

# A Case Study of Management of Psoriasis by Ayurveda

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**Abstract:** Psoriasis is one of the most common clinical conditions encountered in clinical practice. Kitibha is a disease bears greater resemblance with Psoriasis. The current treatment modalities have their own limitations and the drugs have considerable side effects when using for longer period. Hence, it is need of time to find out safe and effective treatment for Psoriasis and here Ayurveda plays an important role. Selected Panchakarma procedures along with Rasayanthrapy and Ayurvedic drugs have been proved valuable in these manifestations. Ayurvedic approach is directed towards alleviating the symptoms. Here a case report of a 34 year male presented with symptoms of Psoriasis, which was treated with a combination of Shaman and Shodhanchikitsa. The condition was diagnosed as Kitibha and was treated with Ayurvedic drugs, snehapana followed by virechan. Rasayan therapy was done. Patient's condition was assessed before and after treatment.

**Keywords:** KitibhaKushtha, Psoriasis, shaman, Shodhan Chikitsa

## 1. Introduction

Skin is the mirror which reflects the harmony of internal functions of the body. Any change in skin color disturbs the patient both mentally and physically. Psoriasis is a non-infectious, chronic inflammatory disease of skin, characterized by well-defined erythematous plaques with silvery white scale with a predilection for the extensor surface and scalp, and a chronic fluctuating course<sup>[1]</sup>. Psoriasis is a common dermatologic disease, affecting up to 1% of the World's population<sup>[2]</sup>, both males and females suffering equally<sup>[3]</sup>. The word Psoriasis is derived from Greek word 'Psora' means 'itch' and 'sis' meaning 'acting condition'. In Psoriasis, main abnormality is of increased epidermal proliferation due to excessive multiplication of cells in the basal layers. The transit time of keratinocyte is shortened and epidermal turnover is reduced to 5-6 days from 28-30 days<sup>[4]</sup>. Even though the etiology is unknown, the factors involved are genetic, biochemical and immunopathological<sup>[5]</sup>. Precipitating factors like trauma, infections, sunlight, some drugs and emotions may flare up the disease.

As there is no available cure for the disease it has remained a great problem for the patients<sup>[6]</sup>. Patients not only have physical problems, but also suffer mental and social distress. Diagnosis of the disease is made mainly on the basis of clinical symptoms<sup>[7]</sup> i.e.

- Erythematous sharply defined plaques, covered with silvery white scales.
- Extensor surface primarily involved such as the knees and elbows.
- Koebner's phenomenon present in the active phase of the disease
- Wornoff's ring often present in the healing phase of the disease.

Auspitz sign and candle grease sign are other classic features of the disease. The goal of the treatment for the disease is to alleviate symptoms which interfere with the patient's life both physically and socially. In modern medicine coal tar preparations, calcipotriol, retinoid, corticosteroids and

ultraviolet radiations are the local measure to manage Psoriasis. The systemic treatment commonly used is photo chemotherapy with PUVA, retinoids, methotrexate and cyclosporine – A and corticosteroids<sup>[8]</sup>. These medicines usually provide good symptomatic control, but in long term cause a number of unpleasant side effects.

There are several types of Psoriasis which can be related to certain diseases described in *Samhitas*. Description of *Kushtha* is present since *Vedic* period. *Kitibha* is one of the *Kshudrakushtha*. *Kitibhakushtha* manifests due to the aggravation of *Tridosha* especially dominance of *Vata* and *Kapha*. *Mithyahara* and *Vihara* vitiate *Tridosha* which further lead to the affliction and aggravation of *Rasa*, *Rakta*, *Mamsa* and *Laseeka*. Predominance of *Vata* can be elicited with symptoms like blackish discoloration, hardness, dryness and roughness to touch. *Kapha* predominance can be appreciated with the presence of severe itching as a cardinal symptom.

Vitiation of *Tridosha* followed by affliction of four entities viz. *Twak*, *Rakta*, *Mamsa* and *Laseeka* leads to *Kushtha*<sup>[9]</sup>. These seven are called as the seven morbid factors (*SaptaDravyaSangraha*) of *Kushtha*<sup>[10]</sup>. No *kushtha* manifests itself due to the aggravation of only one *Dosha*.

*Kitibha* is a type of *kushtha* characterised by skin which is blackish brown in colour (*Shyavata*), rough in touch like a scar tissue (*Kharatwam*) and hard to touch (*Parushatwam*)<sup>[11]</sup>. Dry rough (*Rukshata*) and hard black skin with itching creating sound on scratching is seen in *Kitibha*<sup>[12]</sup>. *Kushtha* characterised with discharging (*Sraavi*), round (*Vrutam*), dense (*Ghanam*), severely itching (*UgraKandu*) and oily black (*SnigdhaKrishna*) skin is *Kitibha*<sup>[13]</sup>.

Ayurvedic management of this ailment with *Shamana* and *Shodhana* modalities is being discussed here under.

## 2. Aim

To study management of *Kitibha Kushtha* i.e. Psoriasis

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### 3. Objectives

- 1) To study *Kitibhakushtha*,
- 2) To study the effect of *Shaman, Shodhan, Raktamokshan* and *Rasayan Chikitsa*.

### 4. Material and method

#### 4.1 Case report

A 34 year male patient approached in *kayachikitsa* OPD presenting with the following complaints,

- 1) *Vam hasta, ubhayapaad, shirapradeshitwakadushi*
- 2) *Krushnavairnya*
- 3) *Kandu*
- 4) *Rukshata*

All symptoms occurred since 4 years, increased from 2-3 months.

#### 4.2 Past history

Patient was all right before 4 years. Then blackish discoloration, itching, dryness occurred on the skin of left hand, both legs and head region. He was diagnosed as Psoriasis. He had taken Allopathic and Homeopathic treatment for same complaints. There was recurrence in his complaints. Since 2-3 months all symptoms were increased. Hence he came to *kayachikitsa* OPD for treatment.

#### 4.3 History

No history of any previous surgical or medical illness.

#### 4.4 Allergy

Allergic to dust.

#### 4.5 Family history

Brother and sister having skin disorder (eczema).

#### 4.6 On examination

Pulse – 80/min.  
BP - 110/70 mm of hg  
RS - B/L clear  
CVS – S<sub>1</sub> S<sub>2</sub> normal  
CNS - conscious oriented  
P/A - soft  
*Sparsha – Ushna, Ruksha*  
*Kshudha – mandya*  
*Mala – asamyak*  
*Mutra – samyak*  
*Shabda - spashta*  
*Akruti - Sthoola*  
*Jivha -Sam*  
*Druk - Prakrut*

#### 4.7 Dinacharya

Wake up at around 7-8am. Take 1 glass of cold water. Have 2-4 cup tea in a day, bakery products 4 days in a week,

paneer, yogurt 4 to 5 days per week. No any physical exercise. Stress and late night sleep.

#### 4.8 Occupation

Office worker in IT sector, sitting in air conditioner room for 10 hours. Also perform shift work having night duties.

#### 4.9 Hetu

*Aharaj*: bakery products, more paneer, yogurt etc.

*Viharaj*: late night sleep, no exercise

*Manas*: stress

### 5. Treatment Given

**Table 1: Shaman Chikitsa**

Date	Symptoms	Treatment given
1-4-17	<i>Vama hasta, ubhayapaad, shirapradeshitwak dushti, krushnavairnya, rukshata, Kandu</i>	<i>Arogyavardhini vati 500mg tds</i> <i>Mahamanjishthadi kwath 20ml bd</i> <i>Aragvadha phala majja 2gm hs</i> <i>Shodhan tail with camphor for L.A.</i>
15-4-17	<i>Kandu</i> ↓ <i>Rukshata</i> ↓ <i>Upashaya – 60%</i>	Same as above with, <i>Jatamansi + Vidanga + Haridra + Sariva</i> each 1gm with <i>Ghrta</i>
29-4-17	<i>Kandu</i> ↓ <i>Rukshata</i> ↓ <i>Upashaya – 80%</i>	Same as above. <i>Shodhan tail</i> is replaced with <i>Kushthaghna lepa</i> with <i>kanji</i>
13-5-17	<i>Upashaya – 90%</i>	Same as above with <i>Raktapachak vati 500mg tds</i> <i>Nimba 500mg</i> added <i>injatamansi + Vidanga + Haridra + Sariva choorna</i>
10-6-17	<i>Shir pradeshi new pitikotpatti</i>	<i>Raktapachak vati 500mg tds</i> <i>Rasamanikya 30mg + nimba 500mg + jatamansi 500mg</i> with <i>Ghrta</i> <i>Kushthaghna lepa</i> with <i>Kanji</i>
8-7-17	<i>Pitikotpatti upashaya – 60%</i>	Same as above.
5-8-17	<i>Sarvanga kandu</i>	<i>Gandhakrasayana 500mg tds</i> <i>Panchatikta ghrta guggulu 500mg tds</i> <i>Rasamanikya 30mg + Nimba + Haridra + Jatamansi + Vidanga</i> each 500mg with <i>ghrita</i> <i>Veliya Aranyadi tail</i> for L.A.

#### 5.1 ShodhanChikitsa

*Ghritapaangivenin Vardhaman matra* till *samyak snigdha lakshanas* occurred (5 days). Then *snehaviram* given for 2 days. *Sarvangasnehan* with *Tila tail* and *sarvangaswedan* with *Bashpaswedagiven* for 2 days. *Gandharvahrataki 3gm* given as *Virechanopaga* at night with *koshnajala.50gm* *TrivruttaLeha* with *koshnajala* used for *Virechana* next day. *Madhyamshuddhi* achieved with 22 Vega of *Virechana*. *Sansarjankarma* given for 5 days. Also bloodletting was done in *Sharad Ritu*.

## 5.2 RasayanChikitsa

*BakuchiSiddhaKshirapaka* had given empty stomach in the morning as *RasayanChikitsa*.

## 5.3 Pathya:

Avoid oily, spicy, junk food, bakery products, and fruits with milk. Avoid sleep in day time. Avoid use of soap and other cosmetics. Take healthy food. Maintain the hygiene. Do regular exercise and meditation.

**Table 2: Symptoms before and after treatment**

	Before Rx	After Shaman Chikitsa	After Shodhan Chikitsa	After Rasayan Chikitsa
<i>Krushnavaivarnya</i>	++++	+++	+	-
<i>Kandu</i>	++++	++	-	-
<i>Rukshata</i>	++++	+++	+	-



**Figure 1 (a): Before treatment**



**Figure 1 (b): After treatment**

## 6. Mode of action

**Table 3: Shaman chikitsa**

Drug	Action	Effect
<i>Arogyavardhini Vati</i>	Pacify tridosha and kleda Shoshana	<i>Kushthaghna</i>
<i>Mahamanjishthadi kwath</i>	<i>Raktagata kapha-pitta pachan</i> and shaman by <i>Tikta, Kashaya, Madhura rasa</i> and <i>Ruksha Guna</i>	<i>Raktaprasadan</i>
<i>Aragvadha phala majja</i>	Reduces <i>raktagata vata-pitta</i>	<i>Raktashuddhikara</i>
<i>Shodhan tail</i>	<i>Rakta-mamsagata kleda Shoshana</i> by <i>Tikta, Ruksha Guna</i>	<i>Twak roga nashaka</i>
Camphor	Dilate blood vessels	<i>Swedajanan, Kandughna</i>
<i>Jatamansi</i>	<i>Kledaka kapha udbhava</i> , reduces <i>Twak Dushti</i>	<i>Kushthaghna</i>
<i>Vidanga</i>	Reduces <i>twakagata</i>	<i>Kushthaghna,</i>

	<i>Kledaka Kapha</i>	<i>krumighna, Raktashuddhikara</i>
<i>Haridra</i>	Reduces all types of <i>kapha</i>	<i>Kandughna, kledaghna</i>
<i>Sariva</i>	<i>Rasa-raktagata vata-pitta shaman</i>	<i>Daha shaman</i>
<i>Kushthaghna lepa</i>	Reduces <i>raktagatavata-pitta</i>	<i>Twak roga nashaka</i>
<i>Raktapachak Vati</i>	<i>Rakta-mamsagata kleda Shoshana</i> by <i>Tikta, Ruksha Guna</i>	<i>Rakta shuddhikara</i>
<i>Nimba</i>	<i>Rakta-mamsagata kleda Shoshana</i> by <i>Tikta, Ruksha Guna</i>	<i>Raktashuddhikara</i>
<i>Rasamanikya</i>	<i>Tridoshaghna</i> by <i>snigdha, GuruGuna</i>	<i>Kushthaghna</i>
<i>Gandhak Rasayan-</i>	<i>Rasayan, raktagata pitta- kapha shaman</i>	<i>Raktaprasadan, Rasayan, dahashamak, Kushthaghna</i>
<i>Panchatikta Ghrita guggulu</i>	Pacify tridosha	<i>Vedanasthapan</i>

After *Deepana, Pachana, Snehana, Svedana*, the *Dosha* should be expelled from nearest route at proper time according to the strength of *Roga* and *Rogi*. *AcharyaHemadri* commenting on it says that *Pachan* does digestion of *Ama*, *Deepana* does separation of *Dosha* from *Dhatu*, *Snehana* does *Utkleshana* of *Dosha* and *Svedana* brings the *Dosha* from *Shakha* to *Koshtha*.

## 6.1 Virechana

*Virechanayoga* should get absorbed and due to *Virya*, it reaches to the *Hridaya*, then the *Dhamani* and then after it reaches to macro and micro channels of the body. The *Vyavayiguna* of drug is responsible for quick absorption. The *Vikasiguna* causes softening and loosening of the bond by *DhatuShaithilyakarma*. Due to *Ushnaguna* *dosha sanghata* is liquefied. Action of *Tikshnaguna* is to break the *mala* and *dosha* in micro form. According to *Dalhana* this action is due to quick excretion (*doshasravanakaratra*). Due to *Sukshmaguna* by reaching in micro channels, disintegrates endogenic toxic, which are then excreted through micro channels. Mainly due to *Prabhava, Prithvi* and *Jala* constitution and presence of *Saraganavirechana* occurs.

## 6.2 Samsarjana Karma

*SamsarjanaKarma* is to bring resurgence to impaired *Koshthaghi* and proper bowel functioning. In this process strict bland diet was maintained for 5 days.

## 6.3 Raktamokshan

As per *SushrutaAcharya*, *pittadosha* plays a major role in manifestation of disease. Vitiating of *pittadosha* causes *rakta* to be *dushit*. This shows “*ashraya-ashrayisambandha*” of *pitta* and *rakta*. So that treatment on *rakta* helps in treating *pittadosha* also. *Raktamokshan* eliminates impure blood. As per *ashraya-ashrayisambandha* between *pitta* and *rakta*, removal of impure blood eliminates local vitiated *dosha* and *subsidesKandu, ruja, Rukshata* symptoms. *Pittadosha* get provoked in the *Sharadritu*. Therefore *Raktamokshan* was given in *Sharad ritu*.

*Kushtha* is disease of *raktavahasrotas*. In *CharakSamhita*, *Virechan* and *Raktamokshan* is important *chikitsa* on diseases of *Raktavahasrotas*.

#### 6.4 Rasayan

*Bakuchi* does *Shoshana* of *kleda* by its *Tikta rasa*, *Ushna* and *RukshaGuna*. It reduces *krimi* produced by *raktadushti* and gives relief from all types of *kushtha*. Hence used as *Rasayan* in *kushthachikitsa*.

#### 7. Result

During *Snehapana* patient has got relief from symptoms. *Aftershodhanachikitsa*, the blackish patches were reduced. Itching was completely relieved. He was advised to follow *Pathya* along with medicines. He got complete relief after treatment.

#### 8. Conclusion

*Ayurvedic* line of management gives satisfactory answer as well equally beneficial for the promotion and preservation of health by removing toxic wastes, by correction of *Agni* which gives the healthy and peaceful life to patient. This case report showed that combined *Ayurvedic* regimen i.e. *Shaman*, *Shodhan*, *Raktamokshan*, *Rasayan chikitsa* is potent and effective in treatment of Psoriasis. No adverse effect was found in the patient during and after the treatment.

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