# International Journal of Science and Research (IJSR) ISSN: 2319-7064

SJIF (2022): 7.942

# A Single Case Study on the Role of Some Ayurvedic Modalities in the Management of Vicharchika (Eczema)

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Abstract: Skin diseases have been explained as kustha by ancestors of Ayurveda where obstinate skin diseases including leprosy were considered with those ailments. The kustha roga in Ayurveda has been broadly classified by our classics in to two groups one is Mahakustha with its seven varieties another is Khudrakustha with its eleven varieties. Vicharchika is a skin disease included under khudrakustha characterized by the features like Kandu (Itching), Pidaka (Papules), Shyava varnata (Discoloration), Bahu srava (Profuse oozing). As those features are commonly found in the disease Eczema of modern science, So Eczema could be called as a modern correlation of VicharchikaIn present study a female of 33 years of age has been treated with some Ayurvedic modalities namely Panchatikta ghrita guggulu, Gandhak rasayan orally and Marichadi taila has been applied locally for her disease Vicharchika (Eczema). Patient has gone through the weekly follow up and after Imonth she was found completely cured. As, those Ayurvedic modalities have showed excellent curative effect. So, the main Aims & Objectives of this article is to encourage the Ayurvedic practitioners as well as scholars to work on those medicine over the problem Vicharchika (Eczema).

Keywords: Vicharchika & Eczema, Eczema & Ayurveda, Vicharchika in Ayurveda

### 1. Introduction

Skin is an important structure distributed all over body which protects all from injury, infection, heat, light, cold and other harmful objects. Ayurveda the ancient science has also provided a lot of measures to protect the skin from harmful objects as well as contributed a lot of herbal and mineral components to prevent the skin & cure the skin diseases. Nowadays Eczema is a big trouble some problem all over globe. It is a inflammatory skin disease and effects 15-20% of children and 1-3% of adults worldwide. [1] It shows the features like Itching, red rashes, scaly leather patch of skin and swelling. Some time Eczema appears with wet &oozing state and sometimes with dried and rough skin. In Ayurveda, Charaka [1000 BC][2] stated that "स्कण्डः पिडका विचर्चिका श्यावा बहुस्रावा " means it is a skin ailment where in eruptions over the skin appear with dark pigmentation, itching and with a profuse discharge. So, the Eczema with discharge or Wet Eczema may be co-related with Vicharchika in Ayurveda. As, it is known that "Eczema is an inflammatory skin reaction characterized histological by spongiosis with varying degrees of acanthosis, and a superficial perivascular lymphohistiocytic infiltrate." [3]Clinically presents as itching, erythema, scaling, papulovesicles, hyperkeratosis, or fissuring based upon complex interactions of genetic predisposition, environmental triggers and immune system<sup>[4]</sup>. So, commonly it could be prevented with maintenance of proper hygiene, nourishment of the skin epithelium and introduction of natural immunomodulators. In acute condition where inflammatory changes are prominent, there the pitta shamaka dravya would work and where is excessive discharge, itching in that condition kapha shamaka dravya would work .Vata nasaka agents of Ayurveda could be able to bring solution in Jirna avastha (chronic stage). Several herbal, mineral and organic components of Ayurveda useful over Twak and Raktavaha srotas (skin & blood circulatory system), for this reasons those components are always beneficial agents against such ailments. In present case study all those above mentioned views have been taken into consideration and these established case of Wet Eczema (Sravi vicharchika )has been treated with Panchatikta ghrita guggulu<sup>[5]</sup> which is effective agents procated vata, pitta ,kapha and act as antiinflammatory medicines. Similarly Gandhak rasayan<sup>[6]</sup> is also tridosha shamak means, pacifies vata, pitta, kapha and nourishes the immune system beside its anti-microbial effect. Marichadi taila [7], is a known protent skin nourisher and also act as Sthanik Kriminashaka ( Local antimicrobial). So, these agents have been chosen to introduce over this esatablished case of Vicharchika ( Eczema). Follow up has been done every weekly where the assessment parameters like Kandu (itching), Daha (Burning sensation), Pidaka ( Papules), Vaivarnyata (Discoloration), Number of patches and Srava (oozing)[8] have been gradually cured.

#### 2. Material and Methods

#### 1) Material

- a) Patient: A 33 years old female patient has been taken for introducing the Ayurvedic modalities.
- b) Recipes as below:
  - Providing all details of drugs along with doses and anupana [Table No- 01]

Volume 11 Issue 7, July 2022

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Paper ID: SR22715103723 DOI: 10.21275/SR22715103723 1020

# International Journal of Science and Research (IJSR)

ISSN: 2319-7064 SJIF (2022): 7.942

SL	Drugs	Dose	Anupana
1	Panchatikta ghrita guggulu	500mg BDPC	Luke warm water
2	Gandhak rasayan	500mg BDPC	Luke warm water
3	Marichadi taila	Quantity sufficient BD	Only external use

2) Ingredients of used medicines[Table No- 02]

Medicine Name	Ingredients		
Panchatikta ghrita guggulu	Nimba, Patola, Vyaghri, Guduchi, Vasa, Vidanga, Nagara, Suddha guggulu, Manjistha, Ativisa &Ghrita, etc.		
Gandhak rasayan	Suddha gandhak, Twak, Amla, Ela, Vibhitaki, Godugdha, Guduchi, Nagkeshara Haritaki, Bhringaraj, Sita, etc.		
Marichadi taila	Trivrit, Haridra, Maricha, Haratala, Manashila, Gomutra, Katutaila, Devadaru, Arka, etc		

#### 3) Method

### a) Center of study:

Institute of Post Graduate Ayurvedic Education and Research At Shyamadas Vaidya Shastra Pith Hospital

b) Type of study:

Sample random single case study.

#### c) Case Report :

A 33 years old female patient suffering from vicharchika for last 3month attended kayachikitsa OPD of Institute of Post Graduate Ayurvedic Education and Research At Shyamadas Vaidya Shastra Pith Hospital with complaints – Kandu (Itching), Daha (Burning sensation), Pidaka (Papules), Vaivarnyata (Discoloration), Srava (Discharge /oozing) and number of patches.

#### d) Plan of treatment:

This is OPD basis case study. In this case study patient was treated with [Table No- 01] Panchatikta ghrita guggulu, Gandhak rasayan and Marichadi taila along with a guidance of pathya &apathy [Avoid Guru ahara ex-piyush, less animal protein as example meat, fish etc, allergic food like brinjal, egg, prawn etc] and avoidance of contact of corrosive agents like acid, strong alkaline objects (Soap, detergent powders), Other things like Spirit,Cement, sand, ashes, latex of flowers and foods and improper maintenance of personal hygiene.

#### e) <u>H/O present illness:</u>

- The patient was suffering from above symptoms for 3months. Patient took allopathic medicine Flucloxacillin and locally applied 5% Lotion Calamine for 1month, inspite of those medications patient not been cured, rather the symptoms gradually aggravated and then she attended OPD of Institute of Post Graduate Ayurvedic Education and Research At Shyamadas Vaidya Shastra Pith Hospital.
- Itching as well as discharge from the patches relieved in cold exposure.
- Aggravated in hot climate and heat exposure.

#### f) Clinical examination:

Following examinations were performed

#### Astavidha Pariksha:

• Nadi: 72/min

Mala: Mala vibandha

Mutra: Normal

• Jihva: Avarana yukti (coated)

• Sabda: Karkasha

 Sparsha: Ruksha, Daha, Vaivarnyata, In hasta pada and few areas of sphik having the wet patches with irruption Drika: NormalAkriti: Madhyama

#### **General Examination:**

Weight: 68 KgHeight: 5'5"

Blood Pressure: 130/70 mm of Hg
Respiration: 15 beats / min

• Sleep: Normal

#### 3. Observation and Results

The patients was observed for 30 days and on each 15 days interval the changes were noted on the basis the objective parameters [Table No-03]

Symptoms	1 <sup>st</sup> Day	15 <sup>th</sup> Day	30 <sup>th</sup> Day
1. Kandu (Itching)	+++	+	-
2. Daha (Burning sensation)	+++	+	-
3. Pidaka( Papules)	+++	++	-
4. Vaivarnyata	+++	++	-
(Discoloration)			
5. Srava (oozing)	+++	++	-
6. Number of patches	5 patches	3 patches	0 patches

1) Pictures: [Table No- 04]



#### 4. Discussion

As this established case of Vicharchika (Eczema) has been treated with Panchatikta ghrita guggulu, Gandhak rasayan orally & Marichadi taila locally. So, the composition of those medicines have definitely breaked the pathway of disease process and have been able to heal the patches. Panchatikta ghrita guggulu composed with nimba, patola,

#### Volume 11 Issue 7, July 2022

www.ijsr.net

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Paper ID: SR22715103723 DOI: 10.21275/SR22715103723 1021

## **International Journal of Science and Research (IJSR)** ISSN: 2319-7064

SJIF (2022): 7.942

guduchi, vasa etc herbs which are known to pacify pitta, Ghrita itself able to carry the properties of all those ingredients to the target organs and cells by nursing the area well. Guggulu [9] is an known anti-inflammatory agents which clears the micro-channels from which necessary nutrients could be supplied to the affected area. It has been stated earlier that corrosives, microbial irritants are also liable for the genesis of the inflammatory changes over the dermis layer and necessary protection is needed to provide health of the skin. Marichadi taila has became able to provide soothing to the irritating parts and roughness at the patches area. As, krimi (microbes) are also liable for production of eruption through the inflammatory changes over skin, so kriminasaka agents are needed for local and systemic anti-microbial activites. The ingredient which are present in Marichadi taila are known to act as krimighna (anti-microbes), the ingredients of bitter taste which are present in Panchatikta ghrita guggulu are also krimighna (Systemic germicidal agents). Gandhak rasayana is a potent rejuvenating compound nourishing the dhatus (Rasa, Rakta etc) beside cleasing of biological or metabolic waste. So, in this case Gandhak rasayan played an important role in nourishment to Rasa ,Twak and purification of Rakta dhatu. It is needless to mention here that, all those ingredients of herbal and organic compound are making equilibriums of tridosha by it's pitta shamak and kapha nashak action for tikta rasa and vatanasak action of ghrita<sup>[10]</sup> and guggulu <sup>[9]</sup>.

#### Conclusion 5.

From above discussion it could be concluded that after 1month of therapy the patient showed excellent curative effect. So, this case report could encourage the Ayurvedic practitioners as well as scholars of this field regarding the effectiveness of this modalities. As, during this therapy no such adverse effect has been observed, so initially it could be stated that therapies are safe and effective.

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