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 Snehana with Panchkika 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 Ashreyaa- Ashryi relationship, treatment modality of Pitta Dosa and Rakta Dhatu resemble each other. Therefore, Virechana therapy is used in this case for Shodhan Karma.

INTRODUCTION

Psoriasis 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 Spota and Ruja as the important signs along with scaling.
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
- Koebner’s phenomenon - Absent
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CASE REPORT

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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

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 Pancchikta Ghrit as follows:

<table>
<thead>
<tr>
<th>Days</th>
<th>Sneha</th>
<th>Dose</th>
<th>Route</th>
<th>Frequency</th>
<th>Anupana</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Pancchikta Ghrit</td>
<td>30ml</td>
<td>Oral</td>
<td>Morning empty stomach</td>
<td>Warm water</td>
</tr>
<tr>
<td>2.</td>
<td>Pancchikta Ghrit</td>
<td>45ml</td>
<td>Oral</td>
<td>Morning empty stomach</td>
<td>Warm water</td>
</tr>
<tr>
<td>3.</td>
<td>Pancchikta Ghrit</td>
<td>60ml</td>
<td>Oral</td>
<td>Morning empty stomach</td>
<td>Warm water</td>
</tr>
</tbody>
</table>
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**

<table>
<thead>
<tr>
<th>Signs and Symptoms</th>
<th>Before treatment</th>
<th>After treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dryness</td>
<td>Present</td>
<td>Absent</td>
</tr>
<tr>
<td>Itching</td>
<td>Present</td>
<td>Absent</td>
</tr>
<tr>
<td>Scaling</td>
<td>Present</td>
<td>Absent</td>
</tr>
<tr>
<td>Erythema</td>
<td>Present</td>
<td>Improved</td>
</tr>
<tr>
<td>Discoloration</td>
<td>Present</td>
<td>Improved</td>
</tr>
</tbody>
</table>
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.

REFERENCES


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