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AYURVEDIC MANAGEMENT OF SCALP PSORIASIS ACCORDING TO CHIKITSA SUTRA OF KUSTHA: A CASE REPORT

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Abstract:

Purpose:

Skin gives the idea of internal function of the body. Cases of skin disorders especially psoriasis is increasing due to Viruddha Ahara-Vihar which reduces person's immunity and vitiates the Doshas. Psoriasis is said to be an immune mediated disease. Psoriasis has psychological as well as social impact on the diseased. Generally, patient comes with symptoms like itching, scaling, patches, dandruff, hair fall, redness, sometimes burning sensation. Psoriasis is caused due to the vitiated Vata - Kapha Dosha. In modern science, there is no as such treatment for psoriasis instead of steroids and antihistamines, which ultimately reduces the individuals.immunity. In Ayurveda certain Panchakarma procedures and medicines has showed significant effect in the disease. **Methods:**

The case study deals with 19-year-old male patient who was suffering from complaints of itchy scalp, dandruff, hair fall, constipation for 5 months. Initially Pachan was given and Shodhana Karma was conducted, after Shaman Chikitsa (Bahya and Abhyantara) was given. Vaman-Virechana was repeated after 6 months to prevent recurrency. Amalaki Rasayan started as Rasayan Chikitsa in the last.

Results:

The Shodhana, Shaman, Apunarbhava and Rasayan Chikitsa has showed the significant improvement in psoriasis along with no recurrency till date.

Conclusion:

Psoriasis can be managed with Ayurvedic Chikitsa (Panchakarma + oral medicine), Nidan Parivarjan and recurrency of disease can be prevented by increasing immunity with Rasayanas. **Keywords:** Scalp Psoriasis, Kitibha Kustha, Panchakarma, Shodhana, Shamana, Apurnarabhavatva.

INTRODUCTION:

Skin gives the idea of internal function of the body. All skin disease in Ayurveda have been discussed under *Kustha*. Cases of skin disorders especially psoriasis is increasing due to *Viruddha* IRJHIS2406003 | International Research Journal of Humanities and Interdisciplinary Studies (IRJHIS) | 17 *Ahara–Vihar* which reduces person's immunity and vitiates the *Doshas*. Psoriasis is said to be an immune mediated disease. Psoriasis has psychological as well as social impact on the diseased. Affects 0.4 to 2.8% of Indians. Males are more affected than Females (2:1).Generally, patient comes with symptoms like itching, scaling, patches, thickened rough skin, dandruff, hair fall, redness, sometimes burning sensation.Psoriasis is caused due to the vitiated *Vata – Kapha Dosha*. In modern science, there is no as such treatment for psoriasis instead of steroids and antihistamines, which ultimately reduces the individual's immunity. In Ayurveda certain *Panchakarma* procedures and medicines has showed significant effect in the disease.

AIM

• To understand effect of Ayurvedic management of Scalp Psoriasis.

OBJECTIVE

- To understand the concept of Scalp Psoriasis
- To understand the effect of Panchakarma and ShamanChikitsa in Scalp Psoriasis.

CASE REPORT:

HISTORY OF PRESENT ILLNESS:

- The case study deals with 19-year-old male patient who was suffering from complaints of itchy scalp, dandruff, hair fall, constipation in the past 5 months.
- H/O Stress (due to exam)

PERSONAL HISTORY:

Frequent consumption of junk food (Chinese food), exposure to cold climate and wind, continuous use of air conditioner, Symptoms worsens with stress, anxiety, strain, inadequate sleep, irregular dietary pattern.

HISTORY OF PAST ILLNESS: Nill

FAMILY HISTORY: Nill

PERSONAL HISTORY:

BOWEL: Irregular (Constipation)

BLADDER: 5-6 times a day

SLEEP: inadequate & irregular

DIET: Oily, Spicy, Sour food (pickle), Chinese food (twice a week)

OCCUPATION: Student (exam stress)

Asthavidha Pariksha

Nadi: 84/min

Mala: Baddha Koshta

Mutra: Prakruta (5-6 times)

Jihva: Kinchita Saam

Shabda: Spastha (Prakruta)

Sparsha: Koshna (Kathor & Parushtaat scalp)

Drik: Prakruta

Akruti: Madhya (shyavavarnanata at Scalp)

Local Examination:

- Site of lesion (Pidaka Sthana) –Shira (scalp)
- Distribution (Vyapti) Asymmetrical ٠
- Character of lesion (Pidaka Lakshanas): Elevated margins
- No of lesions- Multiple
- Size of lesion 0.5 to 2cm
- Colour- Greyish.
- Itching Present
- Severity- Severe
- Inflammation Absent •
- Discharge Absent •

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• Size of lesion - 0.5 to 2cm							
• Colour- Greyish.							
• Itching - Present	of Humanic						
• Severity- Severe	101 aucs a						
• Inflammation – Absent	- VI	d					
• Discharge – Absent		TI_					
 Colour- Greyish. Itching - Present Severity- Severe Inflammation – Absent Discharge – Absent 							
AHARAJ	VIHARAJ	MANASIK					
i i i i i i i i i i i i i i i i i i i		Q.					
Dadhisevan daily,	Ratri Jagaran, Shitoshna Upa	Chinta, Krodha, Bhaya					
Chinese food (twice a week),	Krama, Vega Vid Haran	(Anxiety)					
Vishama A Ahara, Mango		ar					
Pickle cosumption daily, Papad	12						
once a week		Stu					
12		5.					
Samprapti: ^[2]		5					
Dosha: Tridoshaja							
Dushya: Rasa, Rakta, Mamsa, Lasika							
Adhishtana: Twaka							

Vyadhi: Kitibha Kustha(Scalp Psoriasis)

TREATMENT PLAN^[12]

- 1. Vamana Virechana (Repeated after 6 month)
- 2. Takradhara (for 11 days) with Mastishkya application
- 3. Jaloukavacharana (every 7th Day for 12 times)
- 4. Shaman Chikitsa (Local + oral medicine)

Vamana Karma

1	Amapachan	Amapachakvati (250mg TDS before meal)	5 days
2	Abhyantar Snehapana For Vamana	<i>Panchatikta Ghrita</i> given in early morning empty stomach. Starting with 30ml and increased each day by 30ml. (30ml-60ml-90ml-120ml-150ml-180ml-210ml)	7 days
3	Vishram Divas	Sarvang Snehana withMurchitaTila Tail SarvangaBashpa Swedana Abhishyandi Ahara- Dadhi, Odan	1day
4	Vamana	Sarvang Snehana withMurchitaTila Tail SarvangaBashpa Swedana Aakantha Pan-Dugdhapan Vamana Dravya- Madanphala Pippali Kashaya Vamanaopaga Dravya- Yashtimadhu Phanta, Saindhav Jala After completion of Vamana procedure- Vartidhumpan was given	1day
5	Sansarjana Krama	Sansarjana Krama explained according to Shuddhi (7 Vega with Pittanta Vamana)	7 days

Virechana Karma

		~1	
1	Abhyantar	Panchatikta Ghrita given in early morning empty	5 days
	Snehapana	stomach. Starting with 30ml and increased each day	
	for Virechana	by 40ml. (40ml-80ml-120ml-160ml-200ml)	
2	Vishram Divas	Sarvanga Snehana with Murchita Tila Tail	
	>	Sarvanga Bashpa Swedana	2 days
3	Virechana	Sarvanga Snehana with Murchita Tila Tail	1day
		Sarvanga Bashpa Swedana	
		Virechana Dravya – Trivrutta Lehya (50gm)	
		Virechanaopaga – Mrudvika Phanta	
4	Sansarjana	Sansarjana Krama explained according to Shuddhi	5 days
	Krama	(18 Vega with Kaphanta Virechana)	

Takradhara with Mastishkya for 11day Jaloukavacharana (every 7th Day for 12 times)



Oral medicine-

- 1. Panchatikta Ghrita Guggulu 2 BD with Panchatikta Ghrita (2tsf)
- 2. Formulation -3 gm BD with warm water

Arogyavardhini Vati + Kaishor Guggulu +Gandhak Rasayan– 2 tabs each + Guduchi Satva – 5 gm +Rasa Manikya – 0.5 mg

APUNARBHAVARTHA^[3]

Vamana Virechana repeated after 6 months to avoid the recurrency of the disease.

PATHYAPATHYA^{[4][5]}

PATHYA: Shali Dhanya, Yava, Ghrita, Godhuma, Moong, Tikta Shaak, Triphala, Patola, Khadir, Nimba, Takra.

APATHYA: Amla Rasatmak, Atiguru, Lavan, Maricha, Dadhi, Dugdha, Aanupa Mansa, Tila, Udad, Guda.

Observation & Result:

Before Treatment

After Treatment

PARAMETERS	GRADATION	PARAMETERS	GRADATION
AREA	70-89%	AREA	<10 %
ERYTHEMA	1	ERYTHEMA	0
INDURATIION	4	INDURATIION	0
(THICKNESS)		(THICKNESS)	
SCALING	3	SCALING	1
PASI SCORE	4	PASI SCORE	0.1

BEFORE & AFTER TREATMENT:

BEFORE TREATMENT

AFTER TREATMENT



DISCUSSION^[10]

- of Humanilies 1. Shodhana – Vamana, Virechana, Jaloukavac Harana
- 2. Shamana Oral medicine, Local application and Takrad Hara with Mastishkva
- 3. Nidan Parivarjana Lifestyle & Dietary adaption were advised.
- 4. Rasayan Chikitsa Amalaki Rasayan (1 month)^[6]

As mentioned above, in every type of Kustha Vata Kapha Shamak & Kustha Nashak Chikitsa should be done priorly.

Kapha Haran by Vamvana, Pitta Haran by Virechana, Rakta Haran by Vistravan (jalouka), Tikta- Kashaya Dravya Shamanartha.^[7]

According to Ayurveda Kitibha Kustha is a Vata-Kapha Pradhana Tridoshaja Kushta. On history taking patient had irregular diet pattern and excessive use of Dadhi, Vidahi, Guru, Virrudha Ahara. Viharas such as more exposure to Sheetamaruta, Shitoshnaupakrama, Atichinta, Krodha, are the Nidana causes Agni Vyapara Vikruti leads to Tridosha Vikruti along with Rasa, Rakta, Mamsa, Lasika results in Ahara Rasa Vikruti. Vikruta Rasagets Margavarodha in Twacha results in Pidika with *Kandu* and *Daha* in all over the body cause *Kitibha Kushta*.^[8]

Chikitsa was started with Amapachana for Agni Deepana Karma and for Dosha Shithilakarana Snehapana with Pancha Tiktaka Ghrita planned for 7 days for Vamana & 5 days for Virechana Karma. It brings the Dosha from Shakha to Koshta then followed by Abhyanga and Swedana for 1 & 2 day respectevely. The mode of action of Vamaka & Virechana Aushadhi is Dosha Harana, having the property like Ushna, Tikshna, Sukshma, Vyavayi and Vikasi due to this property Aushadha reaches Hrudaya and circulate through the vessel. Due to Ushna property present in Aushadhi theyliquefy the Doshas located in the channels of entire body, thus Doshas flows through GIT, morbid Doshas reaches the Amashaya carriedby Vayu, due to the predominance of Agni, Vayu & Prithvi, Jala Mahabhuta of Doshas from Koshta and leads to Dosha Harana.^[11] As

per Shuddhi Samsarjana Krama is advised. Shamana Ausadhi possessing Tikta, Snigdha Guna, Kusthaghna, Kandughnawas advised.

As we know, *Pitta Dosha* plays a major role in manifestation of disease.Vitiation of *Pitta Dosha* causes *Rakta Dushti*. This shows "*Ashraya-Ashrayisambandha*" of *Pitta* and *Rakta*. So that treatment on *Rakta* helps in treating *Pitta Dosha* also. *Raktamokshana* eliminates impure blood. As per *Ashraya-Ashrayi Sambandha* between *Pitta* and *Rakta*, removal of impure blood eliminates local vitiated *Dosha* and subsides symptoms like *Kandu, Rukshata*.^[9]

Maha-Marichyadi Taila has antiseptic and antifungal properties. So probable mode of action can be proper moisture balance (*Kledaka Kapha* imbalance), Effective functioning of the metabolic mechanisms that co-ordinates all the various chemical and hormonal reactions of the skin (*Bhrajak Pitta* imbalance) and efficient circulation of blood and nutrients to different layers of the skin (*Chala* and *Parusha Guna* of *Vata* imbalance).

As per an article ^[1]*Panchatikta Ghrita* works on the cellular level of skin decreasing keratinization of skin layer thus improving cell cycle as result of itching, scaling, patches, erythema reduces & skin achieves the norman texture. *Panchatikta Ghrita* has *Shothahara* (anti-inflammatory) property which helps provide relief from itching and irritation caused due to psoriasis. Its *Pitta* balancing and *Snigdha* (oily) properties help to control dryness which is also beneficial in psoriasis. *Guggulu* stimulates body activity to build up immune system.

Kaishor Guggulu balances Pitta - Kapha. Its main ingredients are Guduchi, Triphala and Trikatu, when combined with Guggulu, create a rejuvenating and detoxifying combination aimed primarily at removing deep-seated (Leena) Pitta from Dhatu.

Arogyavardhinivati is a useful formulation in treating skin diseases. It is indicated in various skin diseases due to vitiated Vata and Kapha. Kitibha is disease of Vata-Kapha Pradhan tridoshaja Vyadhi, so it is useful in Kitibha (psoriasis).

Guduchi having *Berberin* & *Tinosporin* mainly acts as anti-oxidant and thus cell layers during disease pathology are improved by this drug. It is one of the few herbs which balances the three doshas. It has *Tikta* and *Kashaya Rasa, Madhur Vipaka*. It is a potent immune modulator whichenhances the chances of improvement in the symptoms of disease.

The main component of *Gandhaka Rasayan* is Sulphur. It has *Kusthaghana* property. The *Rasayana* and *Garavishahar*, properties help in the treatment of psoriasis. *Gandhaka* possesses anti-oxidant and anti-inflammatory properties that help in the treatment of auto-immune disorders.

Ras Manikya is an Ayurvedic medicine frequently used for *Vataj-Kaphaj* disorders. It is prepared by *Shuddha Haratala*, which is kept in between two thin transparent *Abhrak* sheets (mica sheets). Its main actions are *Kushthahara*, and *Tridoshghana*. Hence, it breaks the *Samprapti* of the disease.

Conclusion:

On the basis of the present case study, we can state Psoriasis can be Managed with Ayurvedic *Chikitsa* i.e. (*Shodhana, Shaman, Nidan Parivarjan, Rasayan Chikitsa*)

Vamana & Virechana should be performed repeatedly to avoid recurrence; *Rasayana Chikitsa* helps to improve the immunity of the patient.

However, this is a single case study; more clinical trial should be performed in a larger group of patients for an appropriate conclusion.

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