

## ROLE OF *PRACHHAN KARMA* IN THE MANAGEMENT OF *SHVITRA* (VITILIGO)

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### ABSTRACT

*Shvitra* or Vitiligo does not possess much internal pathology or mortality, but its ugly appearance disturbs a person a lot. Large community prevalence studies have demonstrated that about 20-30% of the world population have various skin problems requiring attention. *Shvitra* is troublesome because there is lack of particular remedy for radical cure and its poor prognosis. In modern science, PUVA therapy and corticosteroids are chiefly used for treatment of disease. These drugs have harmful side effects like skin burn, nausea, dermatoheliosis i.e. ultraviolet ageing of skin etc. So it is really needed to find a safe, easier, less complicating, cost effective and fruitful approach for the management of disease through *Ayurveda*. Here, a single case study of a 23 years old male is being presented, who came with complaints of white patches over left shoulder, Itching, Burning sensation. Considering the signs and symptoms of *Shvitra*, the treatment of *Shivtra* were planned according to *Acharya Sushruta* i.e repeated *Prachan karma* followed by *Bakuchichurnaavachurna* complete remission in signs and symptoms of *Shivtra* were found.

**Keywords:** *Shivtra*, Vitiligo, *Prachankarma*.

### INTRODUCTION

Desire to become beautiful is very much related to become white, though white colour reflects cleanliness, peace and calmness, but excess in whiteness again disturb physical as well as psychological homeostasis of a human being. *Shvitra* is one such kind of disease which affects the skin<sup>1</sup>. All the skin diseases in *Ayurveda* have been described un-

der heading of *Kushtha*, which are further divided into *MahaKushtha* and *Kshudra Kushtha*. However *Shvitra* has not been counted among various types of *Kushtha* in *Brihat-trayi*. Later on this has been included under types of *Kushtha* by various *Acharya*. Though *Shvitra* is mentioned along with other types of *Kushtha*, but the difference between *Shvitra*

and *Kushthais* based on non-secretory and non-infectious nature of disease, involvement of *Twakonly*, peculiarity of *Nidana*, *Asadhya-Lakshana* and chronicity. According to Modern dermatology, *Shvitra* can be correlated with Vitiligo and Leucoderma. *Shvitra* is just not a disease of today's era, but has caused a lot of suffering to human being since a long time. Its effect is observed more on human mentality and social relations than on human body. Due to people's superstitious belief, that this disease is contagious; also *Shvitra* produces ugliness in appearance. Because of all these reasons, persons suffering from this disease are frequently ignored by society.

According to *Ayurveda*, *Shvitra* is enumerated as *RaktajaVikara*<sup>2</sup> and *Rakta* and *Pitta* are corre-

lated with *Ashaya*– *Ashrayibhava*. So, mainly *Pitta (Bhrajaka)* gets vitiated, which is responsible for normal skin color, leads to white colored skin patches, named as *ShvitraVyadhi*. Melanin pigment is present in external skin layer, responsible for particular skin colour. According to modern medicine, there is deficiency of this pigment either locally or in whole body's skin, which causes whitening of skin.

**CASE REPORT:** A 23 years old Hindu male patient residing in Kankariya (Ahmedabad) came to OPD of *Panchkarma* Department of Govt. Akhandan and Ayurved College & hospital, Bhadra Ahmedabad, on 6 July, 2016; with the following complains:

**Table 1:** Chief Complaints:

Sr.No	Chief complaints (Present history)	Time duration	Severity of the symptoms
1.	White patches over left shoulder	2 Month	Moderate
2.	Itching	2 Month	+++
3.	Burning sensation	2 Month	+++

### HISTORY OF PRESENT ILLNESS

Patient was asymptomatic before 2 and half month. Then gradually he had developed white patches on his left shoulder. He had itching on patches and also felt burning sensation after itching. So for proper treatment he came here in our hospital.

**PAST HISTORY:** - No relevant past history was found.

**TREATMENT HISTORY:** -Patient had not taken any kind of medication

### NIDANA<sup>3</sup> FOUND IN THE PATIENT

#### *AaharajNidana*

Most of the *Nidans* mentioned by *Aacharya-Charak* were found in the dietary history of the

patient like excessive consumption of *Drava*, *Snigdha* and *GuruAhara*, *Pishtanna*, *Kshir* and occasionally *Viruddhaahara*.

#### *ViharajNidana*

*Vyayam* and *Atisantapsevan* after consumption of food, *Diwa swap*, irregular *Shitaush-nasevan*,

### ADDICTION:

Addiction of tobacco, smoking since 5 years. Excessive intake of coffee 5 to 6 times a day.

**FAMILY HISTORY:** Father had history of *Shvitra*

### TREATMENT PROTOCOL:

**Karma** – *Prachhan karma*<sup>4</sup> was selected.

**Equipments and drug:** needle no.22, Alcohol swab, surgical gloves no 7, cotton swab, *Bakuchichurna*<sup>5</sup>

**Method**

**Purva karma:-**

Procedure was explained to the patient and consent was taken. On the day of procedure, as an aseptic precaution local area was cleaned with Alcohol swab.

**Pradhana Karma**

Needle no.22 was taken and continuously close pricks were made over the affected area.

After sufficient bloodletting clotted blood was removed with the help of cotton swab then *Bakuchichurna* was sprinkled at the affected site, after that bandaging was done.

**Paschat Karma**

Patient was advised to leave the bandage for whole day. Patient was advised not to use soap.

**Advice after treatment**

Not to wash affected part on the day of procedure, Avoid pollution, exposure to sunlight, spicity and junk food.

**Table 2: TREATMENT SCHEDULE CHART**

Date	Procedure	Observations
6/6/2016	<i>Prachanna</i> followed by <i>BakuchichurnaAvchurna</i>	Pain and itching sensation
13/6/2016	<i>Prachanna</i> followed by <i>BakuchichurnaAvchurna</i>	Pain and redness, irritation at the site
20/6/2016	<i>Prachanna</i> followed by <i>BakuchichurnaAvchurna</i>	Redness and Pain at the site
27/6/2016	<i>Prachanna</i> followed by <i>BakuchichurnaAvchurna</i>	Pain, no redness, no itching repigmentation initiated at site
4/7/2016	<i>Prachanna</i> followed by <i>BakuchichurnaAvchurna</i>	Repigmentation seen at site
11/7/2016	<i>Prachanna</i> followed by <i>Bakuchichurnaavchurna</i>	repigmentation seen at site
18/7/2016	<i>Prachanna</i> followed by <i>BakuchichurnaAvchurna</i>	repigmentation seen at site
25/7/2016	<i>Prachanna</i> followed by <i>BakuchichurnaAvchurna</i>	repigmentation seen at site
1/8/2016	<i>Prachanna</i> followed by <i>BakuchichurnaAvchurna</i>	Complete repigmentation seen at site seen at site

**ASSESSMENT<sup>6</sup>**

**Table 3:** Assessment was done on the basis of the criteria like size, colour, numbers and chronicity of the patches.

Involved Body Part	Percentage	Subtotal	Total
Head and Neck	Scalp	2.0	9
	Face	5.0	
	Neck	2.0	
Thorax	Dorsal	9.0	18
	Ventral	9.0	
Abdomen	Trunk	9.0	18
	Back	9.0	
Upper limbs ( Right + Left)		(9R + 9L)	18
	Finger to elbow	(4.5R+4.5L)	
	Dorsal	2.25	
	Ventral	2.25	

	Elbow to shoulder			
	Dorsal	2.25		
	Ventral	2.25		
One lower limb			(18R + 18L)	36
	Finger to knee		(4.5R+4.5L)	
	Dorsal	4.5	9	
	Ventral	4.5		
	Knee to leg		9	
	Dorsal	4.5		
	Ventral	4.5		
Perineal Part		1.0		1.0

#### A. Size of Patch

Size	Score
1cm	1
2 cm	2
3 cm	3
4 cm	4
>4 cm	5

#### B. Colour of Patch

Colour of Patches	Score
Normal Skin colour	1
Red colour	2
White to reddish	3
Red to whitish	4
White	5

#### C. Number of Patches

Number of Patches	Score
1	1
3	2
4	3
5	4
>4	5

#### D. Chronicity of Patches

Chronicity of Patches	Score
1 year	1
2 year	2
3 year	3
4 year	4
>4year	5

- Total score was obtained from calculation of table (1) to (4).
- Maximum score was 25.
- Then they were divided into mild, moderate and severe category as below.

Category	Total Score
Mild	1 to 8
Moderate	9 to 16
Severe	17 to 25

### DISCUSSION

*Svitra* is described as one type of *Kustha* in *Charak* and *Sushrutsamhita*. According to *Acharya Sushrut* it occurs in the 4<sup>th</sup> layer of the skin which is *Tamra*.<sup>7</sup> *Acharya Sushtuta* has described *Prachhan karma* for the treatment of *Pindita*.<sup>8</sup> *Pindita* means the *Doshas* staying in *Twacha*, hence *Prachhan Karma* was selected for the eliminations of *Doshas*. According to *Aacharya Charak* when *Pitta Dosha* is predominant the line of treatment should be *Virechan* and *Raktamokshan*.<sup>9</sup> In this case the mainly *Raktadushti* was found in *Dhatus* so *Raktamokshan* was preferred over *virechan*. *Aacharya Sushruta*<sup>10</sup> has described 2 types of *Raktamokshana* for the elimination of *Dushtarakta*, which are *Prachhan* and *Shiravyadhan*. So, for elimination of

*Pindita Dosha* and *Dushta Rakta* repeated *Prachhan Karma* was done followed by *Bakuchi Churna* application on the *Prachhana* site. Nine sittings of *Prachhana Karma* were done at an interval of 7 days. Total treatment schedule was of two and half months. Proper follow up of the patient was taken for 3 months after completion of the treatment. Complete remission of the disease was found in the patient as he followed the *Pathya Apathya* also very strictly.

## CONCLUSION

There are many types of *Karmas* described in the treatment of *Shvitra* like *Vaman*, *Virechan*, *Raktamokshan*. In this case *Raktadushiti* was predominant in comparison to other *Doshas* hence *Raktamokshan* was preferred and complete remission of the disease was obtained.

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