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Prachanna Karma - An effective procedure in the management of Indralupta followed by Icchabhediya Rasa as Lepa and Shamanoushadi - A Case Report

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ABSTRACT

Hair is the first most noticeable part of body. It enhances personality. As the cliché goes “your hair is your crown and glory” no matter the gender. The hair, after all is your best accessory. It forms an important anatomical structure of the body which not only have protective function. Increased industrialization and urbanization has constituted greater exposure to pollution contamination of water, air, food habits, and life style modification due to their intrinsic factors. Hence there is definite increase in the incidence of hair fall. Hair disorders cause negative impact towards the individual quality of life. *Indralupta* is a *Kshudraroga* characterized by loss of hair. It can be correlated with alopecia areata, which is having chief complaint of hair loss on scalp without any clinical inflammatory signs. In modern science treatment modalities like use of corticosteroid, laser therapy but all have lots of adverse effect. In *Ayurveda* literature *Acharyas* had briefly explain hair and mentioned many more modalities to treat hair loss. *Nidana Parivarjana*, *Prachanna*, *Shamanoushadhi* and externally use of *Lepa*.

Key words: Alopecia areata, Indralupta, Ayurveda, Prachaana, Lepa.

INTRODUCTION

Alopecia areata is a complex autoimmune condition that causes non scarring hair loss. It typically presents with sharply demarcated round patches of hair loss with characteristic exclamation point hairs observed on periphery of the patches. The patho-physiology of this disorder states that it is a hair follicle-cycling defect as the hair follicle matrix epithelium in the cortical differentiation stage is attacked by

inflammatory cells resulting in a premature catagenic phase or hair fall. The hair follicle stem cells are not destroyed and continue to regenerate but do not go beyond the anagen III/IV phase. Histologic examination shows a characteristic bee-swarm pattern of lymphocytic infiltrates around the bulbar region of anagen hair follicles with increased presence of CD8+ and CD4+ T cells in the follicular epithelium and around the hair follicles respectively.^[1]

Other than the genetic disposition, infectious pathogens like virus or bacteria^[2] emotional and physical stress, vaccines and drugs may also be triggering factors.

Conservative management of this disorder include corticosteroid injections, corticosteroid topical application, oral corticosteroids which are having harmful side effects and not advisable for long term use. So, world is expecting some remedies from Alternative medical sciences. *Ayurveda* offers different effective treatment modalities for the

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management of different autoimmune diseases like psoriasis, eczema, etc.^[3]

Alopecia areata can be correlated with *Indralupta* described in *Ayurveda*, a condition which affects the scalp hair resulting in loss of hair already present and obstruction for the growth of new hair follicles. The etiopathology of this disease is available in *Kshudraroga Nidana* of *Sushruta Samhita* and *Shiroroga Adhikara* of *Ashtanga Hridaya*. According to Acharyas, the hairfall is caused due to the vitiation and action of *Vata* and *Pitta* in the *Romakoopa* (hair follicle). The hair doesn't regrow as the *Srothas* or *Romakoopa* is blocked by *Kapha* along with *Shonitha*.^[4] The main treatment suggested in *Indralupta* is *Raktamoksha* i.e. *Siravyadha* or *Prachaana*.^[5]

CASE REPORT

Patient personal data

Name - Y.C.P

Age - 42 years

Gender - Male

Occupation - Private Job

Marital status - Married

Address - Vikas nagar, Hubli

OPD No - 18154

Pradhana Vedana Avadhi

Circular patchy hair loss on scalp, since 2 years and gradually patchy hair loss size increased since 1 year.

Anubandha Vedhana Avadhi

Dandruff associated with itching over affected area since 1 year.

History of present illness

The patient was apparently normal 2 years back then he developed patchy hair loss. Underwent Allopathy treatment for 1 year and did not find control over the disease. The patient was referred to the *Ayurvedic* hospital by some patient having similar disease and had got significant relief with *Ayurvedic* management.

Poorva Vyadhi Vruttanta

Not k/c/o HTN, DM. No history of autoimmune disorders (like Atopic dermatitis, psoriasis, Vitiligo, Urticaria, Rheumatoid arthritis).

Kula vruttanta - Nothing significant.

Physical examination

Shareera Akriti - *Madhyama*

Shareera Bala - *Madhyama*

Nadi - 70min

Rakthachapa - 120/70mm Hg

Swasagati - 18 per min

Dehoshmata - 98.6°F

Dashavidha Pariksha

- *Prakruti* - *Vata Pitta Prakriti*
- *Sara* - *Pravara*
- *Samhanana* - *Madhyama*
- *Satmya* - *Madhyama*
- *Satva* - *Madhyama*
- *Ahara Shakti* - *Madhyama*
- *Jarana Shakti* - *Madhyama*
- *Vyayama Shakti* - *Madhyama*
- *Vaya* - *Madhyama*

Roga Pareeksha

- *Nidana*
 - *Aharaja* - Intake of oily, spicy food, dairy products
 - *Viharaja* - Exposure to dust
 - *Manasika* - *Chinta* (work load)
- *Poorvaroopa* - Itching and hair fall
- *Roopa* - Patchy hair loss
- *Upashaya* - *Ushnasupachya Ahara*.
- *Anupashaya* - *Katu, Kshara, Lavana, Atisheeta Gamana*.

Probable Samprapti

Nidana Sevana which leads to *Agnimandya* rise to *Tridosha* and *Rakta Prakopa* (*Pitta Dosha* present at hair follicles associated with *Vata* cause falling off the hairs, afterwards *Kapha* associated with *Rakta* blocks the hair follicles), hence, no new hair grows in that place.^[6]

Samprapti Ghataka

- *Dosha : Vata Pitta Kapha*
- *Dushya : Rasa, Rakta, Asthi*
- *Upadhathu : Kेशha, Nakha.*
- *Agni : Dhatwagnimandya, Jatharagnimandya,*
- *Aama : Dhatwagnimandyajanya Ama, Jatharagnimandyajanya Ama.*
- *Udbhava Sthana : Amashaya*
- *Sanchara Sthana : Rasayani*
- *Adhishthana : Shiras*
- *Rogmarga : Bahya*
- *Vyaktastana : Twak*
- *Strotas : Rasavaha, Raktavaha, Asthivaha.*
- *Strotodushti Prakara : Sanga*
- *Vyadhi Swabhava : Chirakari*

Sthana Pariksha (Local examination of scalp)

Site of involvement - On right temporal region and parietal region

Size - 4 cm x 3cm

Shape - circular

Skin colour - reddish

Rashes/Discharge - absent

Sensation - absent

Scaling was observed which was indicative of dandruff on the scalp.

The patient was clinically diagnosed as case of *Indralupta* (Alopecia areata) and advised for *Pracchana* and *Lepa* procedure and *Shamanoushadi*.

Chikitsa (Treatment planned)**Poorva Karma**

Collection of materials includes blood lancet 18mm, pair of gloves, sterile cotton balls, betadine solution, *Panchavalkala Kashaya*. Vitals were checked and found to be stable. Hb%, HBsAg, RBS, CT, BT were checked and found to be in normal limit.

Pradhana Karma

In the presence of bright light, Patient was made to sit on a chair in comfortable position. The patchy area should be cleaned with betadine solution. *Pracchana* was done with a blood lancet starting from one end of the boundary of affected area in an equally spaced manner. It was allowed to bleed for 10 minutes. Observe the bleeding intensity and wipe it using sterile cotton balls.

Paschat Karma

After wiping the blood, wash the area with *Panchavalkala Kashaya*.

Note: observe for excess bleeding.

Ichhabhediya Rasa as *Lepa* was done after 4 sittings of *Prachanna Karma*.

2 tab of *Ichhabhediya Rasa* was taken and made it to paste adding lemon.

Applied over the affected area and washed with luke warm water after 6 hours.

Advice after treatment: The patient was advised to avoid head bath for 3 days.

Hair should not be combed. Avoid pollution, exposure to sunlight, spicy and junk food.

| Day | Observation and results |
|--|---|
| 1 to 3 days | <i>Amapachana</i> with <i>Avipattikar Choorna</i> |
| 4 th to 10 th day (Alternate days 4 sittings) | <i>Prachanna Karma</i> |
| 11 th day to 15 th day | <i>Ichhabhediya Rasa Lepa</i> |

| | |
|--|---|
| (Alternate days) | |
| 16 th day | Complaining of rashes, itching and burning after application of <i>Lepa</i> |
| 18 th day to 28 th day (Alternate days) | <i>Icchabhediya Rasa Lepa</i> |
| 30 th day | Redness over the applied area |
| 32 nd day to 42 nd day (Alternate days) | <i>Icchabhediya Rasa Lepa</i> |
| 44 th day | Sparse greyish hairs with brownish tinch appeared over some part of the bald patches. |
| 46 th day to 56 th day (Alternate days) | <i>Icchabhediya Rasa Lepa</i> |
| 2 nd month | Small thin greyish hairs grown on the patches. |
| 3 rd month | Application of <i>Rasotamadi Lepa</i> |
| 4 th month | Patches covered with small hair |
| 5 th month | Hair grown up to 1cm long on the patch of temporal region and parietal region |
| 6 th month | Normalized hair growth at both sites |
| 8 th month | No any recurrence was observed |

| | | | |
|----|-------------------------|-------------|--------------------|
| | <i>Guggulu</i> | after food | |
| 5. | <i>Rasothamadi Lepa</i> | Twice daily | <i>Twak Vikara</i> |



Before treatment



After treatment

Prescribed medicine

| SN | Medicines | Dose | Therapeutic indications |
|----|-----------------------------|-------------------------|---|
| 1. | <i>Arogyavardhini Rasa</i> | Twice a day before food | <i>Kushta, Shotha, Mrudu Virecaka</i> |
| 2. | <i>Manjishthadi Kashaya</i> | Twice a day before food | <i>Rakta Shodhaka, Kandu Hara, Vatarakta, Kushta, Rakta Mandala</i> |
| 3. | <i>Saptamruta Loha</i> | Twice a day after food | <i>Kalitya, Palitya, Shotha</i> |
| 4. | <i>Triphala</i> | Twice a day | <i>Shotha</i> |

DISCUSSION

According to *Acharya Sushruta*, *Pitta* along with *Vata* getting localized at the roots of hair follicles causes hair fall and thereafter *Kapha* along with *Rakta* obstructs the channel of these hair follicles leading to cessation of regrowth of hair over that area and this condition is known as *Indralupta* or *Khalitya*.^[7] Thus derangements of *Vata*, *Pitta*, *Kapha* and *Rakta* are the main causative factors of *Indralupta*. While describing the disorders occurring due to over indulgence in *Katu*, *Lavana*, *Snigdha* and *Viruddha ahara* there is hair loss. It has also been mentioned that excessive intake of *Lavana*, *Katu* causes *Khalitya*.^{[8][9]} Thus, it can be said that a person habituated to excessive *Lavana* or *Kshara* intake and taking *Viruddha Ahara* in

routine, is prone to develop *Indralupta*. In the present case, the patient had the history of excessive intake of spicy, oily food, junk food. These processed foods may be acting as *Virudha Ahara*. This might have caused vitiation of *Pitta Dosha* in the patient and caused the problem of patchy hair loss. Dairy products, especially of buffalo milk are generally *Guru, Snigdha, Abhishyandi, Madhura* in taste and reduces digestive capacity.^[10] Oily and fried foods are also heavy to digest.^[11] Thus intake of these food articles which is heavy to digest on regular basis causes *Agnimandya*. During history taking, patient had habit of eating fried and oily food. Thus the patient was complaining of lack of appetite which indicates *Agnimandya* causing improper digestion of ingested food. During the process of digestion along with the formation of seven *Dhatu* of the body there is also formation of *Updhatu* and *Mala*. One of the waste product of *Asthi Dhatu* is *Kesa*.^[12] When there is improper metabolism there will be no formation of proper *Sara* or *Kitta*. Low digestive fire is a major factor which affects normal metabolism in the body. Thus, in the present case, low digestive capacity and impaired metabolism affecting the level of both micro and macro nutrients of the body might have affected the hair growth causing hair loss due to *Vata* and *Pitta Dosha*. Thus the hair follicles get close by the *Rakta* along with *Kapha Dosa* so in such conditions *Pracchana* helps in opening of pores clearing the *Romakupa* and *Lepa* helps in facilitating absorption of the *Aushadha* applied over the scalp. *Acharya Sushruta* considered *Raktamokshana* as one of the five *Shodhana*, *Pracchana Karma* is one type of *Raktamokshana* in which *Koorcha Shastra* is used to make multiple pricks are made in affected area to ooze out vitiated blood and achieve *Doshasatmya*.

Human physiology explains that hairs are elastic keratinized threads which develop from epidermis and extend downward into subcutaneous tissue. Each hair has a shaft and root embedded in the tubular hair follicle in the skin which is associated with one or more sebaceous gland. The sebum which is a greasy secretion of the sebaceous gland prevents the scalp becoming dry and maintains the normal skin texture.

The peculiarity of hairs of the head is that they do not possess the medulla. It is also to be noted that hairs have no blood vessels but receive nourishment from blood vessel of papilla. Thus, hair growth occurs by multiplication of cells from the papilla.^[13]

Ichhabhediya Rasa contain *Shunti, Maricha, Shuddha Parada, Shuddha Gandhaka, Tankana Bhasma, Shuddha Jayapala* having *Tikshna, Ushna* qualities. Irritation caused by the corrosive effect of *Jayapala* manifest eruptions over the patchy area. When applied locally over the patch of hair loss, it might have increased the blood supply over the area and stimulated hair growth. As per classical references of treatment in *Indralupta, Sthanika Abhaynga* and *Swedana*.^[14] in the form of application of *Lepa* processed with drugs having *Pitta* and *Rakta* pacifying qualities reduced *Dosha* vitiation at site and stimulated hair growth by creating enough *Snigdhatu* added up with the stimulatory effect of mild fomentation curing the cutaneous defects related to hair growth. These localized therapies have helped to improve blood circulation to the papilla of hair follicles and modified the function of Sebaceous glands in turn stimulating the newly present hair which is said to be located on the side of the shed hair^[15] helping in replacement of lost hair. To add upon the prognosis in the present case, as told in the classical textbooks of *Ayurveda, Indralupta* is said to be curable with various treatment modalities as cited above. The present case was of recent onset which got completely cured with re-growth of hairs over the patch. The efficacy of the treatment was assessed by changes in clinical features before and after treatment which were both subjective and objective. In the follow up period of 2 months there was no recurrence of hair loss in the present case.

CONCLUSION

The present case study shows the efficacy of *Ayurveda* intervention including both external and internal medications applied following the treatment strategy as explained in classical text books in a case of *Indralupta*. The drugs helped in regrowth of hairs improving the blood circulation over the hair roots

and providing a favorable condition for hair growth. Such similar treatment protocol can be followed in the cases of *Indralupta*. There was no Adverse Drug Reactions reported during or after treatment.

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