



## CHRONIC ECZEMA MANAGED WITH AYURVEDIC TREATMENT - A CASE STUDY

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## ABSTRACT

**Background:** Atopic dermatitis, also known as atopic eczema, is a chronic inflammatory skin condition characterized by pruritic, erythematous, and scaly skin lesions often localized to the flexural surfaces of the body. A genetic defect in the filaggrin protein is thought to cause atopic dermatitis by disrupting the epidermis. This disruption, in turn, results in contact between immune cells in the dermis and antigens from the external environment leading to intense itching, scratching, and inflammation. Scratching can then lead to further disruption and inflammation of the epidermal skin barrier; this has been described as the itch scratch cycle. According to *Ayurveda*, it is *Raktapradoshajavikara*, in which *Tridosha* are involved, with dominance of *Kapha*. The management available in current mainstream medicine is unsatisfactory; Various *Ayurvedic* treatments have been in use for these manifestations.

**Case Presentation:** A 55 years old female patient presented with complaints of itching in both legs, sometimes in elbows, patches in both legs since 4 years. She has also known case of HTN since 10 years.

**Management & Outcome:** Patient was admitted in Vasant Prabha Ayurvedic Hospital and was put on *Ayurvedic* treatment that consisted of whole body *Abhyanga*, *Bashpaswedana*, rectal drug administration (*Niruhbasti*) and other medicaments. She stayed for 30 days in the hospital. This case highlights the importance of *Ayurvedic* treatment in providing fast improvement in skin disease. What benefits the lady could not get in last four years have been achieved by her in just 30 days.

**Keywords:** Chronic eczema, *Abhyang*, *Virechana* Rectal drug administration (*Niruhbasti*), *Raktamokshana*.

## INTRODUCTION

Eczema is considered to be one of the most common skin diseases. Topical corticosteroids are the most widely prescribed medication for dermatological diseases including eczema as they are so efficient in treating inflammatory and epidermal proliferative diseases. Occasionally, it will be necessary for patients with extensive disease to be treated with large quantities of the more potent preparations for a short time. However, with large quantities of these potent preparations transient adrenal suppression is likely to occur, especially early in the treatment. Also, evidence of mild suppression of the HPA axis – ‘hypothalamic pituitary adrenal axis’ is reported in adults when the more potent topical steroids were used, with rapid recovery of the function when intensive treatment ceased. Untreated or partially treated eczema becomes more chronic requiring treatment for a longer period. There is possibility of increase in the cutaneous flora of micro-organisms and dermatophytes, during the treatment with a steroid preparation. The cost becomes prohibitive and quantity inadequate as corticosteroid preparations is not economical particular for poor patients of eczema where it is more common<sup>1</sup>. Description of a skin disease similar to that of eczema is in *Ayurvedic* classical text as *Vicharchika*, viz, "*Sa-kandu Pidaka ShyavaBahusrava*" meaning skin lesion with hyper pigmentation, vesicles, itching and profuse exudation is termed *Vicharchika*. As it is *Raktapra-*

*doshajvikar*, the mainstay of treatment in *Ayurveda* for *Vicharchika* is *Shodhana*, which eliminate the vitiated *Doshas*. Parallel to *Shodhana*, *Shamanoushadis* help to correct the *Dhatus* and bring them to normalcy<sup>2</sup>.

**Case Presentation:** A 55-year-old lady came to OPD of Vasant Prabha ayurvedic Hospital, Vadnagar; Gujarat, India for *Ayurvedic* treatment. She had the following chief complaints.

1. B/L itchy patches in leg since 4 years; 2. Itchiness increases in night; 3. Constipation; 4. Burning

**History of Present Illness:** Patient was relatively healthy before 10 years, she diagnosed with HTN before 10 years, and before 4 years she developed complaints of itching in whole body, mostly in both legs and hands. Gradually she developed patches in both legs; also, she started having complaint of constipation. She had taken allopathic Treatment, but didn't get satisfactory relief, so she came here for further treatment on 1/1/2020. Family history: Negative for HTN, DM or any skin diseases.

### Pathological Investigation

2/1/2020Hb: 12.3 mg/Dl

### Clinical Examination

CVS: 82/min, RRR, normal S1 S2 sound, no murmur

RS: B/L air entry normal with clear breath sounds

Mental status: depressed

**Table 1:** Gradation of symptoms / subjective parameters of eczema

Symptoms	Gradation	Score
<i>Kandu</i> (Itching)	No itching	0
	Itching present rarely	1
	Itching disturbing patient's attention	2
	Severe itching disturbing patient's sleep	3
<i>Shyavta</i> (Discoloration)	Normal skin colour	0
	Brownish red discoloration	1
	Blackish red discoloration	2
	Blackish discoloration	3
<i>Daha</i> (Burning sensation)	Absence of burning sensation in affected part	0
	Rarely burning sensation in affected part	1
	Continues burning sensation in affected part	2
	Disturbing patient's sleep	3

## Treatment & Outcome

**Table 2:** Line of treatment

Day	Treatment
1-3	<i>Sarvangabhyang (Jatyaditaila)</i> <i>Sarvangbashpasvedana (Nimbpatra)</i>
3 <sup>rd</sup> day	<i>Virechana (Dindyalchurna – 5gm + Erandsneh 50 ml)</i>
4 <sup>th</sup> -5 <sup>th</sup>	<i>Samsarjan karma</i>
6 <sup>th</sup> -12 <sup>th</sup> day	<i>Nimbghanvati (250 mg) 2tab 2 times</i> <i>Gandhakrasayan (250 mg) 2tab 2 times</i> <i>Kaishorguggulu (250 mg) 2 tab 2 times</i> <i>Manjisthadikwath 40 ml 2 times</i> <i>Gandhak + Jatyadimalam for local application</i> <i>Panchtiktaghritashamanarthsnehpana 20 ml 2 times</i>
13 <sup>th</sup> day	<i>Raktamokshan – Sira vedh</i>
14 <sup>th</sup> – 30 <sup>th</sup> day	Medicines and <i>Shamanarthsnehpan</i>
1 <sup>st</sup> follow up	<i>Gandhakrasayan (250 mg) 2tab 3 times</i> <i>Kaishorguggulu (250 mg) 2 tab 3 times</i> <i>Manjisthadikwath 40 ml 2 times</i> <i>Gandhak + Jatyadimalam for local application</i> <i>Gandharvaharitaki tablet (250mg) 5 tablets HS</i>
2 <sup>nd</sup> follow up	<i>Gandhakrasayan (250 mg) 2tab 3 times</i> <i>Kaishorguggulu (250 mg) 3 tab 3 times</i> <i>Nimbghanvati (250 mg) 2 tab 3 times</i> <i>Manjisthadikwath 40 ml 2 times</i> <i>Gandhak + Jatyadimalam for local application</i> <i>Gandharvaharitaki tablet (250mg) 5 tablets HS</i>

**Table 3:** Showing changes in symptoms before and after treatment

Symptoms	Grade before treatment	Grade after treatment
<i>Kandu</i>	4	0
<i>Shyavata</i>	3	1
<i>Daha</i>	1	0

**Results:** The patient had started improving during treatment and at the end of 28<sup>th</sup> day there was overall recovery, with *Ayurvedic* treatment she has relief in all the Subjective and Objective parameters.

**Classification of Vicharchika:** The *Charaka Samhita* and *Sushruta Samhita* classify skin diseases into two categories.

The *Mahakushtha* (Major) and *Kshudrakushta* (Minor)<sup>3,4,5</sup>

**Mode of action of Virechanakarma in Vicharchika:** *Virechana* (systemic purification by giving purgative drug) is better for the skin diseases where *Pitta* and *Rakta* are mainly involved. Due to *Koshthashuddhi*

medicine's effect increases. Also, it decreases reoccurrence of disease<sup>6</sup>.

**Mode of Action of Gandhak rasayan in Vicharchika:** *Gandhak rasayan Vati* is effective in treatment of *Vicharchika*. Different *Bhavana dravyas* in *Gandhak rasayan* act as bactericidal and thus causes blood purification. *Bhavanadravyas* like *Guduchi*, *Nagkeshar*, *Haritaki*, *Sunthi*, has properties of *Katu*, *Kashay Rasa* and *Ushna Virya*. Thus, it does *Dipana*, *Pachana*, *Kledhar* and *Kaphghna* and in this way also acts as *Kushtaghna* and *Kandughna*, which helps in curing the disease<sup>7</sup>.

**Mode of action of Raktamokshan in Vicharchika:**

Symptoms like *Twakvaivarnta*, *Kandu*, *Daha* will reduce after *Siravedha Karma* due to *Prabhutdosha Nirharan* by *Siravedha* and *Raktashudhi*, *Sharir-aghvta*, *Vedana shanti*, *Twakshotha*. According to *Charak* and *Sushruta*, *Shodhan* is necessary for disease due to the *Bahudosha Avastha*. As *Vicharchika* (eczema) is *Vata- Kaphaj* Condition, so *Siravedha karma* (Bloodletting) can be given in *Vicharchika*. Although *Vicharchika* (eczema) is considered as a disease of *Bahyaroga Marg*, the initiation of pathogenesis is from the *Koshtha*. However, applying the usual Shaman principles of treatment of *Vicharchika* according to *Nidan* and *Samprapti*, will inevitably result in only partial cure, therefore *Sanshodhan Karma* is considered as the best line of effective treatment. *Siravedha* (bloodletting) procedure is effective to absorb toxic materials so they can be easily evacuated from body. Beside eliminating *Pitta* and *Kapha Doshas*, the main seat of *Vata* is also purified thereby making *Siravedha Karma* a truly *Tridosahar* procedure<sup>8</sup>

**Mode of action of Nimbghanvati in Vicharchika:**

*Nimb* due to its *Tikta Guna*, does *Raktasuddhi*. Its *Laghu* and *Ruksha Guna* are effective as it is a *Santarpanothavyadhi* described in *Charaksamhita*, *Sutrasthan*. Also, its *Sheet* potency pacifies *Pitta*. *Charak* described it in *Kandughnavarga*. It is also indicated in *Kushtha*.

**Mode of action of Kaishor Guggulu:**

In *Sharandhar samhita madhyam khand-7*, verse “*Jayet Sarvani Kushthani*” is mentioned about *Kaishor Guggulu*. Main drug used in *Kaishor guggulu* is *Triphala*, which is described in classics in *Kushtha Chikitsa*.

**Mode of action of Manjishthadikwath:** *Manjishthadikwath* has contents like *Manjishtha*, *Guduchi*,

*Bakuchi*, *Nimb*, *Haridra*, *Patola* etc., which not only detoxifies but purifies blood. Also helps in pacifying *KaphaDosha*. *Kushtha* is a *Santarpanotha Vyadhi* as per *Charak Samhita*. *Manjishthadikwath* also helps to reduce obesity.

**Mode of action of Panchtikta Ghrita:**

It is described in *Bhaisajya Ratnavali Kushtharogadhikar* 114-11, *Shaman sneh pan* indications are described in *Charak Samhita Sutra sthan*.

## DISCUSSION

Causative factors of Eczema or *Vicharchika* are faulty diet and lifestyle, which leads to impairment of digestion and aggravation of *Kapha Dosha*<sup>9</sup>. *Kapha* manifests in the skin and causes accumulation of toxins. The vitiated three *Doshas- Vata, Pitta, Kapha* along with impaired *Tvak, Rakta, Mamsa* and *Ambu* together constitute seven essential entities which play role in pathogenesis of this skin disorder and *Kapha* is the predominant *Dosha* involved in *Vicharchika*<sup>10,11</sup>. Recurrent skin rashes over extensor surface of leg characterized by redness; itching and cracking were the symptoms of patient. *KaphaDosha* is responsible for symptoms like pruritus, non-progressive / slow progression of it. Patient was asked to avoid food, which is heavy to digest, sour food, milk and curd.

## CONCLUSION

*Vicharchika* comes under *Kshudrakushtha* described in various classics. It has *Kapha* dominancy and also *Tridosha* involvement can be evident from sign and symptoms. It is skin disease, it looks hideous, and so patient has not only physical but also sometimes mental symptoms. All the medicines used are most of *Tikta Rasa*, which purifies *Rakta*, pacifies *Pitta*. Also, local application of *Gandhak* and *Jatyadimalam* acts on *Bharajak Pitta*.

**Image 1:** Before treatment on 1<sup>st</sup> day



**Image 2:** After treatment on 28<sup>th</sup> day



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