

AYURVEDIC MANAGEMENT OF SWITRA ROGA: A CASE STUDY**Keerthi Sudhakaran**

Assistant Professor Department of Panchakarma

Corresponding Author: keerthisudhakaranayu@gmail.com<https://doi.org/10.46607/iamj4113012025>

(Published Online: January 2025)

Open Access

© International Ayurvedic Medical Journal, India 2025

Article Received: 08/12/2024 - Peer Reviewed: 29/12/2024 - Accepted for Publication: 09/01/2025.

**ABSTRACT**

Skin is the largest organ of the human body. Skin complaints affect people of all ages, from the neonate to the elderly, and cause harm in several ways, such as discomfort, disfigurement, disability and even death. The condition can lead to a decline in quality of life and self-esteem as it tarnishes the beauty of the human body. Vitiligo is a common autoimmune pigmentary disorder of great socio-medical importance. It is characterised by white spots appearing on the skin due to melanocyte deficiency. Vitiligo is a condition presenting with whitish discolouration of the skin. It is an acquired condition in which circumscribed de-pigmented patches can be seen. The destruction of melanocytes, pigment-forming cells, causes a lack of melanin and colouring pigment, which leads to this condition. It affects 1-2% of the population worldwide. Onset is usually in childhood, and females are mostly affected. In Ayurveda, the science of life, the " Shwitra " disease can be correlated to vitiligo.

The present study aims to evaluate the action of Ayurvedic medications on Shwitra roga. Due to side effects and limitations of contemporary science, some harmless and effective medicines are expected from Alternative medical sciences. Ayurveda has excellent potential to treat such autoimmune skin diseases. Here, a case of acute vitiligo treated with Ayurvedic management is recorded. Here, I am presenting a case of 26 a 26-year-old girl who came to OPD with c/o white patches over the left side behind the neck region, and a notable improvement in the condition has been observed in this case.

Keywords: Autoimmune, Shwitra, virechana, Skin diseases.

INTRODUCTION

Vitiligo is a chronic disfiguring disease involved with systemic autoimmune process. It is characterised by constrained, idiopathic, progressive, hypo-pigmented or white patches of skin.^[1] The prevalence of Vitiligo is 1% all over the world, while its incidence ranges from 0.1 to > 8.8%.^[2]

Vitiligo is a skin disease commonly seen in OPD. Vitiligo involves focal areas of melanocyte loss. A positive family history of the disorder may be present in those with generalised vitiligo. The generalised vitiligo is often symmetrical and frequently involves the hands, wrists, knees, neck and areas around the body orifices. This type is associated with autoimmune diseases such as diabetes, thyroid, adrenal disorders, and pernicious anaemia. Satisfactory explanation is not available for pathogenesis. The usually accepted theory is that melanocytes are the target of a cell-mediated autoimmune attack. Segmental vitiligo is restricted to one part of the body. Trauma and sunburn may precipitate the appearance of vitiligo.^[3] The term leukoderma explains the depigmented patches of known causes like burns, etc.^[4] Shwitra roga, in Ayurveda, can be correlated to vitiligo as per modern medicine. It is usually caused by the simultaneous vitiation of all three doshas. It is of 3 varieties – daruna, aruna and kilasa as per Acharya Caraka. If located in rakta (blood), it is red in colour, while in mamsa (muscle tissue), it is of coppery colour, and when located in medo dhatu (fat), it is white; the severity increases subsequently.^[5] It can be co-related with Shwitra disease in Ayurveda due to the identical signs and symptoms, which are non-exudative white, red or coppery-red coloured patches, roughness, dryness, itching, burning sensation of the patches, loss and discolouration of the hair. Acharya Caraka has mentioned the nidana (causative factors) – untruthfulness, ungratefulness, disrespecting gods, insulting preceptors, sinful acts, misdeeds of previous life (papa kriya) and intake of incompatible food (Viruddhahara).^[6] Shwitra is considered asadhya (incurable) if the patches are matted together if there are several patches, if the tiny hairs over the patches are red, and if the patient has been suffering for many

years. It is sadhya if the small hairs over the patches are not red, if the skin is thin and white, if it is of recent onset and if the space between patches is elevated. The treatment of Shwitra includes vamana, virechana, raktmokshana, etc. Samana Chikitsa, both internally and externally, has been advised. Ayurveda also gives importance to Daivavyapashraya chikitsa.^[5] Pathya-apathya should also be given priority here. Ayurveda comprises many potent formulations for the treatment of chronic autoimmune diseases.^[6]

AIMS AND OBJECTIVES

1. To study the effects of Ayurvedic treatment in Switra
2. Shamana aushadhi impact after shodhana

MATERIALS AND METHODS:

The study was carried out with ethical principles, and consent was obtained from the patient.

CASE PRESENTATION

A female Hindu patient named Varsha Kumari, aged 26 years, from Maharajganj, reported to Panchakarman OPD (OPD. No: 2325), in ITMAMC, MAHARAJGANJ on 22/10/2022 with c/o white patches over left side behind the neck for 1^{1/2} months.

HISTORY OF PRESENT ILLNESS-

On taking a history, the patient was normal 1 1/2 months back. She noticed mild discolouration with itching and discolouration on the left side behind the neck. As it was a small lesion, she ignored it, and gradually, the size increased. She took Allopathic treatment from a nearby doctor for this complaint, but there was no improvement. Thus, she came here for alternate management. There is no relevant family or medical history.

- **Past History-** Not significant
- **Family History-** No family member has similar signs and symptoms.
- **Birth History-** Full-term normal delivery. Birth weight-2.75kg
- **Appetite** – Poor
- **Bowel** -Once-twice/day, hard
- **Urine** -Normal (5-6 times a day),
- **Sleep** - Sound sleep

- **Likes** -More of outside-packed food, biscuits & chocolates. Dietary habits revealed mixed dietary habits, with 4-5 glasses of water per day, tea twice daily and regular use of curd and oily junk food items.

General Examination

- Eyes - Pallor +
- Tongue - Clear
- Pulse Rate - 78/min
- RR-17/min
- BP -110/70mm of Hg
- Temperature – Afebrile
- Built - Moderate
- Weight -54kg
- Height-159cm
- Cyanosis -Absent
- Clubbing - No
- Oedema - No
- Lymphadenopathy - No

Systemic Examination

- CVS- S1 S2 Audible, no adventitious sound
- RS – NVBS, Chest clear
- P/A- Soft, no distention or organomegaly

Dashavidha pariksha

- Prakriti – Vatakapha
- Satmya – Madhyama,
- Vikriti – Kaphavata,
- Aharashakti – Madhyama,
- Sara- Madhyama,
- Vyayama Shakti – Avara,
- Samhanana – Madhyama,

- Vaya – Baala avastha
- Satva – Madhyama
- Pramana – Madhyama

Local Examination

1. Site of lesion - slightly bigger patch behind the Back of the neck, left posterior cervical side,
2. Distribution - Asymmetrical
3. Character of lesion (Pidaka Lakshanas) - Size:1-2 cm, Colour: White; Arrangement: Grouped
4. Itching – Absent Severity: Mild
5. Inflammation - Absent
6. Discharge - Absent
7. Superficial sensation on lesion – Normal sensation. Pain: Absent; Swelling: Absent

Samprapti Ghataka

- Nidana – Viruddha ahar-vihar
- Dosha - Udana, Vyana, Bhrajaka pitta, Shleshmaka kapha
- Dushya - Rasa, Rakta, Mamsa, Meda,
- Affected srotas - Rasavaha, Raktavaha
- Moolasthanana - Twak
- Sadhya / Asadhyata – Kashta Sadhya
- Agni- Slight mandya-lack of appetite
- Ama – Nirama
- Adhithana- Shakha, Prushta(back)

Diagnosis – Based on the clinical features (lakshanas) and examination (pareeksha), the case has been

diagnosed as switra roga (vitiligo).

Table 1: Haematological and Biochemical Parameters of the Patient

Haematological Parameters	Before treatment	After treatment	Biochemical Parameters	Before treatment	After treatment
TLC	9,500/Cumm	8,400/Cumm	Cholesterol	188 mg/dl	167 mg/dl
Neutrophils	63%	65%	FBS	94 mg/dl	94 mg/dl
Lymphocytes	33%	34%	S. Triglyceride	203 mg/dl	145 mg/dl
Eosinophils	02%	01%	HDL Cholesterol	56 mg/dl	56 mg/dl
Monocytes	02%	02%	Blood Urea	24 mg/dl	20 mg/dl
Basophils	1.7%	1.8%	S. Creatinine	0.8 mg/dl	0.9 mg/dl
Haemoglobin	12.9 gms%	13.1 gms%	S.G.P.T.	14 IU/L	14 IU/L
P.C.V.	37.8%	37.8%	S.G.O.T.	22 IU/L	20 IU/L

E.S.R.	32 mm/hr	21 mm/hr	Total Protein	7.5 gm/dl	7.5 gm/dl
Total RBC Count	4.78 mil/Cumm	4.78 mil/Cumm	Albumin	3.8 gm/dl	3.5 gm/dl
Platelet Count	380000cumm	330000cumm	Globulin	4.0 gm/dl	3.7 gm/dl

TREATMENT CHART

SHODHANA CHIKITSA

Table 2: SHODHANA CHIKITSA CHART

SL.NO	PANCHAKARMA PROCEDURE	MEDICINES USED	DOSE / QUANTITY	NO OF DAYS
1	VIRECHANA			
	<ul style="list-style-type: none"> DEEPANA PACHANA 	<ul style="list-style-type: none"> AGNITUNDI VATI ASTA CHOORNA 	2-2-2 (B/f) 5gm-5gm-5gm with a bolus of food	5days
	<ul style="list-style-type: none"> SNEHAPANA 	ARAGWADHAMAHATIKTAKA GHRITA	Arohana krama 1 st day -30ml 2 nd day -60ml 3 rd day -90ml 4 th day -120ml 5 th day -150ml	5days
	VISHRAMA KALA (GAP DAY) <ul style="list-style-type: none"> SARVANGA AB-HYANGA +SARVANGA BHASPA SWEDANA 	BAKUCHI TAILAM +NALPAMRADI TAILAM	150ml x 4days	4days
	<ul style="list-style-type: none"> VIRECHANA KARMA PROPER DIET PLAN -5 DAYS UTTAMA SHUDDHI SEEN -25 VEGAS 	TRIVRIT LEHYA	60 gm	1day

SHAMANA CHIKITSA :

Table 3: BAHYA CHIKITSA AND INTERVENTION

SL.NO	MEDICINE NAME	QUANTITY (B/F OR A/F)	NUMBER OF DAYS	ADJUVANTS
1.	TAB.SWAYAMBU GUGGULU	2-0-2 (A/F)	60DAYS	LUKEWARM WATER
2.	TAB AROGYAVARDHINI VATI	2-0-2 (B/F)	30DAYS	LUKEWARM WATER
3.	LUKOSKIN ORAL LIQUID	2ml-2m-2ml (A/F)	60 days	LUKEWARM WATER
4.	VIDANGA CHOORNA	5gm-0-5gm (B/F)	30DAYS	HONEY
5.	LUKOSKIN ointment twice daily	QS followed by sun exposure twice daily, morning and evening	60 DAYS	-

RESULT:

Changes were observed after taking the medications by following pathya-apathya strictly during treatment.

DISCUSSION

In Ayurveda, skin diseases are explained under the heading Kushta roga. Shwitra is also a skin disease which is mainly correlated with Vitiligo. Kushta is considered Rakta Pradoshaja vyadhi, a disease arising from the vitiation of rakta. It comes under the diseases affecting the bahya rogamarga. Virechana is the best treatment for pitta vikaras; pitta is the mala of rakta dhatu. In treating kushta roga, all the Acharyas accepted the role of sodhana. Acharya Cakrapani advises that vamana should be done every 15 days, virechana every 30 days, rakta-moksha every 6 months and avapidaka nasya every 3 days. As the patient is 26 years old, Koshtasuddhi is of greater importance before treating any disease. Proper digestion and bowel evacuation help expel unwanted and toxic substances from the body, i.e, the vitiated pitta and rakta dosha. The medications Agnitundi vati and Asta choorna were given in this case, aimed at improving the patient's digestion, hunger, immunity, etc., so that the action of the drugs would be much better. She was advised for arohanakrama snehapana with Aragwadha Mahatiktaka ghrita for snehana purpose so that there is proper utkleshana of doshas takes place and vishrama kala of three days were done where abhyanga with Bakuchi taila and Nalparadi taila and then virechana was done to provide the action of laxative in the form of trivrut lehya. Uttama Shuddhi was seen in the patient, and a proper diet pattern was followed five days later; shamana aushadhis were started. Swayambu guggulu was given, which has the action that helps in the removal of toxic substances from the body. Arogyavardhini vati helps to improve digestion and metabolism in the body. It acts as Dhatu Poshaka. If any Dhatu is im-

paired, we can use Arogyavardhini vati^[9] as here, four dhatus are involved in shwitra. It has anti-pruritic properties and antioxidant properties. It improves digestion and metabolic activities. Vidanga choorna, given with honey, acts as an antioxidant, neuroprotective, cosmetic agent, wound healing, antigenotoxicity, antifungal, and antidepressant. Lukoskin oral liquid, which activates melanin synthesis, modulates immunity, supplements copper and l-dopa, aids in melanin synthesis and restores antioxidants, was administered to the patient. It is very effective and helps restore the affected area's normal complexion. It helps in protecting the biological membrane from oxidative stress, inhibits bacterial growth, and thereby stimulates the immune mechanisms; the main ingredients of the medicines used are Bakuchi, Kapikacchu, Krishna Tulasi, Mandukaparni, atrilal (ammi majus) and lukoskin ointment was given for application with ingredients bal jadi, Bakuchi, vish naag, ark, kumari, Chameli taila, tila taila and ash of Bakuchi and vish naag The ointment was applied and exposure to sunlight was done at morning and evening. Sunlight exposure was done for about 20-30 minutes. Bakuchi (*Psoralea corylifolia*) is considered agrya dravya for treating Shwitra roga. It stimulates melanocytes to synthesise melanin pigment. It has anti-inflammatory and anti-fungal properties and modulates immunity; mild irritation was noted, a positive sign for erythema and pigmentation. Psychological involvement has been found in the pathogenesis and aggravation of Shwitra.^[10] Hence, diet restriction and psychological counselling were also helpful in managing the disease. After treatment, skin colour returned to almost normal surrounding skin colour. No new de-pigmented spots were noticed



VITILIGO DIAGNOSED 22/10/2022



AFTER VIRECHANA



LUKOSKIN OINTMENT APPLIED



CHANGES NOTED AFTER CHOORNA MONTHS



CHANGES AFTER TWO



CONCLUSION

Skin reflects the beauty of a healthy individual. Any impairment can cause cosmetic disfigurement. It is essential to recognise and deal with the physical and psychological factors of the disease to improve their healthy life and quality of life. Shwitra roga is considered a disease difficult to cure, as it is auto immune. Through sodhana therapies followed by samana therapies can manage the condition and reduce the prognosis, which can promise the patient a better livelihood in society. Proper medicines should be selected for this, considering the roga-rogi bala, dosha involvement, dushya, prakriti, ahara-vihara, etc. The chosen treatment should include both internal and external medications. Sodhana procedures help to remove the disease from its root causes. It is essential to treat both physically and mentally as skin diseases have a more significant impact on the individual's psychological level. Skin colour plays a critical role in society, and shwitra is a major skin disease

affecting the patient's quality of life. Even though this is a single case study, it can give us an idea of the unique line of treatment that is to be selected in such cases so with this single case study; we are trying to give an idea of the line of treatment of Shwitra through the Ayurveda perspective.

REFERENCES

1. Vitiligo. Problems and Solutions Lotti T. & Hercogova J., Editors, Marcel Dekker, Inc., New York (NY), 2004.
2. 2.Srivastava G. Vitiligo- Introduction Asian Clinic. Dermatol 1994; 1:1-5.
3. 3. Christopher Haslett, Edwin R. Chilvers, Nicholas A. Boon, Nicki R. Colledge Davidson's Principles and Practices of Medicine, 19th Edition, Churchill Living stone, An imprint of Elsevier Science, Pg. No: 1086.
4. 4. Acha Vidhyadharini, Chaitra. H, Ayurvedic management of Switra with special reference to Vitiligo: A case report, 2017, Journal of Biological & Scientific Opinion, Vol.5 (4), Pg.no:57.

5. 5. RK Sharma & Bhagwan Dash Caraka Samhita [Text with English translation & critical exposition based on Cakrapani Datta's Ayurveda Dipika], Vol.III, Published by: Chowkhamba Sanskrit Series Office, Varanasi, Reprint edition: 2012, Pg.no: 361.
6. 6. RK Sharma & Bhagwan Dash Caraka Samhita [Text with English translation & critical exposition based on Cakrapani Datta's Ayurveda Dipika], Vol.III, Published by: Chowkhamba Sanskrit Series Office, Varanasi, Reprint edition: 2012, Pg.no: 362.
7. 7. Neethu K. J, Kiran. M. Goud, Supreet M. J, Management of Shwitra through Ayurveda: A Case Study, Nov.2018, IAMJ, Vol.6, Iss.11, Pg.no: 2582-259.
8. 8. Shingadiya RK, Sharma R, Bedarkar P, Prajapati PK. Autoimmune bullous skin disease managed with ayurvedic treatment: A case report. Ancient Sci Life 2017; 36:229-33.
9. 9. Ambikadutta Rasaratnasamucchaya, Chaukhambha 9th Sanskrit; Shastri, edition, Publisher, Reprint-1994, chapter- 20 page. no. 400
10. 10. Shingadiya RK, Bedarkar PB, Patgiri BJ, Prajapati PK, Manani Y. Incidence of psychological stress as an etiological factor of skin disorders- A review through Ayurvedic clinical research. International Journal of Pharma Sciences and Research (IJPSR). 2017; 8(10):188-194.

Source of Support: Nil

Conflict of Interest: None Declared

How to cite this URL: Keerthi Sudhakaran: Ayurvedic management of switra roga: a case study . International Ayurvedic Medical Journal {online} 2025 {cited January 2025} Available from: http://www.iamj.in/posts/images/upload/253_259.pdf