

SUCCESSFUL TREATMENT OF AN ATYPICAL VERRUCA VULGARIS (COMMON WARTS) THROUGH UNANI MEDICINE: A CASE REPORT**Qutubuddin Khan***

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ABSTRACT

Verruca (Warts) is an infection of the epidermis with human papilloma viruses. A number of clinical variants depend on the type of virus, mode of entry and immune status of host. Verruca vulgaris manifest mostly single or multiple, circumscribed, firm, spiny papules or nodules with verrucous dry surface on hands and feet. In Unani System of Medicine (USM) many types of *Basoorat*, described with their pathology, clinical presentation and treatment are almost related to warts. Various therapies like *Moaddilate Dam* (Blood purifier), given orally and *Jali* (Cleanser) are used topically in the treatment. In this case apple cider vinegar was used as topical application as a cleanser, have antiviral and cytotoxic properties. Here, a case study of 32 years male, with the complaints of multiple papules, hyperpigmented, coarsy, firm eruption on both lower legs (Left>right) for about one year, diagnosed as Verruca vulgaris was treated with oral & topical Unani drugs. After 100 days of treatment a significant improvement was observed and depicted here in photograph of the skin lesions.

KEYWORDS: Verruca vulgaris, *Moaddilate Dam* (Blood purifier), *Jali* (Cleanser), antiviral, cytotoxic.**1. INTRODUCTION**

Verruca vulgaris (Common Warts) is an infection of the epidermis with one of the numerous human papilloma viruses, manifest mostly single or multiple, circumscribed, firm, spiny papules or nodules with verrucous dry surface, stippled with black dots.^[1,2,3] They are transmitted from one individual to another through broken skin. It is caused by Human papilloma virus (HPV), a DNA virus, which enters the epidermis through trauma.^[4] Contagion probably depends on several factors, including the location of lesions, the quantity of infectious virus present, the degree and nature of the contact, and the general and HPV-specific immunologic status of the exposed individual. Individuals with impaired cell-mediated immunity are susceptible to infection, which occurs through inoculation of virus into the viable epidermis through defects in the epithelium. Maceration is an important factor. It's Virus trigger keratinocyte proliferation and consequently are seen as elevated keratotic lesions on skin. It is classified by their clinical location or morphology, can have a varied clinical appearance from filiform to hyperkeratotic lesions. Non-genital warts are frequently seen in children and young adults; the incidence may approach 10%. Black dots (thrombosed black vessels), seen on removing the top layer with a scalpel, is a diagnostic sign.^[4]

In USM, Warts is not described as such, but different types of *Basoorat* having a semblance with them are mentioned. These are eruptions on skin surface and their possible causes has been described and treated as well. Various therapies are used such as *Moaddilat-e-Dam* (Blood purifier), *Mohallil* (Anti-inflammatory) and *Dafe Ta'ffun* (Antiseptics) to normalize temperamental derangements, resolve inflammation and prevent *Ajsame Khabisa* (infectious agents) while *Jali* drugs (Cleanser) are used topically. Vinegar (*Sirka*) is one of the many formulations used extensively specially in chronic *Basoorat*.^[5,6]

2. OBJECTIVE

The objective of this paper is to present a case study of Verruca Vulgaris and their management through USM.

3. MATERIALS AND METHODS**3.1 Case Report**

A 52 years old male patient came to the Skin OPD with complaints of multiple spiny, hyperpigmented, coarsy and firm papules, gradually developed on both lower legs, in one year of duration. Left leg was more affected than right leg.

3.2 History of present illness

The patient was apparently well before 1 year then he gradually developed papular rashes over both lower legs.

Over a period of time, the patient developed mild itching which was localized to the lesions.

3.3 History of past illness

There was no medical history of Diabetes, Hypertension, Tuberculosis and Diabetes. No history of any major surgery or trauma.

3.4 History of Allergy

There was no history of contact with industrial irritant, poisonous ivory and congress grass (*Parthenium hysterophorus*).

3.5 Family History

There was no familial history of Epidermodysplasia Verruciformis and eczema.

3.6 General physical examination

General appearance was fair; Cyanosis and icterus not present and Clubbing absent. Oral mucosa was normal

pinkish and no sign of pharyngitis, tonsillitis and stomatitis.

3.7 Dermatological findings on examination:

Multiple, hyperpigmented, elevated, Papules present over both (left>Right) lower leg. Hard and Coarse on palpation.

4. TREATMENT

Patient was given both oral and topical drugs and was under treatment for 100 days in Skin OPD of National Institute of Unani Medicine Hospital, Bangalore.

4.1 Oral: Decoction of *Joshanda Musaffi* 12 gm, prepared freshly in water was given twice on empty stomach in the morning before breakfast and evening at around 5 PM. *Majoon Ushba* was given 7 gm twice a day after food with plain water.

4.2 Topical: Unfiltered apple cider vinegar (*Sirka*) was used for local application twice a day.

Composition of *Majoon Ushba*^[8]

Drug	Scientific name	Ratio
Post halelazard	<i>Terminalia chebula</i>	17.5
Post halelakabuli	<i>Terminalia chebula</i>	17.5
Post balela	<i>Terminalia belerica</i>	17.5
Halelasiyah	<i>Terminalia chebula</i>	17.5
Shahtra	<i>Fumaria officinalis</i>	17.5
Bisfajj	<i>Polypodium vulgare</i>	17.5
Turbud	<i>Ipomoea turpethum</i>	17.5
Aftimoon	<i>Custareflexa</i>	17.5
Amla	<i>Emblicoefficialis</i>	10.5
Burge Sana	<i>Cassia angustifolia</i>	35
Ushba	<i>Smilax officinalis</i>	60
Qandsafaid	Sugar	3 time of total drugs

Composition of *Joshanda Musaffi*^[10, 11, 12, 13]

Drug	Scientific name	Dose (g)
<i>Shahatra</i>	<i>Fumaria officinalis</i>	3 gm
<i>Chiraita</i>	<i>Swertiachirayita</i>	3 gm
<i>Gule Surkh</i>	<i>Rosadamascena</i>	3 gm
<i>Berge Neem</i>	<i>Azadirachta indica</i>	3 gm

5. RESULTS AND DISCUSSION

Spiny papules, hyperpigmentation, roughness and firmness were observed on scale of mild (1), Moderate (2), and severe (3). The patient was carefully observed weakly and or fortnightly. On zero day of treatment papules, hyperpigmentation, roughness and firmness scores were all 3. After 15 days of treatment papules, hyperpigmentation roughness and firmness were slightly decreased. After 35 days, treatment scores of papules, hyperpigmentation, roughness, and firmness were 2, 3, 2 and 3 respectively. After 65 days of treatment, scores of papules, hyperpigmentation, roughness, and firmness were 1, 2, 1 and 1, respectively. After 85 days of treatment scores of papules, hyperpigmentation, roughness, and firmness was 1, 2, 0 and 0, respectively.

After 100 days of treatment, scores of papules, hyperpigmentation, roughness, and firmness were 0, 1, 0 and 0, respectively. After 20 days of post treatment, follow-up (on day 120) no recurrence of eruption was observed.

From the above result, it is obvious that Unani treatment was found effective in the management of *Verruca vulgaris*. Ingredients of *Joshanda Musaffi* comprises *Shahatra* (*Fumaria officinalis*), *Chiraita* (*Swertia chirayita*), *Gule Surkh* (*Rosa damascena*) and *Berge Neem* (*Azadirachta indica*). They all are *Muaddilate Dam* (Blood purifier) and immunomodulator and extensively used in various skin disorders. *Shahatra* eliminates *Mirrah Safra* and *Sauda Muhtariqa* through

diuresis. Berge Neem has *Dafe Ta'ffun* (antiseptic), *Muaddil Dam*, *Musakkin* (analgesic), *Muhallil* (anti-inflammatory) properties. Afteemoon (*Cuscuta reflexa*), Halela (*Terminalia chebula*), Balela (*Terminalia bellerica*), Bisfaij (*Polypodium vulgare*) all have *Mushile Sauda* (black bile specific purgative) properties. *Ushba* (*Smilax officinalis*) has blood purifying and diuretic properties.^[5,6,7,8,9,10,11] Apple cider vinegar has antibacterial, antifungal, antiviral properties and cytotoxicity aspect proven in some previous studies.^[2]

Photograph of lesions Day wise



Zero Day

15th Day35th Day42th Day65th Day85th Day100th Day120th Day

6. CONCLUSION

It can be concluded from the result that Unani treatment can provide effective and promising effect in Verruca Vulgaris with least side effects. However, further clinical trials with large number of subjects should be carried out to further evaluate efficacy and safety of drugs used.

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