



AYURVEDIC MANAGEMENT OF EKAKUSHTHA (PSORIASIS): 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 sex. Indian male however is affected twice as female and prevalence from 0.44% to 2.5% psoriasis is the hyperproliferative keratinocytic disease. Psoriasis is the inflammatory skin disease which most commonly affects extensor surface of elbow knee scalp, nails and the sacral region. Psoriasis is an autoimmune disease in which scaling and itching in the papulo-squamose 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 38-year 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 Adhishthana* which is related to *Sparshadnyanam*. *Acharya Sushruta* explain the seven layers of skin and disease related with particular layer.^[1] 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.^[2] And *Acharya Sushruta* explain symptoms as *Krishna Arun Varnata*.^[3] 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.^[4] 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.^[5]

According to *Acharya Charaka*, all *kushtha* are *Tridoshaj* and in *Ekakushtha* there is predominance of *Vata* and *Kapha Dosha*.^[6]

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 38year old female patient came to skin OPD of Government Ayurved college, Osmanabad, Maharashtra, India. Presented with C/O scaly silvery plaques on extensor surface of both fore arm, redness, and itching since 1 year.

For the presented complains she was taken treatment from various hospitals, but she did not get relief before came to our hospital. Patient did not have any other major illness or family history.

History of past illness

Patient has no any past history of major illness, trauma.

General examination: - Vitals

Pulse – 70/min.

CVS: s1s2 normal

BP – 110/70 mmHg
oriented. Temp: Afebrile
RS: AEBE clear.

RR: 22/min.
investigation –

Hb %: 11 gm/dl

Diagnosis - *Ekaakushtha* (Psoriasis)

CNS: conscious,

P/A: soft Blood

BSL (R): 94

Table no 1: -

Sign and symptoms	
<i>Aswedanam</i> (lack of sweating)	Present
<i>Mahavastu</i> (broad based)	Present
<i>Matsyashakalopam</i> (looks like scales of fish)	Present

Treatment given

Firstly, ayurvedic *Shamana* therapy was given.

Table no 2: -

Sr. No	Medicine	Dose	Time	Anupan
1	<i>Pachatikta Ghrut Guggulu</i>	500 mg BD	After meal	Lukewarm water
2	<i>Arogyavardhini vati</i>	500mg BD	After meal	Lukewarm water
3	<i>Nimba+Guduchi churna</i>	3gm BD	After meal	Lukewarm water
4	<i>Khadirarishtha</i>	20ml BD	After meal	with same amount of water.
5	<i>Haritaki churna</i>	3gm OD	Bed time	Warm water

Medicine for external application

1. *Indrayava + vidanga churna Lepa* with Winsoria oil.

Shodhan chikitsa

1. *Pachan* – with *Triphala* 1 part + *Musta* 1 part + *Shunthi* ½ part} – 3 gm BD with Lukewarm water before meal for 3 days.
2. *Snehpan* (oleation)-*Snehanpana* was given with *Mahatiktak Ghrita* in the morning until *Snehsidhi Lakshana* were seen with increasing quantity of *Mahatiktak Ghrita* every day with *Anupana Koshna Jal* (lukewarm water).

3 Virechana

Medicine for *Virechana* with their dose:

Table no: - 4

Sr.no	Medicine	Dose
1	<i>Abhayadi Modak Tab</i>	4 Tab stat
2	<i>Aragwadh Phalmajja phant</i> (cassia fistula)	60 ml stat
3	<i>Triphala kwath</i> (<i>Amalki+Haritaki +Bibhitaki</i>)	60 ml stat
4	<i>Manuka Phant</i>	100 ml muhurmu

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*.

Table no: -3

Day of <i>Snehpana</i>	Quantity of <i>Ghrita</i>
1 st	30 ml
2 nd	60 ml
3 rd	90 ml
4 th	120 ml
5 th	150 ml

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

Total 20 *Virechana Vega* were seen in next 5 hours and *Sansarjan karma* 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.

Assessment Criteria

Assessment criteria was taken by PASI score.^[7] (before treatment)

Table no: - 5

Symptoms	Right arm	Left arm	Back of trunk
Redness	2	3	3
Thickening	1	2	2
Scaling	2	3	3
Area affected %	4	4	4

$$\text{PASI} = [(2+1+2) * 4] * 0.2 + [(3+2+3) * 4] * 0.2 + [(3+2+3) * 4] * 0.3 = 20$$

OBSERVATIONS AND RESULTS

PASI score. (After the ayurvedic treatment)

Table no: - 6

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

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 is correlated with *Ekakushtha* (Psoriasis).

From the above observation, this shows that *Ayurvedic Shamana* and *Shodhana Chikitsa* relieves the symptoms of *Ekakushtha* (Psoriasis).

PASI score before the treatment was 20 and after the *Ayurvedic* treatment is 0.5.

Before treatment**After treatment**

DISCUSSION

Ekakushtha is a type of *Kshudrakushtha* which have a dominance of *Vata* and *Kaph Dosh*. The vitiated *Dosha* reaches to *Dushya Twacha* and leads to *Sihana 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* 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 *Takradhara* therapy showed good result. *Virechan karma* helps to remove dominancy of *Vikruta Dosha* from the body. *Shaman Chikitsa* i.e. *Panchatikta Ghrut Guggulu*, *Arogyavardhini Vati*, *Khadirarishtha* has *kushthaghna* and *Rasayana* effect on skin. *Takradhara* (*Musta* and *Amalaki siddha Takra*) on *Shirpradeshi* may help decrease the stress 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 was given which act as *Kushthaghna*, *Krimighna* and helps to relieves the symptoms.

CONCLUSION

In this case study Ayurvedic medicine and *Panchakarma Chikitsa* has a good result. The treatment given for *Ekakushtha* (Psoriasis) *Deepan Pachan*, *Shodhan*, *Shaman Chikitsa* and *Takradhara* therapy which help in elimination of vitiated *Dosha* from the body and balance the condition of *Vikrut 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.

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