



THE POTENTIAL AYURVEDIC SHODHANA TREATMENT PROTOCOL IN THE MANAGEMENT OF EKAKUSTHA W.S.R. TO PLAQUE PSORIASIS – A CASE STUDY

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ABSTRACT

The Kustha Vyadhi mentioned in Ayurvedic texts occurs due to the vitiation of *Tridosha* and 4 *Dushya* (*Saptko-dravya sangrah*). They are divided into two main parts: *Maha* and *Kshudra-Kustha*. *Eka Kustha* (Psoriasis) is one of among the *Kshudra Kustha*. It is a chronic inflammatory skin disease usually present in the extremities, trunk, scalp, hairs, etc. This case study deals with a thirty-five-year-old female patient suffering from brown scaly plaques (*Matsyashaklopama*), *Sarvang Kandu* (Itching) and *Ragata* (Redness) who came to our college. In this case study, one sitting of *Ayurvedic Bahu-Sanshodhana* (i.e., *Vaman* followed by *Virechan* followed by *Nasya* and *Raktmokshan Karma*) was done.

Keywords: *Kustha Roga*, *Eka Kustha*, Psoriasis.

INTRODUCTION

Skin is the first and the outermost visible structure of the body. Eudermic skin is a reflection of internal health and wellness. Skin is the largest organ and link

between external and internal environment which is exposed to disease and injury. Skin conditions contributed about 1.79% to the global burden of disease,

as measured in disability-adjusted life years (DALYs), from 306 diseases and injuries in 2013.[1] Skin disease affects people of all ages, yet children are one of the most common victims of it.[2] Skin disorders are confounding and intriguing disorders.[3]

A common long-lasting and non-communicable skin disorder is Psoriasis.[4] It is a relapsing disorder affecting 2-3% of the worldwide population.[5] WHO considered psoriasis a serious non-communicable disease in 2014, and in 2016, the accompanying WHO report emphasised the need to understand the global burden of the disease better.[6] There are multiple types of psoriasis, of which plaque is the most common. Plaque psoriasis is a papulosquamous autoimmune disorder of the skin characterised by sharply defined erythrosquamous skin lesions.[7] Depending on the severity of the lesions, the percentage of affected body surface area, and the affected quality of

life of the patients, plaque psoriasis is categorised into two groups: mild or moderate to severe Psoriasis.[8] The most particular sites of the presentation of the disease are the trunk, scalp and extremities, which are symmetrical.[9] In India, the incidence of Psoriasis among total patients attending skin OPD is 0.44% to 2.8%.[10]

In Ayurveda, “Twak” and “Charma” are used for skin.[11] Acharyas explained various skin disorders under the heading of Kustha Roga. Vitiation of Tridosha and Dushya (Twak, Rakt, Mamsa, and Ambu) due to Mithyaahar- Vihar and Karma, are combinedly known as “Saptko- dravya sangrah” responsible for the production of Kustha Vyadhi.[12] Ekakustha, which is a subtype

Of KshudraKustha and have pre-dominance of Vata and Kapha Dosha can be better co-related with Plaque Psoriasis based on symptoms such [13] –

Table 1: Probable co-relation of Ekakustha with Plaque Psoriasis [14]

<i>Ekakustha</i>	Plaque Psoriasis
<i>Mahavastu</i>	Broad base lesions are found all over the body
<i>Matsyashakalopamam</i>	Well-defined raised macules, papules and erythematic plaques present which are covered with silvery scales.
<i>Krishna Aruna Varna</i>	The lesions are raised and erythematous thick lesion become black.
<i>Aswedanam</i>	The lesions of this disease are dry and rough

As per Ayurveda, Kustha is a disease of Bahya Rogamarga, so both Anta parimarjana (Internal) and Bahir- parimarjana (External) treatments should be used.[15] It is a condition of Bahu Dosha Avastha in which Bahu Sanshodhana (Vamana, Virechana, Nasya and Rakta-Mokshana) is the first line of treatment. Acharya Vagbhatta has suggested the use of repeated Sanshodhana in cases of Kustha in the following regimen: Vamana, Virechana, Nasya and Rakta-Mokshana at 15 days, one month, on every 3rd day and 6-month interval respectively.[16] So, here is a case of Plaque psoriasis (Eka-Kustha) reflecting the results of one cycle of Bahu Sanshodhana.

MATERIAL AND METHODS

A. Particulars of Patient:

Name- XYZ Gender- Female Age- 35 yrs.

Place- Gurukul campus, Haridwar Reg. No. – 707/4576

D.O.A.-25/6/23

D.O.D. – 15/8/23

B. Chief Complaint:

- The patient has complained of thick brown, scaly plaques over the arms, trunk, and lower limbs for five months (Matsyashaklopama).
- Lesions are present, and there are red demarcations along with severe itching.
- Dryness leads to itching, which is aggravated during the nighttime.

C. History of Present Illness: According to the patient, she was asymptomatic two years ago. After that, the patient felt burning sensation in the right

lower limb (shin of the tibia) followed by the eruption of a small papule (red colour, less than equal to 0.5 cm) on the surface of the right leg. The papule gradually increased in size along with eruptions and turned into plaque (Epidermal thickened elevated erythematous lesion greater than 1 cm). The lesion was associated with itching, burning sensation and stiffness in the right leg. On asking, there was the presence of Anupsya factors (ingestion of lavana rasa with milk and excess curd spl. during nighttime) and symptoms aggravated during the winter season. Pt. took treatment from the physician and got some relief. But then, after one year, there was a recurrence of the symptoms that aggravated rapidly, and her condition worsened. She was feeling economic as well as psychological distress due to her illness. She came to the Gurukul campus, Haridwar, Uttarakhand, Ayurveda University for Ayurvedic intervention. Past Illness: No P/H of HTN, DM and Thyroidism. Previous Treatment History: Allopathic Treatment (clobetasol propionate lotion for local application. Other

details were unavailable). Personal History: Appetite- Decreased Bowel- clear, Urine- Normal, Sleep- disturbed (due to itching), Addiction- NAD Diet- Mix

D. Dermatological examination:

- No. of lesion: Multiple in no.
- Borders and texture of lesion: Irregular and rough
- Onset: Gradual
- Area involved: Symmetrical and Generalized (Both exposed and unexposed surface)
- The affected part of the body: Involve arms, trunk and lower limbs
- Characteristics of lesion: thickness, redness and scaling.
- Clinical Sign: Auspitz and Candle Greese are positive.

E. Modern Parameters-

BP- 126/80mmHg Pulse-76/min.

RR- 18/min. Weight- 58kg

F. Ayurvedic Parameters (Asthvidha and Dashvidha Pareeksha) = NAD

G) Therapeutic Intervention:

Timeline of events and outcome of patient:

Date	Event performed	Patient observation
25/6/23	Onset of treatment (Deepan-Pachan start for process of Bahu Sanshodhana)	Brownish large size plaques on lower legs, scalp and trunkregion. Auspitz sign, Candle grease sign was present. PASI Score was 30.7
11/7/23	Completion of Vaman Karma	Significant improvement in symptoms of itching, scaling and redness. Mild improvement in Candle grease and Auspitz sign. PASI Score was 20.6
4/8/23	Completion of Virechana Karma	Marked improvement in symptoms of itching, scaling and redness. Mild improvement in Candle grease and Auspitz sign. PASI Score was 12.6
15/8/23	Completion of Nasya Karma and Raktmokshan	Marked improvement in symptoms of itching, scaling and redness. Mild improvement in Candle grease and Auspitz sign. PASI Score was 10.2
15/9/23	Follow-up	Symptoms like itching, scaling and redness are improved. Absence of Candle grease and Auspitz sign. PASI Score was 8.4

OBSERVATION AND RESULT:

The difference was observed before and after the whole treatment accordingly and compared as shown in the tables.

Improvement in subjective Parameters:

Table 6.

Sr. No.	Subjective Paramters	Grade (BT)	Grade (AT)
1.	<i>Aswedanama</i>	3	1
2.	<i>Rukshata</i>	4	0
3.	<i>Matsyashaklopama (Scaling)</i>	3	0
4.	PASI Score	28.5	8.4



25/6/23



11/7/23



4/8/23



15/8/23



15/9/23

DISCUSSION

Samprapti Ghatak: Dosha: Vata-Kapha Pradhan
Tridosha Dushya: Twak, Mamsa, Rakta, Lasika Ag-

ni: Jatharagni and Dhatwagni mandya Strotas: Ras and Raktvaha strotas

Stroto-dusti: Vimarga gaman Udbhavsthana: Amashaya, Pakvashaya Vyaktisthan: Twak

Vyadhi-swabhav: Chirkari

Hence, it is a condition of Bahu Dosha Avastha, so Bahu Sanshodhana (Vamana, Virechana, Nasya and Rakta-Mokshana) is the first line of treatment.[17]

Points in the selection of Sanshodhana Karma:

- 1.) Bahu Dosha Avastha of Kustha Roga
- 2.) Recurrence is the major issue of Psoriasis, and for such conditions, Ayurveda mentions

Sanshodhana Karma.[18]

Probable Mode of Action of Deepan-Pachan:

Purvakarma includes Deepan-Pachan and Snehan.[19] It helps in the separation of the Doshas

From the Dushyas, i.e. Dhatus in the body. Probable

Mode of Action of Vaman Karma: Eka-kustha is Vata-Kapha Pradhan Tridoshaj vyadhi. Kandu (itching) is the Nanatmaj Vyadhi of Vata Dosha, which is the main feature of Eka-kustha.[20] Kustha Roga is a Santarpan type of Vyadhi.[21] As per Ayurvedic texts, Vaman Karma is important for removing Kapha Dosha from the body.[22] Sansarjana karma after completing Vaman Karma enhances digestive power and body strength and thus helps produce good quality Rasa Dhatu from Ahar Rasa formed.[23]

Rakta Dhatu and Uttrotar Dhatu, i.e., Mamsa Dhatu and its Updhatu 'Twacha' formed, would be the best of their qualities.[24]

Probable Mode of Action of Virechana and Raktmokshan Karma:

Acharya Charaka and Acharya Sushruta have clearly mentioned that the vitiation of all three Doshas leads to Rakta Dushti, and thereby, Dushti of its Mala, i.e., Pitta, will take place.[25] Virechan Karma plays an important role in regulating Pitta and Rakta functions.[26] So, in psoriasis, Rakta and Pitta Shodhan by Virechana and Raktmokshan contributed to the achievement of earlier and better results.

Probable Mode of Action of Nasya Karma:

Nasya is one of the Shodhana Chikitsa mainly done in the Vata and Kapha dosha pradhan disorders, which are acts by both Srotovishudhhi and Brinhan of

the body.[27] Acharya Charaka described Pradhama-na Nasya for Kustha as it is Bahudoshaj Vyadhi.

- As per Ayurvedic texts, Murdha (Shira) is considered a place of all types of Gyanendriya and Karmendriya. As Nasa is the Dwara of Shira, the drug administered through the nose helps in the regulation of the function of the skin (Sparsh-nendriya).[28]
- According to Acharya Charka, Murdha is the place of Prana Vayu.[29] So, drugs administered through the nasal passage regulate the function of Prana Vayu, which in turn regulates other types of Vata, like Samana Vata. Regulation of Samana Vayu helps in digestion and can modulate intestinal dysbiosis.
- The ocular and maxillary branches of the trigeminal nerves, the vascular system, and the olfactory nerve plexus connect the nose to the brain. So, drugs administered through the nose stimulate the higher centers of the brain, showing regulation of endocrine and nervous system functions.[30] For Dhatu and balavrudhi of the patient, after Vaman Karma for 5 days and during Nasya and Raktmokshan, Shamana Sneha like Panchatikta Ghrita was given to prevent Vata Dosha Prakopa.

CONCLUSION

Observing the satisfactory relief observed in the current case, it may be inferred that though complete relief of the symptoms is not seen through the only *Bahu-Sanshodhana Chikitsa*, but *Ayurveda* can provide encouraging results in skin disorders.

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