

**A CASE STUDY OF AYURVEDIC MANAGEMENT OF  
PSORIASIS/EK-KUSHTH****Dr. Hetal Mori Jariwala\***

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**ABSTRACT**

Psoriasis is a chronic, multisystem inflammatory disease with predominantly skin and joint involvement. It is a long standing autoimmune disease characterized by patches of abnormal skin. It is non-infectious chronic inflammatory disease of skin characterized by well-defined erythematous plaques with silvery scale. Psoriasis varies in severity from small localized patches to complete body coverage. The disease not only affects the patient physically but also disturbs the mental and social health of the patient. There is no satisfactory treatment available for Psoriasis. Ayurvedic treatment can give promising results in such patients. In Ayurveda all skin diseases are described under the umbrella of *Kushtha* and in that Psoriasis is categorised under *Ek-Kushtha*. Repeated Shodhan Chikitsa followed

by various Shaman Yogas and Rasayan Chikitsa for continued remission are emphasized in treatment of Kushtha in all ancient Ayurvedic texts. In this article a case of psoriasis is being presented which was treated successfully with Ayurvedic management.

**KEYWORDS:** Psoriasis, Ekakushtha, Virechana, Shodhan Chikitsa, Shamana Chikitsa, Rasayana chikitsa.

**INTRODUCTION**

Psoriasis is papulosquamous disease i.e. papules or plaques are covered with scales. Psoriasis is non-infectious chronic inflammatory disease of skin characterized by well-defined erythematous plaques with silvery scale. Exact etiology is unknown, though the current thinking is that psoriasis is one of the commonest autoimmune diseases occurring in human. Familial occurrence suggests genetic predisposition. Mechanical, chemical or radiation

trauma can initiate or worsen psoriasis. Drugs like chloroquine, beta blockers & NSAIDs can worsen or induce psoriasis. Withdrawal of systemic corticosteroids in a patient with of psoriasis can precipitate an attack of erythrodermic or generalized pustular psoriasis. Summer improves psoriasis and winter worsens it. According to W.H.O. the world-wide prevalence of Psoriasis is 1-2%. It is spreading fast because of unsuitable life-style changes such as dietary pattern, busy schedule and stress. There is no satisfactory treatment available for Psoriasis. Pathology seen in psoriasis is that there is accelerated epidermal turnover and deficient keratinocyte maturation results in visible exfoliation of skin. Vascular changes lead to erythema whereas dense neutrophilic infiltrate may lead to formation of pustules. Initial lesion of psoriasis is a barely elevated erythematous papule topped by a whitish scale. Sometimes scales may not be evident unless the surface is stroked or scratched. Papules may enlarge or coalesce to form plaques covered with thick silvery scales. When the scales are removed, pinpoint bleeding is visible on the involved skin (Auspitz sign). Thus fully established psoriasis consists of well-defined rounded erythematous plaques covered with thick silvery scales. There may be variation in distribution such as scalp psoriasis, palmoplantar psoriasis, nail psoriasis.<sup>[1]</sup>

In Ayurveda majority of all skin diseases are described under the chapter of Kustha in Charak Samhita chikitsa sthaan. Vitiated doshas destroys the skin structure creating discolouration of skin. Kustha are divided into 2 types, (a) Mahakustha, (b) Kshudra Kustha. Mahakustha is again divided into 7 types and Kshudra Kustha is divided into 11 types.<sup>[2]</sup>

Commonly described etiological factors for development of Kustha are Viruddha Annapana, Drava Snigdha Guru Bhojan, Vegvidharana, eating during Ajeerna Avastha, Mitthyopacharin Panchakarma procedures etc. because of all these etiological factors all three doshas get vitiated and cause vitiation of twak (skin), Rakta (blood), mamsa dhatu (Muscular tissue) & Lasika (serum/lymph).<sup>[3]</sup> Symptoms of psoriasis can be correlated well with the symptoms of ekakustha and kitibh.<sup>[4]</sup>

Ekakustha is described as Vata-Kapha predominant disease having signs and symptoms as - Aswedanam (absence of sweating), Mahavastu (big size lesions) and Matsyashakalopamam (scaling). Symptoms of Kitibha are skin discolouration (Shyava Varna - blackish discolouration), Khara Sparsha (keratinized skin).<sup>[5]</sup>

## CASE REPORT

A 56-years male patient presented in Aarihant Ayurvedic Medical, Hospital, Panchkarma OPD with complaints of erythematous plaques over both legs. It was associated with scaling. Auspitz sign was positive. He was not having any past history of major medical and surgical illness. Patient was taking allopathic treatment for the psoriasis but, did not get much relief. So patient approached for Ayurved treatment.

## MATERIALS AND METHODS

Assessment Criteria.

Aswedanam (Absence of Sweating)

Normal Sweating	0
Mild Sweating	1
Mild Sweating on exercise/exertion	2
No Sweating after exercise/exertion	3

Mahavastu (Big size lesion)

No lesion	0
Lesion on partial part of body (Hands and feet)	1
Lesion on most part of body (Abdomen and back area of body)	2
Lesion on almost whole part of body	3

Matsyashakalopamam (Scaling)

No scaling	0
Mild scaling from all lesions	1
Moderate scaling from all lesions	2
Severe scaling from all lesions	3

Skin Discouration (Shyav Varnata)

No discoloration	0
Discolouration on partial part of body.	1
Discolouration on most part of body.	2
Discolouration on whole part of body.	3

## Treatment given

Dipana Pachana Chikitsa followed by Shodhana and then Shamana Chikitsa.

1. Deepana Chikitsa - Hingwasthak Churna 5gms 2 times a day before meal with ghrit anupan for 3 days.

2. Pachana Chikitsa- Musta (*Cyperus rotundus*) and Shunthi (*Zingiber officinale*) Kwatha (Decoction as mentioned in mentioned in Sharangdhara Samhita) given 20ml BID after meal for 3 days.

Chitrakadi Vati 250mg 2 tabs 3 times a day with lukewarm water was given during Deepana Pachana Chikitsa.

3. Snehapan with Tiktaka Ghrita given in morning at 7:00 am for 7 days with increasing quantity of Ghrita every day, Anupana - Koshna Jala (Luke warm water).

- a) 1<sup>st</sup> Day - 30ml Ghrita.
- b) 2<sup>nd</sup> Day - 60ml Ghrita.
- c) 3<sup>rd</sup> Day - 90ml Ghrita.
- d) 4<sup>th</sup> Day - 120ml Ghrita.
- e) 5<sup>th</sup> Day - 150ml Ghrita.
- f) 6<sup>th</sup> Day - 180ml Ghrita.
- g) 7<sup>th</sup> Day - 210ml Ghrita.

Sneha Siddhi Lakshan were continuously monitored. Patient was asked to stop snehapana after 7 days as Sneha Sansiddhi Lakshan were observed.

1. Then for 2 days Sarvang Snehana, Sarvang Swedana was given - Snehana with til oil, Swedana with Dashmool Bharad kwatha.
2. On Third day after Snehapana - Virechana was given: Kalpa prepared for Virechana – Cows milk 60 ml plus Abhayadi Modak 4 tablets were given. This preparation was given orally to patient at 9:30 am in the morning after Snehana and Swedana. After one and half hour Virechana Vega (Loose Motion) was started. Ten Virechana Vega (Loose Motion passed) in 12 hours. Pulse Rate and Blood Pressure after Virechana were within normal limit. Sansarjana Karma (rules about diet after Shodhana Chikitsa) advised for 5 days.
3. Shamana Yoga was started 5 days after Virechana. Treatment given Kaishora Guggulu, Gandhaka Rasayana, Mahamanjishthadi Kwath<sup>[6]</sup> 30ml 2 times a day. Jatyadi taila was advised for local application.

**BEFORE TREATMENT****AFTER TREATMENT****DISCUSSION**

In above case study patient got satisfactory relief from symptoms of psoriasis. Ayurveda has Panchakarma Chikitsa as its unique specialty. In this case study Virechana Chikitsa showed good results along with Shamana Yoga. In Kustha Chikitsa according to Acharya repeated Shodhan Chikitsa should be given to Kustha patient. According to text Virechan should be given every month. Virechana Chikitsa is indicated for vitiated pitta and Kapha Dosha. In this case patient was having symptoms of Tridosha vitiation with predominance of Vata and Kapha Dosha. Virechan Chikitsa helps to remove vitiated Dosha from body. Shaman Yoga was given as a combination of Kaishor Guggul 500 mg bid, Gandhak Rasayan 250 mg bid and Mahamanjishthadi Kwatha 20 ml along with local application of Jatyadi taila.

Rasayana Chikitsa was also given with Tiktaka Ghrita 10ml orally on empty stomach. Main content of Kaishora Guggulu is Guduchi, Triphala, Trikatu, Vidanga, Pippali, Chitraka, Dantimool and Nishotha along with Guggulu. This Kalpais useful for vitiated Kapha Dosha & Rakta Dushti. Guduchi is Agrya medicine for vitiated Vata Kapha Rakta. And other content

like Vidang, Trikatu, Danti Pippali, Chitraka are very good medicine for Vata Kapha. They reduce excessively accumulated Kleda at the affected region. Gandhak Rasayana is drug of choice for the vitiated for Pitta Dosha, this combination of Kaishor Guggulu and Gandhak Rasayana found to very much useful in this case of psoriasis. These 2 medicines were given with Anupana as Mahamanjishthadi kwath. Contents of Mahamanjishthadi kwath<sup>[6]</sup> are Ananthamoola, Daruharidra, Devdaru, Haritaki, Kantakari, Manjishtha, Vacha, Baheda, Chirata and Nimba. This Kwatha has Kledaghna, Kaphaghna and Rakta Shodhan property. Patient was advised for local application of Jatyadi taila twice a day at affected part. This local application act by Shodhanaand Ropan Chikitsa. Rasayana Chikitsa was given with Tiktak Ghrita orally. It acts to pacify Vata and Kapha Dosha. It also provides internal oleation which is important part of the psoriasis treatment.

## CONCLUSION

In this case study marked improvement was seen in patient of psoriasis. The treatment so planned was helpful in Aampachan, removal of vitiated Dosha from body and bringing Samyavastha (balanced condition) of Doshas. Also it improved Vyadhikshamatwa of patient and hence the treatment was effective to relieve the symptoms and induce remission.

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