



A SINGLE CASE STUDY ON VICHARCHIKA

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ABSTRACT

Vicharchika is one of the common skin problems in the day today practice. All the main authors considered *Vicharchika* under *kshudra kusta* with lakshanas *sakandu pidaka syava bahusrava Vicharchika* by Charaka and Susrutha tells *Raajyo Atikandu Ati Ruja Sruksha*. While telling the treatment *Caraka* told if Bahu dosha Lakshanas is there then one can go for *Shodhana Chikitsa*, if Patient is not fit for *Shodhana the Sthanika Chikitsa* like *Shringa, Alabu, Jalouka* and *lepa* can be done. Susrutha says If *kusta* involves *Rakta dhatu* then *Shodhana, Alepana, kashyapana, Raktamokshana* line of treatment. so here an attempt is made to understand the role of *Jaloukavacharana* in *Vicharchika* with a case study. A female patient suffering from severe itching and skin lesion in the flexor region of left leg with history of 20 years where treated with two sittings of *jaloukavacharana* with 10 days interval and with oral medication *Kaishora guggulu 2* in Morning and 2 in the Night After food with *Ushna jala Anupana* for 30 days was given and the satisfactory result was found.

KEYWORDS: *Vicharchika, Jaloukavacharana, Kshudra kusta, Eczema.*

INTRODUCTION

Vicharchika can be correlated to Eczema (Dermatitis) which comes under Non-Infectious inflammatory Dermatoses clinically Characterised by itching, erythema, oozing and scaling.^[1] If you see the *Lakshanas* of *Vicharchika* which is similar to Eczema like *Kandu, Srava, Pidaka* with *kandu* as the main lakshana. In modern medicine locally applied drugs as well as systemic drugs are employed for the treatment of dermatological diseases. The fact that locally applied drugs exert their action in addition to systemic drugs is an added advantage. Many disorders respond to local therapy, some requires a combination of local and systemic therapy.^[1] So in Ayurveda also both *Shodhana* and local treatment has been explained like *Virechana, Jaloukavacharana* and various *lepa* has been explained. If the *Lakshanas* are more, then *Shodhana* has to be administered if not local treatments like *Jalouka, lepa* is sufficient to treat the *Vicharchika*.^[2]

CASE REPORT

A female patient aged 51 years came with the chief complaints of Severe *kandu* in the flexor surface of left ankle region with reddish discoloration of skin since 20 years. It was gradual in onset. The symptoms like itching will be reduced after scratching that part and end up in bleeding and ulcer.

The skin lesions used to reduce after applying Local steroids but after stopping the application again

symptoms used to increase. Associated complaints like Bleeding after scratching that part, no other systemic symptoms was found.

Patient was not a known case of Hypertensive, Diabetic mellitus, Asthama.

O/E Patient was lean Vata pittaja Prakruti

Blood pressure: 130/74 mm of Hg

Pulse: 74/ min

Skin Examination:

Kandu: present more in the night time,

Srava: earlier it was there but at present there is no *srava*

Pidaka: absent

Raji: present

Rukshata: Present

Ati Ruja: Present

Routine Blood investigation was done before treatment and found normal After taking proper history and examination the patient was diagnosed suffering from *Vicharchika* (Eczema) and local treatment *jaloukavacharana* was planned as area of skin involvement was very less and as it was a chronic case.

MATERIALS AND METHOD

jaloukavacharana in two sittings with 10 days interval by classical method. In each sitting 2 new fresh medium sized *jaloukas* were used. In each sitting of

Jaloukavacharana around 50- 60 ml blood was removed. Oral medicine *Kaishora guggulu* 2 in the morning and 2 in the Night after food with *Ushna jala Anupana* was given for 30days. The itching and reddness was reduced. The skin started to become soft and gain normal colour.



Before treatment



After 20days



After 30days

DISCUSSION

Vicharchika is *Kshudra Kusta*, it is included under *Rakta Pradoshaja vikara*,^[3] *Vicharchika* having both acute and chronic condition, Charakas lakshanas matches with Acute conditions like Pindaka and srava while susruta's lakshana matches with chronic conditions like Ruksha Raaji, Kandu. While explaining the treatment *Caraka* told if Lakshanas are more, then one can go for *Shodhana Chikitsa*, if Patient is not fit for *Shodhana* then

Sthanika Chikitsa can be done like *Shringa*, *Alabu*, *Jalouka* and *lepa* can be done. In all the *Kusta* the *Twak* is mainly involved so *Twak dosha hara* line of treatment has to be followed Like *lepa*, *Jalouka* can be done.^[2]

If *kusta* involves *Rakta dhatu* then *Shodhana*, *Alepana*, *kashyapana*, *Raktamokshana* is a line of treatment. Before treatment patient had severe itching that was reduced after *Jaloukavacharana*. As it was a chronic case there will be *Sanga of Doshas* in the effected part, therefore by doing *Jaloukavacharana* the vitiated blood is removed from the particular part, once the vitiated blood is removed that part is supplied by new blood, by this the area will be supplied by good oxygen and other required Nutrients and then the movements of *Doshas* will be free. The *Rakta* is also responsible for *Varna*, after the *Jalouka* the effected part of the skin started to getting normal colour.

The oral medicine *Kaishora guggulu* was selected, each tablet is 450mg as it contains *Guduchi*, *Vidanga* and *Triphala* as the main ingredients all these drugs will act on *Rakta dusti*.^[4]

CONCLUSION

By this it can be concluded that *Vicharchika* is *Kshudra kusta*, in which involvement of doshas is less in such condition local treatment like *Alepana*, *Jaloukavacharana* is useful.

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