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Ayurvedic Management of Kitibha W.S.R. to Psoriasis

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Abstract: Psoriasis is one of the most common chronic inflammatory skin diseases, affecting about 2.5% of the population. The disease is still poorly understood and through many treatments are available none is universally safe and effective. However therapies currently employed in the management of psoriasis suffer from draw books such as tachyphylaoxis and increased risk of toxicity because of this experience with the available treatment there is a need for more safe and more effective approaches such as herbal remedies. According to ayurveda all the skin disease are come under broad term "Kushtha" psoriasis is considered as one of the kushtha i.e. Kushodra under heading of Eka- Kushtha in the treatment of Kushtha our Acharyas has indicated repeated use of Shodhana Karma for eliminating vitiated Doshas and Dushyas . It is not possible to eradicated all the vitiated Doshas completely without repeated use of shodhan karma purifies the body upto cellular level and execrateout some toxic materials from the body and regularize the cellular Kinetics. thus plays an important role in the management diseases. The therapeutic measure should be able to assuage symptoms and provide maximum relief to the patients. Bearing this in mind patient of Kitibha were chosen from I.P.D. of Govt. Dhanwantri Ayurveda Hospital.

Keywords: Psoriasis, Kushtha, Eka Kushtha, Tachyphylaxis

1. Introduction

Psoriasis is one of the most common dermatologic disease, affecting up to 1-3% of the world's and 0 of Indian Population. Although the disease can develop anytime, 10-15 % of all cases are diagnosed in children under 10, and the average at a set of symptoms is 28, Psoriasis is most common in fair skinned people and extremely rare in dark skinned individually. It is estimated that over seven million American (26%) have Psoriasis with more then 1,50,000 new cases reported each year According to the National Psoriasis Foundation 20,000, Children's under 10 years of age are diagnosed with Psoriasis annually. It has been recognized as non-infectious, papulosquamous skin disease easily diagnosable in its typical form, Usually runs a chronic course with are mission exacerbations. The exact etiology is still unknown, but many precipating factors, like genetic environmental, immunological and psychological has been to be influential in the manifestation of the disease.

Since Psoriasis cannot be cured in modern medical science. It can only be attenuated. The use of many different types of topical and systemic corticosteroids serves as preventers but bestow various complication, Perceiving the graveness's of the disease. It is essential to discover new strategy of treatment that could cure the disease.

Ayurvedic therapeutic measures chiefly as preventers. The Ayurvedic therapy doesn't present with vital complications like corticosteroids. Thus the management plan of Ayurveda is better is off than modern science.

Bearing all these facts in mind, a safe, cheap and effective therapy is desired that could culmin, rate Kitibha with this rich literary background and potential therapeutics the current study entitled, "Ayurvedic management of Kitibha with special reference to Psoriasis. The present research work has planned to assess the efficacy of Navayas rasayan yoga as shodhan therapy. In that way the present study entitled "Ayurvedic management of Kitibha W.S.R. to Psoriasis".

Aims and Objectives

- 1) To analyse the efficacy of Virechan Karma on Kitibha.
- To assess the clinical effectiveness of Navayas rasayan yoga and Virechan Karma on Kitibha i.e. Shodhan (Virechan) Purvaka Shaman chikitsa.
- 3) To compare the effectiveness of both i.e shodhan purvaka shaman and shaman chikitsa.

2. Material and Methods

2.1 Criteria of selection of patient

The patients reporting in the O.P.D and I.P.D. of Govt Dhanwantri Ayurvedic Hospital Ujjain and fulfilling the diagnostic criterion of Kitibha were randomly chosen irrespective of the age, sex, religion, caste etc.

Inclusion criterion

Patients above the age of 10 year were chosen.

Patients with the sign and symptoms of Kitibha described in Ayurvedic texts were selected further diagnosis was confirmed by the presence of other symptoms and signs of psoriasis described in modern texts e.g. Candle grease sign, Auspitz sign and Roebner pheno.

Following investigations were carried out before treatment to assess the general condition of the patient and to rule out any other pathology.

- 1) Routine hematological Examinations.
- 2) Routine urine examination.
- 3) Biochemical investigations, like blood sugar serum cholesterol and calcium and blood urea.

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Exclusion Criterion

- 1) Patients below the age of 10 year
- 2) Patients of psoriatic arthropathy and psoriaticerythroderma were excluded.
- 3) The patient having associated disease and inconclusive diagnosis were discarded.
- 4) Patients having Cardiac, renal diseases, endocrine disordered were excluded in the study to avoid overlapping of symptomatology.
- 5) Extremes of age groups were discarded.

Plan of Study

Group	Details of Group	Number of Patients Registered	Number of patients completed the course	Duration of course	Drug of Choice
[1]	Shodhan group + Placebo	10	10	30 days	Virechan Karma + Placebo
[2]	Shodhan Purvak Shaman	10	10	30 days	Virechan Karma followed by NAVAYAS
[3]	Shaman Group	10	10	30 days	Navayas Rasayana

Itinerary of Group A

S.No.	Therapy	Time Duration	Drug and Dosage
[1]	Deepana-pachana	3 days	Trikatu churna 5 gm BD
[2]	Abhyantara snehana	5-7 days	25-175ml in ascending are daily increasing by 25ml Drug moorcchita tit tail
[3]	Bahya Snehana and Swedan	3 Annakalas	Moorcchita tit taila for snehana Bahya Swedan with Kwatha of Nimba and Karanj
			leaves.
[4]	Virechan Karma	Morning	Haritaki – 20 gm
			Trivruta – 20 gm
			Aragradha – 20 gm
			Kutaki -20 gm
			200ml Kwatha of above drugs was prepared 30ml Eranda taila was added to it.
[5]	Samsarjana Krama	3-7 days	Peeja, vilepi, Akrita yusha Krita Krishara, Ardhahara, purnahara in chronological order.
[6]	Placebo	15 days	Godanti Bhosma Dose-2BID, C2 BID

*Depends on samayaka snigdha lakeshang.

** Empty stomach in the morning at 09:00 A.M.

***Depends on shuddhi prakara-uttama, hina madhyama.

****Depends on shuddhi -

Total Duration of course- 30 days step 1-6 was followed in systemic order.

Selection of the drug

(A) Shodhan and Placebo Group:

Kitibha is VatakabhajVyashi and due to predominancy of pita than why virechan is selected for shodhan with placebo. detailed description of shodhan karma is given in following group B

(B) Shodhanpurvaksharnan group:

While selecting the drug for shodhana group drug, it was kept in mind that kitibha is vatakabhajvyadhi and due to predominancy of pitta for the purpose of sneha karma several ghrit like panchtiktaghritamahakhadirghrita etc are described these sanskaritaghrita themselves kusthanashak for the present study moorehhita til tail from I.P.D was selected. So as to be in a better position to understand and explain the therapeutic efficacy of shaman drags under study.

Ingredients of moorchchhita til tail: -

* Manjishtha	*Amalaki	*Lodhra	*Vatankur
*Haritaki	* Haridra	*Hebera	* Ketakipushpa
*Bibhitak	* Nagarmot	tha	

Ingredients of Virechan Kalpa:

* Chhoti Harad	* Katuki	* Trivrita
* Aragvadh	* Eranda tail	

The above drug are selected for virechan Kalpa keeping in consideration their properties. Marimum drugs are ushna virya and madhur in vipak. Trivrit and aragvadh are kapha pitta shamak and eranda tail is kaphavata shamak. Haritaki is tridoshahara. In short virechan kapla is acting as tridoshahara, mainly.

Shaman group:

"Navayas Rasayan" has been choose from Chakradatta under kushtha chikitsa as a shaman drug.

It has the following Ingredients

* Amalki	* Vidang	* Bakuchi
* Haritaki	* Chitrak	* Lauh bhasma
* Bibhitaki	* Bhilava	* Bhringraj

Selection of Navayas Rasayana yoga:

Among the above maximum drugs are ushna virya kaphavata shamaka , bittashamaka and ortridoshanhara. Aamlaki is bittashamaka and Rasayana, Bibhitaki is chhedan and shlesh maghna, Haritaki is srotoshodhak and vataanulomak chitrak is deepan, pachan , vidang is krimghna , Bhingaraj is Raktaranjak and Keshya , Bakuchi and Bhilava both are kushthaghna and louh Bhasma is Rakta shodhak and Hematinic.

"Navayas Rasayan" description is mentioned in charakraddta in chikitsathan (Kushtha Chikitsha).

<u> Selction of Virechan – Kalpa:</u>

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Mode of Dispensing

Godanti Bhasma was dispended in the form of capsules of 125mg.

Anupana:

Anupana of Virechan Kalpa and placebo is ushno -daka.

Bhasajya Kala

Virechan Kalpa in prescribed in morning hours after sunrise at 9.00 AM placebo in given after meals.

S.No.	Therapy	Time Duration	Drug and Dose
[1]	Deepana- pachana	3 days	Trikatu churna 5 gm BD
[2]	Abhyantara snehana	5-7 days	25-75ml in ascending are daily increasing by 25ml Drug = moorcchita tit tail
[3]	Bahya Snehana and Swedan	3 Annakalas	Moorcchita tit taila for snehana Bahya Swedan with Kwatha of Nimba and Karanj leaves.
[4]	Virechan Karma	Morning	Haritaki – 20 gm Trivruta – 20 gm Aragradha – 20 gm Kutaki -20 gm 200ml Kwatha of above drugs was prepared 30ml Eranda taila was added to it.
[5]	Samsarjana Krama	3-7 days	Peeja, vilepi, Akrita yusha Krita Krishara, Ardhahara, purnahara in chronological order.
[6]	Shaman Drug	30 days	Navayas rasayan yoga**** Dose-5gm BID

*Depends on samayaka snigdha lakeshang.

** Empty stomach in the morning at 09:00 A.M.

Depends on shuddhi prakara-uttama, hina madhyama. *Depends on shuddhi –Total Duration of course – 30 days step 1-6 was followed in systemic order.

<u>Group – C Shaman Group</u>

10 patients were registered in the group and all patients completed this course Navayas Rasayan yoga was administered to 10 patients.

Methods of preparation:

Method of preparation has been specified in Drug review section.

Mode of Dispatching:

50gm pouches were dispatched to the patients.

Dose of administration:

5gm powder was administered in the dosage of BID.

Anupam:

Til tail paschat ushadak.

Bhashajya kal - After meals

Method of dispensing:

Navayas Rasayana Yoga was dispensed in the from of pouch of 50gm.

Anupana – Anupana of virechan Kalpa is ushnodaka and Navayas Rasayana is til tail paschat ushnodak.

Bhasajya Kala– Virechan Kalpa is described in morning hours after sunrise at 9.00 AM Navayas rasyana a given after meals.

Method of Preparation of Trial Drug:

Method of preparation Navayas Rasayana Yoga (as mentioned in chakradatta, in Bushtha Chikitsha) is the drug of choice for shaman therapy. Following ingredients are present in the below mentioned ratio.

<i>S. No.</i>	Ingredients	Quantity
[1]	Amalaki	1 part – 200gm
[2]	Bibhitaki	2 part – 400gm
[3]	Haritaki	3 part – 500gm
[4]	Vidang	4 part – 600gm
[5]	Chitrakmool	5 part – 700gm
[6]	Bhilava	6 part – 800gm
[7]	Bakuchi	7 part – 900gm
[8]	Lauh Bhasma	8 part – 1000gm
[9]	Bhringraj	9 part – 1100gm
		6.200gm

50 gm pouches were then filled for dispending. Powder is easy to take and hence patient was advised in the dosage of 5gm BID mixed with spuddha til tail in indus form with sukhoshna jala as Anupan.

Mode of action of Virechan Drugs

Panch Bhoutik Sanghthan –Pruthvi +Jala Mahabhuta
Pradhan Codhobhaagahara Prabhav)
Rasa – Sarva rasa
Guna – Tikshan – Induces Chedan Karma
Sukshma –Penetrate dhamanis and minutest
Vyavay – Drag reach heart through it potency
vikasi – expel out the vitiated doshas from Remove out minutes srotas.
Virya – ushna – produeesvishrandana in the body theredy casing indusing of doshas in the physaue
Prabhav – virechan – Drug alone with the dosha will be intimated to expel out of the body through and (root) region

		Mode of action according to modern con	<u>icept</u>	
Osmetic action	-	stimulation of synthesis	_	action on intestinal
\downarrow		of P.G. and adenyl cydose		musosa, inhibitNa,k,
·		ATPase in		
				crease propulsive activity
Etainwater in	\rightarrow	Increases seoreation of	\rightarrow	decreases absortftion
Instestine		Water and electrolytes		of water and electrolytes
		↓ -		-
		Increase in water content of faces.		
		\downarrow		
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Faces can easily propelled,

Modern explanation of possible mode of action of virechan karma.

From the modern point of view- ayurvedicsodham kormas. Are physician induced mild inflammation mainly vaman and virechan drugs are quit irritant to the stomach and the virechan drugs are quite irritant to the stomach to the stomach and the intestinal mucosa respectively to cause inflammation. Due to this the permeability of the membrane changes and those substances come out cloud to the chanced permeability which can not come out in normal condition. The gross signs of inflammation are redness, heat, swelling, pain and less of functions. Some chemical factors are also responsible which increase the permeability in response to acute inflammation.

Virechambarma

Pharmacologohical activity of Navayas rasayan

Pharmacological activity	Drugs				
Keratolytic	Anthraqinones, Psoralen, Bhilava				
Antiseptic	Bhringraj – Ecliptin, Triphala, Chitrak,				
Antiplacterial	Triphala, Bhringraj, Bhilava				
Immunomodulatory	Triphala				
Anti inflammatory	Triphala, Bhilava, Bakuchi				
Anti oxidant	Triphala, Bhilava Katuki-in Virechan Kalpa, Bakuchi				
UV-Potentiating action					
Reduction of epithelial	Lauh Bhasma, Bhilava, Bhringraj,				
Proliferation	Bakuchi				
Restoration of skin texture	Bhringraj, lauh Bhasma, Bhilava,				
Restoration of skin texture	Triphala				
Anxiolytic	Amalaki				
Antipruritic activity	Vidang, Chirak, Triphala, Chitrak				

Navayas rasayana targets the key pathogenic machani sms of Psoriasis different ways.

The first involves inhibition of T-cell activation, through inhibition of molecules involved in the formation of the immunologic synapse.

The second principle is depletion of pathogenicT cells. This is bieved by targeting molecules expressed specifically by activated cells, such as the high affinity interelukin-2 receptor or CD4 third approach involves inhibition of leukocyte recruitment the inflamed skin for example by inhibiting key inflammatory sokines

Laps the most importants Example is tumor necrasis $\alpha(F-\alpha)$, the functions of which are targeted specifically by Chitrak, Bhilava, Bhringraj, bakuchi, Triphala, Lauh Bhasma, Vidang, Chitrak, katuki. It is possible to induce an immune deviation to shift sytokine milieu dominated by type 1 helper T(Thi) cells to Heuweighted with type 2 helper (Th2) cells. Thus alleviating viasis.

a) Vasoactive amine mast cells → Histamine →Increase permeability

Inflamation Platelets \rightarrow Serotonin \rightarrow Dialation

- b) Vasoactive polypeptides these cuases vasodilatation.
- c) Miscellaneous agent (i) Lysosomal enzyme for polymorphs

(ii) Prostaglandins(iii) Globin permeability factor(iv) Antigen antibody complex

Mechanism of Action

Intake of Purgative

Due to Vyavayi guna drug will reach heart through its potency.Due to sukshma guna penetrate dhamanis and minuts srotes. Due to tikshna and ushna guna activation and induces chedana karma, then produces vishyandana in the body thereby causing inclusion of doshas in the physique.

\downarrow			\downarrow
Activation of Diaphragm		Activation of Purgation Cer	tresituated in Medulla
		Oblonga	ata
Ļ		-	\downarrow
	Increase peristalticmovement	Stimulation of Scroll region	
\downarrow		C C	\downarrow

Propulsion of faces toward Ames ↓ Purgation

-			-	
Over	All	Effect	of	Therapy

over in Enece of Therapy									
Total Effect	Group A		Group B		Group C		Total	%	
Total Effect	No. of lt	%	No. of lt	%	No. of lt	%	Totai	70	
Comp. Remission	2	20	6	60	5	50	13	43%	
Marked Important	3	30	3	30	2	20	08	26.7%	
Improvement	4	40	1	10	3	30	08	26.7%	
In changed	1	10	0	0	0	01	01	33%	

Discussion (Total effect of therapy)

Complete remission was found in 20% Group A, 60% in Group B and 50% in Group C. As a whole of 30pt studied, complete remission was found in 43% Markedly

improvement was obtained in 30 % in Group A, 30 % pt. of Group B and 20% pt. of Group C, of the 30 pt. studied, markedly improvement was found in 26.7% Improvement was found in 40% of Group A, 30 % of Group B and 30% Group C pt. of the 30pt. studied improvement was found in 26.7%, 10% of pt. of Group A only remain unchanged.

3. Conclusion

- Navayas rasayan yoga and Virechan Karma both are patent in alloying the malody.
- Sing and symptoms are ameliorated to greaer axtent with virechan therapy.

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- In subjective parameters like Tivra Kandu, Scaling, Thickness, Rukshata, Ausptiz sign candle grease sign, Erythema, plaques gives better improvement with the use of navayas rasayana.
- Navayas rasayana yoga and virechan karma are potent in increasing hemoglobin and decreasing the total leucocytes count, ESR of the patients.
- Shodhana therapy gave moderate improvement in 60% at the patients . All the patients reported mild to marked improvement. Hence shodhan (Virechan) therapy with navayas rasayana is more effective in palliating navayas rasayana.

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