



**AYURVEDIC MANAGEMENT OF PSORIASIS (*EKAKUSHTHA*): A CASE STUDY**

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**ABSTRACT**

Psoriasis is a chronic inflammatory genetically determined multisystem disease affecting 0.44% to 2.8% of the Indian population. Psoriasis has been found to be associated with obesity, metabolic syndrome, and cardiovascular system. The disease occurs equally in both sexes. Indian male however is affected twice as female and prevalence from 0.44% to 2.5% psoriasis is the hyperproliferative keratinolytic disease. Psoriasis is the inflammatory skin disease which most commonly affects extensor surface of elbow knee scalp, nails, trunk, and the sacral region. Psoriasis is an autoimmune disease in which scaling and itching in the papulo-squamouse lesion of skin disturb the *Dincharya* (daily routine). The Ayurvedic diagnosis is considered as *Ekakushtha* which is Vata Kapha predominant *Kshudrakushtha*. The unique type of treatment in psoriasis is *Panchkarma* i.e. *Shodhana*. Here an effort was made to treat 45 -year male patients diagnosed case of plaque psoriasis. Having symptoms like scaly plaques, redness, and itching. In this study the assessment was done with PASI score. As the principle of the treatment of all type of *Kushtha* is *Sanshodhana* along with *Sanshaman* drug. For the assessment parameter of improvement PASI (psoriasis severity index) score was taken.

**KEYWORD:-** Psoriasis, *Ekakushtha*, *Sanshodhana*, *Sanshaman*, PASI score.

**INTRODUCTION**

In Ayurvedic classics skin is included in five Gyanendriya Adhishtana which is related to Sparshadnyanam. Acharya Sushruta explain the seven layers of skin and disease related with particular layer.<sup>[1]</sup> According to Ayurvedic Samhita almost all skin disease included under the name *kushtha*. In Charak Samhita Acharya Charaka explains the sign and symptoms of *Ekakushtha* like *Aswedanam* (lack of sweating), *Mahavastu* (broad based), *Matsyashakalopam* (looks like scales of fish), which may be correlated with psoriasis.<sup>[2]</sup> And Acharya Sushruta explain symptoms as *Krishna Arun Varnata*.<sup>[3]</sup> In the present era, it is spreading fast due to unsuitable life style i.e. *Dincharya*. psoriasis is a chronic inflammatory, hyperproliferative skin disease. It is characterized by well-defined erythematous scaly plaques, particularly affecting extensor surface and scalp, and usually follows a relapsing and remitting course. Psoriasis affects approximately 1.5-3% of Caucasians and less common in Asian.<sup>[4]</sup> It occurs equally in both sex and at any age. The age of onset follows a bimodal distribution with an early onset type in the teenage or early adult years, often with family history of psoriasis and more severe disease occurs. The pathogenesis of psoriasis is multifactorial and genetic and environmental

factors are important. Due to excessive multiplication of cells in the basal layer leads to epidermal proliferation, this is the main abnormality in psoriasis. Plaque psoriasis is the most common presentation and usually represents more stable disease. There is no complete cure for disease. Due to this patient suffer from mental and social distress.<sup>[5]</sup> According to Acharya Charaka, all *kushtha* are *Tridoshaj* and in *Ekakushtha* there is predominance of *Vata* and *Kapha* Dosh.<sup>[6]</sup> In this case study, we had given the treatment like *Virechan*, *Takradhara*, *Nasya*, *Lepa* along with oral medication and most important *Pathya-Apathya*.

**AIM AND OBJECTIVE**

To evaluate the effect of Ayurvedic management in *Ekakushtha* (Psoriasis).

**CASE REPORT**

History of present illness A 45-year-old male patient came to skin OPD of Government Ayurved college, Nanded, Maharashtra, India. Presented with C/O scaly silvery plaques on extensor surface of both fore arm, Trunk, Scalp, redness, and itching over there in the last 2 year. For the presented complains he was taken treatment from various hospitals, but he did not get relief before

came to our hospital. Patient did not have any other major illness or family history.

RS: AEBE clear. RR: 22/min. P/A: soft  
Blood investigation – Hb %: 11 gm/dl BSL (R): 94

### History of past illness

Patient has no any history of major illness, trauma.

### General examination

#### Vitals

Pulse – 70/min.

CVS: S1S2 normal

BP – 110/70 mmHg

CNS: conscious, oriented.

Temp: Afebrile

### Diagnosis - *Ekakushtha* (Psoriasis)

Sign and symptoms	
Aswedanam (lack of sweating)	Present
Mahavastu (broad based)	Present
Matsyashakalopam (looks like scales of fish)	Present
Vivarnata	Present

Treatment given: - Firstly, ayurvedic Shamana therapy was given.

Sr. no	Medicine	Dose	Time	Anupan
1	Aampachak vati	500mg BD	Before meal	Lukewarm Water
2	Raspachak Vati	500mg BD	After Meal	Lukewarm Water
3	Raktapachak Vati	500mg BD	After Meal	Lukewarm Water
4	Arogyavardhini vati	500mg BD	After Meal	Lukewarm Water
5	Pachatikta Ghrut Guggulu	500 mg BD	After meal	Lukewarm water
6	Triphala Churna	3gm OD	Bed Time	Lukewarm Water
7	Syrup Khadirarishtha	20ml BD	After Meal	Lukewarm Water
8	Nimba+Guduchi churna	3gm BD	After meal	Lukewarm Water
9	Syp Rubiclin	20 ml BD	After meal	Lukewarm Water
10	Tab Gandhak Rasayan	500mg BD	After meal	Lukewarm Water

Medicine for external application – 1. Indrayava + vidanga churna Lepa with Nimb Tail, Winsoria oil.

### Shodhan chikitsa

**Pachan** – with Triphala 1 part + Musta 1 part + Shunthi ½ part} – 3 gm BD with Lukewarm water before meal for 3 days.

### Snehpan (oleation)

*Snehpana* was given with *Panchatiktak Ghrita* in the morning until *Snehsidhi Lakshana* were seen with increasing quantity of *Mahatiktak Ghrita* every day with *Anupana Koshna Jal* (lukewarm water).

Day & Date of <i>Snehpana</i>	Quantity of <i>Ghrita</i>
1 (22/02/2024)	30ML
2 (23/02/2024)	60ML
3 (24/02/2024)	90ML
4 (25/02/2024)	120ML

After 5 days *Samyak Snehsiddhi Lakshana* were seen then 2 days *Sarvang Snehana Swedana* was given on day third *Virechana* was given.

3. *Virechana*: Medicine for *Virechana* with their dose:  
Dated 27/02/2024

### ASSESSMENT CRITERIA

Assessment criteria was taken by PASI score.<sup>[7]</sup> (before treatment)

Symptoms	Right Arm	Left Arm	Scalp	Front of trunk
Redness	3	3	3	5
Thickening	2	2	2	4
Scaling	3	3	3	3
Area affected %	4	4	4	5

Firstly, we were prepared *kwatha* as well as Phant has described in *Sharandhar Samhita*. By given above mentioned medicine at 9 am then after half hour *Virechan vega* were started. Vitals such as BP, pulse, HR were monitored after every 30 min. We got a normal reading of BP, pulse after *Virechana karma*. Total 20 *Virechana Vega* were seen in next 5 hours and *Sansarjan krama* were given for 5 days.

4. *Takradhara* with *Amalki* and *Musta Siddha Takra* for 28 days in the morning at 9:30 am for 30 min.

5. *Nasya* -after *Snehan Swedan* two drops of *Anutaila* administered in both nostrils in the morning for 28 days.

$$PASI = [(3+2+3) *4] *0.2+ [(3+2+3) *4] *0.2+ [(3+2+3) *4] *0.2+(5+4+3) *5} *0.3=37.8$$

**OBSERVATIONS AND RESULTS**

PASI score. (After the ayurvedic treatment)

Symptoms	Right arm	Left arm	Scalp	Front of trunk
Redness	0	0	0	0
Thickening	0	0	0	0
Scaling	0	0	0	0
Area affected %	0	1	1	0

Symptoms Right arm Left arm Back of trunk Redness 0 0 0, Thickening 0 0 0, Scaling 0 0 0 Area affected % 0 1 1 0 In above case study patient got complete relief from symptoms like scaly silvery plaques on extensor surface of both fore arm, redness, and itching. In Ayurveda these symptoms are correlated with *Ekakushtha* (Psoriasis). PASI score before the treatment was 20 and after the Ayurvedic treatment is 0.5. From the above observation, this shows that Ayurvedic *Shamana* and *Shodhana Chikitsa* relieves the symptoms of *Ekakushtha* (Psoriasis).

**DISCUSSION**

*Ekakushtha* is a type of *Kshudrakushtha* which have a dominance of *Vata* and *Kaph Dosha*. The vitiated *Dosha* reaches to *Dushya Twacha* and leads to *Sthana Samshraya Avastha* which further leads to signs and symptoms like *Ekakushtha* (Psoriasis). *Acharya Charaka* explained that in *Kushtha* whole skin is loosely in nature but the lesions are present where the dominancy of *Dosha*. In this disease the symptoms like *Matsyashakalopam* i.e., silvery scales, *Mahavastu* i.e., broad based and *Aswdanam* i.e. lack of sweating is present. According to ayurvedic classics the line of treatment for *Kushtha* is *Nidan Parivarjanam, Shodhan Snehana, Swedana, Shaman, Lepana, Raktamokshana* etc. Probable Mode of Action of Therapy In this case study *Shaman* treatment, *Shodhan* treatment along with *Dhatupachak* therapy showed good result. *Virechan karma* helps to remove dominancy of *Vikruta Dosha*

from the body. *Shaman Chikitsa* i.e., *Panchatikta Ghrit Guggulu, Arogyavardhini Vati, Khadirarishtha, Mahamanjisthadi Kadha, Syp Rubiclin* has *kushthaghna* and *Rasayana* effect on skin. Counseling for stress management because psoriasis is the psychosomatic disease. *Anutaila Nasya* was given which spreads into various *Srotasa* and eliminated the vitiated *Dosha* and give nourishment to the nervous system which helps to remove the increased *Dosha* and relieves the symptoms of *Ekakushtha* (Psoriasis). For local application i.e., *Lepa, Indrayava* and *Vidanga* with winsoria oil and nimb Taila was given which act as *Kushthaghna, Krimighna* and helps to relieves the symptoms.

**CONCLUSION**

In this case study Ayurvedic medicine and *Panchakarma Chikitsa* has Excellent result. The treatment given for *Ekakushtha* (Psoriasis) *Deepan Pachan, Shodhan, Shaman Chikitsa* and *Dhatupachak* therapy which help in elimination of vitiated *Dosha* from the body and balance the condition of *Vikruta Dosha*. So above ayurvedic treatment helps to reduce the symptoms of the disease. No any adverse effect was found in the patient during and after the treatment.

**Before treatment**



**After Treatment****REFERANCES**

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