



“EFFICACY OF VAMANA KARMA IN THE MANAGEMENT OF EK-KUSHTHA w.s.r. TO PSORIASIS IN CHILDHOOD AGE”

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DOI: <https://doi.org/10.17605/OSF.IO/5EU8D>

Article Received on 04/12/2020

Article Revised on 24/12/2020

Article Accepted on 14/01/2021

ABSTRACT

Ek-kustha is a *kshudra kustha* occur through Vata & kapha vitiation. Its tendency of recurrence continue to cause problem to the physician. In allopathic science it can be co-related to Psoriasis. It is an autoimmune disease with unknown of etiology. In the skin the lesion may be acute or chronic. The patient were treated with *Vamana karma*. *Panch-tikta Ghrita* was used for *Snehan karma* and for *Vamana karma* *Vamana kalpa kwatha* was used. After *Samsarjan kram* placebo was given in divided dose.

KEYWORDS: *Ek kustha, Kushdra kustha, Panch-tikta ghrita, Vamana karma, Vamana kalpa kwatha, Psoriasis.*

INTRODUCTION

Kshudra is described as one of the most chronic disorder (*dirgh-roga*) by *Acharaya Charak*.^[1] Among different types of *Kustha*, *ek-kustha* is described as one with symptoms like *Aswedanam* (absence of perspiration), *Mahavasthuvam* (present all over body), *Matsyasakalopamam* (skin resembles scale of fish).^[2] All the symptoms can be co-related with psoriasis, in which silver fish scales is most predominant feature along with well circumscribed, sharply demarcated erythematous papules or plaques covered by dry, brittle, silvery or grayish white.

Acharyas has described *Ek-kustha* as *Raktapradosaj, Vatakaprapradhan tridoshaj kshudrakustha*.^[3] It bears a greater resembles with psoriasis. The common initial site of occurrence of psoriasis such as scalp, knees & earlobes as well as other places of joints are also pertaining to the *sthan* of *Vatadosha*. There is limitation of available medication & associated with side effect. There is need to find out safe, long lasting & better treatment for psoriasis. According to our classics *Kustha* being a *Bahudoshavastha vyadhi* repeated *shodhan* is indicated.

MATERIAL & METHODS

Place of study- State Ayurvedic College & Hospital, Lucknow.

Types of study:
“Single case study”

Age: 14 years old

Sex: Female

Case Report

The present case study is successful Ayurvedic management of a case of *Ek-kustha* (Plaque psoriasis). A14 years old female child XXX patient with Registration no. 76570 came to SAC&H Lucknow OPD no 2 (Bal rog) with a chief complaints of desquamation of skin in fine powder form over posterior hair line of scalp, right armpits, right inguinal area along with burning sensation, intense itching and discoloration of *Ek-kustha* (Psoriatic) lesion since three years.

History of present illness

The patient was asymptomatic before 3 years ago. The patient was suffering from intense itching followed by burning sensation as initial symptoms on posterior hair line of scalp since 2.5 years then in the right armpits area since 2 years followed by right inguinal area with powdery scaling of skin and silver scales like spot on the lesion since 6months. She had used many local & oral allopathic medicines. But there was no any significant relieve. Therefore, she came to State Ayurvedic College & Hospital, Lucknow in IPD of Kaumarabhritya for better treatment.

Past History: Not significant

Occupation: Student (12th std.)
O/E:

- GC- Average
- Nadi- 92/min
- Mala- Niram
- Mutra- Normal
- Jhiwa- Normal(Uncoated)

- Agni- Kshudhamandya
- Shabda(Speech)- Normal
- Sparsha(Skin)- Khar?
- Druka(Eyes)- Normal(6/6=Rt.&Lt eyes)
- Akuti- Madhyama
- Bala- Madhyama
- Raktadaaba(B.P.)-110/74mmhg

Selection of internal medicines

Oral medicines were selected on the basis of their properties useful in pacifying vitiated *Doshas* in & ability to relieve the sign & symptoms of *Ek-Kustha*.

Samprapti Ghataka

Dosha: Tridosha

Dusya: Rasa, Rakta

Adhithana: Twaka

Diagnostic parameter

With the help of Psoriasis Area Severity Index (PASI), the severity is estimated by four clinical signs. The severity parameters are measured on a scale of 0 to 4, from none to maximum. The body is divided into four sections Head, Arms, Trunk, & Legs. Each of these area is scored by itself and then four scores are combined into final PASI. For each section, the percent of area of skin involved is estimated and then transformed into a grade from 0 to 6.

0% of involved area	Grade:0
<10% of involved area	Grade:1
10-29% of involved area	Grade:2
30-49% of involved area	Grade:3
50-69% of involved area	Grade:4
70-89% of involved area	Grade:5
90-100% of involved area	Grade:6

Assessment Criteria

1. Erythema (Redness)
2. Induration(Thickness)
3. Desquamation(scaling)
4. Itching

MANAGEMENT

In all type of *Kustha*, *Snehapan* is recommended at early stage. The treatment is planned as the *sadhyasnehana*, *sadhya sarvaanga swedan* along with *sadhyavamana*. *Snehapana* is given on the basis of *agnideepana* attained on that particular day of *snehapan*. Under the influence of adequate *snehan*, *shodhan* will be done proper & there by restoration of *dhatuamyata* is achieved.

Panchkola churna was given for *deepana* effect as mentioned as *purvakarma* before *vamana*. After that, administration of medicine (*Panchatikta ghrita*) was started with initial minimum to moderate dose at 5A.M. & then Luke warm water was given as *anupan* with *Snehapana*. Patient is advised not to sleep during day time & when he feels thirst, luke warm water is given for drinking.

Vaman karma

Seven days after *snehapan*, patient is subjected to undergo *vaman karma*. A day previous to *vaman karma*, the patient is instructed to take food that promotes production of *kapha* like curd, sweets and milk diets which have the quality of *kapha utklesha*.

After examining the pulse, blood pressure and respiratory rate etc; on the day of *vaman karma*, the patient is subjected to local *abhyanga* with coconut oil and *mrudusweda* of entire body except above the neck region before starting the process. The *kapha* toxins accumulated in the body are effectively removed by *vaman*. *Vaman* is therapeutic vomiting, which is medicated emesis therapy. A people with high imbalance of *kapha* are given this type of treatment, which looseness and mobilize the toxins, an effort to eliminate them from the body. *Madanphal* is said to be the best therapeutic emetic agent. Milk is used as a medium *vamanopaga*, (which facilitates the *vaman*).

Vaman Management

After *abhyang* and *swedana*, the patient is asked to drink milk as much as she can consume. Patient consumed 2000ml of milk in many divided times. After that *vaman kalp kwath* is given insidiously glass by glass. Then *Yasthimadhu phanta* is given.

After administering emetic drug waited for 20 minutes for self-induction of *doshas* elimination by *vaman*. This duration is for facilitating for the *doshas* movement. The onset of perspiration on forehead indicates liquefaction of *dosha* indicates that *doshas* are dislodging from their seat of stagnation, abdominal distention indicates that *doshas* have reached the stomach. This act is allowed by nausea and salivation that confirm the upward movement of *doshas*. At the end of procedure, it is observed that *pittant vaman*. Spontaneous *vaman* was started within 20 minutes. The proper *vaman* symptoms were noted by observing the vomitus.

Again for the better induction of *vaman*, *neemba kalka* is given along with luke warm water. This provokes better induction of *vaman*. For *kostha prakshalana*, *Saindhava lavana*, *Shahada* in unequal ratio along with luke warm water is given.

Observation Parameter

The *Antiki*, *Vagiki*, *Maniki*, *Laingiki* purification are as follow.

Procedure summary Measures

Mainki (measurement) input 2000ml

Output 3000ml

Antiki Pittant vaman

Vegiki (No. of vomiting) 8

Laingiki Kapha chadrika present in

Vomitus & no bleeding was observed.

Patient given an out put of 3000ml of content in 8 vegas. Express the *pravar shuddhi*. The entire process of *vaman* is completed in duration of 90minutes. Patient felt

relaxed, lightness in whole body. After completion of *vaman*, *dhumapan* (therapeutic smoke inhalation) is given.

Table showing the Dose, Route, Kala and Anupan of purva karma drugs

S. No.	Name of Medicine	Dose	Route	Kala	Anupan
1	<i>Panchkola churna</i>	1gram First 3 days	Per oral	Before meal, Thrice in a day	Luke warm water
2	<i>Panchtikta ghrita</i>	25ml on 1 st day 35ml on 2 nd day 40ml on 3 rd day 50ml on 4 th day 60ml on 5 th day 80ml on 6 th day 100ml on 7 th day	Oral	Early morning at 5 A.M.	Luke warm water

Table showing ingredients of external application in purva karma (Abhyanga & Sarwaanaga swedana)

S. No.	Name of Medicine	Ingredients	Properties
1.	Coconut oil	Coconut	Useful in skin disease, lubricating.
2.	<i>Sarvang Swedana</i>	<i>Dashmoola kwath</i>	Bring doshas in <i>kostha</i> .

Table showing ingredients of Vaman karma with their properties.

S. No.	Name of Ingredients	Latin Name	Dose	Properties
1	<i>Madanphala Churna</i>	<i>Randia dumetorum</i>		<i>Vamanopaga</i>
2	<i>Vacha Churna</i>	<i>Acorus calamus</i>		<i>Vamanopaga</i>
3	<i>Saindhava lavan</i>	Rock salt		<i>Kshobhaka, Shodhak</i>
4	Honey			<i>Chedaka, Yogavahi</i>
5	Milk		2000ml	<i>Vamanopaga</i>
6	<i>Yasthimadhu phant</i>	<i>Glycyrrhiza glabra</i>		<i>Vamanopaga</i>
7	<i>Neemba kalka</i>	<i>Azadirachta indica</i>	50 leaves approx.	<i>Vamanopaga</i>

Treatment Plan- Patient was treated on IPD basis.

A) Selected Internal Ayurvedic Drugs

Purva Karma- *Agni Deepan* (*Panchkola churna*)

Snehapan with *Panchatikta ghrita* (1st day 25 ml with luke warm water with increasing order)

Duration- 03 days for *Agni deepan* & 7 days for *Snehapan*

B) Selected external Ayurvedic Drugs

Drug: *Snehana* with Coconut oil.

Dose: Sufficient quantity applied on the whole body.

Duration: Before institution of *Vamana* procedure.

C) Selected Internal Ayurvedic Drugs For Vamana

Dugdha (2000ml), *Yasthimadhu Phanta* (250ml), *Vamana kalpa kwatha* are administered on the day of *Vamana*, *Neemba kalka* along with water, *Saindhava* along with water, *Madhu*(Honey).

Table showing ingredients of Vaman Karma with their properties:

S. No.	Involved area	Grade	Erythema (Redness)	Induration (Thickness)	Desquamation (Scaling)
1	0% , <10%	0	0	0	0
2	10%	1	1	1	1
3	10-29%	2	2	2	2
4	30-49%	3	2	2	2
5	50-69%	4	3	3	3
6	70-89%	5	3	3	3
7	90-100%	6	4	4	4

Table showing changes in sign & symptoms during each follow up:

S. No	Sign & Symptoms	Before treatment	1 st Follow up	2 nd Follow up
1	Erythema (Redness)	3	1	1
2	Induration (Thickness)	3	2	0
3	Desquamation (Scaling)	3	1	0
4	Itching	3	2	0

Erythema:

Grade	Score		Feature
0	0	Normal	None
+	1	Mild	Light red
++	2	Moderate	Red but not dark
+++	3	Severe	Dark red
++++	4	Very Severe	Very dark/ purple

Thickness (Induration):

Grade	Score		Feature
0	0	Normal	None
+	1	Mild	Slight elevation, edge indistinct or sloped
++	2	Moderate	Mod. elevation, edge rough or sloped
+++	3	Severe	Marked elevation, edge rough or sloped
++++	4	Very Severe	Very marked elevation, edge hard or sloped

Scaling:

Grade	Score		Feature
0	0	Normal	Normal
+	1	Mild	Fine scale covering part of lesion
++	2	Moderate	Fine to rough scale covering part of lesion
+++	3	Severe	Rough thick scale covering part of lesion
++++	4	Very Severe	Very rough, very thick scale totally covering skin

Itching:

Grade	Score		Feature
0	0	Normal	Normal
+	1	Mild	Occasionally at site of lesion
++	2	Moderate	Tolerable itching throughout the day
+++	3	Severe	Severe itching or disturbing sleep all the times at the site of lesion.

Discussion (Regarding the action of procedure):

Ek-Kustha is accepted as psoriasis because the description and characteristic features of it are coinciding with description of psoriasis. It is counted as *Kshudrakustha* hence *kustahar* drugs as well as immunity enhancing drugs can be beneficial for this disease such as *Panchatikta ghrita* as it is explained in *Bhaisajya ratnavali*, *Kustha adhyay*.

Ek-Kustha is a *kapha* predominant type of *Kustha* and *Vamana* is indicated for *kapha* predominant disease. *Vamana* acts on microcellular level, eliminates the toxins from the body & help in maintain normal body function. It is just a bio-purification of body which is achieved by in successive steps

1. **Deepan karma** by *Panchkola churna* 1TSF TDS for 3 days
2. **Abhyantar Snehapana** by *Panchatikta ghrita* in order of increasing dose in early morning followed by luke warm water for seven days.
3. At the last day, after *abhyantar Snehapana*, **external application** of coconut oil on whole body followed by **Sarvang swedana** by *Dashmoola kwath* done for 10 minutes.
4. **Vaman** is advised immediately after completion of sarvang swedana.
5. **Dhumpana** is done just after vaman procedure.

Treatment Plan- Patient was treated on OPD basis.

Dugdha(200ml), Yasthimadhu Phanta(250ml), Vamana kalpa kwatha are administered on the day of Vamana, Neemb kalka along with water, Saindhava along with water, Madhu(Honey).

DISCUSSION

Psoriasis is a papuloSquamous disorder of the skin characterized by sharply defined erythematous squamous lesions. They vary in size from pinpoint to large plaques. At time it may manifest as localize or generalized pustular eruption.

Ek-kustha is considered as psoriasis because the description and characteristics feature of it are coinciding with description of psoriasis.

Aswedanam- The lesion of this disease are dry & rough, *Mahavastu*- lesions are found all over the body, *Matsya Shakalopamam* – Well defined raised macules, papules, erythematous plaques which are covered with silvery scales. *Krishna Aruna varna*- erythematous lesion.

Kshudrakustha hence as *Kustahar* drug as well as immunity enhancing drug can be beneficial for this morbid disease. Such as *Panchatikta ghrita* &

Panchatikta ghrita guggulu as it is explained in *Bhaisjya ratnavali, kusta adhyay*.

Ek-kustha is a *Kapha* predominant type of *Kustha* and *Vaman* is indicated for *Kapha* predominant disease. *Vaman* indicates reduction in the level of free radical and significant increase in super oxide dismutase. These all are helpful in reducing the oxidative state. Thus, *vaman* acts on microcellular level, eliminate the toxins from the body and helpful in maintaining the normal function of the body.

After *Shodhan*, the patient is kept on *Samsarjan* karma through restricted diet for 7 days. In this *Samsarjan* karma, *Peya*, *Vilepi*, *Akrita Yusha*, *Krita Yusha* are advised because of reduced *agni* mean while the *Vaman* karma. Luke warm water is advised to drink at the time of this procedure. After completion of *Samsarjan* karma, *Shaman chikitsa* is administered to the patient.

CONCLUSION

Psoriasis can be compared with *Ek-kustha* on the basis of complex symptoms.

Ek-kustha showing *matsaya-shakal pradhan* and having *bahudosha avasthajanya* condition with dominance of *kapha* and *vata dosha*.

Itching, erythema, scaling and size of lesion are significantly reduced after *Vaman karma*, *Samsarjan karma* and *shaman chikitsa*.

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