



Ayurvedic approach in the management of Visarpa by Jalaukavacharana - A Case Study


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Visarpa is a skin disorder mentioned in Ayurvedic texts, characterized by the spreading of disease in various directions across the body. It is considered to be caused by an imbalance of Doshas, particularly Pitta Dosha. In modern, it can be correlated with Herpes zoster also known as shingles. After an attack of varicella, virus lies dormant in sensory ganglia. Zoster is the manifestation of its reactivation.[1] Among all skin problems herpes gain immediate notice due to its severity in localized spread. There will be reddish eruptions with basal erythema in the skin. These lesions become pustules followed by crust formation. It occurs along the course of spinal nerves. There will be pain, burning sensation and itching in the site of lesions. Herpes zoster occurs at all ages, but its incidence is highest (5 to 10 cases per 1000 persons) among individuals in the sixth through eighth decades of life.[2] The case presented here is a 50-year-old female who came with complaints of reddish skin eruptions along with itching over right flank region for 2-3 days. Here, Shamana Aushadhi along with Jalaukavacharana (leech therapy) was given to the patients for about 3 weeks. And on the basis of improvement in signs and symptoms assessment is done.

Keywords: Visarpa, Kustharoga, Herpes zoster, viral infection, skin lesions, Shingles, dermatological condition, Jalaukavacharana

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Introduction

Skin is the largest organ of the body and plays a vital role in immune defense. The aggravation of various *Dhatus* and *Doshas* results in various skin diseases. *Visarpa* is one of such disease resulting from *Pitta Pradhana Tridosha Dushti*. The disease is described in a separate *Adhyaya* (chapter) by *Acharya Charaka* and is explained in detail apart from *Kushtha*. It shows the seriousness and clinical importance of the disease in medical science.

The disease is termed as '*Visarpa*' because of its spreading nature or it is known as '*Parisarpa*' due to extensive spreading.[3] It is classified as a *Raktaja* (blood-related) disorder primarily involving the *Pitta Dosh*, with the other *Doshas* (*Vata* and *Kapha*) also contributing to its manifestation depending on the subtype. The word "*Visarpa*" means "to spread in various directions," reflecting the disease's nature to expand across the skin's surface, much like a snake's movement. The disease is characterized by rapid spread of *Pidaka* (blisters), *Shoola* (pain), *Daha* (burning sensation), *Jwara* (fever), and *Raga* (redness). It is classified into seven types based on the predominant *Dosha* (*Vataja*, *Pittaja*, *Kaphaja*, *Agneya*, *Granthi*, *Kardama*, and *Sannipataja Visarpa*). Clinical presentation of *Visarpa* can be correlated with Herpes zoster. Herpes zoster is the result of reactivation of the varicella zoster virus that has lain dormant in a nerve root ganglion following chickenpox earlier in life. Reactivation may be spontaneous (as usually occurs in middle-aged or elderly) or due to immunosuppression (as in patients with diabetes, malignant disease or AIDS). [4] It is characterized by unilateral vesicular eruption within a dermatome, often associated with pain. The dermatome from T3 to L3 are most frequently involved.[5] In modern it is treated with antiviral drugs like Acyclovir, or Famciclovir (best within 72 hours of rash onset). Pain management includes NSAIDs, opioids, or neuropathic agents like Gabapentin or Pregabalin. Corticosteroids may be used in severe cases. The management of *Visarpa* in *Ayurveda* includes *Shodhana* (*Vamana*, *Virechana* and *Raktamokshana*), *Shamana* (internal medication and external *Lepa*).

Objective of the study

To assesses the efficacy of *Ayurvedic* treatment in the management of Herpes zoster.

Material and Method

A 50-year-old female patient came to OPD of *Panchakarma* with complaints of reddish skin eruptions along with itching in right hypochondrium, right lumbar and flank region from 2-3days.

Patient Profile

Name: X
Age/Sex: 50 year/ F
OPD No.: 6925/38769
Occupation: Housewife
Religion: Hindu
Address: Haridwar

Case Description

Chief Complaints

A 50-year-old female patient (OPD No. 6925/38769) with complaints of reddish skin eruptions (*Pidaka*) along with itching (*Kandu*) in right hypochondrium, right lumbar and right flank region from 2-3days. Burning sensation (*Daha*) and pain (*Shoola*) in right hypochondrium, right lumbar and right flank region from 3days.

Past History

No history of any major illness such as Hypertension, Diabetes, Thyroid Disorder and Bronchial *Asthma* was found. No drug allergy or previous surgery was reported.

Personal History

Appetite: Decreased
Thirst: Normal
Bowel: Constipated (Irregular habit)
Micturition: Normal
Sleep: Sound

General Examination

Pallor: Not Present
Icterus: Not Present
Clubbing: Not Present
Cyanosis: Not Present
Lymph Nodes: Normal / No Lymphadenopathy
Edema: Not Present

Vital Examination

Blood Pressure: 136/76 mmHg
Pulse rate: 76 bpm
Respiratory rate: 16cpm

Temperature: 99.8 F

Systemic Examination

In systemic examination, gastro-intestinal, respiratory, cardiovascular examinations were within normal limits. Patient was conscious but she was in pain and burning sensation was there at the site of subcostal nerve. Her pupillary reflexes were normal. Deep tendon reflexes and superficial tendon reflexes were also normal.

Ashtavidha Pariksha

1. Nadi: Pitta-Vatika
2. Mala: Malabadhata
3. Mutra: Prakrut
4. Jivha: Sama (coated)
5. Shabda: Prakrut
6. Sparsha: Ushna (warm)
7. Drika: Prakrut (no pallor, no icterus and normal vision)
8. Aakriti: Madhyam Sharir

Dashvidha Pariksha

1. Prakriti - Vata-Pitta
2. Vikriti - Vata-Pitta Pradhan
3. Sara - Mamsa
4. Samhanana - Madhyam
5. Pramana - Madhyam
6. Satva - Madhyam
7. Satmya - Madhyam
8. Ahara Shakti - Alpa
9. Vyayama Shakti - Alpa
10. Vaya - Madhyam

Samprapti Ghataka

1. Nidana - Paittika Aahar-Vihara
2. Doshha - Pitta Pradhana Tridosha
3. Dushya - Twaka, Rakta, Mamsa And Lasika
4. Agni - Jatharagni and Dhatwagni Mandya
5. Srotas - Rasavaha, Raktavaha and Mamsavaha
6. Srotodushti - Sanga
7. Rogamarga - Abhyantara, Madhyam and Bahaya Roga Marga
8. Adhithana - Abhyantara and Bahaya Roga Marga
9. Sanchara Sthana - Twaka

Treatment

The patient was given 3 sessions of Jaluakavacharana with seven days gap in between along with Shamana Yogas. A routine follow-up was conducted every 7 days.

Treatment protocol of the patient is discussed in table below:

Table 1: Treatment Protocol

SN	Drug	Dose	Anupana	Duration
1.	Tab. Raktapachaka	2 BD	Lukewarm water	21 Days
2.	Mahamanjishthadi Kashayam	20 ml BD	1cup lukewarm water (approx. 60 ml)	21 Days
3.	Arogyavardhini Vati	2 BD	Lukewarm water	21 Days
4.	Tab Nityam	1 HS	Lukewarm water	7 Days

Changes In Sign And Symptoms

Sign and Symptoms	Before Treatment	After Treatment
Shoola	++	-
Daha	+++	-
Kandu	+++	+
Pidaka	+++	-
Raga	+++	-



Before Treatment



After Treatment

Discussion

Visarpa is a severe *Pitta* dominant *Tridoshaja Twaka Vikara* characterized by the rapid spread of *Pidaka*, *Daha*, *Shoola*, *Raga* and *Kandu* due to *Rakta Dushti*. The condition is often correlated with Herpes Zoster in modern. *Raktamokshana*, *Vamana*, *Virechana* and various *Shamana Yogas* are given in Ayurvedic texts in the management of *Visarpa*. In this present study a patient of *Visarpa* was given 3 sittings of *Jalaukavacharana* (with 7 days gap in each sitting) along with *Raktapachaka* Tablet, *Mahamanjishthadi Kashayam*, *Arogyavardhini Vati* and *Nityam* tablet. *Jalaukavacharana* is a classical *Raktamokshana* procedure classified as an *Ashastra* modality. It can be applied even in *Parama Sukumara* and is safer, less complicated, and easy to perform compared to other *Raktamokshana* techniques.

Jalauka is *Sheeta* in nature, so it is especially beneficial in *Pitta Pradhan Rakta Dushti*. Since *Visarpa* is caused by *Rakta* and *Pitta Dushti*, *Jalaukavacharana* helps by removing *Dushita Rakta* and pacifies *Pitta* thus helps in alleviation of *Daha*, and *Raga*. The anticoagulant enzymes in leech saliva also improve circulation and detoxification, aiding faster healing of *Pidaka* and reducing residual scarring. It helps to improve skin health, restore equilibrium and Relieves symptoms of the disease.

Raktapachaka Tablet is a *Raktashodhaka* (blood purifier) and *Pitta-Kapha Shamak* formulation. It contains *Manjishtha*, *Neem*, *Guduchi*, *Triphala*, and *Kutki*. It helps in reducing *Daha*, *Pidaka* and *Kandu* in *Visarpa*. *Mahamanjishthadi Kashayam* is also *Pitta* and *Kapha Shamak* and *Rakta Shodhaka*, making it beneficial for *Visarpa*. It contains *Manjishtha*, *Neem*, *Guduchi*, *Haridra*, *Triphala*, *Khadira*, *Chandana*, etc. which help in detoxifying the blood, reducing inflammation, and promoting skin healing.

Arogyavardhini Vati is said to have *Malashudhikar*, *Raktashodhaka* *Yakrut uttejak*, *Kushthaghna*, *Vranashodhana*, *Vranropana* and *Tridoshahara* properties. It contains *Kutki*, *Gandhaka*, *Parada*, and *Triphala*. It reduces *Daha*, *Shoola*, and *Pidaka Utpatti* by pacifying *Pitta* and *Vata*.

Nityam tablet contains ingredients like *Swarnapatri*, *Mishi (Saunf)*, *Haritaki*, and *Eranda Taila*. It helps in relieving *Vibandhata* and promote regular bowel movements. As patient had complaint of constipation and irregular bowel habits so this formulation was given.

Conclusion

A patient of *Visarpa* (Herpes zoster) was treated with *Jalaukavacharana* along with *Shamana Yogas* *Raktapachaka* Tablet, *Mahamanjishthadi Kashayam*, *Arogyavardhini Vati* and *Nityam* tablet and effective result was found. Significant improvement was seen in the sign and symptoms of *Visarpa* shown effective result in the management of *Visarpa* (Herpes zoster). No adverse reaction was seen during the period of intervention.

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