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# Ayurvedic management of *Kitibha Kushta* - A Case Study

Berbi PS<sup>1</sup>, Sourabha S Kokatnur<sup>2</sup>

<sup>1</sup>3<sup>rd</sup> Year Post Graduate Scholar, Department of Mouluka Siddhanta, Ayurveda Mahavidhyalaya, Hubli, Karnataka, India.

<sup>2</sup>Assistant Professor, Department of Mouluka Siddhanta, Ayurveda Mahavidhyalaya, Hubli, Karnataka, India.

## ABSTRACT

Skin is a barrier protecting the underlying tissue from physical, chemical and biological toxic agents. Skin diseases are mainly affecting the external beauty of the patients that hampers the daily routine of one's life. Skin disorders constitute one of the largest groups of health problems in general clinical practice. *Kushta* is a broad term which covers almost all the skin disease in Ayurveda. In general *Twak Vikaras* are mainly affecting due to altered lifestyle, lack of physical exercise, poor hygiene, mental stress and improper food habits. *Kushta* is further divided into *Maha Kushta* and *Kshudra Kushta*. *Kitibha Kushta* is one of the *Kshudra Kushta*. Here *Tridosha*, *Rasa*, *Rakta*, *Mamsa*, *Ambu* are affected. *Rakta Dusti* is the main cause of *Twak Vikaras*. *Virechana* is the *Shodhana Karma* for *Raktaja Vikaras*. After *Shodhana*, *Shamana Chikitsa* plays major role for *Alpadosha Nirharana*. This paper highlights a case study of *Kitibha Kushta* as a *Raktavahasrotodusti Vikara* treated with the Ayurvedic principles in particular *Shodhana Chikitsa*.

**Key words:** *Kitibha Kushta*, *Shamana*, *Shodhana Chikitsa*, *Psoriasis*

## INTRODUCTION

Ayurveda, the eternal science which has its root in Vedas, the oldest available literature explains the health of an individual as the physical, mental, social and spiritual well-being. Ayurveda says "*Dosha Dhatu Mala Mulam Hi Shareeram*".<sup>[1]</sup> If any *Dusti* in this causes *Vikaras* to the individual. "*Kushnati Shareerasya Shonitam Vikrute*" means vitiation of *Rakta Dhatu* leads to *Kushta*.<sup>[2]</sup> *Twak Vikaras Nidana* are most commonly arises due to *Mithyahara*, *Vihara*, *Manasika* vitiate *Tridosha* which further leads to the affliction

and aggravation of *Rasa*, *Rakta*, *Mamsa* and *Lasika*.<sup>[3]</sup> Each *Dosha* vitiation elicit the different *Lakshanas* in the *Twacha*. According to *Charaka Acharya*, *Kitibha Kushta* is one of the *Raktapradoshaja Vikara* caused by vitiation of *Vata* and *Kapha Dosha* in excess having *Lakshanas* like *Shyava Varna* (blackish brown colour), *Kina Khara Sparsham* (rough on touch), *Parusham* (Dryness), *Ruksha Pidika* (skin eruption) and *Kandu* (itching).<sup>[4]</sup> According to *Acharya Charaka* a wise physician is one who closely observe the *Vridhhi*, *Sthana*, *Kshaya Avastha* of *Roga*, *Deha*, *Agni*, *Chetas* of *Rogi* then should give the *Chikitsa* to the *Rogi* by treating all at the same time.<sup>[5]</sup> The *Oushadhi* administered by *Bhishak* should not provoke another *Vyadhi* by subsiding one *Vyadhi*.<sup>[6]</sup> The main line of treatment of *Kushta* is repeated *Shodhana*.<sup>[7]</sup> The *Dosha* which are pacified by *Shodhana* never re-occur. *Virechana* is the *Shodhana Karma* for *Raktaja Vikara* for eliminating *Doshas* from its root.<sup>[8]</sup> Then *Shamana Oushadhi* given for *Alpadosha Nirharana*. In Modern, *Psoriasis* is considered as a genetic, immunological and systemic disorder. Generally, there is a clinical manifestations like *Psoriatic arthritis*, *Psoriatic Pustules* and *psoriatic erythroderma* as well as some cases of

### Address for correspondence:

Dr. Berbi PS

3rd Year Post Graduate Scholar, Department of Mouluka Siddhanta, Ayurveda Mahavidhyalaya, Hubli, Karnataka, India.  
E-mail: psberbi10@gmail.com

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psoriasis palmoplantaris and inverse psoriasis are to be considered as severe. Even though modern way of treatment has many steroids, topical creams and ointment, the recurrence of psoriasis is common. It is also important to note that they have considerable side effect when used for the longer period. Hence it is a need of an hour to search effective, adequate and safe ideal remedy from Ayurveda to cure the disease from its root.

## CASE PRESENTATION

### Presenting Complaints

A 63 yrs old female came to OPD of Ayurveda Mahavidhyalaya College and Hospital, who was apparently normal before 15 years developed small skin lesion over upper, lower limb, scalp and abdomen associated with severe itching and powdery discharge distributed all over the body. She is housewife belonging to low economic class, Hindu family background. She consulted an allopathic physician and was advised with antibiotics, anti-histamines and topical steroids. But there was no considerable relief. Later she consulted to our hospital OPD for treatment. She is not known case of DM, HTN.

### Personal History

**Diet :** Excessive *Guru Ahara* (heavy food), *Dadhi* (curd), *Mamsa Sevana* (meat), *Viruddha Ahara* (incompatible food).

**Appetite :** Less appetite

**Bowel :** constipated

**Micturition :** Normal 4-5 times per day

**Sleep :** Disturbed

### Clinical Findings

Patient was very much depressed with the present condition. O/E - Circular skin lesion with silvery scale like patches distributed over upper and lower limbs, scalp, hands, abdomen associated with severe itching, blood discharge, scaly, dry, round, rough lesions were found.

**Skin Examination:** Candle grease sign was positive.

**Laboratory Investigation:** CBC – Hb% - 10.04%, TC – 11,800 /Cu.mm, DC - P - 66% L 30% E 4% ESR - 100 mm/hr, Platelet count - 3.90 lakhs / hr

### Samprapti Ghataka

*Dosha - Vata Kapha Pradhana Tridoshaja*

*Dushya - Rasa, Rakta, Mamsa*

*Ama - Jatharagnijanya Ama*

*Agni - Jatharagnijanya, Dhatwagni*

*Srotas - Rasavaha, Raktavaha Srotas*

*Srotodushti Prakara - Sanga*

*Rogamarga - Bahya*

*Udbhava Sthana - Amasaya*

*Vyaktasthana - Twacha*

*Roga Swabhava - Chirakari*

*Sadhyasadhyata - Kricchrasadhya*

### Samprapti

*Nidana Sevana (Aharaja, Viharaja, Manasika)*  
(Excessive intake of *Dadhi, Guru Ahara, Atiamla, Lavana Rasa, Ati Mamsa*, exposure to *Sheeta Maruta, Krodha, Shoka*)



Causes *Agni Vyapara Vikruti*



*Tridosha Vikruti* along with *Rasa, Rakta, Mamsa, Lasika*



*Anna Rasa Vikruti*



*Vikruta rasa* gets *Margavarodha* in *Twacha*



*Pidika* with *Kandu, Daha* in *Sarvanga*



Causes *Kitibha Kushta*

## Vyavacchedaka Nidana

Lakshana	Sidhma	Kitibha	Vipadika	Dadru	Charmadala
<b>Dosha</b>	Vatakapaha Pradhana	Vatakapaha Pradhana	Vatakapaha Pradhana	Kapha Pitta Pradhana	Pittakapaha Pradhana
<b>Vedana</b>	Kandu (Itching)	Ugrakandu	Teevra edana Mamsakandu (Severe Itching)	Kandu	Shoola (Pain), Kandu, Sparsha Sahatva Osha (Burnin g Sensati on), Chosha , Toda, (Prickin g Pain) Daha
<b>Varna</b>	Sweta (White), Tamra (Copper y), Alabu (Bottle Guard) Puspava rna	Shyava (Reddi sh Black), Krishna (Black) , Asita Varna (Blacki sh)	-	Raga Atasipus hpa Varna Tamra	Raktav arna (Reddis h Colour)
<b>Samsthana</b>	Rukshamabhi Snigdham Anitah Dourgan daka Puspavat Ajogrist am	Khinak hara Sparsha Parusha Sravi Snigdha Ruksha	Panipada Sputana , Saragap idika	Pidika (Eruption ) Mandala Utsanna Parimandala Visarpini Anushan gini	Saspho ta (Carbu ncle)

	Vimunc hati Slaksha na Sparsha				
<b>Sthana</b>	Bhuyasi Urahsi	-	Panipada	Deergapr atana	Tala Hasta Padatal a

## Vyadhi Vinishchaya : Kitibha Kushta

## Chikitsa

"Samprapti Vighatanam Eva Chikitsa". Ayurveda emphasizes on "Swasthasya Swasthya Rakshanam and Aturasya Vikara Prashamanam" hence Chikitsa can be considered as Kriya or Karma which maintains the Samyata in Dosha, Dhātu, Mala and Agni; and simultaneously also cures the disease. It can be classified under the 3 categories

- Daivavyapashraya,
- Yuktivyapashraya
- Satwavajaya

Antahparimarjana Chikitsa includes Shodhana, Shamana and Nidana Parivarjana therapies.

As Kushta is the Raktavaha Srotodusti Vikara, Virechana is the main line of treatment adopted in it. Virechana is given with the help of Trivrut, Danti and Triphala etc. Virechana is advised when Kapha and Pitta Pradhana Kushta localized in Vata Sthana.

## MATERIALS AND METHODS

Amapachana (Appetizer), Arohana Snehapana (oleation therapy), Virechana (Purgation), Samanoushadhi (Internal medicine), Pathya - Apathya Palana (Diet).

## Treatment Schedule

The patient was administered with Shodhana and Shamana medicines

Date	Treatment	Medicine/Procedure
21/04/21	Amapachana	Trikatu Churnam <sup>[9]</sup>

		1 tsp BD with hot water after food for 3 days
24/04/21	<i>Snehapana</i>	<b>Pancha Tiktaka Ghrita</b> <sup>[10]</sup> 30ml - 1 <sup>st</sup> day 60ml - 2 <sup>nd</sup> day 100ml - 3 <sup>rd</sup> day 120ml - 4 <sup>th</sup> day
28/04/21 - 30/04/21	<i>Abhyanga and Swedana</i>  One day before <i>Virechana</i>  <i>Kaphautklesa Ahara Masha, Nimbu, Lavana, Sheeta Jala, Paniya, Katu Rasa Ahara</i> given	<b>Manjisthadi Taila</b> <sup>[11]</sup> <i>Abhyanga</i> followed by <i>Bashpa Sweda</i>
01/05/21	<i>Virechana Karma</i>	<b>Trivrut Lehyam</b> <sup>[12]</sup> 30gm morning 8am  Total – 16 Vega observed  <i>Samsarjana Krama</i> Advised  <i>Pathya Apathya, Nidana Parivarjana</i> advised.

Drug Name	Indication
<i>Trikatu Churna</i>	<i>Deepana, Amapachaka, Shleshmaghna, Medoghna, Kusthagna</i>
<i>Panchatiktaka Ghrita</i>	<i>Deepana, Pachaka, Srotoshodhaka, Raktaprasadaka, Kandughna, Kushtaghna, Varnya</i>
<i>Manjisthadi Tailam</i>	<i>Raktashodhaka, Vranaropaka, Twachya</i>
<i>Trivrut Lehyam</i>	<i>Mridu Virechaka</i>

**Shamanoushadhi**

- *Mahatiktaka Ghritam* 1tsp BD bf with hot water

- *Cap. Tiktamrita* 1 TID af
- *Tab. Panchatiktaka Ghrita Guggulu* 1 TID af
- 777 Oil External application

**Assessment of clinical features based on gradation system**

Grading	Vaivarnya	Srava	Kandu	Ruja	Lesion Size
00	<i>Prakruta Twak Varna</i>	<i>Nissrava</i>	<i>Akandu</i>	<i>Avedana</i>	Lesion as scar
01	<i>Krishna</i>	<i>Jala Sannibha Srava</i>	<i>Madhyama Kandu</i> but not disturbing normal activity	<i>Vedana</i> on deep pressure over <i>Pidaka</i>	Lesion less than 1 cm
02	<i>Krishna Rakthabha</i>	<i>Pooya Srava / Rakta Srava</i>	Occasional <i>Kandu</i> disturbing normal activity	<i>Sa Vedana Sparsha</i>	Lesion between 1 to 3 cm
03	<i>Rakthabha</i>	<i>Sa Rakth Pooya Srava</i>	<i>Satata kandu</i> with <i>nidranasha</i>	<i>Asparsha Vedana</i>	Lesion more than 3 cm

**RESULTS**

Lakshanas	BT	AT
<i>Vaivarnya</i>	02	01
<i>Srava</i>	02	00
<i>Kandu</i>	03	00
<i>Ruja</i>	03	00
Lesion Size	03	00
Scaling	Present	Absent

**Pathya Apathya**

- *Pathya - Laghu Anna* (light diet), *Gritha Yukta Anna, Purana Dhanya, Mudga, Jangala Mamsa*

- *Apathya - Ati Guru Anna, Amla Rasa, Dugdha, Dadhi, Anupa Mamsa, Matsya, Tila, Guda*

## DISCUSSION

According to Ayurveda *Kitibha Kushta* is a *Vatakaphapradhana Kushta*. A 63 yrs old patient came with the complain of small skin lesion over upper, lower limbs, scalp, abdomen associated with severe itching distributed all over the body. On history taking patient had irregular diet pattern and excessive use of *Dadhi, Atimamsa, Guru, Virrudha Ahara*. *Viharas* such as more exposure to *Sheetamaruta, Atichinta Krodha Shoka* are the *Nidana* causes *Agni Vyapara Vikruti* leads to *Tridosha Vikruti* along with *Rasa, Rakta, Mamsa, Lasika* results in *Ahara Rasa Vikruti*. *Vikruta Rasa* gets *Margavarodha* in *Twacha* results in *Pidika* with *Kandu* and *Daha* in all over the body cause *Kitibha Kushta*. Because of *Rasavaha Srotodusti* the patient is having *Agnimandhya* and because of *Apana Vayu Vaigunya* cause *Malabaddhata*. There is significant increase of *Ruksha, Khara* and *Sheetaguna* in the patient, therefore *Sneha Virechana* was planned for *Shodhana*. *Chikitsa* was started with *Amapachana* with *Trikatu Churnam* for 3 days for *Agni Sandeepana Karma* and for *Dosha Shithilakarana Snehapana* with *Panchatiktaka Ghrita* planned for 4 days in *Arohana Krama* to bring the *Dosha* from *Sakha* to *Koshta* then followed by *Abhyanga* and *Swedana* for 3 days. Then *Virechana* with *Trivrut Lehya* contains ingredients like *Trivrut, Khanda Sharkara, Ghruta*. *Trivrut* is mainly having *Tikta, Katu Rasa, Ushna Veerya, Kaphapittahara* and *Kushtaghna* property. It is a *Sukha Virechaka*. It removes *Doshas* from *Koshta* by its *Rechana* property. Due to *Laghu, Rooksha, Teekshna Guna* it does *Deepana* and *Pachana*. By its *Srotoshodhana* property it acts on minute channels and does *Twak Prasadana*. The mode of action of *Virechana Oushadhi* is *Adhobhaga Dosha Harana* having the property like *Ushna, Tikshna, Sukshma, Vyavayi* and *Vikasi* due to this property *Aushadha* reaches *Hrudaya* and circulate through the vessel. Due to *Ushna* property present in *Aushadhi* they liquefy the *Doshas* located in the channels of entire body, thus *Doshas* flows through GIT, morbid *Doshas* reaches the *Amasaya* carried by *Udana Vayu*, due to the predominance of *Prithvi* and

*Jala Mahabhuta* of *Doshas* from *Koshta* and leads to *Dosha Harana*. 16 *Vegas* were attained, then *Samsarjana Krama* is advised. On discharge *Shamana Ousadhi* possessing *Tikta, Snigdha Guna, Kusthaghna, Kandughna* was advised to continue and patient was asked to come for follow up after 15 days. *Pathya Apathya* is advised.

## CONCLUSION

This case study is documented evidence for the successful treatment of *Kitibha Kushta* through *Shodhana* and *Shamana Chikitsa*. *Shodhana* has great importance in *Bahudosha Avastha*. *Acharya Sushruta* opines that repeated *Shodhana* has great importance in *Bahudoshaavastha* in *Kushta*. Generally, *Kushta Vyadhi* has tendency to reoccur. So, *Nidana Parivarjana* should be done along with the *Chikitsa*.

### Before Treatment



## After Treatment



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