



A MANAGEMENT OF SHWITRA BY AYURVEDIC MEDICINES – A CASE STUDY

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ABSTRACT

Skin disorders are common manifestation in present era and *Shwitra* being one of them, affects not only the quality of life but also the psychological state of mind, social wellbeing and economic growth of a person. This disease has become a major social embarrassment and economic burden for the patient. Thus, the following article discusses the method of treatment of the disease using *Ayurvedic* treatment methods including *Shaman Aushadhi* (*Kushtahar yog*, *Kandughana churna* and *Dooshivishari gulika* etc). Based on the signs and symptoms observed in the patient, a treatment protocol was advised. It can become a new way to achieve effective and safe care treatment and to show a significant improvement in a patient's condition. A 66year old male diagnosed with vitiligo vulgaris (*Shwitra*), presented with complaints of an increasing area and number of depigmented patches specifically over face which were treated by following the *Ayurveda* principles. On the basis of the patient's condition, *Prakruti* and *Samprapti ghatak* (pathological factors) a treatment protocol was designed which includes the *Shamana chikitsa*. The combination of various powdered herbs like *Bakuchi churna*, *Kushtahar yog*, *Vishaghan churna*, *Panchatikta ghritha guggulu*, *khadirarishtha* were advised to the patients with proper dietary instructions and restrictions. The treatment

protocol was found to be effective in the reversal of depigmented patches to re-pigmentation and it could be extended in future cases by using different combinations of drugs based upon the different *Ayurvedic* parameters to obtain even better results. It showed marked improvement in the patient's condition. According to one's *prakruti* and combinations of various potential ingredients, diets and lifestyle recommendations, it worked on the overall disease management. The management strategy was efficacious in recovery of the patients with the improvement in the re-pigmentation. The case was treated with compound *Ayurvedic* medicines over a period of 6 months with remarkable improvement which is evident from the inspection and photographs. The outcome of this clinical study will reveal further the effect of *Ayurvedic* medicine in vitiligo.

Keywords: *Shwitra*, vitiligo, *Kushtahar yog*, *Dooshivishari gulika Panchatikta ghritha guggulu*.

INTRODUCTION

The skin covers the entire external surface of the human body and primary point of contact with the outside world. Vitiligo is the most common pigmentation disorder in which patches of skin loses their colour (hypo melanosis of the skin and hair) due to its characteristic appearance, the white patches appear on the skin, melanocyte deficit and are called as *Shwitra* in *Ayurveda*. All kinds of skin diseases come under *Kustha Roga* in *Ayurveda* and *Shwitra* as one type of *Kushtharoga*^{1,2}. The word *Shwitra* has origin in the *Sanskrit* word *Shweta*, which means white patch³. *Shwitra* is a most common pigmentary disorder of the skin, which is induced by the vitiation of *Tridoshas* as well as *Dhatus* such as *Rasa*, *Rakta*, *Mamsa*, *Meda*⁴. *Shwitra* can be caused by impairment of the *Bhrajaka Pitta*, *Vata*, and *Kapha dosha*⁵. In *Ayurveda* one of the main causes for the disease is believed to be *Purva Janma Krita Paapa karma*⁶. The worldwide prevalence of 1% in India or some dermatological records show the incidence of vitiligo as high as 8.8%⁷. In which about 25% of the world's population, both adults and children are affected by this disease and causing disfigurement and serious disturbances in quality of life. Basic treatment of vitiligo in modern medical science is tropical creams, corticosteroids, radiations therapy, skin grafting etc which is an economic burden to the patient.

AIMS AND OBJECTIVES

To evaluate the effects of *Ayurvedic* medications in the management of *Shwitra* by single case study.

CASE REPORT

A 66-year-old male patient visited OPD of *Agad tantra Rishikul Ayurvedic* college Haridwar with complaints of white patches over the region of face on both side with multiple irregular sized patches for last 2 years. Initially lesions were small isolated, later progressively increased in size. Itching was mildly present. Burning sensation was not associated in this patient. The patient had taken *Allopathic* medicine treatment for a period of one and a half years without any definite improvement. As per the classical signs and symptoms, the patient was diagnosed as a case of *Shwitra*.

HISTORY OF PRESENT ILLNESS - The patient appeared to be normal until about 2 years ago, when the symptoms began with patches of depigmentation on both sides of the face. The number, size, and area of de-pigmented patches grew in number, size, area and with clearly marked boundaries with time. Hair depigmentation was also observed in the afflicted areas. Initially the patient received *allopathic* treatment, which did not stop the condition from worsening. After obtaining no significant symptomatic alleviation, the patient came for *Ayurvedic* treatment.

PAST HISTORY:

No history of above skin complaints before 2 years.

No history of HTN/ DM/ Thyroid disorder.

Patient had a desire for spicy food, ice-cream, meat, fish and he could not tolerate warmth.

FAMILY HISTORY- There was no family history of a similar skin disease.

PSYCHOLOGICAL HISTORY – 1. The patient was feeling embarrassed and depressed psychologically because of the discolouration of patches increased day by day from last 7 months.

LOCAL EXAMINATION

1. Site of lesion: both side on face
2. Distribution: Symmetrical
3. Itching: Mildly present
4. Discharge: Absent
5. Sensation: Present
6. Character of lesion: White coloured grouped and diffused lesion
7. Inflammation: Absent
8. Severity: Mild
9. Inflammation: Absent

PERSONAL HISTORY

1. Bowel: irregular bowel habits with feeling of incomplete evacuation of bowels
2. Bladder: frequency 5-6 times a day with no nocturia
3. Sleep: Disturbed
4. Diet: Mixed, excessive intake of Fish and Curd, Meat eating twice in a month, regularly
5. Occupation: RTO office, Haridwar.

GENERAL EXAMINATION –

Pallor: Present

Icterus: Absent

Cyanosis: Absent

Clubbing: Absent

Lymph node: Not palpable

Blood Pressure: 130/80 mm of Hg

Pulse: 78/min.

ASTHA VIDHA PARIKSHA:

Nadi: Samyak (76 beats per minute - regular)

Mala: Baddha Koshta(Constipated)

Mutra: 4- 6 times /day

Jihwa: Alpa-liptata

Shabda: Prakruta

Sparsha: Ruksha

Drik: Prakrusta

Akruti: Magdhyama

MATERIAL AND METHOD

Centre of Study - This study was carried out in OPD of Agad tantra Department Rishikul, Haridwar

Study design – Single Case study

Hetu and *Samprapti* of *Shwitra* according to *Ayurveda* which is correlated with the patient.

SAMPRAPTI GHATAKA–

Dosha - Tridosha (Pitta-Vata pradhana)

Dushya – Rasa, Rakta, Mamsa, Medas

Adhishtana – Twak

ASSESSMENT SCORE CHART (ASC)⁹-

Assessment of case was done on the basis of ASC.

Score	0	1	2	3
Type	No improvement	Stationary	Resistant	Progressive
Site of the lesion		Follicular	Mucosal	Acral
Number of patches	Absent	Single patch	Segmentary	Generalized
Hair in patch	Black	Mild black	White	
Margins of patch		Normal	Inflamed	
Colour of patches	Normal	Pigment spot on patch	Pink	Milky white
Re-pigmentation	Fully pigmented	Perifollicular pigmentation	Hyper pigmentation of margin	No pigmentation

> BASELINE ASSESSMENT SCORE OF THE PATIENT ON FIRST VISIT

Score	0	1	2	3
Type				Progressive
Site of the lesion			Mucosal	
Number of patches				Generalized
Hair in patch			White	

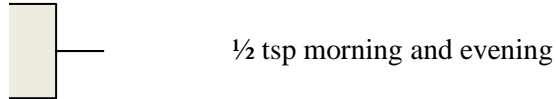
Margin of patches		Normal	
Colour of patches			Milky white
Re-pigmentation			No pigmentation

TREATMENT PLAN: PATIENT WAS TREATED ON OPD BASIS.

ORAL MEDICATION

Medication Dose Time of Administration

1. *Kushtahar yog* - 2gm
Vishaghan churna - 2gm
Bakuchi churna - 2gm with lukewarm water
2. *Shirish ghan vati* - 1 Tab BD morning evening after meal with Lukewarm water.
3. *Dooshivishari gulika* - 1 Tab BD morning evening after meal with Lukewarm water.
4. *Panchatikta ghrita guggulu* - 1TabBD morning evening after meal with Lukewarm water
5. *Khadirarist* - 20ml/ day with Lukewarm water
6. *Bakuchi oil* - L/A Twice a day



FOLLOW UP

Patient had been followed up every 15 days. After a 6 months follow-up, there has been no recurrence of pigmented areas. Before and after treatment patch changes are being represented in the figure.

FIG 1: (BEFORE TREATMENT)



FIG 2: (3 MONTH AFTER TREATMENT)



FIG 3: (6 MONTH AFTER TREATMENT)



ASSESSMENT AFTER THE TREATMENT

SIGN AND SYMPTOMS	BEFORE TREATMENT	AFTER TREATMENT (AFTER 6 MONTHS)
Type	Score 3	Stationary with score 1
Number of patches	Score 4	Absent with score 0
Hair on patches	White with score 2	Black with score 0
Colour of patches	Milky white score 3	4 patches with score 0
Re-pigmentation	no pigmented score 3	4 patches with score 0

OBSERVATION AND RESULT-

The patient was monitored for 6 months to see if there were any changes in skin pigmentation during the *Shaman Chikitsa*. The depigmented areas were reddish and scratchy initially, indicating that the treatment was proceeding with no new spots emerging since the diagnosis. After 4-5 months, normal pigmented patches began to appear in the affected areas. After 6 months of the same treatment, Re-pigmentation proceeded, and patches were noticed to change. Within six months, the bulk of the skin had returned to normal pigmentation. Regular oral use of *Kustahar yog*¹⁰, *Vishaghan churna*¹¹, *Bakuchi churna*¹² *Shirishghan vati*, *Panchatikta ghrita guggulu*¹³, *Dooshivishari gulika*¹⁴, and other ingredients with local application of *Bakuchi oil*¹⁵ reduces the size of vitiligo and changes the appearance of patches from white to normal skin colour. In the case of further study and investigation the treatment is continued.

DISCUSSION

In allopathic medicine, the main cause of vitiligo is autoimmune, genetic, psychological, endocrine, chemical and adverse drug interaction in modern medical sciences, so mainly photosensitizers and blood purifiers are used. *Shwitra* is *Deergha Roga* in *Ayurveda* and should be treated immediately. *Khadirarista*¹⁶ main ingredients include *Khadira* extract (*Acasia Catechu*). *Khadir* extract is used as an immune modulator, purify blood, astringent, bactericidal, refrigerant and antiphogistic agent. *Panchatikta Ghrita Guggulu* keeps the *Tridoshas* (*Vata*, *Pitta* and *Kapha*) calm¹⁷. It is blood purifier and good for skin diseases. It has many medicinal properties-Antioxidant, Antipruritic, Demulcent, purifies blood, Neuro protective, anti- inflammatory and Analgesic. It is helpful in digestive problems and also acts on digestive system. If *Agni* (digestion) becomes poor, it may cause various diseases in the body. Poor digestion leads to malabsorption which in turn produces more toxins in the body, which ultimately cause several disorders. *Panchatikta Ghrita Guggul* helps to eliminate toxins from the body. Main contents of *Vishaghan churna* and *Kustahar yog* has

several potential uses for skin health. *Kusthahar yog* is *Raktashodhak*, *Twachya* and useful in skin condition (*Kushtaghna*). *Dooshivishari gulika* is used in the management of various skin ailments and other allergic skin conditions, dermatitis and pruritis. *Vishaghan churna* has *Deepana* (Increase the secretion of gastric enzymes), *Ruchikara* (Tasty), *Baladayani* (Increase the body strength) properties. *Bakuchi oil* is an Ayurvedic medicinal oil prepared from the dried fruits of *Piper nigrum* (*Kali mirch*), *curcuma longa* (*Haridra*) and *Pongamia pinnata* (*karanj*), *Azadirachta indica* (*neem*) for treatment of dermatitis in Ayurveda. Photosensitizing agents involve *Bakuchi* (*Psoralea corylifolia*) contain psoralen to stimulate melanocytes when exposed to ultraviolet light exposure. The exact mechanism of action of psoralen with the epidermal melanocytes and keratinocytes to enhance pigmentation into the body is still unknown. The treatment consists of the oil application and sunlight exposure to the affected areas of the skin. The major secondary metabolite of *P. corylifolia* is the furanocoumarin, psoralen. Psoralen stimulates repigmentation by sensitizing the skin to ultraviolet light¹⁸. Photo chemotherapy is very valuable for the treatment of vitiligo. Psoralen has good photochemical response to ultraviolet as well as ultraviolet B. Because of this reason the treatment includes topical/oral treatment, followed by exposure to ultraviolet light or Sunlight. After recovery of this case, it can be said that Ayurvedic medication is useful in vitiligo without any adverse effect and many other studies also give successful results. In oral treatment the drug first affects the blood and via blood reaches to the epidermis while in topical treatment the drug direct effects the epidermis thus topical treatments are faster than oral treatments.

CONCLUSION

However, this case illustrates the best results of Ayurvedic treatment in vitiligo without any side effect. *Bakuchi Taila* for local application, *Kusthahar yog*, *Vishaghan churna*, *Panchatikta ghruta guggul*, *Dooshivishari gulika* and *Khadirarishta* are all effective in vitiligo. Sun light has additive effect on

melanocyte formation. This shows that if treatment is done according to *Ayurveda's* principles, with proper dosage and duration, as well as strict follow of pathya and apathya *Ahara*, it leads to success as in this case of vitiligo (*Shwitra*).

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