

Role of *Shodhana* and *Shamana Chikitsa* in the Management of Guttate Psoriasis W.S.R. to *Kitibha Kushtha*: A Case Study

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DOI: <https://doi.org/10.52403/ijhsr.20220815>

ABSTRACT

Psoriasis is a dermatological disorder, which is a chronic inflammatory as well as a hyperproliferative skin disorder. Which particularly affects the extensor surfaces & scalp region. Which has a 0.09 to 11.2 % prevalence rate worldwide, Various treatments are available for this in modern medical science but they have various side effects. Ayurveda has the main aim of Prevention as well as a cure for various diseases. A 20 years old male patient was suffering from Guttate Psoriasis since one year. There are various treatment modalities and principles of Ayurveda that helps to prevent as well as cure kitibha kushtha which has a resemblance with Guttate Psoriasis. This case study intends the efficacy of Shodhana Chikitsa as well as Shamana Chikitsa in the management of Psoriasis that is Kitibha kushtha¹. The Patient got highly significant results in Chief complaints i.e. Mandalotpatti, Kandu and Daha after shodhan and shaman chikitsa. (Before treatment PASSI score was 51.)

Keywords: Shodhana Chikitsa, Shamana Chikitsa, Guttate Psoriasis, Kitibha Kushtha, Case report.

INTRODUCTION

Ayurveda has the main aim of Prevention as well as cure for various diseases². In Ayurveda, Kitibha Kushtha is one of the Kushtha which can be correlated with Psoriasis. Kushtha is one of the disorders which is mentioned in Aupasargika Roga by Acharya Sushruta³. As we know Agnimandya is a reason for developing all disorders in the body⁴. Due to the improper diet, and lifestyle this disease is increasing day by day.

Various treatments are available for this, but in Ayurveda, Shodhana is one of the best managements for Kitibha Kushtha. Because by the help of the Shodhana process it helps to expel the vitiated Doshas from the body and reduces the Signs & symptoms. Along

with Shamana Chikitsa with proper Pathya-Apathya is important for relief.

Psoriasis is a chronic inflammatory, Hyperproliferative skin disorder. Which is characterized by well-defined, erythematous scaly plaques, particularly affecting extensor surfaces & scalp, and usually follows a relapsing & remitting course. It has 0.09 to 11.2 % prevalence rate worldwide. It occurs equally in both sexes and at any age. Genetic, environmental, and stress factors are important etiology in developing Psoriasis⁵.

CASE REPORT

A 20-year-old male patient visited to our skin OPD, presenting with main complaints of small red - pinkish patches on the trunk

with Itching and Burning sensation since 1 year.

Name of patient: ABC, 20-year-old, Male

Occupation: Student

Chief complaints:

1. Small red-pinkish patches (Mandala utapatti) at - Scalp, Hands, Abdomen region, drop shape patches are spreading all over the trunk.
2. Kandu (Itching) - at lesion it raises due to wind
3. Daha (Burning sensation) - at lesion

Ashtavidha Pariksha:

- Nadi = 78 / min
- e. Shabda = Prakruta
- Mala = Samyaka
- f. Sparsha = Anushna
- Mutra = Samyaka
- g. Druka = Prakruta
- Jivha = Sama
- h. Akrti = Madhyam

General examination:

PR – 78 / min

BP - 110/78 mm of Hg

RS - AE= BE, Clear

CVS – S₁ S₂ N

CNS - Conscious, Oriented

P/A - Soft, No Tenderness

Personal History:

- Dinacharya: Wake up at around 7 'o' clock am, no exercise, Ratrijagarana, Late night sleep, Stress, eating Ruksha, Spicy, Fast food, disturbed sleep, etc.
- Occupation: Student

Past History:

No history of any major illness like DM, or HTN.

Present history

The patient was well before one year when he was shifted to hostel from home and had eaten food in mess. After one year he started complaining of small red blisters like lesions over the abdomen and back with itching. Gradually it spreads all over the trunk and hands, itching also rises followed

by burning. Patient was undergoing allopathy medicine for the complaints but he didn't get satisfactory relief, so he came to skin opd of ARSMH *Ayurveda* Hospital Nigdi, Pune, Maharashtra.

Skin Examination

A. Inspection

- Size shape – small lesions 0.8 to 11 mm thickness all over abdomen, chest, back region and both upper limbs.
- Color – Red
- Thickness – 0.8 to 1.2 mm thick
- Lesion - Small red blisters like lesion.
- Palpation: -
- Moisture- Dryness
- Temperature – Warmth to touch
- Texture – Rough, scaly dandruff on lesion

Diagnosis

Kitibha kushtha (Guttate Psoriasis)

As skin patch are small drop shape scaling spot mostly seen on trunk, scalp, hand and abdomen. So it was diagnosed as 'Guttate Psoriasis'⁶.

Management:

A. Shodhana Chikitsa:

As per Charaka Kustha Adhyaya, for Kustha; Shodhana and Shamana Chikitsa mentioned so patient had started Shodhana and Shamana Chikitsa.

1. Dipana - Pachana Chikitsa:

Before Shodhana Chikitsa, Dipana, Pachana treatment is important. So therefore, Dipana Pachana was done with the help of Avipattikara Churna⁷, 5 gm with Koshnajala at night for about 3 days.

1. Snehapana:

Acharyas mentioned that Snehapana is indicated in the Vataj Kushtha⁸. Here Sneha in body helps to decrease Rukshata of the skin and reduces itching.

Kalpa	Matra	Kala	Anupana
Mahatiktaka Ghrita ⁹	50 ml	Pratah & Sayam kala [6 : 00 am - 6 : 00 pm]	Koshna Jala

1. Virechana:

Dravya	Matra	Duration	Period of Study
Trivrutta Avaleha ¹⁰	20 gm	1 day	1 day

A. Shamana Chikitsa:

Kalpa	Matra	Kala	Anupana
Arogyavardhini Vati ¹¹	250 mg (4 tab.)	Adhobhakta (After meals 2 times)	Ushnodaka
Gandhaka Rasayana ¹²	125 mg (2 tab.)	Adhobhakta (After meals 2 times)	Ushnodaka
Dushivishari Agada ¹³	125 mg (2 tab.)	Adhobhakta (After meals 2 times)	Ushnodaka
Patolkaturohinyadi Kashaya ¹⁴	40 ml	Purva bhakta (Before meals 2 times)	-
Bruhata Marichyadi Taila ¹⁵	local application	Q. S. at night	

Along with this treatment proper Pathya – Apathya (Do's and don'ts) had been followed by the patient. Patient follow up had taken on 13th, 16th & 18th day. On each day follow up he has been shown improvement.

Pathya:

- Aahara = Snigdha aahara, ghritapana, Mudga, godhuma, Nimba, Haridra, Aamalaki, Karvellaka, Dadima, Madhu, Tikta rasatmak ahra, etc.
- Vihara = Exercise, Yoga, Dhyana, Abhyanga, Snana, Dhyana, Dharana, etc.

Apathya:

- Aahara = Avoid extra salt intake, Dry, oily foods, fruit salads, hot & spicy foods, bakery products, fast food, milk, pickle, curd, Guru Aahara, Ruksha, Abhishyandi aahara, Masha, Lavana rasa, Mulaka, cold drinks, Madhura rasa dravyas, Guda, Tila, etc.
- Vihara = Avoid stress, Chinta, Shoka, Krodha, diwasvapa, ratri jagarana, lying down position after dinner, Ati shrama, excessive Atapa sevana, avoid application of soaps, detergent on skin, etc.

Criteria for Assessment

PASI Score¹⁶- The current gold standard for assessment of extensive Psoriasis has been the Psoriasis area severity index (PASI). PASI combines the assessment of the severity of lesions and the area affected into a single score in the range 0 (no disease) to 72 (maximal disease). The PASI is a measure of the average redness, thickness

and scaling of the lesions (each graded on a 0-4 scale), weighted by the area of involvement.

Steps in generating PASI score

Divide body into four areas: head, arms, trunk to groin and legs to top of buttocks. Generate a percentage for skin covered with psoriatic plaques for each area and convert that to 0-6 scale as bellow.

Percentage	Rating scale
00	00
00 - < 10 %	01
10 - < 30 %	02
30 - < 50 %	03
50 - < 70 %	04
70 - < 90 %	05
90 - 100 %	06

- Generate an average score for the erythema, thickness and scale for each of the areas.
- Sum the score of erythema, thickness and scale for each of the areas.
- Multiply item (c) and (d) for each area and multiply that by 0.1, 0.2, 0.3 and 0.4 for head, arms, trunk and legs respectively.
- Add these scores to get the PASI score.

OBSERVATIONS AND RESULT

The improvement of condition of the patient was assessed on the basis of PASI scale*

Before trial

	Head and neck	Arms	Trunk	Legs	Total
Skin area involved score	0.3	0.5	0.6	0.2	
Redness	4	4	3	1	
Thickening	2	2	2	1	
Scaling	2	3	3	2	
Total	2.4	4.5	4.8	1	51.84

After 3 months

	Head and neck	Arms	Trunk	Legs	Total
Skin area involved score	0.1	0.1	0.2	0.1	
Redness	0	0	0	1	
Thickening	0	1	1	1	
Scaling	0	0	1	1	
Total	0.1	1	0.4	0.3	0.012

Gradation of Symptom Daha:

1 - 3 = Mild; 4 - 6 = Moderate; 7 - 10 = Severe

+ = Mild, ++ = Moderate, +++ = Severe

In *Daha*(Burning), symptoms patients noted that *Daha*(Burning) is decreased by 80 to 90 % shows significant results in all signs and symptoms of Psoriasis.



DISCUSSION

In this study, observations were noted down before and after treatment based on PAASI scale and results were obtained. It was observed that patient got above 90% relief from Skin patches (Mandala utapatti) at Scalp, Hands, Abdomen along with the other symptoms like Kandu (Itching) and Daha (Burning sensation) after the treatment. So it is proved that Samprapti Bhanga of Psoriasis / Kitibha Kushtha can be done by this treatment modality.

Vitiated Pitta dosh and Dushit Rakt develops Mandala Utpatti over the skin surfaces and it spreads all over the body due to vitiated Vata. As disease progresses Kandu (Itching) in Kitibha kushtha is increases because of vitiation of Kapha dosha. Therefore Snigdha guna is important for the Kitibha Kushtha. Abhyantara Snehapana when taken in empty stomach helps to provide Agni vrudhhi, which reduces Vata prakopa / vitiation, thus it helps to reduced Mandala utpatti, Kandu, Daha.

Virechana: It is one of the important procedure for Kushtha. Virechana given with Trivrutta Avaleha, which helps to reduce pitta and kapha Dosha dushti and gives relief in Lakshanas.

Arogyavardhini Vati: It helps to decrease the Agnimandya, which further helps to reduces Ama dosha which is important factor for the formation of Kushtha. Also it stops production of Kleda, which leads to Dosha Samyata, & Breaks Samprapti of Kushtha.

Gandhaka Rasayana: Bacterial infection is major trigger for Guttate Psoriasis. Gandhaka Rasayana reduces Kleda by Ushna tikshna properties present in it. Due to removal of Kleda, Gandhaka Rasayana acts as Anti-bacterial. It is Kandughna which helps to decreases the Kandu (itching) & Vata dushti in the body.

Dushivishari Agada: It has properties like anti-poison (Vishahara by prabhav) & all contains are tikta rasatmak blood purifier (rakta shodhak).

Patolkaturohinyadi Kashaya: The chief ingredient is Patola and Katurohini. It has Tikta and ruksha , ushna propeties which helps to reduce Kandu, Daha, Acts as anti-inflammatory, useful in skin disorders.

Bruhata Marichyadi Taila: Acts as anti-fungal and anti-itching (Kandughna) properties.

CONCLUSION

Psoriasis is chronic inflammatory disorder developed due to the environmental, genetic factors. Its characteristics usually follows a relapsing & remitting course. In *Ayurveda* it can be correlated with the *Kitibha Kushtha* as similarity found in the signs and symptoms. This case study concludes that *Shodhana Chikitsa* and *Shamana Chikitsa* are significantly effective in the *Kitibha Kushtha* (Psoriasis) along with proper *Pathya & Apathya* for disease. As significant effect seen in this case and relapse of symptoms have not seen after 6 months withdrawal of treatment.

Acknowledgment: We are giving heartfelt thanks to Dr Ragini Patil Superintendent of *Ayurveda Rugnalya* and Sterling Multispeciality Hospital, Nigdi, Pune for her permission to publish this case report and *Panchakarma* Department of ARSMH for the proper *Panchakarma* to our patient

Conflict of Interest: None

Source of Funding: None

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How to cite this article: Meenal D Lad, Rohan Sanjay Vishvasrao. Role of Shodhana and Shamana Chikitsa in the management of guttate psoriasis W.S.R. to Kitibha Kushtha: a case study. *Int J Health Sci Res.* 2022; 12(8):109-114.
DOI: <https://doi.org/10.52403/ijhsr.20220815>
