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Ayurvedic management of *Vicharchika* (Eczema) - A Case Report

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ABSTRACT

Eczema is a reaction pattern manifested by variable clinical and histologic findings. Primary lesions may include papules, erythematous macules and vesicles which can coalesce to form patches and plaques. In severe eczema, secondary lesions such as weeping and crusting may predominate. Eczema has quite resemblance with *Vicharchika* in *Ayurveda*. *Vicharchika* is characterized by skin manifestation having the symptoms *Kandu* (Itching sensation), *Pidika* (Papule), *Shyava Varna* (Blackish brown discoloration) and *Bahusrava* (Excessive exudation). **Case summary:** A 62 year old male patient approached with chief complaints of diffuse scaly skin lesions over face, upper limbs, lower limbs, abdomen and flanks associated with severe itching and serous discharge since 8 months. The *Ayurvedic* diagnosis was made as *Vicharchika* (Eczema) on the basis of signs and symptoms. The patient was given with *Raktha Shodhaka* and *Kushtahara Shamana Aushadis* (Oral medications) along with *Parisheka* (Sudation by shower sprinkling) with *Sidharthaka Snana Choorna* as *Sravahara* line of management. Later on *Sadyovirechana* was administered for *Koshta Shudhi*. From the 7th day *Abhyanga* (Oil massage) was started and on 11th day of treatment *Siravyadha* (Bloodletting) was done. Significant improvement was observed after 14 days of treatment in terms of EASI Score. This case study shows that *Ayurvedic* treatment is helpful in effective management of *Vicharchika* and helps in improving the quality of life.

Key words: Eczema, *Vicharchika*, *Parisheka*, *Abhyanga*, *Siravyadha*, Case report.

INTRODUCTION

The terms Eczema and Dermatitis are synonymous. The histologic features of dermatitis have been divided into three patterns: acute, sub-acute and chronic. Acute dermatitis shows a mixture of epidermal vesiculation, and a mononuclear cell infiltrate. Chronic dermatitis demonstrates epidermal acanthosis, hyperkeratosis, upper dermal fibrosis, and a predominantly perivascular

mononuclear cell infiltrate. Mixtures of these two histologic reaction patterns occur in sub-acute dermatitis.^[1] Allergic contact dermatitis is an immunologic reaction to an allergen which comes into contact with skin. Dermatitis was estimated to affect 245 million people (3.34%) of world population. About 10-20% of the general practice includes the patients suffering from skin disorders and eczema accounts for a very large population of all the skin diseases.^[2]

Vicharchika (Eczema) is one among the *Kshudra Kushta* (Minor skin disorder). *Vicharchika* is characterized by skin manifestation having the symptoms *Kandu* (Itching sensation), *Pidika* (Papule) *Shyava Varna* (Blackish brown discoloration) and *Bahusrava* (Excessive exudation).^[3] There is no specific description available in *Samhita* regarding the line of management of *Vicharchika*. Hence the treatment is to be carried out according to the predominance of *Dosha*. The treatment should be planned on the basis of *Roga* and *Rogi Bala* (Strength of disease and patient).

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PATIENT INFORMATION

A 62 year old male patient visited *Kayachikitsa* Outpatient department of SDM Hospital, Hassan on 10/9/22 with complaints of diffuse scaly skin lesions over face, upper limbs, lower limbs, abdomen and flanks associated with severe itching, watery discharge, burning sensation and puffiness of face since 8 months. Clinical sign and symptoms like *Kandu* (Itching sensation), *Pidika* (Papule) *Shyava Varna* (Blackish brown discoloration) and *Bahusrava* (Excessive exudation) were present. He had taken treatment from general physician but found no relief, then he came here for further management.

Associated Complaints

He had disturbed sleep due to itching and burning sensation.

Habits: taking curd, milk (Twice a day), Spicy, oily food, Tea (3 times/day) and smoking (4 beedis/ day).

Past History

No h/o Diabetes mellitus/Hypertension, other major medical and surgical history.

Family History

No relevant family history.

Psychological Evaluation

Patient was in stress due to disturbed sleep, burning sensation and itching.

Clinical Findings

Vital signs were normal. The sleep of the patient was disturbed due to itching. On Integumentary system examination, distribution of the skin lesion was over the face, upper and lower limbs, abdomen and flanks. Type of lesion was papules, vesicles and scaly lesions. The colour was blackish associated with rough surface and serous discharge.

Laboratory parameters

Hb: 14.2 gm%, E.S.R: 20 mm/hr, Eosinophils: 6%, AEC: 625 cells/cmm.

Timeline

Table 1: Timeline

Date	Relevant medical history
January 2022	Acute onset of skin lesion over neck associated with itching
	Gradual development of skin lesions over other body parts
February 2022	Severe itching and burning sensation started
March 2022	Disturbed sleep due to itching
April 2022	Started allopathic treatment (Corticosteroids and ointment)
August 2022	Symptoms reappeared
September 2022	Consulted in outpatient department of SDM Hospital and admission advised.

Diagnostic Assessment

Sroto Pareeksha : *Raktavaha Srotas*

Symptoms - *Daha* (Burning sensation), *Panduta* (pallor), *Vyangha* (pigmentation), *Kotha* (Skin eruptions).^[4]

Diagnosis - *Sravi Vicharchika* (Eczema Contact)

Kandu (Itching sensation), *Pidika* (Papule), *Shyava Varna* (Blackish brown discoloration) and *Bahusrava* (Excessive exudation)

Therapeutic intervention

Table 2: Intervention

Date	Oral medication and procedure	Dose
10/9/22	1. <i>Punarnava Mandoora</i> Tablet	2-0-2 Before food
	2. <i>Patola katurohinyadi</i> <i>Kashaya</i>	30ml-0-30ml Before food (with warm water)
	3. <i>Triphala</i> Tablet	0-0-1 After food
	4. Six-C ointment	External application
	5. <i>Eladi</i> soap	External application
	6. <i>Ganji</i> as diet	

11/9/22	1 to 6 and 7. <i>Sarvanga Parisheka</i> with <i>Sidhartaka Snana Choorna Kashaya</i>	
12/9/22	7 and 8. <i>Sadyovirechana - Trivrit Lehya + Draksha Kashaya</i>	50 gm + 100ml No of Vegas - 6
13/9/22	2,4,5,7 and 9. Tablet <i>Gandhaka Rasayana DS</i>	1-0-1 After food
14/9/22	2,3,4,5,7,9 and 10. Tablet <i>Arogya Vardhini</i>	2-0-2 Before food
15/9/22	2,3,4,5,7,9,10	-
16/9/22	9,10 11. <i>Sarvanga Abhyanaga</i> with <i>Marichadi Taila + Sarvanga Parisheka</i> by <i>Sidhartakasnanachoorna Kashaya</i> 12. <i>Sidhartaka Snanachoorna Lepa</i> 13. <i>Panchatikta Guggulu Ghrita</i> 14. <i>Mahatiktakalepa</i>	External application 20ml with warm water-empty stomach. External application
17/9/22	9 to 14.	
18/9/22	9 to 14 and 15. <i>Aragwadadhi Kashaya</i> 16. <i>Nimbaamritadi Eranda Taila</i>	30ml-0-30ml Before food 10ml bed time with warm water
19/9/22	9 to 16	
20/9/22	9 to 16 and 17. <i>Siravyadha</i>	60 ml of blood obtained
21/9/22 to 23/9/22	9 to 16	
23/9/22	Discharged the patient with following medicines:	

1. <i>Panchatikta Guggulu Ghrita</i>	15 ml Before food – Empty stomach 20ml-0-20ml After food 1-0-0 After food External application Before bath External application After bath External application
2. <i>Khadira Arishta</i>	
3. <i>Shiva Gutika</i>	
4. <i>Marichadi Taila</i>	
5. <i>Nalpamaradi Taila</i>	
6. <i>Mahatiktaka Lepa</i>	

Outcomes

Table 3: Outcomes

Parameter	Before treatment	In between the treatment (7 th day)	After 14 days of treatment
<i>Kandu</i> (Itching sensation)	Present	Reduced	Absent
<i>Pidika</i> (Papule)	Absent	Absent	Absent
<i>Shyavavarna</i> (Blackish brown discoloration)	Present	Present	Reduced
<i>Bahusrava</i> (Excessive exudation)	Present	Reduced	Absent
EASI Score	39.8	36.8	30.8

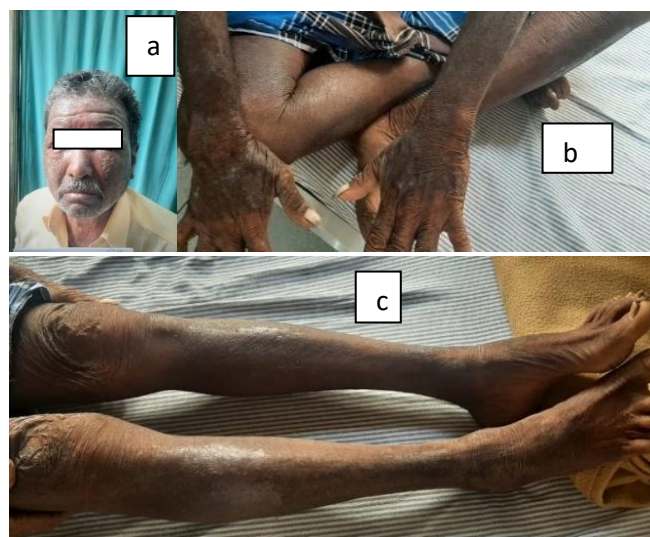


Fig. 1 (a,b&c): Picture showing before the intervention of case



Fig. 2 (d,e&f): Picture showing after the intervention of case

DISCUSSION

The Ayurvedic diagnosis was made as *Vicharchika* (Eczema) on the basis of signs and symptoms. The patient was given with *Parishekasweda* (Sudation by shower sprinkling), *Abhyanga* (Oil massage), *Sadyovirechana* (Purgation therapy), *Siravyadha* (Bloodletting) and *Shamana Aushadhis* (Oral medications).

The *Swedana Karma* is a part of *Purvakarma* of *Panchakarma* along with the *Snehana Karma*. *Sidarataka Snana Choorna*^[5] is *Tikta Kashaya Rasa Pradhana*. It possess *Sheeta Virya* and *Vata Kaphahara* properties. *Sidarataka Snana Choorna Yoga* is *Varnakara*, *Kandughna* and *Twakdoshahara*. After proper *Swedana*, it helps the development of *Mriduta* (Softness), *Laghuta* (lightness) and *Agnideepti* (increase of digestive power) of body. Through *Snehana* the *Dhathus* and obstructed *Dosha* are moistened and on application of *Swedana* they are mobilized flows towards *Koshta* and accumulates in *Koshta*, which are later removed from the body through *Shodhana* process.^[6] *Marichadi Taila* is *Kapha Samaka*, *Ushna Virya*, *Teekshna*, *Ruksha*, *Kushtaghna* and *Kandughna*.

Virechna is useful in in *Pitta* dominant disorders along with *Kapha Sansrista Doshas* and *Pitta Sthanagata Kapha*.^[7]

The Patient was not ready for *Snehapana* and considering his age also we planned for *Sadyovirechna*. The *Trivrit* is *Kashaya*, *Madhura* in *Rasa*, *Ruksha* and *Katu* in *Vipaka*. It is *Kapha Pitta Nasaka*. When administered along with other *Dravya* it becomes *Tridosha Shamaka* and *Sarvarogahara*.

In *Shalyakarma* the *Siravyadha* treatment is considered as the half treatment. *Siravyadha* is a procedure of *Raktamokshana*. *Vicharchika* is a *Raktha Pradoshaja Vyadhi*. Hence *Siravyadha* helps in expelling out the *Dushta Raktha* from the body.

Patola Katurohinyadi Kashaya possess *Tikta Rasa*, *Ruksha Guna*, *Kapha Pittahara* properties. It acts as *Kanduhara*, *Rakta Shodaka*, *Varnya* and *Kushtaghna*. *Gandhaka Rasayana* is *Katu Tikta Kashya Rasa*, *Kapha Hara*, *Kandughna* and *Kushtaghna*. *Arogyavardhini Vati* is *Tikta Kashaya Rasa*, *Ushna Virya*, *Tridosahara*, *Pachana*, *Rakta Vardhaka*, *Rasayana* and *Kushtahara*. *Punarnava Mandoora* is *Tikta Rasa*, *Katu Vipaka*, *Sheeta Virya*, *Kapha Vatahara* and *Raktavardhaka*.

Aragwadhadhi Kashaya is *Kaphahara*, *Dahahara* and *Kandughna*. *Pancha Tikta Guggulu Gritha* is *Tikta Rasa*, *Vata Pittahara*, *Katu Vipaka*, *Kapha Vatashamaka* and *Kandughna*. *Mahatiktaka Lepa* is *Vata Pittahara*, *Dahaghna* and *Shyavahara*. Significant improvements were observed after 14 days of treatment in terms of itching, skin lesion and serous discharge.

CONCLUSION

Vicharchika (Eczema) is relapsing disease. In present study the patient was given with *Parisheka Sweda* (sudation by shower sprinkling), *Abhyanga* (Oil massage), *Sadyovirechana* (Purgation therapy), *Siravyadha* (Bloodletting) and *Shamana Aushadhis* (Oral medications) were found to be effective in the management of Eczema. Present observation and approach definitely boost up the new researcher scholar to manage this condition and do further studies.

PATIENT PERSPECTIVE

Patient was satisfied with the treatment in terms of reduced itching, burning sensation, exudation and improved sleep.

PATIENT CONSENT

Written permission for the publication of this case study has been obtained from the patient.

REFERENCES

1. Robert A Swerlick, Thomas J Lawley. Eczema, Psoriasis, Cutaneous Infections, Acne and other common skin disorders. In: Isselbacher, Wilson, Martin et.al. Harrison's principles of internal medicine. 13thed. International publication; Mc Graw-Hill;1994;274.
2. Berth Jones J. Eczema, lichenification, prurigo and erythroderma. In Burns T et al., eds. Rook's textbook of Dermatology. 8th edition. UK: Blackwell Publishing Ltd; 2010. <http://dx.doi.org/10.1002/9781444317633.Ch23> PMID:21812829.
3. Sharma RK, Dash Bhagwan. English translation on Cakrapani Datta's Ayurveda Dipika on Agnivesa's Caraka Samhita, Chikistasthana, Kushta chikista: Chapter 7, Verse 26, Varanasi: Chowkhamba Sanskrit series office, 2014 :325.
4. Sharma RK, Dash Bhagwan. English translation on Cakrapani Datta's Ayurveda Dipika on Agnivesa's Caraka Samhita, Sutrasthana, Vividha ashitapeethiya adhyaya: Chapter 28, Verse 11-12, Varanasi: Chowkhamba Sanskrit series office,2012 :576.
5. Murthy KRS, English translation on Astanga Hridayam of Vagbhata. Chikitsasthana; Kushta chikitsa: Chapter 19, Verse 59-60. Varanasi: Chowkhamba Krishnadas Academy,2013:482.
6. Murthy KRS, English translation on Astanga Hridayam of Vagbhata. Sutrasthana; Sveda vidhi: Chapter 17, Verse 30. Varansi: Chowkhamba Krishnadas Academy, 2013:56.
7. Murthy KRS, English translation on Astanga Hridayam of Vagbhata. Sutrasthana; Vamana Virechanavidhi: Chapter 18, Verse 1. Varanasi: Chowkhamba Krishnadas Academy,2013:58.

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