

MANAGEMENT OF *EKA KUSHTHA* W.S.R. TO PSORIASIS THROUGH AY- URVEDA: A CASE STUDY

Kadam Krishna¹, JadhavViraj²

¹Ph.D. Scholar, Asst.Professor, Department of Rog Nidan Vikriti Vigyan,

²Associate Professor, Department of Rachna Sharira,

R A Podar Medical (Ayurved) College, Worli, Mumbai, Maharashtra, India

ABSTRACT

Psoriasis is a major problem among the society till today because of its ugly appearance which may disturb personal, familiar and social life of the patient. It is characterised by round, reddish, erythematous patches covered with dry, adherent silvery scales. In *Ayurveda*, almost all skin diseases are considered under *Kushtha*. Among that, *Eka-Kushtha*, one of the types of *Kushtha* is accepted as Psoriasis because the description and characteristic features of it are coinciding with description of Psoriasis. For present study, I had reported a 27 year male patient having symptoms of Psoriasis since from September 2011. He was suffering from round, erythematous, reddish patches over his both of legs and below both of his knee joints. Also he was feeling severe itching and dryness over affected lesions. Prior going for treatment, we carried out his routine blood investigations as Complete blood count, Blood sugar level, Liver function test, Renal functional test and routine Urine examination to rule out any possible associated disorder. But findings of these investigations were found within normal limit. There was no significant past history of any other chronic illness in patient. The patient was treated with *Vamana* therapy in *Panchkarma* followed by oral medications in the form of *Arogyavardhinivati* and *Patoladi Kwatha* for two months. Patient reported substantial symptomatic improvement after the course of *Vamana*. The improvement was significantly increased during course of subsequent therapy and oral medications.

Keywords: Psoriasis, *Eka-kushtha*, *Kushtha*, *Vamana*, *Arogyavardhinivati*, *PatoladiKwatha*

INTRODUCTION

Psoriasis is one of the most common dermatological diseases affecting most of the world's population. It occurs in all age groups and about equally in men and women. It is a chronic, recurrent inflammatory disease of the skin. The exact aetiology is still unknown, but many precipitating factors like genetic, environmental, immunological and psychological have been found to be influential in the expression of the disease¹. Psoriasis has been considered as

psychosomatic disorder where the effect of psyche has been stressed in both *Ayurveda* and Modern Science. In *Ayurveda*, almost all skin diseases can be taken under generalised term *Kushtha*. Psoriasis is considered as a one type of *Kushtha*². The symptoms of *Eka Kushtha* like *Aswedanama*, *Mahavastuma*, *Matsyashakalopamama* and *Abhrakapatrasama*, it seems to be more nearer to psoriasis³.

Aswedanama (absence of sweating) indicates absence of perspiration. *Mahavastuma* means extensive lesions invading whole body⁴. Psoriasis is spreading disease which occupies whole of the body. *Matsyashakalopama* (resembles scales of fish), explains the scaly nature and hyperkeratinisation which is occurring in the epidermis, scaling resembling scales of fish⁴. According to *Acharya Bhavprakash*, in *EkaKushtha*, skin lesions are *chakrakara* (rounded) and as like *patra* of *Abhraka* that is silvery like mica. These clinical features indicate the similarity between *Eka-Kushtha* and Psoriasis.

Psoriasis is a *Vata* and *Kaphadosh* predominant disease⁵. In *Panchakarma*, among *Shodhantherapy*, *Vamana* is the principle treatment for *Kapha dosha*⁶. *Acharya Charaka* defined *Vamanaas* a process in which waste products or toxins (*doshas*) are eliminated through upper channels that are mouth⁷. *Acharya Sharangdhara* explains that the process in which '*Apakwa*' *Pitta* and *Kapha* are forcibly expelled out through the upward route. *VatadoshaisYogvahi* that means it functions according to the accompanying *Kapha dosha*. Hence in case of *Eka-Kushtha*, *Vamana* has been selected as the purification mechanism. *Vamana* remains the best treatment for *Apakwa Kapha* as well as *Apakwa Pitta*. Oral medications which were prescribed to the patients were *Arogyavardhini Vati* and *Patoladi Kwatha* etc. All these conservative medications were used for the pacification of *Vata* and *Kapha*. These drugs possess mainly *Tikta* and *Katu-properties*⁸. Thus it was assumed that Purification mechanism in combination with oral medication would be helpful in the treatment of *Eka-Kushtha*.

Case-Report

History of the presenting illness: A 27 year old male was presented in OPD number 15 of Rog Nidan department presenting with chief complaints as itching and discoloration of skin, red patches of rounded to irregular shape, appearance of silvery scales guarding the patches over his both of legs below the knee joints.

Around about 4 years back the person was in a healthy situation, later he started with itching on skin at lower portions below knee joints and just above both ankle joints. The area affected with itching was slowly got discoloured and dry. Also there was appearance of red scaly patches guarded with silver scales. The patches were more pronounced at left ankle joint. Simultaneously he was suffering from constipation with forceful excretion of small amount of stool on alternate day. With this, he has got loss of appetite, mental stress and disturbed sleep. He has taken treatment of allopathic medicine for 1 year, but was not got relief.

When he visited to OPD, first of all we carried out his routine blood investigations as Complete blood count, Blood sugar level, Liver function test, Renal function tests and routine Urine examination to rule out any possible associated disorder⁹. But findings of these investigations were found within normal limit. There was no significant past history of any other chronic illness in patient. No history of any type of addiction was found.

Treatment Plan: The plan of treatment was done in two phases.

First Phase

First phase of treatment included *Sanshodhan Karma* (Purification mechanism) that is *Vamana* (process of vomiting) and it was strictly followed with *Purvakarma* (prior to

vamana) and Paschatkarma (after vamana) that is Sansarajana karma. Total period required for this process was 15 days.

Second phase: After Sanshodhana karma, second phase of treatment initiated in the form of oral drug. The composition of oral administration of drug was Arogyavardhini-Vatjand Patoladi Kwatha for a period of two month.

Preparation and process of Vamana: The Ayurvedic approach to the treatment of a disease consists of two major procedures, one is Sanshodhanachikitsa (Purification therapy) and other is Samshamanachikitsa (Pacification therapy). Samshodhanachikitsa is the radical treatment of a disease as it eradicates the vitiated Doshas from the body completely preventing or curing the disease. When vitiated Doshas are eliminated through the upper channels that is through mouth, is called as Vamana. After elimination of vitiated Doshas, the effect of oral medicines found to be more significant¹⁰.

Purvakarma

Deepana Pachana (Digestion): It is very essential process before any purification process. As with this process, Ama doshas (toxins) present in the shakha undergo digestion. For removal of Amadosha, stuck to the srotasas should undergo the process of digestion through DeepanaPachana. Thus the free doshas (toxins) can be easily eliminated outside the body through Vamana. For this the patient was administered Trikatu(Zingiberofficinale, Piper longum and Piper nigrum) Churna (powder form) in dose of 3gms thrice a day for 3 days with luke warm water¹¹.

Snehapana (Oleation): After three days of DeepanPachan process, Snehapana (Oleation) therapy was carried out in patient. Charaka quotes that Kapha glides flu-

ently towards Koshttha through the body, which is kept ready by Oleation and Fomentation, in the same manner as the water stream eloquently through the vessel coated with a layer of unctuous material¹². For this patient was administered with Mahatiktaka Ghrita¹³ in a dose of increasing order of 20ml, 40ml, 80ml, 120ml and 150ml with luke warm water for respective five days¹⁴. During this period, the patient was kept on semi liquid hot diet with less unctuous material.

Swedana(Fomentation): After completion of oleation therapy, patient was subjected for atapasevanathat is exposure of whole body to sunlight for near about 30-35 minutes or until profuse perspiration occurred. The patient was advised for complete rest on this day¹²

Pradhana Karma (Main Procedure)¹⁵

On this day, the patient was kept on nil by mouth (NBM) till the process of Vamanas-tart. Patient was unable to pass the stool therefore a simple warm water enema was administered. Abhyanga along with swedana was given to the patient. Phanta of Yashtimadhu(Glycyrrhizaglabra) as Vamanopaga (helpful for vomiting), which was prepared by using bharad (coarse form) of Yashtimadhu 700mg mixed with 3 litres of hot water¹⁶.

After general examination of patient, Pulse and Blood pressure was monitored. Then he was administered luke warm Godugdha (milk of cow) till he felt that his stomach was filled (2.5 litre) completely. The Vamaka yoga (preparation used for vomiting) that contained the drugs Madanphala(Randiadumetorum)¹⁷, Vacha(Acoruscalamus) and Saindhav(Sodium Chloride) in proportion of 4:2:1 mixed with Honey in total quantity of 7gms of it was

administered to patient (Table 1)¹⁸. After 15 minutes of administration of *Vamaka yoga*, patient was follow for *Vamanavega* (acts of vomitings) to commence on his own. Time and quantity of administration of *Vamanopaga dravyas*, acts of vomiting (major, moderate or minor) and amount of vomitus along with the contents were noted. The process was continued till patient was undergone through 8 major and 3 minor vomiting acts (*vegas*). When the appearance of vomitus was composed of medicine along with *Pitta* and *Vatadosha*, the procedure was stopped¹⁹.

Pashchat Karma (Process after Vomiting)

Dhumapana: After rest of 10 mins, *dhumapana* was given with stick made of *Aguru* (*Aquilariaagalloycha*) for 3-4 times by each nostril of patient²⁰.

Samsarjana Karma: Since patient was undergone in *pravar* (major) grade of purification (8 major and 3 minor *vega*) of *vamana*, he was advised to follow the dietetic and behavioural restrictions regimen of seven days²¹. In this dietetic and behavioural restrictions were given to patient. The sequence of regimen was planned as *Peya*, *Vilepi*, *Akrita Mudga Yusha*, *Krita Mudga Yusha*, rice with *mamsarasa* were served for 3 *aa-harkaala* (diets).

DISCUSSION

During the 15 day course of *Vamana*, patient had reported 50-60% improvement in his symptoms. He had got complete relief from itching. The discoloured skin and red scaly patches had developed quite normal lustre. The silver scales were disappeared. Also the patient had developed normal bowel habit. The treatment regime was planned in two phases. In the initial phase of the management patient was undergone through *Vamana karma*, one of the basic procedure

of *Panchakarma*. The principle of the therapy is until one expel out the morbid *Doshas* from the body. It acts mainly on vitiated doshas of psoriasis that is *Vata* and *Kapha*. In *Purvakarma* patient was administered *Mahatiktaka Ghrita*¹³ in an increasing manner. *Ghee* carries property of drug without leaving its own property. The ingredients are *Saptaparna* (*Alstoniascholaris*), *Ativisha* (*Aconitum heterophyllum*), *Shampak* (*Cassia fistula*), *Kutaki* (*Picrorrhizakurroa*), *Patha* (*Cissampelocpareira*), *Musta* (*Cyperusrotundus*), *Ushir* (*Andropogonmuricatus*), *Triphala* (*Emblia officinalis*, *Terminalia chebula*, *Terminalia belleria*), *Patola* (*Trichosanthesdioica*), *Nimba* (*Azadirachtaindica*), *Par-pataka* (*Fumariaparviflora*), *Dhan-wayasa* (*Alaghimouroum*), *Chandana* (*Santalum album*), *Pippali* (*Piper longum*), *Padmaka* (*Prunuscirasoidus*), *Haridra* (*Curcuma longa*), *Daruharidra* (*Berberisaristata*), *Vacha* (*Acoruscalamus*), *Vis-hala* (*Citrulluscolocynthis*), *Shata-vari* (*Asparagus racemosus*), *Sariva* (*Hemidesmosindicus*), *Krishna Sariva* (*Ichnocarpusfrutescens*), *Vasa* (*Adhatodavasica*), *Murva* (*Clematis triloba*), *Guduchi* (*Tinosporacordifolia*), *Kiratatika* (*Sweritachirata*), *Yashtimadhu* (*Glycyrrhizaglabra*), *Trymamana* (*Gentian kurroa*), *Gogh-rita* (*Butyrumdepartum*) etc. The drugs possess *Ushna*, *Tikshna*, *Vyavayi*, *Vikashi*, *Katu*, *Tiktarasatmaka* and *Katuvipaka*. It was observed that the action of drugs was mainly due to properties of these drugs which have *Dipan*, *Pachana*, *Amapachaka*, *Strotoshodhaka*, *Raktaprasadan*, *Raktashodhaka*, *Kandughna*, *Kushthaghna* and *Varnya mecha-*

nism of actions. They acted mainly for the eradication of *doshas* from whole body and brought them into *Koshtha*. It also pacified the symptoms like itching, discoloration and dryness due to aggravated *Vata* and *Kapha doshas*.

The main components of *Vamana* and their actions are as follows - *Madanaphala* (*Ran-diadumetorum*) in small doses acted as nauseant and provided useful as a nervinecalminativeand antispasmodic duringvomiting process. *Vachai*.e. *Acoruscalamus* was having spasmolytic action. *Yasshtimadhu* i.e. *Gly-cyrrhizaglabra* helped to lower the increasing blood pressure during the strenuous *Vamana* process. It also acts as smooth musclerelaxant. *Saindhava*.e. Sodium Chloride was said to be the best in helping the process of emesis. According to *Acharya Vagbhata*, it possesses the properties like *Vishyandi*, *Aruksha*, *Sukshma*, *Ushna*, *Vyavayi*. *Acharya Indu* clears that it increases secretions through channels, penetrates the minute channels and spread quickly to the whole body. *Madhu* was effective in breaking the *avarana* (shield) of fat tissue without aggravating the *Vata*. Thus *Vamana* pacified itching, diminished red scaly patches, reduced dryness, depressed some silver scales and mildly normalised the discoloration.

In second phase of treatment, the patient was administered with oral medications like *Arogyavardhini Vati*²² and *PatoladiKwatha*. *Arogyavardhini Vati* contains *ShuddhaParada* (Herbal Purified Mercury), *ShuddhaGandhaka* (Herbal Purified Sulphur), *ShuddhaLoha* (Purified Iron), *Abhrahkabhasma* (Purified Mica), *Tamrabhasma* (Purified Copper), *Triphala*, *ShuddhaShilajit* (Asphaltum), *ShuddhaGuggulu* (*Commiphoramukul*), *Twaka* of root of *Chi-*

traka (*Plumbagozeylanica*), *Ku-taki* (*Picrorrhizakurroa*) all are pasted in *swarasa* (juice extract) of leaves of *Nimba* (*Azadirachtaindica*). It was administered to the in a dose of 500mg twice a day with water after meal.

Dysfunctions of large intestine lead to constipation. Further there is disturbance or *dushti* of *Vata* in large and small intestine and in this way the required *Pitta* for digestion get disturbed. Also there occurs vitiation of *Kapha*, which is required for regulation of peristalsis movement in large intestine. These leads to delay of movements of stool which further results in production of organic toxins and get absorbed in interstitial skin, *Rakta Mamsadi dhatu*. Vitiation of *Vata* results its spread among all over body. Thus there is development of *Kushtha vyadhi* in body. *Arogyavardhini Vati* worked as Purificatory agent for large intestine and mainly on the organic toxins produced in large intestine.

The second content of oral medication was *PatoladiKwatha*²³. It contains leaves of *Patola* (*Trichosanthes dioica*), *Niryasa* of *Khadira* (*Acacia catechu*), *Triphala*, *Krishnavetra*, *Twaka* of *Nimba* etc. It was administered in a dose of 40ml twice a day²⁴ mixed with equal parts of water after meal. These drugs acted as stimuli for *Jatharagni* (digestive fire), digestive for food, Purifier for blood and also helped in the formation of formed stool. These prevented formation of *Amadosha* or toxins at *rasagni* and *draktagni* level. Thus patient was freed from complaints of constipation; he had started regular passage of stool. The lustre of his skin at affected lesions was more provoked with removal of discoloration and dryness of skin. In this phase of treatment, patient was kept only on oral medication for

a period of 2 months. After completion of 2 months of treatment, patient had got significant improvement in his all of the chief complaints, which was 80-90% according to

the patient. Now the patient is gradually improving and there is no recurrence of symptoms after the 4 months of follow up.

Table1: Preparation of Vamana

Ingredients	Quantity
<i>Madanphala</i>	4gm
<i>Vacha</i>	2gm
<i>Saindhav</i>	1gm

Table 2: Oral drugs, their Composition, Doses and Exact effect

Name of drug Compound	Ingredients	Dose	Frequency	Duration	Exact effect ²⁵
<i>Arogya-vardhinivati</i>	<i>ShuddhaParada, ShuddhaGandhaka, Abhrakabhasma, Tamrabhasma, Triphala, ShuddhaShilajit, ShuddhaGuggul, Chitrakmulatwaka, Kutaki</i> all pasted in <i>swarasa(rasa)</i> of Leaves of <i>Nimba</i>	2 tab (500mg each)	Twice a day	2 month	<i>Amadoshanashak, Hepatoprotective, Vata and Kapha nashaka</i>
<i>Patoladi Kwatha</i>	Leaves of <i>Patola, Khadira</i> , Fruits of <i>Triphala, Krishnavetra, Twaka</i> of <i>Nimba</i>	40 ml	Twice a day	2 month	<i>Kandunashaka, Raktashodhaka, Virechaka, Raktaprasadaka</i>

Table 3: Overall Effect of Vamana

Steps in Process of Vamana	Mechanism	Exact effect showed
<i>Dipana Pachana</i>	Removal of <i>Amadosha</i> Increase in <i>Agni</i>	<i>Ama-doshanashaka</i>
<i>Snehapana</i>	Pacification of <i>Vata dosha</i> Decrease in Burning Sensation Reduction in Scaling and Dryness	<i>Vata-doshashamaka</i>
<i>Abhyanga</i>	Removal of Dryness Decrease in Scaling	<i>Vata doshaShamaka</i>
<i>SarvangaSwedana</i>	Removal of Obstruction	<i>Strotas Shodhana</i> (Purification)

	Increase in Swedana	of system)
<i>Vamana</i>	Reduction in Itching Pacification of <i>Kaphadosha</i>	<i>Kapha dosha Shamaka</i>
<i>Dhumapana</i>	<i>Kaphadosha</i>	<i>Shiro Virechana</i>



Figure 1: First visit of patient to OPD



Figure 2: Visit of patient after *Vamana* Therapy



Figure 3: Visit of patient after Oral drug therapy

CONCLUSION

Ekakushtha (psoriasis) being a type of *Kshudra Kushtha* has dominance of *Vatadosha* and *Kaphadosha*. The principle behind the treatment for this disease is removal of *dosha*, through purificatory mechanism of *Panchkarma* like *Vamana* therapy. For that the patient suffering from

complaints of *Ekakushtha* was treated by *Vamana* therapy. Pacification of remaining *doshaswas* carried out in the form of oral medication as *Arogyavardhini Vati* and *Pataladi Kwatha*. The patient had got near about 80-90 % relief from symptoms. Thus the plan of treatment was found to be significant in the case of *Eka Kushtha* (psoriasis)

REFERENCES

1. Sir Stanley Davidson 13, Davidson's Principles and Practice of Medicine; Edited by Christopher, Hunter and Nicholas Boon; Published by Harcourt publishers; 1999 p. 900
2. Agnivesha, *Chikitsasthana* 7: 9-10, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p 248
3. Agnivesha, *Chikitsasthana* 7: 21, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p. 252
4. Ayurveda Dipika Commentary by Chakrapanidutta, *Chikitsasthana* 7: 21, Edited by VaidyaYadavajiTrikamji Acharya, Published by ChaukhambaSurbharatiPrakashana, Varanasi; 2005.p 451
5. Agnivesha, *Chikitsasthana* 7: 29, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p. 253
6. Agnivesha, *Chikitsasthana*7: 39, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p. 255
7. Agnivesha, *Kalpasthana* 1:4, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p 890
8. Agnivesha, *Chikitsasthana* 7: 58, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p 258
9. Vinay Kumar, Abul Abbas and Nelson Fausto; Pathologic basis of disease; Seventh Edition; Published by Elsevier publication, New Delhi; 2005 p. 1256-57
10. Agnivesha, *Kalpasthana* 1:5, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p 891
11. Tatwadipika, *Madhyamkhanda* 6:11-12, Hindi commentary by BhishakvachaspatiPanditDurgaduttaShastri, Shrangadhara Samhita, Varanasi, ChaukhambaVidyabhavan; 2002.p 346
12. Agnivesha, *Siddhisthana* 1:7, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p 960
13. Agnivesha, *Chikitsasthana* 7: 144-150, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p 270
14. Agnivesha, *Siddhisthana* 1:6, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p 960
15. Agnivesha, *Kalpasthana* 1:14, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p 897
16. Tatwadipika, *Madhyamkhanda* 3:1-2, Hindi commentary by BhishakvachaspatiPanditDurgaduttaShastri, Shrangadhara Samhita, Varanasi, ChaukhambaVidyabhavan; 2002.p 334
17. Agnivesha, *Kalpasthana* 1:13, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Sam-

- hita, Varanasi, ChaukhambaBharti Academy; 2001.p 896
18. Agnivesha, *Kalpasthana* 1:15, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p 898
19. Agnivesha, *Sutrasthana* 15:14, Hindi commentary by KashinathaShastri, Edited by Dr.GangasahayaPandeya; Charak Samhita, Varanasi, Chaukhamba Sanskrit Sansthan; 2011.p 219
20. Agnivesha, *Siddhithana* 1:15, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p 964
21. Agnivesha, *Siddhithana* 1:10, Hindi commentary by KashinathaShastri and GorakhNathChaturvedi, Charak Samhita, Varanasi, ChaukhambaBharti Academy; 2001.p 961
22. RasaratnaSamucchaya of Shri Vagbhatacharya 20:87-93, Suratnojjvala Hindi Commentary by Sri Ambikadutta-Shastri, Varanasi, ChaukhambaAmarbharatiPrakashan; 2003.p. 400
23. Vaidyaprabha, *Kushtharoga* Chikitsa 50:60, Hindi commentary by Dr.IndradevTripathi, Chakradutta, ChaukhabhaSanskritaSansthana; 2002, p.285
24. Tatwadipika, *Madhyamkhanda* 2:1, Hindi commentary by BhishakvachaspatiPanditDurgaduttaShastri, Sharanagadhara Samhita, Varanasi, ChaukhambaVidyabhavan; 2002.p 297
25. Bhavmishra, Edited by Chunekar KC, Pandey GS, BhavPrakashNighantu, Varanasi, ChaukhabhaBharti Academy; 2004

CORRESPONDING AUTHOR

Dr. Kadam Krishna

Dr.Ambedkar Nagar, Near Fire Station Road, Nanded, Maharashtra, India

Email: drkvjadhav@gmail.com

Source of support: Nil

Conflict of interest: None Declared