderma, Uttanavatarakta*



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## INTRODUCTION

Morphea is a rare skin condition that causes reddish patches on skin. It is a localised form of scleroderma which is characterised by excessive collagen deposition leading to thickening of dermis, subcutaneous tissues or both<sup>1</sup>. Morphea is classified into circumscribed, generalized, linear and pan sclerotic subtypes according to the clinical presentation and depth of tissues involvement that causes a wide variety of skin discolouration to difficulty with function of joints and muscles.

It has been associated with other connective tissue disorders, such as juvenile dermatomyositis, polymyositis, lupus erythematosus and eosinophilic fasciitis as part of an overlap syndrome<sup>2</sup>. It can be present with extra cutaneous manifestations, including fever, lymphadenopathy, arthralgias, fatigue, central nervous system involvement as well as laboratory involvement eosinophilia, polyclonal hypergammaglobulinemia and positive anti-nuclear bodies<sup>3,4</sup>.

When we studied Ayurvedic classic texts in detail we found that most of signs and symptoms are related to Rakta, Mamsa, Meda and Twakadushti which are similar to the signs and symptoms of Uttana Vatarakta<sup>5</sup>. The

disease was diagnosed on the condition based on Dosha, Dhatu and Dushya considering this point a single clinical case study was done on Morphea (Uttana Vatarakta).

## CASE REPORT

A 34 years old female patient, non-diabetic, non-hypertensive residing in Kolhapur, was presented in Ayurved College and Hospital OPD on 5<sup>th</sup> February 2018 with complaints of

- 1) Twaka Vaivryata (blackish discoloration of skin) over face forearm, scalp and hands
- 2) Keshapatan (Hair loss)
- 3) Sandhishotha and shoola at Janusandhi, Manibandhasandhi & Karpursandhi,
- 4) Katishoola.
- 5) Kandu

Patient was asymptomatic two years back, then she complaints of Twaka Vaivryata (blackish discoloration of skin) over face forearm, scalp and hands, Keshapatan (Hair loss), Sandhishotha and shoola at Janusandhi, Manibandhasandhi & Karpursandhi, Katishoola and Kandu which were progressive in nature. During this period patient had consulted with dermatologist and underwent treatment. She was on long standing steroids in form



of systemic and local application, painkillers, antacids and advised for skin biopsy which gives histological findings consistent as Morphea. Previously patient was on Allopathic management but was not satisfied with results and came for Ayurved treatment. In Ayurveda Morphea can be correlated with Vataraktavyadhi by its lakshnas (symptoms and signs).

### GENERAL EXAMINATION

Patient was averagely build and nourished, cooperative, obeys verbal commands, Vitals were as follows:

- Pulse – 82/min, regular
- Blood Pressure – 130/90 mmHg on right side of upper extremity.
- RR – 16/ min
- Temperature – 98 °F
- Oedema – Absent
- Cyanosis – Absent
- Clubbing – Absent
- Pallor – Present
- Central pulses – Present
- Peripheral pulses – Present
- JVP – Normal

### SYSTEMIC EXAMINATION

- RS – AEBE clear
- CVS – S1 S2 normal
- CNS – Higher Mental functions were intact , conscious and oriented
- P/A – Soft, Non-tender

### SKIN EXAMINATION

A blackish discoloration of skin was observed along with rough and hard skin of face and forearm.

All the haematological parameters were normal.

### MANAGEMENT

According to the involvement of Vata, Rakta, Twaka and Siradushti and as per patient bala we planned for Basti karma in shodhanchikitsa. Initially, externally oleation of Nimba taila<sup>6</sup> and Sudation was performed.

#### Shodhana

##### 1) AnuvasanBasti –

Hingutrigunataila 30 ml + PanchtiktaGhrita 30 ml = 60 ml

##### 2) Kshirbasti –

Manjishta, Nimba, Khadir, Triphala, Vidhang, Dashmool, Sariva, Each dravya in churna form taken for 3 gms + Kshir 250 ml + PanchtiktaGruth 30 ml = Total quantity of KshirBasti is 280 ml. Anuvasan and Kshirbasti was given alternately for 7 days.

**Shaman chikitsa:** All the internal Kalpas with appropriate dosage and anupana are given as per Table no .1 (mentioned below)



**Table 1** Shaman Chikitsa

Sr.No	Drugs	Dose	Anupana
1)	Rasrajras	125 mg	1 Tab OD with luke warm water
2)	AmruthotarKashayam	15 ml	3 tsp BD
3)	Shonithamruthotarkashayam	15 ml	3 tsp BD
4)	Amruthaguggul	250 mg	2 Tab BD with luke warm water
5)	Raktashodhakvati	250 mg	2 Tab BD with luke warm water
6)	MahatikhtakGhruth	5 ml	5 ml BD with luke warm water
7)	KottamchukyadiTaila + MurivennaTaila + SahcharTaila ( in equal quantity)	For L/ A	

The shaman chikitsa was given as per patient response to disease for continuously 3 months.

### Improvement

- Appropriate and good improvement was seen in blackish pigmentation over face and hand.
- Evacuation of bowel & quality of health.
- Changes in the skin seen along with glow on skin.
- Regrowth of hairs on scalp seen.

Below are Figures of Patient before Treatment (Figure 1 to Figure 5) and After Treatment (Figure 6 to Figure 9):

### Figure 1-5 Before Treatment



Figure 1



Figure 2



Figure 3



Figure 4





Figure 5

Figure 6-9 After Treatment



Figure 9



Figure 6



Figure 7



Figure 8

## DISCUSSION

In present case study we have discussed about Morpheawhich is a progressive systemic fibrosing rare skin disorder. The cause of Morphea is unknown, but may cause due to the collagen producing cells become overactive that overproduce collagen resulting in a Reddish or purplish oval patches on skin that gradually develop a lighter or whitish center.

Morphea can be differentiated clinically from systemic scleroderma based on the absence of sclerodactyly, Raynaud's phenomenon, Telangiectasis, Gastrointestinal Involvement and nail fold capillary changes.

Morphea treatment currently includes the most evidence for efficacy with phototherapy, Topical tacrolimus, calcipotriene, methotrexate and corticosteroids. These patients commonly have positive Auto antibodies with a high prevalence of positive ANA titres, homogenous Pattern, Single stranded



Antibody, Antihistoneantibodies, Anti Topoisomerase II Alpha antibody and Rheumatoid factor<sup>2</sup>.

The diagnosis of Morphea is based on the clinical features lesions initially present as a disorder of cellular immunity .Hyperpigmented patches or plaques, which evolve to become white and sclerotic centrally with a characteristic hyper pigmented border.

Scleroderma is not curable but we can improve the life span and quality of life of the patient.We have selected Ayurvedic preparation based on Dosha-Dushyasamurchna of the disease.It is a chronic inflammatory skin disease that manifests microcirculation.

Rasraj rasa is having Rasayan property and most effective in vata shaman activity<sup>7</sup>. Panchtiktagrutha contains drugs which are predominant in Ushnaviryra that helps in nourishing the Asthidhatu along with milk and sneha of the Basti which helps in to pacify the aggrevatedVata and subsides the pain<sup>8</sup>.

No recurrence of new symptoms were seen during the course of the treatment. Now, also patient is continuing oral medication with regular follow up & satisfied with Ayurved treatment .After complication of treatment (After 3 Months) Liver function tests and Renal function tests done to rule out changes( Reports are within normal

limits). Hence,Ayurvedic drugs are more safe & effective in such disease.

## CONCLUSION

In Ayurved classical Samhitas (texts) we had not found descriptionof Morphea. A single clinical case study was selected and treated it according to Dosha – DushyaSamurchanasiddhant by considering it as UtthanaVatarakta. Patient shows good results in lakshnas(symptoms) which had been managed on the basis of Raktapradosshajchikitsa ( Vata and RaktaDosha ) and changes can be seen in Figures mentioned above before treatment ( fig no 1 to fig no 5 ) as well as after treatment ( fig no 6 to fig no 9 ) . The patient was treated by knowing pathological state, as per vitiated dosha and consideringMorphea as Anuktavyadhi .



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