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Ayurveda is a single hope for Autoimmune disease Psoriasis : A Case Study

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ABSTRACT

An autoimmune disease arises due to abnormal response of immune system. Psoriasis is one of very common autoimmune disease characterized by dry skin and raised, rough, red areas on the skin covered with fine silvery scales and itching in the lesion of skin they disturb the daily routine of the patients. In *Ayurveda* all the skin diseases are described under a broad term of *Kustha*, which are further divided in *Mahakustha* & *Kshudra Kustha*. *Kitibha Kustha* one among 11 varieties of *Kshudra Kustha* which resembles psoriasis clinically. In modern medicine There is no certain cure for this disease, it provides symptomatic relief but also has side effects in long course. Here an effort was made to treat a 29 year old female diagnosed case of plaque psoriasis, by Ayurvedic regimen. In the study initially *Virechan Karma* was performed. After *Sanshodhan*, *Sanshamana* drugs were given for 30 days. After 30 days we observed a marked improvement in overall condition of the patient with no recurrence since last 4 months.

Key words: *Kustha, Mahakustha, Kshudra Kustha, Virechan, Sanshodhan, Sanshamana.*

INTRODUCTION

The term Psoriasis originated from the Greek word 'Psora' that means, 'itch'.^[1] Psoriasis is a chronic inflammatory, hyperproliferative skin disease. It is characterised by well – defined erythematous scaly plaques, particularly affecting extensor surfaces, scalp and nails and usually follows a relapsing and remitting course.^[2] In psoriasis, main abnormality is of increased

epidermal proliferation to excessive multiplication of cells in the basal layers. The transit time of keratinocyte is shortened and epidermal turnover is reduced to 5-6 days from 28-30 days.^[3]

Because of its relapsing nature the disease has remained a great problem. In this disease patients not only have physical problems, but also suffer mental and social distress. Diagnosis of the disease is made mainly on the basis of clinical symptoms.^[4] Globally psoriasis affects only 1% of the total population, with men and women being equally affected. The overall incidence in India ranges from 0.44% to 2.2%, with an overall prevalence of 1.02%.^[5] Methotrexate, corticosteroids etc. can be used for the management of psoriasis in modern medicine, but long term use of these medicines are very harmful.

On the basis of symptoms, it can be correlated with *Kitibha Kustha*. *Kitibha Kustha* is mentioned in all *Ayurvedic* classics under *Kshudra Kustha* and has predominance of *Vata* and *Kapha Dosh*.^[6] The

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causative factors of *Kitibha Kustha* is same as *Kustha*. Dietary factors as *Viruddha Ahara*, excessive consumption of *Drava, Snigdha, Guru Ahara, Navanna, Vega Dharana* specially of vomiting are major aetiologies. Indulgence in sinful act and ill *Manovritti* (negative mentality) are associated mental factor for causing the disease.^[7] *Acharya Charak* has mentioned the symptoms of *Kitibha Kustha* as *Shyava, Khar Sparsh, Parusha*^[8] and *Acharya Sushruta* described its symptoms as *Stravi, Vrittam, Ghan, Ugra Kandu, Snighda, Krishna*.^[9] The etiological factor leads to vitiation of *Tridosha* especially *Vata* and *Kapha*. These *Dosha* through *Tiryakvahini Siras* proceed to *Bahya Rogamarga* i.e., *Twacha, Rakta, Mamsa, and Lasika* and cause the symptoms of disease.^[10] Repeated *Samshodhana* along with *Samshamana* is main line of treatment.^[11] Both *Antah Parimarjan* and *Bahiparimarjan* therapies have been indicated in *Kushtha Roga*.

In present case study there is *Vata-Kapha* dominancy with involvement of *Tridosha*. Therefore for this study, *Virechana* as *Samshodhana* and *Panchatikta Ghrita Guggulu* tablet (it contains drugs having *Tikta, Kashay Rasa, Ushna Virya* and *Katu Vipak*) and *Mahamarichyadi Tailam* for local application as *Shamana* drug was planned for the management of psoriasis.

AIM AND OBJECTIVE

To evaluate the role of *Samshodhan* and *Sanshaman Karma* in the management of psoriasis.

MATERIAL AND METHODS

Selection of patient - for this study, patient was registered from OPD of Pt. Khushilal Sharma Govt. Ayurvedic Hospital Bhopal.

Plan for study - Patient taking allopathy medicine was stopped during study period. The drug required for *Virechana Karma* were procured and prepared in *Prakalpa of Panchakarma* in Pt. Khushilal Sharma Govt. Hospital Bhopal.

Duration of study - 30 Days. Follow up every 30 days for 6 months.

CASE REPORT

Basic information of the patient

Age - 28 yrs

Sex - Female

Religion - Hindu

Socio economic status - Middle class

Chief complaints

1. Erythematous rashes over head, both hands and legs, abdomen and back since 10 yrs.
2. Itching in rashes.
3. Scaling on scratching.
4. Low back ache.

History of present illness

The patient was normal 10 year back. Since then patient have been suffering from reddish patch all over head, scaling of skin and itching gradually increasing all over body. For this complaints she got diagnosed psoriasis in allopathic hospital and she took treatment from different doctors but got no satisfactory relief, than she came to Pt. K.L.S. Govt. Auto. Ayurveda College & Hospital on 24/11/2021 in Kayachikitsa Department OPD.

History of past illness - no

Family history - no

Personal history

Appetite - Normal

Bowel - constipated often

Sleep - Normal

Micturition - Normal

On examination

Candle-Grease sign - Positive

Auspitz sign - Positive

Koebners phenomenon - Positive

Vitals were normal.

Treatment protocol

1. *Deepan Pachana - Chitrakadi Vati* 500mg BD, *Panchkol Phanta* 10ml BD for 5 days.
2. *Abhayantara Snehan - Panchtikta Ghrita* for 7days in increasing order from 50 ml to 180 ml with luke warm water followed by *Mridu Snehan* and *Swedana* for 3 days. Then *Virechana Karma* was performed.
3. *Virechana Karma* - with *Trivritta Kashayam*.
4. *Samsarjana Karma* - for 7days was done before starting *Samshamana* drugs.
5. *Samshamana* therapy - for *Samshamana* therapy following medicine were used -
 - *Tablet Panchatikta Ghrita Guggulu* - it contains having like *Tikta, Kasaya Rasa, Ushna Virya* and *Katu Vipak*. These properties collectively possess *Vatahara* and *Kaphahara* properties and act as excellent antimicrobial and ant inflammatory agents.
 - *Mahamarichyadi Tailam* - It is ant inflammatory and antipruritic, moisturising agent.

PASI Score^[12]- The current gold standard for assessment of extensive Psoriasis has been the Psoriasis area severity index (PASI). PASI combines the assessment of the severity of lesions and the area affected into a single score in the range 0 (no disease) to 72 (maximal disease). The PASI is a measure of the average redness, thickness and scaling of the lesions (each graded on a 0-4 scale), weighted by the area of involvement.

Steps in generating PASI score

- a) Divide body into four areas head, arms, trunk to groin and legs to top of buttocks.
- b) Generate a percentage for skin covered with psoriatic plaques for each area and convert that to 0-6 scale as below.
- c) Generate an average score for the erythema, thickness, and scale for each of the areas.
- d) Sum the score of erythema, thickness, and scale for each of the areas.

- e) Multiply item (c) and (d) for each area and multiply that by 0.1, 0.2, 0.3 and 0.4 for head, arms, trunk and legs respectively.
- f) Add these scores to get the PASI score.

Percentage	Rating scale
00	00
00<10%	01
10<30%	02
30<50%	03
50<70%	04
70<90%	05
90-100%	06

Assessment criteria

The improvement of condition of the patient was assessed on the basis of PASI scale

Before treatment

	Head and neck	Arms	Trunk	Legs	Total
Skin area involved score	3	4	2	4	
Redness	2	3	2	4	
Thickening	2	4	2	4	
Scaling	4	3	2	3	
Total	2.4	8	3.6	17.6	31.6

After 3 months

	Head and neck	Arms	Trunk	Legs	Total
Skin area involved score	2	3	1	3	
Redness	2	3	2	2	

Thickening	2	2	1	2	
Scaling	3	3	2	3	
Total	1.4	4.8	1.5	8.4	16.1

RESULT AND DISCUSSION

Psoriasis is a chronic inflammatory, hyperproliferative skin disease. It is characterised by well – defined erythematous scaly plaques, particularly affecting extensor surfaces, scalp and nails. Here a case of plaque psoriasis has been discussed, which is correlated with *Kitibha Kustha*. *Kitibha Kustha* is one among 11 varieties of *Kshudra Kustha* which resembles psoriasis clinically.

Kitibha is a *Kshudra Kustha* and have *Vata-Kapha* dominance and even involvement of *Tridosha* can be evident from its signs and symptoms. The vitiated *Doshas* reaches to *Shithila Dushya* like *Twaka, Rasa* etc. and results into *Sthana Samshraya Avastha* and then produces symptoms of *Kitibha Kustha*. *Acharya Charaka* has mentioned the symptoms of *Kitibha* as *shyaw, Kin Khar Spars, Parusha* and *Acharya Sushruta* described its symptoms as *Stravi, Vrittam, Ghan, Ugra Kandu, Snighda, Krishna*. The line of treatment mentioned in *Ayurvedic* classics for *Kushtha Roga* are *Nidana Parivarjana, Shodhana, Snehana, Swedana, Raktamokshana, Prakriti Vighatana, Shamana, Lepana* etc. Repeated *Samshodhana* along with *Samshamana* is main line of treatment. It is a disease of *Bahya Rogamarga*, so both *Antah Parimajana* and *Bahi Parimarjana* treatments should be used. Considering the above facts, composite treatment plan was adopted. Initially *Abhyantara Shodhana* was done with *Virechana Karma* and after completion of *Samsarjana Krama, Samshamana* treatment was performed. *Sanshamana* drug (*Panchatikta Ghrita Guggulu* tablet and *Mahamarichyadi* oil) contains drugs having like *Tikta, Kasaya Rasa, Ushna Virya* and *Katu Vipak*. These properties collectively possess *Vatahara* and *Kaphahara* properties, act as excellent and antimicrobial and anti-inflammatory agents.

For the basis of improvement of lesions, PASI scale was considered. PASI score was 31.6 after 3 months it was

16.1, the patient remained in follow-up once every month and her PASI score varied from 12 to 16.1 and have no aggravation of complaints till September 2022.

CONCLUSION

The present case study shows that *Virechan Karma* and *Sanshamana Chikitsa* work effectively in the management of psoriasis. *Virechan Karma* by *Trivritta Kashay* and *Sanshaman Chikitsa* (*Panchatikta Ghrita Guggulu* tablet and *Mahamarichyadi Tailam*) can be efficiently done as no adverse effects were observed. There is good result in psoriasis. No adverse effect and aggravation of the symptoms was found in the patient during and after the treatment.

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