

“THE EFFECT OF VIRECHANA ON VIPADIKA (PALMO-PLANTAR PSORIASIS – A CASE REPORT”***Dr. Manikrao Kulkarni**

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ABSTRACT

Psoriasis is a chronic, unpredictable and immune mediated disease that has a negative impact on patient's quality of life. Palm and sole Psoriasis can add to this negative impact as it directly affects activities of daily living. In India, prevalence of psoriasis varies from 0.44 to 2.8%. It is twice more common in males compared to females. High prevalence of plantar involvement was ascribed to Indian custom of walking barefoot or wearing open slippers most of the time which leads to frequent trauma compared to closed footwears. Palmo-Plantar psoriasis is with painful fissures and bleeding which are more common. A 52 year old male patient suffering with Palmo – plantar psoriasis since 4 months. In ayurveda repeated shodhan chikitsa and shaman yoga are mentioned in the treatment of vipadika. In this case study, deepan-pachana, snehapana with Panchatikta ghrita and virechan karma and local application were given. The treatment showed good result in Palmo-Plantar psoriasis. Pachan leads to amapachana, and virechana helped to remove vitiated doshas from the body. Local application with Jatyadi Taila improved the texture of skin locally.

KEYWORDS: Vipadika, Palmo-Plantar psoriasis, Rukshan, Pachan, Virechana.**I. INTRODUCTION**

Psoriasis is a chronic, unpredictable and immune mediated disease that has a negative impact on patient's quality of life. Palmo-plantar psoriasis can add to this negative impact as it directly affects the activities of daily routine.^[1] Palmo-plantar psoriasis accounts for 3 to 4% all psoriasis cases, produces significant functional and social disability.^[2] In India, prevalence of psoriasis varies from 0.44 to 2.8% It is twice more common in males compared to females.^[3] Palmo-plantar psoriasis is a variant of psoriasis resistant to many forms of treatment.^[4] In Ayurveda, all skin diseases have been described under the umbrella of Kushta^[5] Vipadika is one of the Kshudra-kushta described in classiscs.^[6] In Charak samhita, in 7th chapter, vipadika is described as Vata-Kaphaja disease.^[7] Vipadika has signs and symptoms i.e. Pani-padashutanam (fissure in palms and soles) and Tivravedana (Severe pain) which are cardinal symptoms.^[8] Palmo-plantar psoriasis can be correlated with Vipadika. Hence it has been taken as analogue in this patient case study. Hence shodhan chikitsa i.e. virechana which helps to remove the vitiated doshas from the body to avoid the recurrence of the disease was selected in this case. The local skin lesions fail to heal for a long period so bahya ropana chikitsa was also selected for this case.

II. CASE REPORT

A 52 yr. old male patient came to department of Panchakarma, S.S.V.P. Ayurvedic college and RI, Hatta Dist. Hingoli Maharashtra, India presented with c/o fissures in both soles and palms with pus discharge, severe itching, erythematous plaques, scaling on both soles and palms with pain.

H/o recurrence of same complaint/s 4 years back But since 4 months again there is recurrence of all these symptoms with increased intensity. Patient was treated with antibiotics, steroids (orally and locally) but not got significant relief because of recurrence of the disease. So he came for the needful. Patient was thoroughly examined and detailed history was taken. Patient was vegetable vendor by occupation. Patient did not have history of any other major illness.

On examination

General condition – moderate, afebrile
Pulse rate - 74 / min, Regular
BP – 110/80 mmHg. No pallor, icterus was present.

Routine Investigation

Routine investigations such as complete blood count, Random blood sugar and urine routine and microscopic were in normal range.

Diagnosis: Vipadika (Palmo-plantar psoriasis)

| | Signs and symptoms | |
|---|------------------------------|---------|
| 1 | Panipada sphutanam (Fissure) | Present |
| 2 | Tivratara Vendana (Pain) | Present |
| 3 | Kandu (Itching) | Present |
| 4 | Vibandham (Constipation) | Present |
| 5 | Disturbed sleep | Present |
| 6 | Erythematus Plaques | Present |
| 7 | Scaling | Present |
| 8 | Auspitz sign | Present |
| 9 | Candle grease sign | Present |

Assessment Criteria.**1. Pani pada Sphutanam (Fissures in both palms and soles.**

- 0- Absent
1- Mild
2- Moderate
3- Severe

2. Tivratara vedana (Pain)

- 0- Absent
1 - Mild
2 - Moderate
3- Severe

3. Kandu (Itching)

- 0 - Absent
1- Mild
2- Moderate
3- Severe

4. Vibandha (Constipation)

- 0 - Absent
1- Mild
2- Moderate
3- severe

5. Disturbed sleep

- 0 - Absent
1- Mild
2- Moderate
3- Severe.

6. Erythematus Plaque

- 0 - Absent

With scaling
1- Mild
2- Moderate
3- Severe

7. Scaling

- 0- No scaling
1- Mild scaling from some lesions.
2- Moderate from some lesions
3- severe scaling from some lesions.
4- very severe scaling from all lesions

8. Candle grase sign

When a psoriatic lesion is scratched with the point of a dissecting forceps, a candle grease like scale can be repeatedly produced.

- 0- Absent
1- improved
2- present

9. Auspitz sign

On complete removal of the scales, ared, moist surface is seen. On further scarping, punctute bleeding points are seen.

- 0- Absent
1- present
2- improved

IV. Treatment Given

| Procedure | Medication | Dose | Duration |
|--|---|---|--|
| 1. Deepan-pachana | Panchakola Phanta | 30 ml twice a day | 8 days Nirama Lakshana observed |
| 2. Snehapana | Panchatikta ghrita | Day 1 – 30 ml Day 2 - 60 ml Day 3 – 90 ml Day 4 – 120 ml Day 5 – 130 ml | 5 days Samyak snigdha lakshana observed. |
| 3. Sarvanga abhyanga and sarvanga bashpa swedana | With Murchita tila taila. Panchatiktakwata | Day 6,7,8 45 min 10-15 min. | After 3 days Samyak snigdha samyak swinna lakshana observed. |
| 4. Pradhan Karma i.e. Virechan Karma | Abhayadi Modaka with Triphala kwatha. | 2 tab 50 ml | 1 day |
| 5. Paschat Karma Samsarjana Karma | Rice gruel + greengram gruel i.e. Peya, Vilepi, Yush (Akruta & Kruta) | Day 9 th only at night Day 10, 11 & 12 | 3 days |
| 6. Bahi parimarjana with Locally ropana | Jatyadi taila | 10 to 20 ml daily on both palms and soles | For 15 days Palmar and solar skin get softened. |

1) Rukshan/Pachan: given upto 5 days and Nirama

| Signs and symptoms | BT | AT |
|----------------------|----|----|
| Pani pada sphutanam | 3 | 1 |
| Kandu | 3 | 0 |
| Tivratarā vedana | 3 | 0 |
| Scaling | 3 | 1 |
| Erythematous plaques | 2 | 0 |
| Vibandha | 3 | 0 |
| Disturbed sleep | 2 | 0 |
| Candle grease sign | 2 | 0 |
| Ausptiz sign | 2 | 0 |

Photographs



Before treatment



After treatment



Before treatment



After treatment

DISCUSSION

In above case study, patient got significant relief from the symptoms of Vipadika (Palmo-Plantar psoriasis.) Panchakarma i.e shodhan chikitsa is a unique specially to avoid the recurrence. In this case study, virechan chikitsa showed good results along with Jatyadi taila local application helped accelerating the healing process in skin lesions.

The treatment plan includes deepan-pachana with panchakola phanta helps for amapachana, snehapana with Panchatikta ghrita helped for dosha-utklesha as it is of lipid binded protein mixed with medicaments enter the cells and get mix up with toxins and waste products of metabolism. Then the purgative drug (abhayadi modaka with triphala kwatha) in empty stomach when pyloric end is open. The drug passes quickly to the intestine, where while passing through it produces inflammation in it which increases the permeability of vessels of the intestine.

Due to this vyavayi, vikasi and sukshma properties, virechana drug (abhayadi modaka with triphala kwatha) quickly reach up to the cellular level where two nexus of toxins with tissues except ushna and tikshna guna broke down the complicated nexus into smaller and relatively less harmful molecules which can be removed out of the cell. These released toxins and waste products of metabolism are brought to the intestine and due to purgation action they are thrown out of the body.

Jatyadi taila accelerated the healing process of skin lesions with softening.

CONCLUSION

In this case study, we got significant results of Virechan and Jatyadi taila application as bahi parmajana chikitsa and this attempt was made to provide safe and effective treatment to the patient within short period.

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