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CASE REPORT

ROLE OF JALOUKAVACHARANA IN MANAGEMENT OF VIPADIKA: A CASE STUDY ANURADHA CHAVAN¹ SHRIDHARA. B.S²

Abstract:

The skin is the first organ of the body interacting with the environment agents like physical, chemical and biological agents. The skin disorders are intrinsic in origin, all skin diseases in Ayurveda have been considered under the heading of *Kushtha*. *Vipadika* is one of such diseases which has been included under the heading of *KshudraKushtha*. It is characterised by cracks (*sputana*) either in palms or soles or in both with severe pain. The pain present in *Vipadika* is so intense that it severely afflicts the quality of life of the patients. In spite it being a minor condition it cripples the daily activities of patients. According to Charaka, Sushruta and Vagbhata *Kushthas* are *raktajavyadhi* and *Jaloukavacharana* is claimed to be supreme therapy because of its high efficiency in curing blood related disorders. A case of 60yr old female patient who presented features of *Vipadika* was treated by *Jaloukavacharana*, showed marked improvement is discussed here.

Key words: Kshudrakushtha, Vipadika, Jaloukavacharana.

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¹ PG Scholar, ²Professor and Head, department of Panchakarma, Govt. Ayurveda Medical College, Bangalore, India Corresponding Email id: rathod.anu47@gmail.com Access this article online: www.jahm.in

INTRODUCTION

Based on symptoms of Vipadika^[1], it can be co-related to Palmo-plantar psoriasis^[2], Palmoplantar Keratoderma, Palmo-plantar dermatophytoses conditions according to modern science. As per Ayurveda, it is one of the Vatapradhana Kshudra kushta and due to lack of hygiene, excessive walking etc. the dryness in the body especially in the foot increases which aggravates the Vata resulting in the scaling of the skin of the soles and palms(Pani-padasputanam, Tivravedanam). Hypertrophy of comeous layer of the palms and soles, usually of a more or less horny and plate like character , is well defined in Ayurveda as *Vipadika* and Palmo- Plantar psoriasis in the contemporary science. The hardening and thickening arise spontaneously without necessarily having any external factor, such as pressure, friction etc ,and is futhersome symmetric and usually on palms and soles. Moreover, it is as a rule, congenital or aheriditory condition while it is commonly limited to the palmer and plantar aspect, occasionally it extends somewhat beyond on the side and exceptionally slightly on the dorsal surface. The condition may further worsen due to absence of personal hygiene.

According to Charaka, Sushruta and Vagbhata,

Kushthas^[3,4,5] are raktajavyadhi and and

Jaloukavacharana is claimed to be supreme

therapy because of its high efficiency in curing blood related disorders.

CASE REPORT:

A 60 year female patient, from Chikkaballapur, developed cracks on heels and feet since one year. There was severe itching and pain which was continuous throughout the day. These symptoms hampered daily activities of the patient.

Not a K/C/O DM, HTN

All are said to be healthy in the family.

Examination

Inspection:

Site of scaly plaques-plantar surfaces

Morphology –Maculo-papular, slightly
yellowish in colour

Investigation done before Jaloukavacharana

Hb%	70%		
TC	8300cell/cumm		
DC	P-65% L-31% E-4%		
ESR	10mm/hr		
FBS	110mg/dl		
PPBS	130mg/dl		
BT	2' 15"		
СТ	3'50"		

Treatment Given

- Jaloukavacharanadone with all aseptic precautions in two sittings with seven days gap.
- Panchavalkalaqwatha^[6]washdone, followed by application of white ointment for 3 days.

- Manibhadragudaleha^[7] -10gm given orally in the morning with warm milk for 7 days.
- Sthanikaabhyanga done with AyyappalaKeratailam^[8] followed by exposure to sun for seven days.

Table 1. Effect of therapy on Objective Parameters

Parameters	Before	After 1 st sitting	After 2 nd sitting
	treatment		
Scaling	Gr. 4	Gr. 4	Gr. 2
Erythma	Gr. 3	Gr. 2	Gr. 1
Induration	Gr. 4	Gr. 3	Gr. 1
Pain on pressure	Gr. 4	Gr. 2	Gr. 1

Table 1. Effect of therapy on Subjective Parameters

Parameters	Before	After 1 st sitting	After 2 nd sitting
	treatment		
Itching	Gr. 3	Gr. 3	Gr. 1
Pain	Gr. 4	Gr. 2	Gr. 0

DISCUSSION

Based on symptoms of *Vipadika*, it can be correlated to Palmo-planter Psoriasis condition according to modern science. So here in such case by using medical leeches i.e. *Jalouka* which contains several bioactive substances in its salivary glands and has anti-edematous, bacteriostatic, analgesic properties we saw the marked improvement.

Mode of action of Leech therapy in Vipadika

Tryptase inhibitor:-Inhibits proteolytic enzymes of host mast cells, which reduces burning sensation.

Bdellins, Eglins: - Anti-inflammatory , to check swelling of skin cells and redness.

Hyaluronidase:-Increases interstitial viscosity, alleviate itching.

CarboxypeptidaseA inhibitors:-increases inflow of blood which prevents dying of skin cells i.e. scaling.

Factor X^{th} inhibitor:-Blocks the action of the coagulation factor X^{th}

Calin:-Prevents coagulation ,prevents dying of skin cells i.e. scaling^[9].

CONCLUSION

Raktamokshana, one among Panchakarma procedures gaining popularity around globe, is

being widely practiced. Bloodletting by applying *Jalouka* removes vitiated blood and heals the lesions. After first sitting of *Jalouka* symptoms reduced by 35% and after second sitting symptoms reduced by 75%.

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