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Ayurvedic management of *Sheetapitta* - A Case Study

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ABSTRACT

Ayurveda is the science of life which described the *Hita* and *Ahita* to *Ayu*. Means, it described the favorable and unfavorable to life. If man doesn't follow the rules described in *Ayurveda*, it leads to several pathogeneses, which ultimately produces different disorders. *Sheetapitta* (Urticaria) is one of such disorder, which caused by *Asatmya Sevana* means the Exposure to allergens and antibody. In present busy and fast life, one can't follow the rules of *Dinacharya* and *Ritucharya* described in *Ayurveda*. Due to heavy industrialization and heavy traffic one constantly comes into contact with various pollutants. The spicy and fast food eaten now a days, which have very less nutritional values and also having similar properties to *Viruddhahara*. These all ultimately resulted into *Dhatudurbalya* (lower immunity). Which causes sensitization towards allergens as well as antibodies and produces various types of allergic reactions, one of them is Urticaria, which is very common. Urticaria is a disease characterized by itchy red rashes on skin on almost all over the body. *Sheetapitta* is characterized by *Varati Damshta Samsthana Shotha, Kandu Bahula, Toda Bahula, Chhardi, Jvara, Vidaha*. Based on sign and symptoms *Sheetapitta* can be correlated with Urticaria.

Key words: *Sheetapitta, Urticaria, Ayurveda.*

INTRODUCTION

According to *Ayurveda*, *Sheetpitta* is described as *Tridoshaj Vyadhi*, but *Vata* and *Pitta Dosha* are predominant and *Ras* and *Rakta* are main *Dushya*. *Sheetapitta* is one among the *Twak Vikara* that have related *Hetu* of *Kotha* and *Udarda*. *Vata* and *Kapha* are two *Doshas*, which are primarily bothered which in turn is associated through *Pitta* resulting in *Tridosha Prakopa* causing to redness, swelling itching on the skin etc. *Anjana Nidana* explained *Udarda* as, the appearance of skin patches look like those caused by

the sting of wasp along with Itching, Vomiting, Fever and is caused by *Sheeta* and *Pitta*.^[1] *Madhukosa* explained that, though the features of *Sheetapitta* and *Udarda* are similar to each other, there is a predominance of *Vata* in *Sheetapitta* while *Udarda* is dominated by *Kapha*.^[2] *Acharaya Madhava* and *Bhavprakash* have defined *Sheetpitta* as *Shotha* caused by *Sarti-Dansh* along with *Kandu, Toda, Jvara, Chhardi* and *Vidaah*.^[3] Urticaria is a common problem affecting up to 25% of the population at some point in their lifetime.^[4] Chief symptoms of *Sheetpitta* are reddish spots, inflammation on skin with moderate to severe itching at site. It is compared with urticaria in modern science and termed as primary cutaneous disorder. An episode of it may start with pruritis. Episodes of urticaria may continue to revert for days, weeks, months or year if not cured properly. Urticaria is calculated as allergic reaction due to certain food and has only symptomatic treatment and anti-allergic drug. Though the disease, Urticaria is not a life threatening, it makes worried the patient due to its appearance, severe itching disturbing routine and its nature susceptible to be chronic. Urticaria affects 20% of people at some point in their lifetime. In some cases, the disorder is relatively mild, recurrent and frustrating

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for both the patient and physician. In other cases, it manifests as part of a spectrum of systemic anaphylaxis, which may be life threatening. The disability and distress caused by Urticaria can lead to serious impairment of quality of life, almost comparable to that experienced by patients with cardiovascular disease. To further complicate the issue, a fairly extensive list of diseases can cause Urticaria. Patients often seek medical attention with the hope that a reversible cause can be identified. Therefore, the challenge for the clinician is to try to identify a cause that could lead to a specific treatment or avoidance strategy. A carefully taken history, blood tests, cutaneous punch biopsy, and allergy skin testing may provide the clues to specific mechanisms in some cases. Often, however, it is impossible to pinpoint the exact cause. Modern medicine not having any remedy for permanent cure but remission of the disease can be achieved administering the medicine. Patients have to take those medicines for lifetime, which are having some unwanted side effects. *Ayurveda* can provide better and permanent management for *Sheetapitta*.

Nidana

(1) Aaharaja Hetus

- Abhishyandi* and *Kaphaprapakara nidana*
- Pittaprapakara* and *Raktadushtikara nidana*
- Visha Janana Nidana*

(2) Viharaja Hetus

- Vata Prakopaka* and *Tvak Vaigunyakara*
- Pitta Prakopaka* and *Rakta Dushtikara nidana*

(3) Nidarthaakara Roga

- Sannipatika Jvara* and other *Jvara*.
- Unmada*
- Adhoga Amlapitta*

(4) Chikitsa Mithya Yoga

- Vamana Ayoga* and *Virechana Ayoga*
- Svedatiyoga*
- Raktarshe Dushita Rakta Nigraha*

Poorvarupa^[5,6]

Pipasa (Thirst), *Aruchi* (loss of appetite), *Hrillasa* (Nausea), *Deha Saad* (Feeling of tiredness) *Anga*

Gaurava (Feeling of heaviness), *Rakta Lochanata* (Redness of eyes).

Rupa: (Madhavnidana 50/3)

Vartidasht Sansthan Shotha (Inflammation like insect bite), *Kandu* (itching), *Todda Bahulya* (excessive pain like pricking), *Chhardi* (nausea or vomiting). *Jvara* (fever), *Vidaah* (burning sensation).

Samprapti:

Nidana Sevan + Agni Mandhya



Formation of *Aam* along with *dosha Prakopa*



Prasara of Dosha



Dosha Dushya Sammurchna in *Amashya*



Sthana Samsraya in *Twak*

CASE REPORT

A 34 year old female patient came to OPD of Jammu institute of *Ayurveda* and Research Jammu on 13 February 2024.

- Patient name - XYZ
- Age/ Sex - 34/F
- Religion - Hindu
- Occupation - Teacher
- Address - Satwari, Jammu.

Pradhana Vedana

- Reddish slightly elevated papules or erythematous wheals on bilateral Upper and lower limbs since 1 month
- Itching since 1 month
- Burning sensation since 1 month

Vedana Vruttanta

Patient was apparently alright 1 month ago, then patient having complained of frequent eruption of smooth, reddish slightly elevated papules or

erythematous wheals on bilateral Upper and lower limbs for 1 month which gradually increased. It is associated with localized and generalized itching, burning sensation. The complaints got aggravated during evening and night time, or on exposure to cold climate and wind. The patient took allopathic medication and found relief. But the condition relapsed on discontinuing the medications. Hence patient came to OPD of JIAR Jammu.

Poorva Vyadhi Vruttanta

NO H/O Hypertension, T2DM, Hypo / Hyperthyroidism

Kutumbh Vritanta

No significant history was found.

Vyaktika Vruttanta

Appetite - Reduced

Bowel habit - Constipation

Micturition - 7-9 times/day

Sleep - Sound sleep

Socio economic status - Middle class

General Examination

General condition - Fair

Pallor - Absent

Oedema - Absent

Cyanosis - Absent

Icterus - Absent

Clubbing - Absent.

Lymphadenopathy - Absent

Weight - 58 Kg

Height - 5.6 feet

BMI - 20.5.

BP - 126/88 mm of Hg.

Pulse - 70/min

Respiratory rate - 17/min

Temp - 98.6° F

Systemic Examination

Reddish slightly elevated papules or erythematous wheals on bilateral Upper and lower limbs

Gastro intestinal system - Abdomen soft, non-tender and no Organomegaly was found.

Respiratory system - Symmetrical chest, no added sound, bilateral normal air entry. Normal vesicular sound heard.

Cardio vascular examination - S1, S2 heard, no murmur was found.

CNS examination - Conscious, Oriented.

Before Treatment



After Treatment





Asthasthana Pariksha

Nadi	Vataj
Mala	Niram
Mutra	Samanya
Jihwa	Saam
Drik	Samanya
Shabda	Ksheena
Sparsha	Khara
Akrithi	Krish

Dashavidha Pariksha

प्रकृति	वात - कफ
विकृति दोष	वात, कफ
सार	मध्यम
संहनन	मध्यम
प्रमाण	मध्यम
सात्म्य	मध्यम
सत्व	मध्यम
आहार शक्ति	अभ्यवहरण शक्ति: अवर जरणशक्ति: अवर

व्यायाम शक्ति	अवर
वयः	मध्यम

- Varati Damsha Sansthana Shotha: +++
- Kandu: +++
- Toda: +++
- Vidaha: +++
- Jwara: +++ (occasional)
- Chardi: +++ (occasional)

(+ : Mild; ++ : Moderate; Severe : +++)

- Agni - Mandagni
- Koshtha - Asamyak
- Prakruti - Pitta Pradhan Kapha Anubandhi

Management

Shaman Chikitsa

- Use of Sarshap, Haridra, Kustha, Prapunnag and Tila with Katu Taila^[7] for 21 days .
- Yashtimadhvaadi Kwatha^[8] for 21 days:
- Tab. Laghusutshekhara Rasa - 1 tab. bd (with lukewarm water) for 21 days.
- Kamdudha Ras - 250mg od for 21 days.

Shodhan Chikitsa

Nitya Virechan with Gandharvahastadi Erenda Taila for 14 days.

RESULT

Patient was instructed for follow up every 7 days.

Symptoms	Day 0	Day 7	Day 14	Day 21
Kandu	+++	+++	++	Absent
Toda	++	+	ABSENT	Absent
Vidaha	+++	++	+	Absent
Vartidasht Sansthan Shotha	+++	+++	++	Absent

(+ - Mild; ++ - Moderate; +++ - Severe)

All the sign and symptoms after treatment is diminished after *Shodhan* by *Virechan* and rest of *Doshas* are pacified by *Shaman Chikitsa*. At last follow up after 21 days all symptoms *Kandu, Toda, Vidaha, Vartidasht Sansthan Shotha* were diminished.

DISCUSSION

Use of *Sarshap, Haridra, Kustha, Prapunnag* and *Tilla* with *Katu Taila* is beneficial in *Sheetpitta*.

S N	Content	Rasa	Guna	Veerya	Vipaka
1.	<i>Sarshap</i> ^[9]	<i>Katu, Tikta</i>	<i>Sanigdha</i>	<i>Ushna</i>	<i>Katu</i>
2.	<i>Haridra</i> ^[10]	<i>Katu, Tikta</i>	<i>Ruksha, Laghu</i>	<i>Ushna</i>	<i>Katu</i>
3.	<i>Kustha</i> ^[11]	<i>Tikta, Madhur, Katu</i>	<i>Laghu Ruksha, Tikshna</i>	<i>Ushna</i>	<i>Katu</i>
4.	<i>Prapunnag</i> ^[12]	<i>Katu</i>	<i>Laghu, Ruksha</i>	<i>Ushna</i>	<i>Katu</i>
5.	<i>Tilla</i> ^[13]	<i>Madur</i>	<i>Guru, Sanigdha</i>	<i>Ushna</i>	<i>Madhur</i>

All the contents here possess *Ushna Veerya*. *Sarshap* and *Tilla* have *Sanigdha Guna*, which helps in *Shaman* of *Vata Dosha* which is predominant in *Sheetpitta*

Contents of *Yashtimadhvaadi Kwatha*

S N	Content	Rasa	Guna	Veerya	Vipaka
1.	<i>Yashtimadhu</i> ^[14]	<i>Madhur</i>	<i>Guru, Snigdha</i>	<i>Sheeta</i>	<i>Madhur</i>
2.	<i>Madhuk</i> ^[15]	<i>Madhur</i>	<i>Laghu, Snigdha Pichhil</i>	<i>Sheeta</i>	<i>Madhur</i>
3.	<i>Rasna</i> ^[16]	<i>Katu</i>	<i>Laghu, Tikshna Ruksha</i>	<i>Ushna</i>	<i>Katu</i>
4.	<i>Chandan</i> ^[17]	<i>Tikta, Madhur</i>	<i>Laghu, Ruksha</i>	<i>Sheeta</i>	<i>Katu</i>
5.	<i>Raktchandan</i> ^[18]	<i>Tikta, Madhur</i>	<i>Guru, Ruksha</i>	<i>Sheeta</i>	<i>Katu</i>

6.	<i>Nirgundi</i> ^[19]	<i>Katu, Tikta</i>	<i>Laghu, Ruksha</i>	<i>Ushna</i>	<i>Katu</i>
7.	<i>Pippalji</i> ^[20]	<i>Katu</i>	<i>Laghu, Snigdha Tikshna</i>	<i>Anushna Sheeta</i>	<i>Madhur</i>

In *Sheetpitta* there was vitiation of *Kapha* and *Vaat* due to *Sheeta-Amla Ahara* and *Shita Vihara*. *Kapha* was dominant and *Pitta* was *Anubandhi*. In such condition *Strotavarodha* created by vitiated *Kapha* should be broken first. *Pitta* achieved normal state after removal of *Avarodha* and in this *Laghusutshekhar Ras* was helpful to give relief in symptoms *Virechan* is said to be best for vitiated *Pitta dosha*. *Nitya Virechan* with *Gandharvahastadi Erenda Taila* was done.

CONCLUSION

According to Ayurveda, *Sheetpitta* is described as *Tridoshaj Vyadhi*, but *Vata* and *Pitta Dosha* are predominant. Use of *Sarshap, Haridra, Kustha, Prapunnag* and *Tila* with *Katu Taila* is beneficial in *Sheetpitta*. Use of *Yashtimadhvaadi Kwath, Tab. Laghusutshekhar Rasa, Kamdudha Ras* was found effective in *Sheetapitta*. *Nitya Virechan* with *Gandharvahastadi Erenda Taila* was very useful.

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