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# MANAGEMENT OF BULLOUS PEMPHIGOID [VISPHOTA] THROUGH AYURVEDA: A CASE STUDY

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#### **ABSTRACT**

All ages from neonates to elderly persons suffer from skin disorders. The pathophysiology and management of skin disorders are explained in Ayurveda as *Raktavahasrotodushtijanya vikara*. Bullous pemphigoid is a rare, potentially fatal autoimmune blistering disease in which the immune system produces antibodies to the fibers that connect the epidermis and the dermis of the skin. In Ayurveda this manifestation has close resemblance with *Visphota*. A case of 54-year-old female who came with the complaints of multiple blisters (some are ruptured) with clear fluid over both upper and lower extremities associated with itching and some ruptured blisters causing reddish black lesions associated with burning sensation for 20 days. The patient was treated according to the Ayurvedic principle with *Shodhana* and *Shamana* therapy followed by *Pathya-apathya* and got relief with appreciable changes in symptoms.

**Key words:** Bullous pemphigoid, *Visphota, Raktavahasrotodushtijanya vikara, Shodhana, Shamana.* 

#### INTRODUCTION

Bullous pemphigoid is a rare, autoimmune blistering disease in which the immune system produces antibodies to the fibers that connect the outer layer (epidermis) and the next layer(dermis) of the skin. These antibodies trigger inflammation that produces the blisters and itching of bullous pemphigoid. They need quick and proper management to avoid fatal complications. It mostly affects the elderly and is considered uncommon during childhood and in infants.[1] In Ayurveda this manifestation has close resemblance with the disease Visphota. It is described as the disease in which eruptions mimics vesicles caused by skin burn (~Agnidagdha Sphota) appear all over the body or on any particular area, associated with fever, thirst and burning sensation. [2,3] The manifestations occur with dominance of Dosha and Dushya i.e., Pitta and Rakta. [4] Visphota mentioned in Kshudra Kushta by Acharya Charaka, presents with Shweta Arunavabhasa Sphota (~whitish red) and Tanutwak (~thin skin)<sup>[5]</sup> that occurs due to Pitta and Kapha Dosha. [6] Bullous pemphigoid can be managed successfully with Ayurvedic approach based on the line of treatment of Visphota.

#### **CASE STUDY:**

A 54-year-old female patient came to Kayachikitsa OPD of KVGAMCH Sullia, with the c/o multiple blisters (some are ruptured) with clear fluid over both upper and lower extremities associated with itching for 20 days. Some ruptured blisters causing reddish black lesions associated with burning sensation. The patient stated that, small multiple blisters developed initially on the dorsum of foot then to the arm and gradually to both upper and lower limb associated with itching, disturbed sleep and reduced appetite. Fluid filled bullae or blisters after getting ruptured turned to reddish black lesion with burning sensation. For this

she consulted nearby hospital and took treatment but not got relief. So, for better management she visited our hospital.

**FAMILY HISTORY:** There was no relevant family history.

**PAST MEDICAL HISTORY:** Not a known case of Diabetes, Hypertension and any other systemic diseases.

#### PAST TREATMENT HISTORY:

- Tab Cefixime 200mg 1-0-1
- Tab Esredep forte 1-0-0
- Tab Ortid 0-0-1
- Diprobate g plus L/A
- Fusiderm ointment E/A

#### ON EXAMINATION:

General examination- Appearance: I'll look, Built: Lean, Consciousness: Conscious, Orientation: Well oriented to time-place & person.

Vital Examination- Vitals were normal.

Physical examination- Pallor present (++). Icterus, Clubbing, Cyanosis, Edema and Lymphadenopathy were Absent.

Integumentary system examination: The lesion type was multiple, asymmetric, widespread, ruptured blisters were erosive in nature and was having reddish to black in colour. Lesions were located in both upper and lower extremities. Active discharge is absent. Palmar lesion was rough and dry. Nails and mucosa were unaffected.

### **AYURVEDIC TREATMENT ADOPTED: Table No. 1: Showing the treatment adopted**

Shodhana Therapy					
Sl. No	Treatment	Medicine	Duration		
1.	Sneha Virechana (Sadyovirechana)	Nimbamrutadi eranda taila (25ml) + Triphala	1st day(1day)		
		Kwatha (100ml)			
2.	Jaloukavacharana		4 <sup>th</sup> day (1 day)		

External Therapy for 10 days					
Sl. No	Treatment	Medicine	Duration		
1.	Sarvanga Sheetala Kashaya Dhara	Panchavalkala Kashaya	1 <sup>st</sup> to 10 <sup>th</sup> day(10days)		
2.	Lepa (except opened blisters)	Dashanga lepa with grita	1 <sup>st</sup> to 7 <sup>th</sup> day(7days)		

Shamana Therapy for 45 days						
Sl. No	Medicine	Dose	Time of administration			
1.	Patolakaturohinyadi Kashayam	10ml + 10ml lukewarm water	morning and evening before food			
2.	Avipathikara Churna	1 tsp. with hot water	After food bedtime			
3.	Cap Detox	1 tablet	morning and evening with Kashaya			
4.	Nimbadi guggulu	1tablet	morning and evening after food			

#### Pathya-apathya:

Pathya: Mudga Yusha, Purana shali, Patola, Karavellaka, Nimba.

Apathya: Matsya, Mamsa, Katu-Kshara-Lavana-Amla Ahara, Tila, Masha, Dadhi.

#### **RESULTS/IMPROVEMENT:**

#### **Before Treatment**



#### **After Treatment**



#### **DISCUSSION**

*Kushta* manifests due to the aggravation of *Tridosha* along with the *Dushyas* like *Twak*, *Rakta*, *Mamsa* and *Lasika*. Depending upon the permutation and combination of the *Dosha-Dushya* innumerable *Twak* 

vikaras are formed. In the pathogenesis of disease Sphota, involved Dosha is Pitta Pradhana Tridosha and involved Dhatu are Rakta and Mamsa. Virechana, Raktamokshana and Shamana Chikitsa are the basic principles of Chikitsa explained in classics for Raktadushtijanya Vikaras. [8] As Sphota is mentioned

one among *Kshudra Kushta*, *Kushtahara* line of treatment like *Shodhana* is helpful.

The patient was treated on an IPD basis for 10 days and as OPD basis for 45 days. Snehavirechana with Nimbamrutadieranda taila and Triphala Kwatha were advised to control Bahudosha, and which acts as Tridoshahara. Raktamokshana with Jalouka is advised to eliminate the Sthanika Dosha and Dushya. As Bahiparimarjana chikitsa, Panchavalkala Sheetha Kashayadhara acting as Pittahara, Vranaropaka and Dashanga lepa with Shatadoutha gritha acting as Pittahara, Vishahara were advised. In Shamana chikitsa, medicine with Tikta Rasa, Sheeta Virya was possesss Pitta-rakta given which shamaka, Amapachana, Shothahara, Kushtahara, Krimigna, Kandugna and Anulomaka in action. The patient got relief with appreciable changes in symptoms with comprehensive administration of Ayurvedic treatments.

#### CONCLUSION

In the present case, all signs and symptoms of bullous pemphigoid (*Visphota*) got completely diminished within 30 days. Principle based approach with proper *Shodhana* and *Shamana* is significantly effective, followed by a proper *Pathya-apathya* regimen in the management of dermatological conditions.

**Declaration of patient consent:** Authors certify that they have obtained patient consent form, where the patient/caretaker has given his/her consent for reporting the case along with the images and other clinical information in the journal. The patient/caretaker understands that his/her name and initials will not be published, and due efforts will be made to conceal his/her identity, but anonymity cannot be guaranteed.

#### REFERENCES

 Fisler RE, Saeb M, Liang MG, Howard RM, McKee PH; Childhood bullous pemphigoid: A

- clinicopathologic study and review of the literature. Am J Dermatopathol 2003; 25:183-9.
- Prof. Yadunandana Upadhyaya edited Madhava Nidana of Madhavakara, Published by Chaukambha Prakashan Varanasi, Reprint Edition 2021, Part 2, Visphota Nidana, Chapter no:53, Sloka no:3, Page no:214.
- Vaidya Yadavji Trikamji Acharya edited Charaka Samhita of Agnivesha, Published by Chaukambha Publications New Delhi, Reprint Edition 2016, Chikitsasthana, Chapter no:12, Sloka no:90, Page no:490.
- Vaidya Yadavji Trikamji Acharya edited Sushruta Samhita of Susruta, Published by Chaukambha Sanskrit Sansthan Varanasi, Reprint Edition 2010, Nidanasthana, Chapter no:13, Sloka no:18, Page no:320.
- Vaidya Yadavji Trikamji Acharya edited Charaka Samhita of Agnivesha, Published by Chaukambha Publications New Delhi, Reprint Edition 2016, Chikitsasthana, Chapter no:7, Sloka no:25, Page no:451.
- Vaidya Yadavji Trikamji Acharya edited Charaka Samhita of Agnivesha, Published by Chaukambha Publications New Delhi, Reprint Edition 2016, Chikitsasthana, Chapter no:7, Sloka no:30, Page no:451.
- Vaidya Yadavji Trikamji Acharya edited Charaka Samhita of Agnivesha, Published by Chaukambha Publications New Delhi, Reprint Edition 2016, Nidanasthana, Chapter no:5, Sloka no:3, Page no:216.
- 8. Vaidya Yadavji Trikamji Acharya edited Charaka Samhita of Agnivesha, Published by Chaukambha Publications New Delhi, Reprint Edition 2016, Sutrasthana, Chapter no:24, Sloka no:18, Page no:125.

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