



AYURVEDIC MANAGEMENT OF SIDHMA KUSTHA-A PAEDIATRIC CASE REPORT

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ABSTRACT

Sidhma kustha is a disease bears greater resemblance with psoriasis. The current treatment modalities have their own limitations and drugs have considerable side effects when using for longer time period. Hence, it is the need of time to find out safe and effective treatment for Psoriasis and here Ayurveda plays an important role. Ayurvedic approach is directed towards alleviating the symptoms and also to reduce the disability. Here a case report of 14 years old female child presented with symptoms of sidhma kustha which was treated for 10 days with combination of panchkarma procedure and selected ayurvedic drugs. The condition was diagnosed as Sidhma kustha on the basis of symptoms and was treated with deepana pachana, snehpana, abhyanga, swedana followed by virechana karma (purgation). Patient condition was assessed before and after treatment with sign and symptoms of the disease in which there was considerable improvement without any adverse effect.

KEYWORDS: Ayurveda, Psoriasis, Sidhma kustha, Panchkarma.

INTRODUCTION

Psoriasis is an autoimmune noninfectious, chronic disorder of skin where keratinization of epidermal cell takes place with well- defined lesion and silvery plaques on the extensor surface and scalp.^[1] The pathogenesis of psoriasis involves both genetic as well as immunologic mechanisms, in genetic it includes the influence of genes of Human Leucocyte Antigen Complex and in immunologic it includes T- cell mediated.^[2]

In Ayurvedic literature, the disease Sidhma kustha has been mentioned under the category of kustha that denotes all varieties of skin disorders. Acharya Charaka description of the disease Sidhma kustha closely resembles with that of Psoriasis. It is characterized by kandu (itching), sweta, tamra (white and coppery in color), alabupushpavarna (patches looks like the flower of alabu), Ghristhvimuchyate (peeling of skin looks like small dust particles after rubbing).^[3] Siddhma kustha caused due to vitiation of kapha vata doshas.^[4] Typically it occurs over the knee, elbow, scalp and can also affect palm and sole of the feet.^[5]

Case history

A 14 years female child belongs to a middle class family came from Sanquelim, Goa came to the Kaumarbhritya OPD of KLE Ayurveda Hospital, Belgaum, Karnataka

with complaints of itching and dandruff over scalp since 3 years.

- Thick scaly, dry, itchy lesions over lateral and frontal region of scalp since 4 years.
- Silvery white lesions over scalp since 4 years.

Patient had taken allopathic treatment before coming to our hospital. Patient was thoroughly examined and detailed history was taken. Patient was a school student and she did not have any other history of major illness.

On examination:-

- General condition- Good
- Afebrile
- Pulse rate- 80/ min, regular
- Respiratory rate- 18/ min

Assessment criteria

No. of patches – 3
Site - scalp (lateral and frontal region)
Border – Irregular
Surface - Silvery white colour
Dandruff – Present
Itching – Present
Scaling – Absent

Treatment given: Shodhana Chikitsa with Shaman yoga showed good result in this case study.

Day 1 st – 2 nd	Deepana pachana	Panchkola phanta		10 ml TID before meal
Day 3 rd -7 th	Snehpana	Indukanta ghrita ^[5]	In early morning empty stomach (7:00 am)	Day 1- 30 ml Day 2 – 60 ml Day 3- 90 ml Day 4 – 120 ml Day 5 – 120 ml
Day 8 th -10 th	Sarvanga abhyanga and baspa swedana	Manjisthadi taila	In early morning	
Day 11 th	Virechana	Trivrut leha	In early morning	22 gm (8 vegas observed without any complications)

1. Samsarjana Karam (rules about diet after Shodhan Chikitsa) advised for 7 days.
2. Shaman yoga: Patient was discharged with the shamana aushadi for 2 months.

- Dooshivishari agada- 1 tab BD
- Haridra churna + Guduchi churna + Triphala churna all are in equal quantity and mixed well and then, ½ tea spoon mixed with water BD
- Psora oil for local application over scalp

Ist follow up

Itching was reduced in all lesions and one lesion was completely disappeared.

In her first follow up, patient advised following medicines for one month and advised to avoid junk foods like chips, Kurkure etc.

- Aragwadhadi kasaya- 10 ml BD
- Powder combination of Haridra + Guduchi + Triphala in equal quantity- ½ tsf mixed with water in BD dose

2nd follow up treatment plan.

Day 1 st – 2 nd	Deepana pachana	Panchkola phanta		10 ml TID before meal
Day 3 rd -7 th	Snehpana	Tiktaka ghrita ^[6]	In early morning empty stomach (7:00 am)	Day 1- 30 ml Day 2 – 60 ml Day 3- 90 ml Day 4 – 120 ml Day 5 – 120 ml
Day 8 th -10 th	Sarvanga abhyanga and baspa swedana	Manjisthadi taila ^[7]	In early morning	
Day 11 th	Virechana	Trivrut leha ^[8]	In early morning empty stomach	30 gm (10 vegas observed without any complications)

1. Sansarjan Karam advised for 5 days.
2. Shaman aushadhi was started.

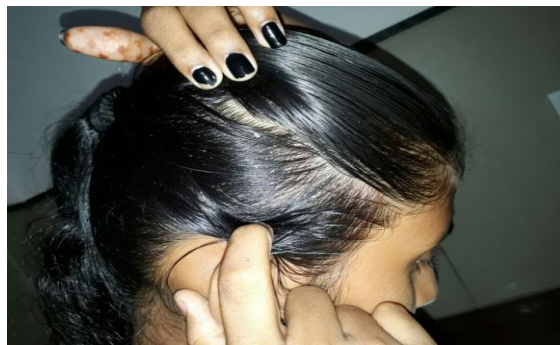
- Capsule Psora- 1 BD for 1 month
- Capsule Tiktamruta- 1 BD for 1 month
- Psora ointment for local application

After this visit all dryness and itching was completely reduced from all lesions and few lesions completely disappeared only one lesion remained (behind ear).

BEFORE TREATMENT



AFTER TREATMENT



DISCUSSION

In Ayurvedic literature, according to symptoms of Psoriasis mostly comparable with Siddhma kustha. In classics siddhma kustha is categorized under Kshudra kustha and Maha kusthas respectively. Irregular food habits, consumption of incompatible food together, excessive use of sour and salted food can activate the pathogenesis. The produced toxins accumulate in deep tissues (dhatus) like rasa, rakta, mamsa, lasika and its contamination leading to kustha. The panchkarma therapies along with shamana aushdis are so helpful in all kind of kusthas have similar presentations with Psoriasis. Deepana pachana with panchakola phanta increases agni and helps in ama pachana. Snehapana with tiktaka ghrita alleviates the dryness and itching in skin. Sarvanga abhyanga and Svedana will liquefy the doshas and bring them to the koshtha from shakha. Virechana with trivrut leha helps in eliminating the toxins out of the body. Thus cleansing the lower passage and rejuvenating each and every cell of lower GIT. Dooshivishari agada helps to eliminate cumulative doshas in the body.

CONCLUSION

Selection of chikitsa for kustha depends on predominant of doshas. Repeated shodhana is essential for bahu doshavastha other than trying to eliminate it all at once since it weakens the patient. Sodhana karma is more beneficial than shamana aushada karma.

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