



AYURVEDIC MANAGEMENT OF SHEETAPITTA -A CASE REPORT

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ABSTRACT

Sheetapitta is one of the common clinical conditions of the skin that occurs due to exposure of a person to cold wind which aggravates *Vata* and *Kapha Doshas*. Vitiated *Vata* and *Kapha Doshas* associate with vitiated *Pitta Dosh* which gets lodged in the skin and vitiates *Raktadi Dhatus* also. Some Ayurvedic scholars consider *Sheetapitta*, *Udarda*, and *Kotha* as single clinical entities as there is no major difference in the signs and symptoms of these three clinical conditions. Though all three vitiated *Doshas* are involved in *Sheetapitta*, *Udarda*, and *Kotha*, dominance of vitiated *Vata Dosh* is found in *Sheetapitta*, and dominance of vitiated *Kapha Dosh* is found in *Udarda*. The clinical features of *Sheetapitta* include raised skin patches (wheals), *Kandu* (itching), *Toda* (pain), *Chardi* (vomiting), *Jwara* (fever), and *Vidaha* (burning sensation). The clinical features of urticaria are similar to the clinical features of *Sheetapitta*. Ayurvedic management of *Sheetapitta* includes *Snehpana*, *Svedana*, *Vamana*, *Virechana*, *Rakta moksana*, and the whole treatment protocol indicated in the management of *Kushtha*. A 54-year-old female patient with having chief complaint of repeated episodes of itching and rashes all over body since last 5-6 years was admitted for 21 days in P.D. Patel Ayurveda Hospital, Nadiad. She was diagnosed with *Sheetapitta* and treated with *Snehpana* with *Panchatikta Ghrita*, *Abhyanga*, *Svedana*, *Virechana* and *Raktamoksana*. She was also given oral medicaments including *Kaisor Guggulu*, *Dhanvayasa Kvatha*, and *Haridra Khanda*. A patient got satisfactory relief in itching and rashes after the treatment.

KEYWORDS: Ayurveda, *Rakta mokhana*, *Sheetapitta*, Urticaria, *Virechana*.

INTRODUCTION

Sheetapitta is one of the common clinical conditions of the skin that occurs due to exposure of a person to cold wind which aggravates *Vata* and *Kapha Doshas*. Vitiated *Vata* and *Kapha Doshas* associate with vitiated *Pitta Dosh* which gets lodged in the skin and vitiates *Raktadi Dhatus* also. Some of the Ayurvedic scholars consider *Sheetapitta*, *Udarda*, and *Kotha* as single clinical entities as there is no major difference in the signs and symptoms of these three clinical conditions. Though all three vitiated *Doshas* are involved in *Sheetapitta*, *Udarda*, and *Kotha*, dominance of vitiated *Vata Dosh* is found in *Sheetapitta*, and dominance of vitiated *Kapha Dosh* is found in *Udarda*. The clinical features of *Sheetapitta* include raised skin patches (wheals), *Kandu* (itching), *Toda* (pain), *Chardi* (vomiting), *Jwara* (fever), and *Vidaha* (burning sensation).^[1] The clinical features of urticaria are similar to those of the *Sheetapitta*.

It is estimated that about 1 in 5 people will have urticaria once in their lifetime and this seems to be the case across all age groups. Up to 1% of the population suffers from

chronic urticaria (CU) and all age groups appear to be affected, although the peak incidence is between 20 and 40 years of age.^[2] Urticaria is a disease characterized by itchy red rashes on the skin almost all over the body. Urticaria is produced due to localized oedema of dermis secondary to a temporary increase in capillary permeability. Acute urticaria is present for less than a week and chronic if persists for more than 6 weeks. Urticaria is triggered by a wide variety of antigens or by physical stimuli, including sunlight, cold, and pressure. Management of urticaria depends on its severity and duration. In acute urticaria antihistamines (diphenhydramine) or nonsedating agents (terfenadine, cetirizine, loratadine), and short-term corticosteroids (up to 1mg) can be given. In chronic urticaria antihistamine cyclosporine at doses 3mg/kg or higher for 8 to 16 weeks can be given.^[3] All these medicaments have several harmful effects on long-term use. In some cases, the disorder is relatively mild, recurrent, and frustrating other cases, it manifests as a part of a spectrum of systemic anaphylaxis, which may be life-threatening.

The disability and distress caused by Urticaria can lead to serious impairment in quality of life.

Ayurvedic management of *Sheetapitta* includes *Snehpana*, *Svedana*, *Vamana*, *Virechana*, *Rakta moksana*, and the whole treatment protocol indicated for the management of *Kushtha*.

Patient Information

A 54-year-old female patient was admitted on 27/05/2022 in the post-graduate department of *Panchakarma*, P.D. Patel Ayurveda hospital of J.S. Ayurveda Mahavidhyala, Nadiad, Gujarat.

Clinical Findings

The detailed history of the patient revealed that she had started eruption of red patches with itching all over body on and off since last five years. The condition was getting worse with an intake of sour food items and the rainy season. She was taking allopathic medicine levocetirizine 10mg /day which was providing little relief in itching and rashes (Table 1). Hence, she came to this hospital to get Ayurvedic treatment for her disease. She had no relevant family or past history of the disease. There was no genetic predisposition.

Routine hematological and urine investigations were carried out to exclude any other clinical conditions. It was found in normal limits.

Her cardiovascular, pulmonary, abdomen, lymphatic, and locomotor examinations were normal. Skin examination revealed multiple erythematous wheals on the arms, legs, abdomen, and back.

MATERIAL AND METHOD

The Ayurveda treatment given during the hospitalization is mentioned in Table no 2.

The patient was given rice, boiled green gram, boiled vegetables, and 10gm *Chyavanprasha* in the morning with warm milk during the treatment period.

RESULT

The patient was getting much relief from itching and eruption of wheals. After *Snehpana* itching was decreased from VAS scale of 9 to 6, the eruption of wheals was decreased to 5 to 7. After *Virechana karma*, itching was decreased from VAS scale 6 to 4, and the eruption of wheals was decreased up to 4 to 6. At the time of discharge, itching was decreased from vas scale 4 to 1, and eruption of wheals was decreased up to 1 to 2. The patient was regularly followed up after every interval of 15 days. Itching and wheals disappeared. (Table no 3) (image no 1,2).

Table 1: Case Timeline.

June 2018	the patient has begun eruption of 5 to 10 upper lower extremities wheals and itching vas scale 5 in monsoon season relived by antihistamine drugs.
June 2019	Again, re eruption of wheals 4 to 5 on upper lower extremities and back wheals itching vas scale 7 relived by antihistamine drugs.
March 2022	Again, re eruption of wheals 5 to 10 on upper lower extremities, abdomen, back wheals itching vas scale 9 relived by antihistamine drugs.

Table no 2: Treatment details.

DATE	TREATMENT
27/5/2022	<i>Snehpana</i> with <i>Panchatikta ghrita</i> 40 ml twice a day (morning and evening) with <i>Usnodadaka</i>
28/5/2022	The dose of <i>Panchatikta ghrita</i> was increased to 55 ml twice a day with <i>Usnodaka</i>
29/5/2022	The dose of <i>Panchatikta ghrita</i> was increased by 70 ml twice a day with <i>Usnodadaka</i> with this <i>Samyak Snigdha Lakshana</i> was observed in the patient
30/5/2022 & 31/5/2022	<i>Sarvanga Abhyanga</i> with <i>Jatyadi Taila</i> and <i>Sarvanga Bashpa Svedana</i> with <i>Nimba Patra</i> was advised.
1/6/2022	<i>Sarvanga Abhyanga</i> and <i>Sarvanga Bashpa svedana</i> were given then <i>Virecana karma</i> with <i>Dindayala Churna</i> 5 gm and <i>Eranda Sneha</i> 50 ml with <i>Draksha Kvatha</i> given. The patient got 20 <i>Virechana Vega</i> .
2/6/2022 to 4/6/2022	<i>Sansarjana krama</i> for 3 days
5/6/2022 to 8/6/2022	<i>Sarvanga Abhyanga</i> and <i>Sarvanga Bashpa svedana</i> were given then <i>Niruha basti Pathyadi Kvath</i> 320 ml empty stomach. <i>Haridrakhanda</i> 3 gm twice a day orally with water. <i>Dhanvayasa kvath</i> 40 ml twice a day empty stomach. <i>Kaisor Guggulu</i> 3 tab (250mg) thrice a day with warm water after meal.
09/6/2022	<i>Niruha basti</i> and oral medication given as above, <i>Siravedha</i> was done from the right median cubital fossa and approximately 50 ml bloodletting was done.
10/06/22 to 15/06/22	<i>Niruha basti</i> and oral medication given as above,
16/06/22	Oral medication was given as above, The patient got discharged.

Table no. 3: Improvement in signs and symptoms.

Sign and Symptom	B. T	A. T
Itching	8	2
Eruption of red patches all over the body	9	2

**Image no 1: Before treatment.****Image no 2: After treatment.**

DISCUSSION

Sheetapitta is involved of all three vitiated *Doshas*. *Shodhana* procedures including *Virecana* and *Niruha Basti* cause the elimination of vitiated *Doshas* out of the body. The vitiated *Doshas* eradicated by *Shodhana* procedures do not get aggravation again easily and hence help prevent the recurrence of the disease.^[4] The whole treatment protocol of the disease *Kushtha* is indicated for the management of *Sheetapitta* by *Yogaratanakara* and *Bhavaprakasha*. *Panchatikta Ghrta* is indicated in the management of *Kushtha* hence it was used for *Abhyantara Snehapana* in this patient.^[5] *Sarvanga Bashpa Svedana* was given with *Nimbapatra* by considering its *Kushthaghna* effect. *Jatyadi Taila* is commonly used in skin conditions, especially in the condition of rashes hence it was used for *Abhyanga* in this patient.^[6] *Dhanvayasa Kvatha* and *Haridrakhanda* are indicated in the management of *Sheetapitta* by *Yogaratanakara* and *Bhaishajyaratnavali*^{[7][8]} respectively. *Kaishore Guggulu* is also used routinely in the management of *Kushtha* hence all three oral medicaments were given to this patient. In *Kaishor Guggulu* contents are prominence of *Tikta Rasa*, which pacifies *Pitta Dosh* and *Tikta Rasa* is also *Deepan*, which improves *Agni* and *Pachana Karma* helps in *Ama Pachana*. *Tikta* and *Kashaya Rasa* also decrease the *Kleda Guna* of *Rakta*, *Kapha*, and *Ama*. *Raktamokshana* is indicated in the management of diseases where *Raktadushti* is involved in the disease process hence *Raktamokshana* by *Sira Vedha* was also

performed in this patient.^[9] Elimination of vitiated *Doshas* by *Shodhana* therapy and their pacification by oral medicaments provided relief in signs and symptoms of *Sheetapitta* including itching and rashes in this patient.

CONCLUSION

Based on this single case report, it can be concluded that the Ayurved management including *Abhyanga*, *Svedana*, *Virechana*, and *Rakta moksana*, as well as oral medicaments, are useful in the treatment of *Sheetapitta*. This treatment protocol should be followed in a greater number of the patients of *Sheetapitta* for its scientific validation.

PATIENTS PERSPECTIVE

The patient – “When I came to this hospital, I had itching and rashes all over my body and Now after the treatment, I have much relief from all symptoms I was taking allopathic medicine but I got recurrence after taking sour food items and in monsoon. but here after *Virechana karma* and other Ayurveda treatments.

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