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Role of *Virechana Karma* in management of Psoriasis w.s.r. to *Ekakushtha* - A Case Study

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ABSTRACT

Introduction: Psoriasis is one of the most common dermatologic diseases. A 24 years old female presenting complain of large itchy, erythematous plaques with dry scaling all over the body include scalp and nails. The patient had taken allopathic medicine irregularly from many skins specialist but did not get relief. Patient is diagnosed with psoriasis or *Ekakushtha* and treated with *shodhan* therapy as *Virechana karma*. **Objective:** To evaluate the effect of *Virechan* in Psoriasis w.s.r. to *Ekakushtha*. **Materials & Methods:** *Deepan*, *Pachana* with *Chitrakadi Vati* and *Ajmodadi Churana* for 5 days and *Snehpana* with *Panchtikta Ghrita* for 7 days. External *Snehana*, *Swedana* for 3 days. *Virechana* is done with the help of *Trivrit Avaleha* dose of 80 gm followed by *Samsarjana Karma* for 5 days as *Pashchat Karma* in the management of psoriasis. **Result:** After *Virechana* therapy, there was a reduction in the redness, itching and scaling of the plaque in the 7 days. **Discussion:** Psoriasis is one of the most common skin disorders and a chronic dermatologic condition marked by periodic flare-ups of sharply defined red patches, covered by a silvery, flaky surface. In *Kushtha*, *Rakta* is considered as one of the main *Dhatu* which is responsible for *Prasara* stage of *Kushtha Samprapti*. As the *Pitta* and *Rakta* have *Ashreya- Ashryi* relationship, treatment modality of *Pitta Dosha* and *Rakta Dhatu* resemble each other. Therefore, *Virechana* therapy is used in this case for *Shodhan Karma*.

Key words: Psoriasis, *Ekakushtha*, *Virechan*, Ayurveda.

INTRODUCTION

Psoriasis^[1] is a chronic dermatosis, characterized by an unpredictable course of remissions and relapses and presence at typical sites of well-defined, erythematous, indurated papules and plaques and silvery shiny scale. The cause of psoriasis is not exactly

known, but it is believed to have an autoimmune, genetic component and it can be triggered by a prolonged injury to the skin. Factors that may aggravate Psoriasis include stress, withdrawal of systemic corticosteroid, excessive alcohol consumption, and smoking. There are many treatments available, but because of its chronic recurrent nature Psoriasis is a challenge to treat.

Worldwide Prevalence of psoriasis is 3 - 4%. In India its prevalence is 0.4%-2.8%.

Ayurveda texts do not give a direct reference towards a single disease which can be compared with the modern day "Psoriasis". Many entities like "*Kitibha*", "*Charmadala*" and "*Ekakushtha*" are compared with it. The disease *Kitibha* does not have scaling as such but *Shyava Varna* and *Khara Sparsha* can be noted. *Charmadala* on the other hand has *Sphota* and *Ruja* as the important signs along with scaling.

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Ekakushtha^[2] consists of the signs and symptoms i.e., *Aswedanam*, *Mahavastu* and *Matsyashakalopam Avastha* which can be compared with Psoriasis and hence it has been taken as the analogue to Psoriasis in the present research work.

In *Kushtha*, *Rakta* is considered as one of the main *Dhatu* which is responsible for *Prasara* stage of *Kushtha Samprapti*. As the *Pitta* and *Rakta* have *Ashraya- Ashrayi* relationship, treatment modality of *Pitta Dosha* and *Rakta Dhatu* resemble each other. Therefore, *Virechana* therapy is used in this case for *Shodhan Karma*.

CASE REPORT

A 24 years old female patient came to *Panchkarma* OPD in Institute for Ayurved Studies & Research, Shri Krishna AYUSH University, Kurukshetra, Haryana (Regn.no.187068) with chief complaints of large itchy erythematous plaques and scaling over trunk, scalp and extremities also including nails from the past 15 years. History of present illness According to the patient, she was asymptomatic 16 year back when she developed itching papular eruptions over scalp with watery discharge on itching, followed by formation of erythematous plaques with dry scaling gradually. She then developed similar lesions first over trunk, upper and lower limbs approximately 14 years back. She also complained of pain in all the joint of the body 1 year back and also complain of loss of concentration and lack of sleep and headache. The patient had taken allopathic medicine irregularly from many skin specialists but did not get relief.

History of past illness

N/H/O - DM / Hypertension / Thyroid disorders.

Family history

Family history is negative for same skin condition.

Personal history

- Diet - vegetarian less of green leafy vegetables, low fibres, indulges in fast food and sweet foods
- Addiction - Nil
- Sleep - disturbed

- Bowel - constipation on and off
- Micturition - burning, 5-6 times/day

Vitals

- Pulse rate - 78 b/min
- Respiratory rate - 25/min
- Blood pressure - 120/90mmhg
- Temperature - 97°f
- Weight - 58 kg
- Height - 5.2ft

General examination

- Conscious - awake, well oriented
- Nutrition - moderate
- Gait - normal
- Pallor - absent
- Icterus - no yellowish discoloration seen
- Clubbing - absent
- Cyanosis - absent
- Lymphadenopathy - absent
- Edema – absent

Systemic Examination

- CNS - Conscious, well oriented
- CVS - S1 & S2 heard, no added sounds
- RS - Air entry bilaterally equal

Skin Examination

- Lesions - Well defined erythematous papules and plaques with silvery white scales
- Surface - dry /rough
- Discharge - on/off
- Temperature - Afebrile
- Auspitz sign^[3] - Positive
- Koebner's phenomenon - Absent

Dashavidha Pareeksha

1.	Prakriti	Vata Pitta
2.	Vikriti	Kapha Rakta
3.	Sara	Madhyama
4.	Samhanana	Madhyama
5.	Pramana	Madhyama
6.	Satmya	Madhyama
7.	Satva	Madhyama
8.	Ahara Shakti	Madhyama
9.	Vyayama Shakti	Madhyama
10.	Vaya	Madhya Vaya

Investigation

Hb	14.27 g/dl
TLC	8.10/L
DLC - Neutrophils:	72.85%
Lymphocytes	19.12%
Monocytes	5.82%
Eosinophils	2.01%
Basophils	0.20%
RBS	92.1mg/dl
TSH	1 microIU/MI
SGOT	39.7 U/L
SGPT	26 U/L

Nidana

Excessive intake of *Kshira, Dadhi, Kulatha, Masha, Katu Rasa Ahara, Virudha Ahara, Shoka, Chinta* and *Ratri Jagarana*.

Samprapti^[4]

According to *Acharya Charaka* seven *Dravyas* are involved in the *Samprapti*. It includes all the three

Doshas (Vata, Pitta, Kapha) along with four *Dushyas* i.e., *Twaka, Rakta, Mamsa* and *Lasika*. *Acharya Charaka* has stressed upon the dual part played by *Nidana* i.e., simultaneous vitiation of *Tridosha* and disturbance of normal configuration i.e., '*Shaithiya*' in *Dhatus*. This leads to the final manifestation of *Kushtha*.

Samprapti Ghataka

- *Dosha - Tridosha Vata Kapha Pardhan*
- *Dushya - Twaka, Rakta, Mamsa, Lasika*
- *Srotas - Rasa, Rakta, Mamsa, Meda*
- *Prakara - Sanga and Vimargagamana*
- *Udbhava Sthana - Amashaya and Pakwashaya*
- *Sanchara Sthana - Tiryag Sira*
- *Roga Marga - Bahaya*
- *Adhistana - Twacha*
- *Swabhava - Chirkari*

Vyadhi Vinischaya - Eka Kushtha**Therapeutic Intervention**

The therapy was performed in three steps.

a) Poorva Karma

Poorvakarma of *Virechana* is *Deepan-Pachana* and *Snehana*. *Deepan- Pachana* was done by administration of *Chitrakadi Vati* 250 mg 1 TDS, *Ajmodadi Churana* 3g for 5 days. Internal oleation (*Snehapana*) was done by administration of *Panchtikta Ghrit* as follows:

Days	Sneha	Dose	Route	Frequency	Anupana
1.	<i>Panchtikta Ghrit</i>	30ml	Oral	Morning empty stomach	Warm water
2.	<i>Panchtikta Ghrit</i>	45ml	Oral	Morning empty stomach	Warm water
3.	<i>Panchtikta Ghrit</i>	60ml	Oral	Morning empty stomach	Warm water

4.	<i>Panchtikta Ghrit</i>	90ml	Oral	Morning empty stomach	Warm water
5.	<i>Panchtikta Ghrit</i>	120ml	Oral	Morning empty stomach	Warm water
6.	<i>Panchtikta Ghrit</i>	150ml	Oral	Morning empty stomach	Warm water
7.	<i>Panchtikta Ghrit</i>	160ml	Oral	Morning empty stomach	Warm water

During all these days, patient was advised to take hot water for drinking till *Kshudha Pravritti* (attainment of hunger). Only light and liquid diet was advised at that time. The symptoms of *Samyak Snighdh* (proper internal oleation) were observed on 7th day. On the 8th, 9th and 10th days the patient was subjected to *Abhyang* and *Swedana* with *Til Tailam* followed by *Sarwang Swedana*.

b) Pradhan Karma (main therapy)

Before administration of *Virechana* (purgation) drug, pulse, blood pressure, temperature was recorded and at regular interval during the *Pradhana Karma*. *Trivrit Avaleha* dose of 80 gm was given to patient at 9 am.

Number of motions after administration of *Virechana* drug was counted till the symptoms of proper purgation like stopping of purgation on its own, passing of stool with mucus in the last one or two motions, feeling of lightness in the body appeared. 18 *Vegas* (number of motions) were observed.

c) Pashchat Karma (post procedure of dietetic indication)

After the completion of *Virechana* (purgation), patient was kept on *Samsarjana Krama* (post procedure of dietetic indication) of considering the '*Shuddhi*' as '*Madhya*' type of '*Shuddhi*' (moderate purification). Patient was advised to take rest and special diet is advised for 5 days.

Life style modification

Advised to sleep early and wake up early, morning walk and to follow ideal daily routine, timely intake of food,

to take green leafy vegetables, pomegranate fruit, and barley. Also advised to avoid rice, curd, tea, pickles, fried food and excessive salt.

RESULTS

Signs and Symptoms	Before treatment	After treatment
Dryness	Present	Absent
Itching	Present	Absent
Scaling	Present	Absent
Erythema	Present	Improved
Discoloration	Present	Improved



Before treatment



After treatment

DISCUSSION

Psoriasis is one of the most common skin disorders and a chronic dermatologic condition marked by periodic flare-ups of sharply defined red patches, covered by a silvery, flaky surface. In *Kushtha*, *Rakta* is considered as one of the main *Dhatu* which is responsible for *Prasara* stage of *Kushtha Samprapti*. As the *Pitta* and *Rakta* have *Ashraya-Ashrayi* relationship, treatment modality of *Pitta Dosha* and *Rakta Dhatu* resemble each other. Therefore, *Virechana* therapy is used in this case for *Shodhan Karma*.

CONCLUSION

Virechana therapy is effective in the management of Psoriasis. It also prolongs the recurrence of the symptoms. Repeated *Shodhan Karma* can even control psoriasis in early stage.

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