

Effective Management of Vaipadika Kushta: A Case Study on Palmar Psoriasis

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Abstract: ***Introduction:** Ayurveda is a divine ancient system of medicine where skin diseases are broadly categorised under Kushta. Vaipadika is described as a type of Kshudra Kushta affecting the hands and feet. It is mainly characterised by Rukshata (dryness), Sphutana (cracks/fissures), Scaling and Vedana (severe pain). Its pathogenesis is mostly associated with the Tridosha, predominantly Vata Dosha, in association with Kapha Dosha, along with Rakta and Mamsa as Dushya, resulting in the manifestations of the symptoms. The Vaipadika Kushta is compared to the chronic inflammatory condition affecting the hand and feet. From a dermatological perspective, palmar psoriasis is characterised by erythematous plaques with thick, adherent scales, fissuring, occasional pustule formation, and severe pain. This is a localised form of Psoriasis, particularly affecting the palms and soles, which impacts motor skills and daily activities, often leading to significant discomfort and pain that can hamper the quality of life. **Methods:** The Vaipadika Kushta can be treated by both Shodhana and Shamana lines of treatment. In this case study, a 52-year-old female presenting with the clinical features of Vaipadika was treated with Shodhana therapy as an inpatient in the hospital, and post Shodhana therapy, Shamanoushadha with Rasayana was administered. **Results:** The patient showed potential relief from the complaints and significant improvement in the quality of life. No adverse effects were reported during or after the treatment. The improvement was assessed through the PPASI Score, which evaluates redness, thickness, scaling and the area involved. **Discussion:** In this case, an attempt is made to highlight the significance of Virechana as a modality of Shodhana in Vaipadika Kushta, in conjunction with Shamana and Rasayana Chikitsa. Significant symptomatic relief and functional improvement were suggestive of the effectiveness of Ayurvedic interventions, which could be further validated and established through clinical studies in a larger population.*

Keywords: skin disease, Vaipadika Kushta, Palmar Psoriasis, Virechana Karma, purificatory therapy, Shamana Oushadha, palliative medicines, Rasayana Dravya, rejuvenating drugs, quality of life

1. Introduction

Skin is the largest organ of the human body and a vital protective barrier that covers the entire external surface. The skin of the palms and soles is a specialised type of skin, i.e., thick skin to withstand friction, pressure, abrasion, and for common activities of gripping, walking, and bearing weight. Thus, skin is a dynamic organ that plays a crucial role in maintaining the overall well-being of a person.

In Ayurveda, Twak Vyadhis are explained under the broad heading of Kushta Vikara. Acharya Charaka explains seven types of Maha Kushta and eleven types of Kshudra Kushta [1]. Among the Kshudra Kushta, Vaipadika affects the skin of the palms and soles. This is due to the involvement of Tridosha with the predominance of Vata and Kapha, while Rakta and Mamsa act as Dushya, and play a vital role in producing skin lesions on the palm and sole. It is mainly characterised by Pani-Pada Sputana (splitting or cracks in the palm and sole) and Teevra Vedana (severe pain at the site of cracks) [2]. The pain can be devastating, making it difficult to perform daily activities like gripping or walking. These features are mainly due to the Vata Dosha.

Vaipadika has been referred to with a different nomenclature as Padadari by Acharya Sushruta, describing features such as Kandu (itching), Daha (burning sensation at the site), and Ruja (severe pain) [3]. Here, Kandu is due to Kapha, Daha is due to Pitta, and Ruja is due to Vata involvement.

Vaipadika is compared to Palmo-plantar psoriasis, which is an immune-mediated inflammatory skin condition, characterised by thick, scaly plaques, fissures, redness, and hyperkeratosis of the palm and sole [4]. The incidence of Palmo-plantar psoriasis is 4-5% among all types of Psoriasis [5].

The present case history is of a patient with a history of 4-5 years of skin lesions on the palm associated with itching and pain in the fissured area. Based on the clinical evaluation of the Dosha, Dushya, Bala, and other factors, it was diagnosed as Vaipadika Kushta. Due to chronicity, Shodhana and Shamana Chikitsa, along with Rasayana was administered accordingly, and the condition improved significantly with a reduction in the skin lesions and the associated complaints.

2. Case Report

Patient Information: A 52-year-old female patient visited the Kayachikitsa OPD of SDM Institute of Ayurveda and Hospital, Bengaluru, with the complaints of skin lesions over the palms, since 4-5 years, with intermittent exacerbations of lesions with cracks, fissures and scaling associated with occasional itching sensation. She initially neglected the condition and used to apply topical moisturiser to get rid of the cracks. But the condition worsened, and she was unable to perform her daily routine activities. For the betterment of the condition, she

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approached the hospital. She is not a known case of diabetes, hypertension, or hypothyroidism. No surgical history and past medical history is contributing to the present condition.

Clinical Findings: On the day of the patient's visit to OPD, general and local examinations were done with the following findings.

Table 1

General examination	Was intact <ul style="list-style-type: none"> • Appetite – Good • Bowel – regular, once a day • Micturition – Normal • Sleep – sound
Astha Sthana Pariksha	<ul style="list-style-type: none"> • Nadi – 76 b/min – Vata Kaphaja • Mala – once a day - Nirama • Mutra – 4- 5 times per day - Prakruta • Jihva – Alipta • Shabda – Prakruta • Sparsha – Mrudu • Drik – Prakruta • Akrti – Madhyama
Dasha Vidha Pareeksha	<ul style="list-style-type: none"> • Prakruti – Vata- Kaphaja • Vikruti – Vata Pradana Tridoshaja • Sara – Mansa – Asti Sara • Samhanana – Madhyama • Satva – Madhyama • Satmya – Sarva Rasa Satmya • Ahara Shakti – Madhyama Abhyavarana Shakti & Madhyama Jarana Shakti • Vyayama Shakti – Madhyama • Vaya – Madhyama

Table 2: Diagnostic Assessment

Sthanika Pariksha of Ubhaya Hasta (Local examination)	<ul style="list-style-type: none"> • Cracks - +++ • Scaling - +++ • Itching - ++ • Pain - ++
Laboratory investigation	HB% - 12gm%, ESR – 12mm/hr, WBC, RBC, Platelet count, Blood urea, Serum creatinine are in normal range, while HIV and HBsAg are non-reactive)

Table 3: Treatment Timeline

Date	Therapeutic Intervention	Remarks
14/01/2022	Patient's first visit to OPD Medications advised: for 3 days (14/1/2022-16/1/2022) 1) Tab. Arogya Vardhini Vati – 2-2-2 – Before food 2) Tab. Laghu Sutashakara vati – 2-2-2 – Before food 3) Tab. Agnitundi Vati – 1-1-1 – After food 4) Mahamanjistadi Kashaya- 20ml-20ml-20ml – Before food	Patient is advised admission in the IPD section of the hospital for the Shodhana Karma, ie, Virechana Karma
17/01/2022	Deepana Pachana – 1. Tab. Agnitundi Vati – 1-1-1 – After food Anulomanartha (Koshta Shuddhi) - 1. Tab. Anuloma DS – 0-0-2 (only on 17/1/2022)	The patient was admitted to the IPD section of the hospital. Appetite – Good Bowels - Normal
18/01/2022	Abhyantara Sneha Pana - Day-1 Mahatikthaka Ghruta – 30ml	Kshudha Pravrutti – attained at 2.15 pm
19/01/2022	Abhyantara Sneha Pana - Day-2 Mahatikthaka Ghruta – 60 ml	Kshudha Pravrutti –attained at 3 pm
20/01/2022	Abhyantara Sneha Pana - Day-3 Mahatikthaka Ghruta – 90 ml	Kshudha Pravrutti –attained at 1.30 pm
21/01/2022	Abhyantara Sneha Pana - Day-4 Mahatikthaka Ghruta – 120 ml	Kshudha Pravrutti –attained at 3.30pm Koshta Snigdha Lakshanas were achieved, ie, the patient got Snigdha Varchas (soft unformed stool), Sneha Dwesha (aversion to consume ghee)
22/01/2022	Bahya Snehana and Swedana – Day- 1 Sarvanga Abhyanga with Moorchita Taila followed by Bhashpa Sweda	No itching, no pain at the skin lesion
23/01/2022	Bahya Snehana and Swedana – Day 2 Sarvanga Abhyanga with Moorchita Taila followed by Bhashpa Sweda	Fissures and scaling in the palms were reduced
24/01/2022	Bahya Snehana and Swedana – Day- 3 Sarvanga Abhyanga with Moorchita Taila followed by Bhashpa Sweda	Fissures and scaling in the palms have reduced.
25/01/2022	Bahya Snehana and Swedana – Sarvanga Abhyanga with Moorchita Taila followed by Bhashpa Sweda	Virechana Karma Shuddhi Prakara - Madhyama Antaki – Vatanta Vegiki - 16 Vegas Laingiki – Shareera Laghuta (Lightness of the body), Klama (tiredness due to purification) Maniki – Assessment not feasible
26/01/2025	Patient is discharged with the following medications (from 01/02/2022 for 10 days) Tab. Laghusutashakara Rasa – 2-2-2 – Before food Patola Katurohinyadi Kashaya – 20ml – 20ml-20ml – Before food	Samsarjana Karma for 5 days

Tab. Kaishora Guggulu – 2-2-2- After food Yastimadhu taila – For external application half an hour before bath. Siddhartha Snana Churna – for bath and washing the palms. Skin arc cream – external application – 3-4 times after bath

Assessment

Skin lesion Severity was evaluated using the Palmoplantar Psoriasis Area and Severity Index (PPASI) [6] scoring system at baseline (pre-treatment), post-treatment, and during follow-up.

Before treatment – 14/01/2022



PPASI Score -16.8

After Virechana Karma – 25/01/2022



PPASI Score – 2.8

Follow-up and Outcomes: After the Virechana Karma, the skin lesion with fissures decreased, and in the follow-up visit, there was complete resolution of complaints, and there was no remission. Follow-up visit details are as below

Follow-up visit	Particular	Medications
10/02/2022	Cracks, Fissures, pain and Itching – reduced	Tab. Laghusutashekara Rasa – 2-2-2 – Before food Patola Katurohinyadi Kashaya – 20ml – 20ml- 20ml – Before food Tab. Kaishora Guggulu – 2-2-2- After food Yastimadhu taila for external application before bath Siddharthaka Snana Churna for bath and washing the palms. Skin arc cream – external application – 3-4 times after bath
14/03/2022	Cracks, Scaling, pain and Itching – reduced	Tab. Laghusutashekara Rasa – 2-2-2 – Before food Patola Katurohinyadi Kashaya – 20ml – 20ml- 20ml – Before food Tab. Kaishora Guggulu – 2-2-2- After food Yastimadhu taila for external application before bath Siddharthaka Snana Churna for bath and washing the palms. Skin arc cream – external application – 3-4 times after bath

Follow-up result: 14/03/2022



PPASI Score – 0

The improvement in the condition was assessed using the PPASI Score, which evaluates redness, thickness, scaling and the area involved. The scores reduced from 16.8 before treatment to 2.8 after treatment and further to 0 at follow-up, indicating marked clinical improvement.

3. Discussion

The case presented with classical features of Vaipadika Kushta. Due to its chronicity Shodhana chikitsa was planned and before shodhana Deepana, Amapachana and Raktha Shodhana was required. To achieve this, Agnitundi vati [7] with Deepana and Pachana properties, Aarogyavarhini Vati [8] with Tridosahara, Deepana, Pachana and Kushtagna properties, Mahamanjistadi Kashaya [9] with Pitta Vata hara, Raktashodhaka properties, and Laghusutashekara vati[10] with Kapha Pitta hara Deepana Pachana properties were administered. Once Deepana and Pachana was achieved Patient was opted for Shodhana process (Virechana).

The Virechana Karma is an effective methodical approach for different varieties of Kushta, which brings detoxification and promotes sustained relief.[11] Patient demonstrated a marked improvement after Virechana, highlighting its efficacy by addressing the Dosha and Dushya involved in the pathogenesis.

Mahatikthaka Ghruta was chosen for Snehapana considering its potent action of Pittahara and Kandughna action, and was given in Arohana Snehapana Krama for 4 days.[12] Later, Abhyanga was performed with Moorchita Taila, which has a Vata Kaphahara action.[13] Trivrut Lehya was chosen for Virechana, where Trivrut is considered to be the best Sukha Virechaka.[14] The patient had 16 Virechana Vegas with Madhyama Shuddhi. Samsarjana Krama was adopted for 5 days, and then oral medications were started.

For Shamanoushadha orally, Laghusutashekara Rasa, Patola-Katurohinyadi Kashaya [15], Kaishara Guggulu [16] were administered, which are Tridosahara, Kushtahara, and Twak Rasayana. Yastimadhu Taila was recommended for external application before bath, which reduces Twak Rukshata while Siddhartaka Snana Choorna aids in removing the remaining skin debris and thereby rejuvenates the skin by protecting it from further damage. Skinarc is a patent cream that contains olive oil, almond oil, Vrukshamla, and Aloe vera as key ingredients, which acts as both a moisturiser to the skin and a rejuvenator.

Thus, Shodhana, Shamanoushadhi along with the Rasayana showed a significant result in treating the Vaipadika Kushta.

4. Conclusion

This case study vividly illustrates the sequential and synergistic application of Virechana Karma as Shodhana and application of Shamanoushadha along with the Rasayana Chikitsa for the effective management of Vaipadika Kushta. As the case had a chronic history, the

approach addresses root cause pathology, removing and strengthening the internal body healing mechanism and enhancing overall quality of life improvement by the use of Rasayana Chikitsa. **Informed Consent:** Informed Consent was obtained from the patient for clinical photography and the use of images for academic and research purposes.

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