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Case Study

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# AYURVEDIC MANAGEMENT OF EKA-KUSHTA WITH SPECIAL **REFERENCE TO PSORIASIS - A CASE STUDY**

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#### **ABSTRACT**

Eka-Kushta is one among the Kshudra Kushta presenting with Lakshanas like Aswedanam, Mahavastu and Matsyashakalopama. It is of prime importance due to its chronicity and severity which involves alarger extent of the body. This is often compared to Psoriasis. Psoriasis is one of the most commondermatological conditions affecting both males and females upto 2% of world's population. It is animmune mediated disease characterized by erythematous, sharply demarcated papules and roundedplaques covered by silvery micaceous scale which are variably pruritic. There is no satisfactory treatment for complete cure in psoriasis. But in the case of Ayurveda, Shamana (Pacifying treatment) and *Shodhana chikitsa* (detoxification treatment) along with *Nidan parivarjan* (Abstinence from disease causing factors) play an important role in overcoming this disease.

**KEYWORDS:**- Panchakarma, Nidan parivarjan, Vamana, Ekakushtha, Shodhana Chikitsa, Psoriasis.

#### INTRODUCTION

Psoriasis is a Autonomous and chronic inflammatory skin disease characterized by erythematous patches associated with silvery scales, itching, burnt skin appearance, and in some cases pustules orblisters. There is no definite treatment available for psoriasis, but different treatment modalities, such as internal medications, topical creams, phototherapy, and biologics, are available.<sup>[1]</sup> In *Charak Samhita Chikitsasthan* Chapter 7, *Ekakushtha* is described as Vat - Kaphaj disease. [2] In Ayurveda all the skin diseases have been discussed under the Vyadhi i"Kushtha" Ekakushtha (Psoriasis) is one among Kshudra-Kushtha. Nearly all Acharyas have described Ekakushtha first in their 11 types. Symptoms of Ekakusthaare: Mahavastu (Large area), *Mandaloutpati* (Patches), Rukshata (Dryness), Matsyashakalopamam (silvery scales). Ekakushtha (Psoriasis) has dominancy of Kaphavatadoshas. [3] The name *Panchkarma* literally means "Five Actions" namely *Vaman* (Emesis), Virechan (Purgation), Niruham (therapeutic decoction enema) Anuvaasan (therapeutic oily Enema) and Nasyam (therapeutic errhine). In other words, Panchakarma is a healing technique or a pillar on which majority of Ayurvedic techniques stand. Here Ayurveda plays an important role, i.e. Ek-kustha being Kapha Pradhana, Tridoshaja Vyadhi is best treated by Shodhan procedure. [4] Shodhana Chikitsa forms the mainstay of treatment for all major skin diseases in Ayurveda which helps to remove the deep seated Dosha's from the root itself. Here in this study Vamana Karma is planned because it helps to eliminate deep seated Dosha from the body. In Ayurveda line of treatment both Shamana and Shodhana are available. As Ekakushtha is Bahudoshaja Vyadhi, Punah-Punah Shodhana can be done to avoid recurrence.<sup>[5]</sup>

#### **CASE STUDY**

A 50-year-old male patient registered by the O.P.D. number 1655. On the date of 15/03/2022 came to the O.P.D. no. 24 of and got admitted in *kaychikitsa* Department. He presented himself with the following complaints,

- Scaly Patches (*Matsyashakalopamam*) over B/L ankle joint and B/L hand with red demarcation with *Mandalotpatti*.
- Severe itching, which would rarely result into bleeding.
- Dryness.
- Itching aggravating during night.
- Suffering from the last 4 years.
- Had taken modern treatment with limited improvement and recurrence.

### **Associated complaints**

Irregular evacuation of stools

#### Past history

- No H/O- DM, HTN, Surgical Procedures.
- No F/H/O- Any skin disorder

#### On examination

• General condition: Moderate

• Pulse rate: 78/min

• B.P: 130/90 mm of Hg

R.R: 17/minH.R: 70/min

#### Ashta sthana pariksha

1	Nadi	VataKaphaj
2	Mala	Asmayak
3	Mutra	Prakrita
4	Jihva	Lipta
5	Sabda	Prakrita
6	Sparsha	Ruksha
7	Druk	Prakrita
8	Akriti	Madhyam

### **Systemic examination**

- Respiratory System: B/L Chest clear, Airway entry, Breathing entry Clear
- Cardiovascular System: S1 S2 heard.
- CNS: All superficial reflexes are intact. Patient is conscious and well oriented.
- GIT: Soft Abdomen, Bowel sound heard, No Pain or any other symptoms

# Skin examination: Table 1

Chief complaints	Present
Aswedanam	++
Mahavastum (area)	+++
Kandu	++
Pidika	-
Daha	+
Vaivarnya	++
Rukashata	++

- Shape Irregular Scaly Patches
- Size Multiple Patches, no specific size. (Ranging from 7mm to 10cm too)
- Site- B/L Anklejoint and Hand
- PASI Scoring 6.6<sup>[6]</sup>

#### Samprapti ghatak

• Dosha- KaphaPradhanaVataAnubandhi

- Dushya- Rasa, Rakta, Mamsa, Ambu
- Srotas- Rasavaha, Raktavaha, Mamsavaha, Svedavaha
- Srotodushti- Sanga
- Ama- Sama
- Udbhavasthana- Amashaya
- Vyaktisthana- B/LAnklejoint and Hand

#### **Treatment protocol**

After proper clinical examination, patient was diagnosed with EkaKushthaand was advised to undergo Vamana Karma. i.e.

#### A. Purva karma

- Deepana pachana: Ladhusutashekhar-2 -2 -2 tab thrice a day, before food with luke warm water, Arogyavardhini vati 2-2 tab afer meal with Mahanajishtadi Kwath 10ml-10ml, Gandharva Haritaki Churna 2 gm at night with luke warm water was given until Nirama Lakshana appears, there after the patient was given Snehapana.
- Snehapana: Shodhanartha Snehapana with Mahatikta Ghrita given to the patient in increasing dose pattern, until Samyak Snigdha Lakshana appears, i.e. from 19/03/2022 -23/03/2022 Snehapanaa dministered and daily Jiryamana and Jirna Lakshana of Snehapana noted.

Table 2

Date	Time	Dose	Time of Hunger
19/03/2022	7.15am	30 ml	12.30pm
20/03/2022	7.15am	60ml	3.30pm
21/03/2022	7.00am	90ml	4.30pm
22/03/2022	7.00am	120ml	6.30pm
23/03/2022	7.30am	150ml	8.30pm

Vishrama kala: On 24/03/2022, Abhyanga with Murchita Tila Tail followed by Sarvang Sweda was done for 1 day and Kapha utkleshta Ahara was given to the patient.

#### B. Pradhana karma

- 1. Sarvang Snehana Swedana is Done.
- 2. The patient was told and counselled regarding the procedure and Patient sign was taken on informed Consent Form.

- 3. At first Blood Pressure (130/90 mm of Hg) and Pulse Rate (80/min) was monitored.
- $4. \ \ \textit{After Vamana Karma with Madhanphala Pippali} + \textit{Vacha} + \textit{Pippali} + \textit{Saidhav} + \textit{Madhu}$ Yoga administered to the patient, i.e. - On 25/03/2022,

Table 3

Time	Name of thedrug	Quantity	Vega	Upa- vega	Output	Sign, Symptoms	Vitals	Compli cation if any
7:25 AM	Dugdha	6Glass		1	Dugdha		Bp-130 /80mm Hg Pulse- 76/min	
7:30 AM	cc	2Glass	1		Dugdha + <i>kapha</i>			
7:35 AM	Medicine- Madhanphalapi palli Churna )=8gm, Pippali churna=3gm SaindhavaLavan a=1gm ,Vacha=2gm and Honey =Quantity sufficient						Bp-130/ 80mm HgPulse -78/min	
7:40 AM						Sweda- pravarti	Bp-120/ 90mm Hg Pulse- 110/min	
7:44 AM	Yastimadhu fanta	5Glass	1		Dugdha +kapha			
7:46 AM	cc	2Glass	1	2	Kapha+ Fanta		Bp-120/ 90mm Hg Pulse- 112/min	
7:48 AM	cc	1Glass		1	Kapha+ Fanta			
7:51 AM	cc	2Glass	1		Kapha+ Fanta		Bp-120/ 90mm Hg Pulse- 110/min	
7:55 AM	cc	1Glass		1	Kapha+ Fanta			

7:57 AM	2Glass	1		Medicine	Pulse- 110/min
8.00 LavanAudak	3Glass	1	1	Kapha+	Pulse-
AM Edvantidak	0 014.55	-	_	Fanta	116/min
8.04	2Glass	1		Fanta+	Pulse-
AM	201a88	1		Dugdha	116/min
8.05	1Glass	1	1	Lavanau	Pulse-
AM	IGIASS	1	1	dak+pitta	116/min
8:10	2Glass		2	Lavanaudak	Pulse-
AM	201888			Lavanauaak	86/min
8:15	2Glass		2	Lavanaudak	Pulse-
AM	ZGlass			Lavanauaak	86/min

#### C. Paschat karma

Samsarjana Krama advised as per Shuddhi attained, i.e. Samsarjana karma for 7 days was advised the patient, which contains 3 Anna Kala. In 1stAnna kalaPeyawas advised. Gradually Aharawas changed (Laghuto Guru Guna Pradhana), finally normal dietwas given in the evening of 7th day. on discharge medicines are-

- 1) Panchatikta Grita-30 ml rasyana kali upashipoti
- 2) Gandhak rasayan -2-2 tab after meal
- 3) Manjistadi kashayam- 3tsp -3tsp after meal
- 4) Arogyavardhini vati-2-2 tab after meal
- 5) Avipattikar Churna- 3 tsp with luke warm water at night

#### **OBSERVATIONS AND RESULTS**

### Observations onvamana karma

1st *Vega* starts at 7:30 AM, last *Vega* i.e. 8th *Vega* was observed at 8.05 AM. Depending upon observation done during the whole procedure below findings were noted.

Table 4

Sr. no.	Vamana Karma criteria	Remarks
1	Vacili	Uttam shudhi attained (i.e.8
1	Vegiki	Vega observed)
2	Lancibi	Samyak Vamana Lakshan
2	Lengiki	observed
3	Maniki	Madhyam (12.5 ltr)
4	Aantiki	Pittanta attained.

# Observations on Signs and Symptoms gradation scales

Table 5: Aswedanam.

Grade	Score
Normal	0
Improvement	1
Presenting Few Lesions	2
Presenting All Lesions	3
Aswedanam in Lesion and Uninvolved Skin	4

# Table 6: Maha-Vastu.

Grade	Score
No Lesions on <i>Mahasthanam</i>	0
Lesion on partial parts of hand, leg,	1
neck, scalp, back	1
Lesion on most parts of hand, leg, neck	2.
scalp, back	2
Lesion on whole part <i>Mahasthanam</i> (vast	3
area)	3
Lesion on whole body	4

# Table 7: Scaling.

Grade	Score
No Scaling	0
Mild Scaling by rubbing/ by itching	1
Moderate scaling by rubbing/ by itching	2
Severe scaling by rubbing/ by itching	3
Scaling without rubbing/by itching	4

# Table 8: Kandu.

Grade	Score
No Itching	0
Occasional Itching	1
Frequent but tolerate itching	2
Very severe itching disturbing sleep and	3
activity	

# Table 9: Daha.

Grade	Score
Absent	0
Occasional	1
Frequent <i>daha</i>	2
After itching started	3
Continues daha	4

# Table 10: Rukshata.

Grade	Score
Normal Skin	0

Slightly dry skin	1
Excessively dry skin	2
Lichenified	3
Bleeding through the skin	4

Table 11: Vaivarna.

Grade	Score
Normal discolouration	0
Slight discolouration	1
Reddish discolouration	2
Slight reddish black discolouration	3
Black discolouration	4

Table 12: Pidaka.

Grade	Score
Absent	0
Disappears but discolouration persists	1
Pidaka in<5sq.cms.in whole of the affected Area	2
Pidaka in between 5-10sq.cms.in whole	2
Affected area	3
Many or uncountable <i>pidaka</i> in whole of the	1
Affected area	4

Table 13: Vedana.

Grade	Score
Absent	0
Mild	1
Moderate	2
Severe	3

# **Pasi**

PASI scoring was calculated by using PASI worksheet of British Columbia, ministry of Health Service. On the Basis of Result found during treatment, observations were quoted below,

Table 14

	Before Snehapana	After Snehapana	After Vamana	After Samsarjan Karma
PASIscoring	6.6	5.4	2.4	0.8
Matsyashklopam (Scaling)	3	2	1	0
<i>Mandloutpati</i> (patches)	3	2	1	1

Kandu (Itching)	3	2	1	1
Rukshata (Dryness)	3	2	2	0
Vaivarnya	3	2	1	1

#### **DISSCUSION**

Kushta is a Kleda Pradhana and Bahu Dosha Vyadhi and it involves Saptako Dravya Sangraha in its manifestion. Chakrapani in Aragwadadi Adhyaya has highlighted the importance of *Bahirparimarjana* in *Kushta*. <sup>[7]</sup> The word *Parimarjana* means *Shodhana*. This can be considered as *Bahya Shodhana* procedure. [8] Psoriasis is a Papulo Squamous disorder of the skin, characterized by sharply defined erythematous squamous lesions. They vary in size from pinpoint to large plaques. At time, it may manifest as localized or generalized Pustular eruption. [9] Eka-Kushtha can be compared with Psoriasis, because the description and characteristic feature of it are similar with description of Psoriasis, i.e. Aswedanam (No sweatning) - The lesion of this disease are dry & rough, Mahavastu (Large area) - Lesions are found all over the body, Matsya Shakalopamam(Scaly patches) -Well-defined raised macules, papules, erythematic plaques which are covered with silvery scales. Krishna Arunavarnaerythematous lesion. It is counted as Kshudra Kustha. [10] As it is a disease of Bahyarogamarga, so both Antahparimarjana(Internal) and Bahir-parimarjana (External) treatments should be used. Considering the above facts, composite treatment plan was adopted. Initially Abhyantara Shodhana (Internal oleation) done with Vamana Karma and after completion of Samsarjana Krama (Dietery), Samshamana treatment was advised.

- Purva karma- The Purva Karma administered in the form of Deepana-Pachana and Snehapana. Purvakarma has the important action of separating the vitiated Doshas from the Dushyasi.e. Srotas in the body (Dosha-dushyasamurchana). It also helps in bringing the vitiated Dosha from Shakha to the Koshtha area in the body from where these vitiated Dosha can be removed from the nearest root of the body. [11]
- Abhyantra snehapana: The internal administration of Sneha used for Shodhana, Shamana, and Brimhana is known as Abhyantara Snehapana (internal oleation). Understanding the Acharyas' descriptions of Samyak Snehana's signs and symptoms namely, that Snehana denotes Snigdhata (unctuousness), Vishyandan (liquefication), and Vilayana—is crucial (dissolution or diffusion) While making comments, Dalhanacharya quoted To be soft is to be Vishyandanam Drava Srutihi, Mardavata. Kleda is dampness or moisture. Here, Kleda denotes the body's increased Apya Guna. Samyak Snigdha is

evaluated taking into account these *Gunas* as the main characteristics. *Sneha's* unctuousness in the body, stool, and skin can be considered (*Pureesha Twak and Gatra Snigdhata*). Stool excretion, either with *Sneha* present or not, is how *Vishyandana* is observed (*Snigdha Mala and Adhastat Snehadarsana*). *Gatra Mardava* evaluates *Mardavata*. *Asamhat Varcha*<sup>[13]</sup> the consistency of the stool, is used to evaluate *kledana*. The body's *Doshas* each have their own *Gati*, and during *VyadhitaAvastha* the *Doshas* will be intensified and might be present in *Shakhas* (periphery). The purpose of the *ShodhanaChikitsa* (Purification) is to remove these vitiated *Doshas* from the body either through the administration of *Vamanaby Urdhwamarga or Virechana by Adhomarga*. <sup>[14]</sup> Snehapana, which is directly dependent on Agni and Agnibala as a primary aspect, is aimportant element for achieving Shodhanaphala properly. Therefore, evaluating Agni before to Shodhanartha Abhyantara Snehana<sup>[16]</sup> is important.

- *Pradhan karma* Here, *Vaman* was used as a *pardhana karma*. Because *Ek-kustha* is a *Kapha Pradhana*, the optimum treatment for *Tridoshaja vyadhi* is the *Shodhana* procedure. Swedana will cause the smoothed Doshas to become liquid and reach *Koshtha*, where they can be quickly eliminated by the action of *Vamana*. Shodhana (*Vamana* and *Virechana*) may cause some endogenous alterations in the body that are in charge of easing the psoriatic pathological process.
- Samsarjanakrama— Samsarjan krama was carried out in the patient for 7 days/3 Aanakala considering the Pravara Shuddhi (Best shudhi). Due to shodhanagni got hampered So Samsarjana krama enhances agni as well as provide strength to the body after Vaman<sup>[19]</sup> Hence the patient was kept kept on laghu, pathyahar and discharged on 25-3-2022.

#### Mode of action

• Panchatikta grita: This is a very potent drug of choice in Kushtha Adhikar. It is indicated in Visham and Atiprabala Vata. Nimba, Guduchi, Patola, Kantakari, Vasa are the contents of Panch tikta. Here in Psoriasis though Kapha and vata are involved, to spread all these Doshas are carried by Vata itself. Tikta Rasa acts on both Vata and Kapha doshas. Ghrita is yogavahi dravya. Acts as Anti Itching property, Kled, Vikrut Meda upshoshana, Vranashodhaka (wound healing). [21]

- Aarogyavardhini rasa: It is Herbomineral fomulations. It is having Kushtahara, Durmedahara, Kledahara, Dhatu Gata Amapachana, Raktaprasadana, and also having Dipana-Pachana and Kapha-Vata Shamaka property, all these qualities are very much helpful for Samprapti Vighatan of Kushta. [22]
- Gandhakrasayan: It is having properties like Kushtagna, Rakta Doshahara, Vishaghna, Ropana, Rakta-Tvakgata Vishahara, Durmedhohara, Rasayana, Dhatubalya. all these properties are essential to treat EkaKushta. [23]
- Manjistadi kashayam:- This medicine is mainly used in treatment of various skin diseases. It also helps in natural purification of blood so can be used in skin related problems. It helps in blood detoxification and also dissolves the obstructions in blood flow. [24]
- Avipattikar churna:- This medicine is mainly used in treatment of various skin diseases. treatment of various skin diseases. It also helps in natural Pittasarak Kushthaghna, Medohara, Chedan Deepan, Pachana, Rakta Prasadak all these properties are essential to treat EkaKushta. [25]



#### **CONCLUSION**

We can conclude from this case study that combining Ayurvedic medicine with a food plan can be effective and helpful in treating Ekakustha (Psoriasis). Neither throughout the course of the treatment nor afterward, the patient experienced no side effects or worsening of the symptoms. To determine the statistically meaningful impact on both the disease and *Karma*, a comprehensive investigation with a bigger sample size can be conducted. Acharya suggested Puna Puna shodhana (Repeated Purification) for treating EkaKushta because it is a chronic and recurring condition. After Vamana Karma, further Shodhana therapies like Virechana and *Raktamokshana* can be used for improved outcomes.

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