CASE REPORT

April 2024

Journal of Ayurveda and Integrated Medical Sciences | April 2024 | Vol. 9 | Issue 4

An Ayurvedic approach to Atopic Dermatitis - A Case Report

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ABSTRACT

Atopic dermatitis, which is also called as Eczema is a type of response pattern characterised by a range of histologic and clinical characteristics including Papules, erythematous macules and vesicles. This affects a person's cosmetic appearance, which is equally distressing since it creates disfigurement. Vicharchika, one of Kshudra Roga can be compared to Atopic Dermatitis based on its signs and symptoms. In the present case study, a 55 years old female patient was admitted in the IPD section of Department of Swasthavritta, Sri Sri College of Ayurvedic Science and Research Hospital, Bengaluru with the complaints of Skin lesions over both the forearms and neck associated with blackish brown discolouration, sever itching, mild discharge and reduced sleep since 2 years. The case was diagnosed as Atopic Dermatitis (Vicharchika) based on signs and symptoms. Classical Virechana was planned along with other Ayurvedic oral medications. Patient was satisfied with the treatment in terms of reduced itching, discharge and improved sleep. This study demonstrates that Ayurvedic treatment is effective in managing Atopic Dermatitis, without any complexities or negative consequences.

Key words: Atopic dermatitis, Vicharchika, Tridosha, Virechana, EASI score.

INTRODUCTION

Atopic dermatitis, which is also called as Eczema is a type of response pattern characterised by a range of histologic and clinical characteristics. Papules, erythematous macules and vesicles are examples of primary lesions that can combine to produce patches and plaques. Secondary lesions like weeping and crusting may be more common in cases of severe eczema.¹ Eczema and Vicharchika are fairly similar in Ayurveda based on signs and symptoms. Vicharchika is considered one of the Kshudra Kushta by the Acharyas. The symptoms of Vicharchika include Pidika (papules), Bahusrava (excessive exudation), Shyava Varna (blackish brown discolouration), and Kandu (itching sensation).² The Samhitas contains no particular description of the Vicharchika line of management. As per Acharya Sushruta, Vicharchika is Pitta Pradhana Vyadhi but as per Acharya Charaka and Acharya Vagbhata it is Kapha Pradhana Vyadhi. As a result, the course of treatment must be determined by the preponderance of Dosha, Rogi Bala and Roga Bala.

CASE REPORT

A 55-year-old married female patient was admitted in the IPD section of Swasthavritta, S.S.C.A.S.R. & H.

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Submission Date: 16/02/2024 Accepted Date: 23/03/2024

Access this article online

Quick Response Code
Website: www.jaims.in
DOI: 10.21760/jaims.9.4.55
Bengaluru with complaints of Skin lesions over both the forearms and neck associated with blackish brown discolouration; sever itching and mild discharge since 2 years.

**Personal history**

Diet: 3 times / day; mixed
Sleep: 5 to 6 hours / night; disturbed
Appetite: good
Bowel: once / day; Hard in consistency
Micturition: 5-6 times / day
Habits: Tea - 2-3 cups/day
Menopause: at the age of 52 years
Past illness history: had COVID-19, 2 years back, recovered
Past medical history: nil
Allergic to Peanuts, Hazelnuts and Brinjal

**On Examination**

BP - 110/60mm/Hg
Pulse - 78/min
RR - 18/min
RBS - 100mg/dl
Height - 160cm
Weight - 65Kg
BMI - 25.4Kg/m²

**Past Medical History**

Patient has taken other system medicine but there is no relief, hence patient visited to our hospital.

**Family History**

Mother is having allergic rhinitis since 20 years.

**Skin Examination over hand, neck**

Scaly patches ++
Lichenification ++
Itching +++ (more while sweating)
White demographism ++

**Samprapthi Ghataka**

- **Dosa** - Pitta Pradhana, Kapha Anubandhita Vata
- **Dushya** - Dhatu - Twak, Rakta, Mamsa, Lasika (Ambu)
- **Srotas** - Rasa, Rakta, Mamsa & Udakavaha
- **Agni** - Jatharagni & Dhatwagni Mandya
- **Sroto Dushti** - Sanga & Vimargagamana
- **Udbhava Sthana** - Amashaya
- **Sanchara Sthana** - Tiryaq Sira
- **Vyakta Sthana** - Twak
- **Swabhava** - Chirkari

**Diagnosis** - Atopic dermatitis (based on Hanifin & Rajka’s Criteria) and Assessment was done on the basis of the Eczema Area and Severity Index Score (EASI score).

**Therapeutic Intervention** - Classical Virechana was planned.

<table>
<thead>
<tr>
<th>Treatment</th>
<th>Medicines</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deepana Pachana</td>
<td>Chitrakadi Vati - 2 BD before food</td>
<td>3 days</td>
</tr>
<tr>
<td></td>
<td>Panchakola Phanta - 30ml BD before food</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Triphala Churna - 1tsp with hot water at bed time</td>
<td></td>
</tr>
<tr>
<td>Snehapana</td>
<td>Tiktaka Ghrita + Yavakshara + Panchakola Choorna</td>
<td>3 days</td>
</tr>
<tr>
<td>Sarvanga Abhyanga</td>
<td>Nalpamaradi Taila + Eladi Kera Taila</td>
<td>4 days</td>
</tr>
<tr>
<td>followed by Bashpa Sweda</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sthanika Lepa</td>
<td>Nirgundi Patra</td>
<td>3 days</td>
</tr>
</tbody>
</table>

On 4th day of Sarvanga Abhyanga & Baspa Sweda, Virechana was induced with Trivrut Lehya 50grams.

**Observation** - 15 Vegas occurred (Pravara Shuddhi).

**Samsarjana Krama** was advised for 1 week as per standard protocol.
Discharged on 8th day with medications.
- Shirisharishta - 15ml BD (after food)
- Tab Sooktyn - 1 BD (after food)
- Tiktaka Ghrita - 1sp (early morning, empty stomach)
- Cutis Ointment (external application)

All above medicines were given for 1 month

Advice on discharge
Avoid junk, spicy, sour and refrigerated food.

Advised to take more vegetables, except Potato, Brinjal.

Yogasana, Pranayama should be adopted on daily basis.

Follow-Up
Patient visited to OPD for the follow-up after 1 month of discharge. She was relieved of itching, discharge and also reported of improved sleep.

Further oral medication was continued for another 1 month.

Observations

<table>
<thead>
<tr>
<th>Parameters</th>
<th>Before treatment</th>
<th>After the treatment</th>
<th>After follow up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kandu</td>
<td>Present</td>
<td>Reduced</td>
<td>Absent</td>
</tr>
<tr>
<td>Pidaka</td>
<td>Present</td>
<td>Reduced</td>
<td>Absent</td>
</tr>
<tr>
<td>Shyava Varna</td>
<td>Present</td>
<td>Reduced</td>
<td>Reduced</td>
</tr>
<tr>
<td>Bahusrava</td>
<td>Present</td>
<td>Absent</td>
<td>Absent</td>
</tr>
<tr>
<td>EASI score</td>
<td>7.2</td>
<td>4.6</td>
<td>2.6</td>
</tr>
</tbody>
</table>

Discussion
As we all know that Eczema needs a special care, as the rate of reoccurrence is high. After the examination of the patient, we assessed that there was involvement of Pitta Pradhana Kapha Anubandhita Tridosha. So, the line of treatment chosen was Classical Virechana.

To attain a proper Shuddhi, Amapachana and Agnideepana has to be done properly. Hence Chitrakadi Vati and Panchakola Phanta were given. Majority of the drugs in these medicines are having Katu Rasa, Ushna Veerya and Teeksna Guna which are mandatory for Deepana-Pachana. Triphala Churna was given for the purpose of Vatanulomana.
Piperin in Chitakadi Vati and Panchakola Phanta on oral administration stimulate pancreatic enzymes that improve digestion and reduce food transit time in the gastrointestinal tract, increases saliva production, gastric secretions and activate the salivary amylase enzyme. It also stimulates the release of bile acids from the liver, which is important in the digestion and absorption of lipids.[3] Hence administration of these medicines is like preparation for Snehapan also (administration of medicines with ghee/oil base). The extract of Chitraka exhibits Anti-inflammatory activity by reducing the prostaglandin synthesis and release.[4] The extract of Chavya considerably boosts lymphocyte proliferation, implying an immuno-modulatory action, mainly through lymphocyte proliferation and natural killer cell activity activation.[5]

On 4th day, Snehapan was administered with Tikta Ghrita along with Panchakola Churna and Yavakshara.

Tikta Ghrita is combination of Patola (Trichosanthes dioica), Nimba (Azadirachta indica), Katuka (Picrohiza kurrooa), Darvi (Berberis aristata), Patha (Cissampelos pareira), Parpata (Fumaria indica) etc. and are having Tikta Rasa, Laghu Guna, Kandughna Karma and Kushthahara properties which will help in subsiding the Prakupita Pitta Dosha, Kanduta (itching) and even Vatadosha Shamana as it is Sneha (Ghee) based.[6] Panchakola Churna helps in easy digestion and absorption of Sneha as discussed earlier. Yavakshara stabilizes the Kapha-Pitta Dosha by its Prabhava like Lekhana and Medohara properties.[7]

Tikta Ghrita is a complex mixture of 3-Phenylpropanol, 1,3-Benzenedioli, Eucalyptol, o-Acetyl-L-serine etc. which are having Anti-inflammatory action, Succinic acid which reduces oxidative stress in skin, Terpineol, Benzenediol acts as antioxidants and other compounds which helps in healing of damaged skin.[8]

After Sneha Siddi Lakshanas we have started with Sarvanga Abhyanga (whole body oil massage) with Nalpamaradi Taila and Eladi Kera Taila. Nalpamaradi Taila is helpful for skin health because of its Kushtanashaka and Kanduhara qualities[9] and Taila preparations, by nature, have the capacity to normalize the vitiated Vata-Kapha in the skin which is a major aspect for skin conditions presenting with skin exfoliation, dryness, itching etc. This traditional Nalpamaradi Taila has been treasured for ages for its unique ability to brighten the complexion and provide an equal, balanced tone. As it contains a potent combination of natural components, including Turmeric, Vetiver, and Sesame oil, all of which play important roles in revitalising the skin. Turmeric, known for its anti-inflammatory and antioxidant characteristics, not only gives skin a natural shine but also helps to minimise the appearance of dark spots and blemishes, resulting in a cleaner complexion. The anti-inflammatory and cooling characteristics of the herbs in this oil, including Licorice and Vetiver, work together to reduce redness and pain. Whether coping with small irritations or more persistent inflammation, Nalpamaradi Tailam soothes and comforts the skin.[10]

Eladi Kera Taila is specially indicated in Skin disorders in concern of reducing Kandu, Kotha, Pitika and provides Varnaprasadana,[11] hence it has been included for Abhyanga in addition to Nalpamaradi Taila.

Eladi Kera Taila is having important biomolecules such as Dodecanoic acid, 2,3-dihydroxypropyl ester Octadecanoic acid, Dodecanoic acid, 1,2,3-propanetriyl ester, all these are containing similar medical properties like acidifier, Arachidonic acid inhibitor, increase aromatic amino acid carboxylase activity etc. Production of allergic reactions and inflammation in the body is due to the synthesis of prostaglandins using Arachidonic acid precursors by two enzymes, Cox 1 and Cox 2. These enzymes are activated, whenever there is a production of pro inflammatory cytokines due to injury or infection. The molecules mentioned above inhibit Arachidonic acid, thus preventing skin allergy and inflammation. Similarly, the decarboxylation of L-Dopa and 5-hydroxytryptophane by increased aromatic amino acid carboxylase activity by the molecules present in Eladi Kera Taila leads to the formation of Catecholamine such as dopamine, norepinephrine, epinephrine and serotonin which increase the blood circulation in the affected areas, reducing allergic reaction, itching.[12]
**Bashpa Swedana** (moist steam) increases metabolism, facilitates a great cutaneous circulation by vasodilatation and stimulates sweat glands to flush off the toxins through sweat, thereby it detoxifies at cellular level and fasten up the healing process. It also maintains the water capacity of protective cells of Stratum corneum.\[13\]

On the last day, **Sarvanga Abhyanga, Baspa Sweda** followed by **Virechana** was induced with **Trivrut Lehya** to expel out the **Prakupita Doshas** from the **Koshta**. When **Doshas** reach the **Kosta, Trivrut** (**Operculina turpethum**) increase the **Kosta Gati** and it being **Sukha Virechana Dravya** expels out **Doshas** from **Adhobhaga** in **Drava** form. **Madhura Tikta Rasas** of **Trivrut** are **Pitta Shamaka** whereas **Katu, Tikta Rasas, Ushna Veerya** of **Trivrut** will cause **Kapha Shamana** and it also causes **Vata Anulomana**, thus it is mainly **Kapha Pitta Hara** and at the same time **Tridoshashamaka**.\[14\]

**Operculina turpethum** is containing **Tannins, Tarpenoids, Flavenoids** and other contents which are essential for the skin health for their antimicrobial, antioxidant and photo protection properties.\[15\]

Local application of **Nirgundi** (**Vitex negundo**) **Patra** can help in alleviating inflammation, as it contains Ursolic acid, 4′-pentamethoxy flavone etc.\[16\]

By the above observations, we can understand that Ayurveda is deeply rooted in scientific principles and methodologies that have stood the test of time. At its core, Ayurveda is predicated on the intricate understanding of the human body, the properties of natural herbs, and the profound influence of lifestyle on health and well-being. This age-old science methodically categorizes body types into distinct **Doshas - Vata, Pitta, and Kapha** - each associated with specific physiological and psychological characteristics. This classification enables personalized treatment plans, aligning perfectly with modern precision medicine concepts. Furthermore, **Ayurvedic** treatments are not arbitrary; they are based on the systematic observation of the natural world and the human body, meticulously documented through centuries of practice. Techniques such as **Panchakarma** (detoxification processes), the use of medicinal herbs with documented efficacy, and the emphasis on diet and lifestyle modifications are all scientifically arranged to restore balance within the body. The principles of **Ayurveda**, emphasizing prevention and the maintenance of health through a balanced life, resonate with contemporary scientific research advocating holistic and preventative approaches to health. Thus, **Ayurveda**’s ancient practices are not only steeped in tradition but are also scientifically arranged, offering valuable insights and methodologies for achieving health and wellness.

**CONCLUSION**

The exact cause of atopic dermatitis is unknown, but it is believed to be a result of genetic, environmental, and immune system factors that disrupt the skin’s barrier, making it more susceptible to irritation and infection. Individuals with atopic dermatitis often have a history of allergies or asthma, indicating a complex interplay between the immune system and environmental triggers. Management includes moisturizing, avoiding irritants, and sometimes medications to control inflammation and itch. In the present study, Patient of Atopic Dermatitis was effectively managed with Classical **Virechana** and **Sthanika Lepa** treatments along with oral medications. The current observation and strategy will undoubtedly help the aspiring scholar researcher to manage this condition and do further studies.

**Patient Perspective:** Patient felt better in concern of sever itching, blackish brown discolouration, discharge, skin irritation and she wants to continue Ayurvedic treatments.

**Informed Consent:** Obtained from the patient to publish her case as article.

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Source of Support: Nil, Conflict of Interest: None declared.