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A CASE STUDY ON PALMOPLANTAR PSORIASIS (*VIPADIKA*) WITH AYURVEDIC MANAGEMENT

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ABSTRACT
Psoriasis is a noncontagious, autoimmune condition that affects the skin and the joints. It can appear almost anywhere on the body, but it most frequently affects the arms, legs, scalp, lower back, and upper torso. Palmoplantar psoriasis usually affects the palms of the hands and the soles of the feet specifically. Palmoplantar psoriasis is second most common type of psoriasis after chronic plaque psoriasis. It has 3-4% of total psoriasis cases. According to Ayurveda palmo-plantar psoriasis can be diagnosed as '*Vipadika*' and the efficacy of ayurvedic treatment was assessed. In present case of palmoplantar psoriasis Two times assessment was done with the PPPASI score. One before the treatment and second after the treatment. In present case firstly 15 days of *shaman* treatment was followed by *shodhana* treatment. And clinically meaningful improvement was noted in scaling, itching, thickening, fissuring, and pain during working etc. without recurrence. This shows that ayurvedic treatment is very useful in management of diseases like psoriasis.

KEYWORDS: Psoriasis, Palmo-plantar psoriasis, Ayurveda, PPPASI, *Vipadika.*

INTRODUCTION
Psoriasis is a noncontagious, autoimmune condition that affects the skin and the joints. It can appear almost anywhere on the body, but it most frequently affects the arms, legs, scalp, lower back, and upper torso. Palmoplantar psoriasis usually affects the palms of the hands and the soles of the feet specifically.[1]

Among all skin diseases, prevalence of psoriasis in india is about 1.02%.[2] In which chronic plaque psoriasis is the commonest having 90% of prevalence among all psoriasis followed by palmo-plantar psoriasis.[3]

Diagnosis of psoriasis is clinical as characterized by itching, scaling, fissuring, area of involvement, redness etc. In palmo-plantar psoriasis the affected area which is limited to palm of hands and soles of legs in some cases it may be one of the parts of common plaque psoriasis. There is no specific management of palmoplantar psoriasis only symptomatic treatment is given in modern medicine.

According to Ayurveda there is no direct reference of palmoplantar psoriasis but the condition *Vipadika* resembles with palmoplantar psoriasis. For sustained relief patient came to ayurvedic hospital. The present study represents a case of Palmoplantar psoriasis which was managed by ayurvedic medicines and shodhana. Written consent was taken from the patient for the publication of present case.

CASE DESCRIPTION
A 55 year old male patient came to Govt. Ayurvedic Hospital, Osmanabad (28.11.2017) with the complaints of fissuring, scaling and itching on palms and soles, redness on both palms, difficulty during walking due to fissures in both soles since one year (2016). He has been taking allopathic medicines for skin lesions. There was burning sensation before fissuring. The lesions were gradually progressive & the onset was insidious. Patient was diagnosed as Palmo-plantar psoriasis & took allopathic treatment for 6 months but didn't get sustained relief.

At the time of examination, patient had severe fissuring with redness and burning sensation on both palms and sole, mild scaling on both palms and soles. The lesions were bilaterally symmetrical. Over the soles, instep and sides of feet were involved (Fig. 1). The disease was symptomatic causing severe fissuring, burning sensation, and difficulty in walking or doing work (Table 1). There were no psoriatic nail changes and no associated psoriatic arthritis. Psoriasis was not present at other sites except palms and soles. Distal sole and toes were not

involved. Web spaces were not involved and sparing of skin over creases of palms is noted. No increased pigmentation found. The condition was progressive and creating anxiety to the patient. Fasting blood sugar (FBS) and post prandial blood sugar (PPBS) levels were normal. Renal function tests, routine haematological investigations like haemoglobin, total leukocyte count, differential leukocyte count, platelet count, and erythrocyte sedimentation rate and lipid profile were found within normal limits.

Diagnosis, Assessment & Treatment Patient was diagnosed as having 'Palmo-plantar psoriasis' and according to Ayurveda, diagnosis of '*Vipadika*' is made.

Diagnosis of Palmo-plantar psoriasis is made clinically based on history and findings of thorough dermatological examination.

To measure the efficacy of the treatment, the clinical findings before and after the treatment were assessed with the PPPASI score. Total two assessments were carried out; one before starting Ayurvedic treatment, second after completion of treatment. The main objectives of the treatment were, to provide relief in signs & symptoms of Palmo-plantar psoriasis. Strict diet plan along with life style changes were implemented during treatment.

Diagnosis – Palmoplantar psoriasis (*Vipadika*)

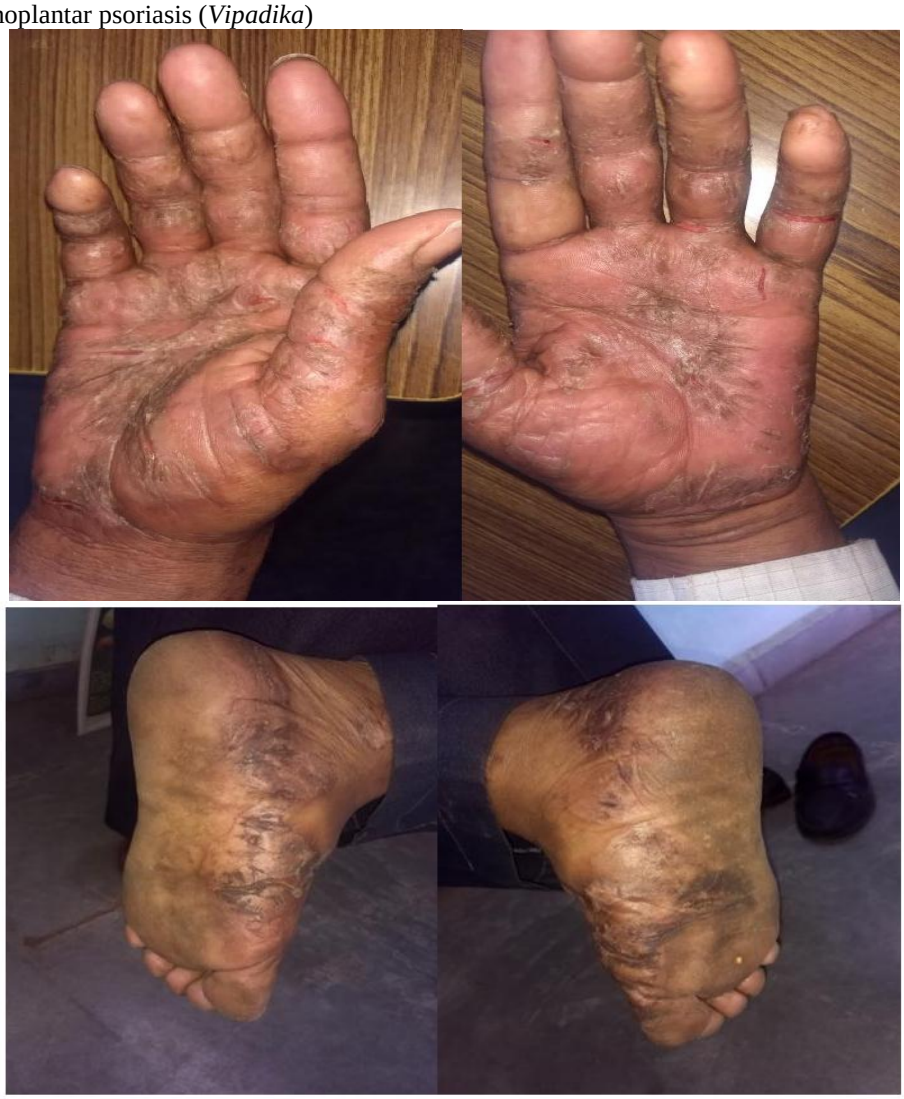

Fig. 1: Before the Ayurvedic treatment Signs and symptoms.

Table 1: Signs and symptoms of Palmoplantar psoriasis before the treatment.

Fissuring	Present
Itching	Present
Burning sensation	Present
Scaling	Present

Criteria of assessment for the Palmoplantar psoriasis- PPPASI.[4]

Table 2: PPPASI scoring before the Ayurvedic treatment.

Symptoms	Rt. Palm	Lt. Palm	Rt. Sole	Lt. Sole
Erythema	3	3	3	3
Pustules	1	1	2	2
Desqumination	4	4	4	4
Area affected %	5	5	5	5

PPPASI = [(3+1+4)*5]*0.2+ [(3+1+4)*5]*0.2+ [(3+2+4)*5]*0.3+ [(3+2+4)*5]*0.3 = 43

Treatment Given

Firstly ayurvedic *shamana* treatment was given for 1 month which is followed by *shodhana* (Panchkarma) in which *virechana* karma was done.

1. *Shamana* treatment

Table 3: Internal medicine for *Shaman* with their dose and time.

Sr. No.	Name of medicine	Dose	Time	Anupana
1.	*Sutshekhar Rasa*[5]	250 mg OD	At morning	With luke warm water
2.	*Panchtikt ghrut guggulu*[6]	500 mg BD	After meal BD	With luke warm water
3.	*Maha manjishthadi kwath*[7]	20 ml BD	After meal	With same amount of water
4.	*Haritaki churna*	3gm OD	At bed time	First 7 days with warm water, after that with ghrut.

Medicine for external application

Shatdhaut ghrut[8] BD for local application

2. *Shodhan* (Panchakarma) treatment – *Virechana* (therapeutic purgation)

a. *Pachan* and *rukshan* medicines- Given for 5 days

Table 4: *Pachan* and *Rukshan* medicine with their dose,*Anupana* and time.

Sr. No.	Medicines	Dose and Anupan	Time
1.	*Amlaki*(Emblica officinalis) 1 part +*Musta* (Cyperus rotundus) 1 part + *Shunthi* (Zingiber officinale) ½ part	3 gm BD with luke warm water	After meal
2.	*Aampachak Vati*[9]	1 QID	8am-12pm-4pm-8pm

b. *Snehapana* – (Oleation)

Snehapana was given with *Panchatikt Ghrut*[10] until *snehasidhi lakshan* were seen.

Table 5: Date of *Snehapana* with quantity of ghrut.

Sr. No.	Day	Quantity
1.	24/01/2018	30 ml
2.	25/01/2018	60 ml
3.	26/01/2018	90 ml
4.	27/01/2018	120 ml
5.	28/01/2018	150 ml
6.	29/01/2018	180 ml
7.	30/01/2018	210 ml

On seventh day *snehasidhi lakshan* were appeared.

c. *Bahya snehan* and *swedan*-(31,1,2 / 01/ 2018)

After sneha sidhi lakshan were seen, on next day for 3 days Bahya snehan was done with til tail (Sesamum indicum oil) and swedan to whole body by steam of water

d. *Virechana Karma*- (03/02/2018)

On *virechana* day firstly *sarvang snehana* and *swedana* were done. Bp- 130/80 mmhg Pulse- 80/min Midicines given for *virechana*.

Table 6: Medicine for *Virechana karma* with their dose.

Sr. No.	Medicine	Dose
1.	*Abhayadi Modak*(11) Tab	5 tab stat
2.	*Aargvadh phalmajja fant* (Casia fistula)	75 ml stat
3.	*Triphala kwath*(Termanalia chebula+ Embllica officinalis+ Termanalia belerica)	75 ml stat
4.	*Draksha phant*(Vitis vinifera)	100 ml *Muhurmuhu*

Kwath (Decoction) prepared as per *Sharangdhar samhita*, *Phant* also prepared as per *Sharangdhar Samhita*.

After giving above medicines at 9.30 am, *virechana vega* were started after one and half hrs.

BP and Pulse were recorded regularly after every 30 mins. BP and Pulse were in normal limits after *virechana*.

Total 25 *vega* of *virechana*(Loose motion) were seen in next 6 hrs.

e. *Sansharjan Kram* (Rules about diet after *shodhana Chikitsa*)- *Sansarjan kram* were given for 7 days. (4-10/02/2018).

OBSERVATION AND RESULT

Table 7: PPPASI score after the Ayurvedic treatment.

Sr. No.	Rt. Palm	Lt. Palm	Rt. Sole	Lt. sole
Erythema	0	0	1	1
Pustules	0	0	0	0
Desqumination	0	0	0	0
Area affected %	0	0	1	1

There was significant relief to the patient. Redness, itching and fissuring of the skin had been reduced. PPPASI was 43 before the treatment which reduces to 0.6 after the treatment which is significant. After the treatment before and after PPPASI score were compared. PPPASI= 0+0+0.3+0.3 = 0.6

Before the treatment PPPASI score- 43 After the treatment PPPASI score- 0.6.

This shows that Ayurvedic treatment resolves 98.61% of symptoms and there is no recurrence since 2 months of treatment.

DISCUSSION

In Ayurveda whole skin diseases are covered under the topic of '*Kushtha*'. Regarding present topic Palmoplantar psoriasis, it can be correlated with the *Vipadika* which is one of the types of *Kushta* according to Ayurveda. In classics there are *vata* and *kaph dosha* involvement in *Vipadika*[12], but in present case according to clinical findings there was *pitta* and *kaph dosha* involvement. So the management was done according to *Dosha*. According to Ayurveda characteristics of *Vipadika* are *pani-pada sphutana* (fissure in palms and soles) with *tevra vedana* (severe pain). In present case there were fissuring in both palm and soles with itching and burning sensation as well as thickening of skin.

Shaman treatment

As patient was suffered since 1 year with the disease so shaman treatment was given first this were followed by *Shodhana*.

Action of shaman treatment

Sutshekhar ras at morning this was given for *panchana* as well as *saam pitta shaman*. *Panchtikt ghrut guggulu* was given at *vyanodane kala* which works on *rasa* and *rakt* and normalise *vata* as well as *pitta*. *Mahamanjishtadi kwath* was also given at *vyanodane kala* for the *raktprasadan* as well as *pachana*. *Haritaki churna (*powder*)* given at *nishi kala* for regular *anulomana*. After 1 month of this treatment patient was having 80% relief (Fig.2).

Figure 2: After the Shaman treatment.

But after 10 days there was again some fissuring of both soles and palms (Fig 3). So after *shaman*, *Shodhana* treatment was planned. In *shodhana* process *Virechana* was planned as all the symptoms were of *Pitta-vataj* and *virechana* is the treatment for *pitta dosha* predominance.

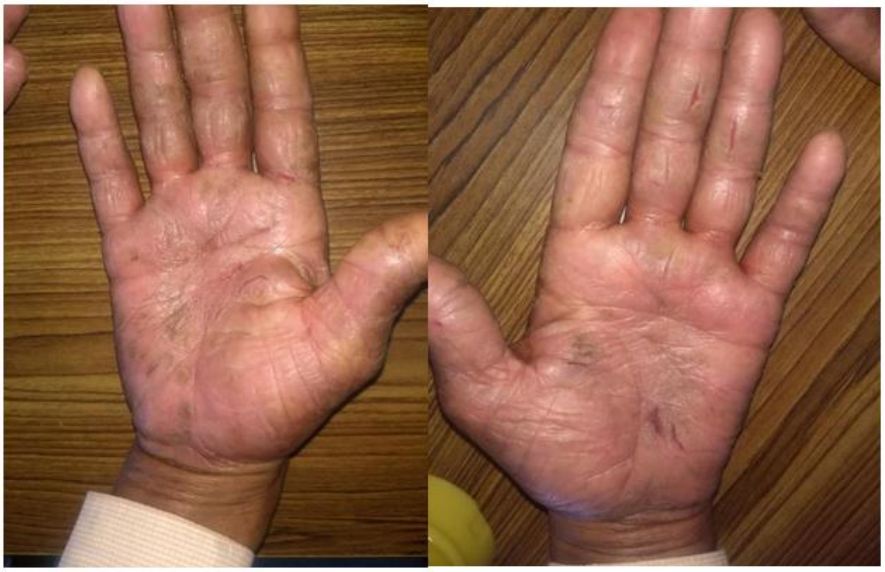

Figure 3: Relapse after 10 days of shaman treatment.

Purva karma- In *purva Karma pachana* was given to increase the digestive power and to make it ready to digest ghrut. *Snehapana* (Oral administration of medicated Ghee) decreases the dryness and also it is mentioned that *snehapana* brings *doshas* into *Kosth* (GIT) from the extremities (other than GIT). *Snehapana* were given with '*Panchtikt Ghrut'* which was prepared by Ghrut (Ghee) which is *vata-pittaghna* in nature as well as decreases the dryness of skin and fissuring of sole and palm. *Panchtikt* are the 5 herbs which are bitter in taste increase the digestive power and also do the blood purification. It was given for 7 days in increasing quantity till *snehasidhhi lakshan* (Ghee like feaces) were seen. *Snehapana* acts mainly for the eradication of *doshas* from whole body and brought them into *Koshtha*. Due to *Snehapana* there was some relief in symptoms.

After there was *snehasiddhi lakshan*, on next day *sarvang snehan* and *swedan*(whole body massage and steam) were done for 2 days.

Pradhan Karma- On next day (*Virechana day*) firstly *sarvang snehana* and *swedana* was done. This was followed by 5 tablets of *Abhayadi modak*. In *Abhayadi Modak*, *Haritaki* (Termanalia chebula) and *Aamlaki* (Emblica officinalis) are *Anulomak (*laxative), *Danti* (Baliospermum momtanum) is *Tikshna Virechak* (Purgative), *Trivrut* (Operculina turpethum) has *Virechak prabhav, Pippali* (Piper longum) is *Pitta Virechak* and *Marich* (Piper nigrum) has *Pramathi* property (Opens the obstructed channels). Along with *pitta rechan, kapha samshodhana* and *vatanuloman* take place. *Abhaydi Modak* is *Katu Rasa* (Bitter in taste), *Tikshn*a in *Guna* and *Ushna* in *Virya* with *Katu* in *Vipaka*. *Doshas* expel out through anal route (*Gudamarga)* as *Virechak dravyas* have *Jala* and *Pruthvi Mahabhut pradhanya* and have *Adhobhaghar prabhav.*

Abhayadi modak was followed by *Aragvadh phal majja fant* (20 gm pulp seed of Cassia fistula dipped in 80 ml warm water and kept until it became luke warm and filtered it). *Aragvadh phalmajja* is laxative in nature but without causing irritation to GIT. It also does not cause any spasmodic pain in abdomen and smoothly passes the faeces. *Aragvadha* is *Madhur* (sweet) in *taste, Madhur* in *vipaka* and *shita* in *virya* which shows it self it is *pitta* and *vaat shamak* in nature.

After giving *Aragavadh phal majja fant,* which is followed by *Triphala Kwath* (Decoction if Triphala). *Triphala* is purely an *ayurvedic* combination which is used as a laxative. It is also *rasayana* i.e. rejuvenation in nature.

Draksha Phant (Vitis vinifera dipped in warm water and crushed it, used after filtering) given *muhurmuhu* i.e.after every loose motion. *Draksha* is also a mild laxative in nature having *madhur rasa, madhur vipaka* and *sheeta virya* which balances *vata* and *pitta dosha*.

Paschyat Karma (Sansarjan kram) –As due to *snehapana* and *virechana* there is loss of digestive power. So it is not helpful to start full diet after the *pradhan karma*. So *acharyas* mentioned the *sansarjan kram* according to the purification process. In this case there was *pradhan shuddhi* so *sansarjan kram* for 7 days was given which was followed by normal diet.

So after the whole process of *shaman* and *shodhan* treatment there was significant relief to the patient from the symptoms.

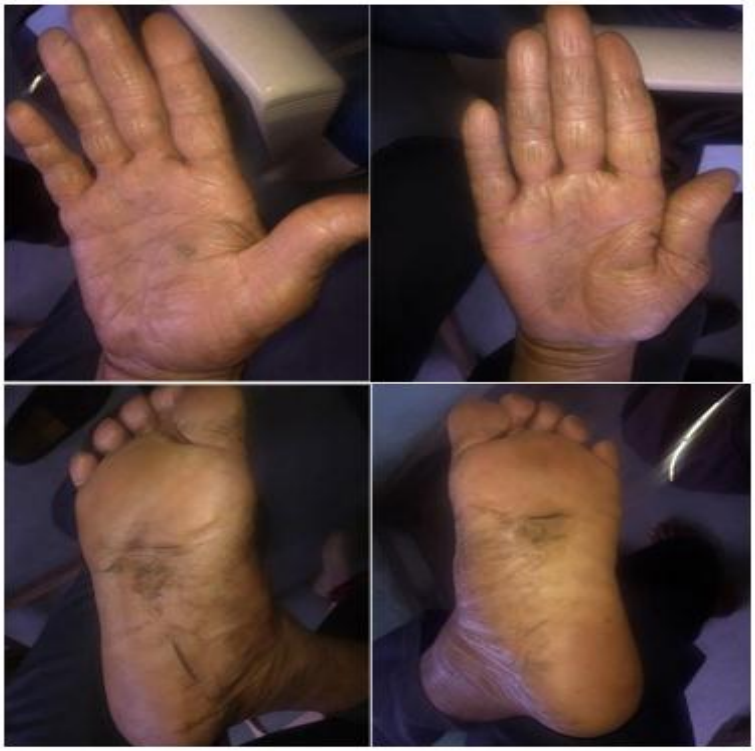

Figure 2: After the *Shodhana* (*Virechana*) Treatment (Both palms and soles).

CONCLUSION

In conditions like palma plantar psoriasis in which there is imbalance of *pitta- vata dosha*. Ayurvedic medication which balances *pitta* and *Vata* with panchkarma shows significant results but for the diseases like psoriasis it is essential to follow strict diet regimen.

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