INTERNATIONAL AYURVEDIC MEDICAL JOURNAL



Review Article ISSN: 2320 5091 Impact Factor: 4.018

AYURVEDIC MANAGEMENT OF PSORIASIS - A CASE STUDY

Pravin G.Jagtap¹, Snehal Sherikar²

^{1, 2}Assistant Professor Y.M.T. Ayurvedic Medical College Kharghar Navi Mumbai, Maharashtra, India

Email: Vd.pravin09j@gmail.com

ABSTRACT

Psoriasis is a common, chronic and non-infectious skin disease characterized by circumscribed scaly patches with particular predilection to scalp and extensor surface of body. Exact cause for this disease is unknown but there is an inherited predisposition. The strong genetic influence may result from a single dominant gene with poor penetrance or a number of genetic influences. Other factors such as local trauma, general illness and stress are also involved, so the cause of psoriasis is best regarded as being multifactorial. In *Ayurveda*, the disease is correlated as *Ekakushtha* and *Mandala Kushtha* due to resemblance of signs and symptoms. In modern medicine the cure of this disease is out of question as the cause is unknown. Ayurveda propounds a holistic treatment approach for psoriasis. As per *Ayurvedic* view point *Vata*, *Kapha* and *Pitta/Rakta* vitiation are the major contributing pathological factors in its manifestation and *Virechana Karma* (purgation therapy) and internal medication is considered as the best line of management for skin disorders. A case report of 22-year-old male, presented with well demarcated raised red scaling silvery patches on trunk and back region with itching and burning has been presented in this article.

Keywords: Ekakushtha; internal medication; psoriasis; virechana

INTRODUCTION

A common, chronic, disfiguring, inflammatory and proliferative condition of the skin, in which both genetic and environmental influences have a critical role¹. The most characteristic lesions consist of red, scaly, sharply demarcated, indurated plaques, present particularly over extensor surfaces and scalp. The disease is enormously variable in duration, periodicity of flares and extent. Morphological variants are common. The disease affects more than 7 million people in the developed country such as America with an annual incidence of 150,000 to 260,000 new cases. The situation is similar in India, with 0.5% to

1.5% of the Indian population affected by the disease. The cause of psoriasis is not known, but it is believed to have a genetic component. Several factors are thought to aggravate psoriasis. These include stress, physical injury, digestive upsets, excessive alcohol consumption and smoking. Individuals with psoriasis may suffer from depression and loss of self-esteem. As such, quality of life is an important factor in evaluating the severity of the disease. There are many treatments available but because of its chronic recurrent nature psoriasis is a challenge to treat. Modern medical science treats psoriasis with

PUVA and corticosteroids. But the therapy gives serious side effects like liver & kidney failure, bone marrow depletion etc. Hence it is the need of time to find out safe and effective medicine for Psoriasis and here comes the role of Ayurveda. In Ayurvedic texts, all skin disease described under the heading of Kushtha. Psoriasis is considered as a type of Kushtha and may be correlated as Ekakushtha and Mandala Kushtha due to resemblance of signs and symptoms.

CASE PRESENTATION

A 22-year-old male patient, Muslim by religion, boutique worker by occupation, presented on 4/04/2016 with well demarcated raised red scaling patches on trunk and back region and on hands. The affected skin was a variable shade of red and the surface was covered by large silvery scale. He complained of itching and burning all over the body and on scraping, white powder (silvery scale) like substances falls down and leaves behind a shiny bleeding surface. On history, patient had above complaints since 10 years and diagnosed of psoriasis by allopathic physicians. Initially lesions were coin shaped and started from back of trunk, both hands and legs but later the polycyclic plaque was produced on all over body parts as several lesions coalesce and destruction of nail plates was also developed. Hence, it was clear case of plaque psoriasis. For this, patient took allopathic treatment for long time but got no relief. His general health was good and both physical examination and all blood tests (routine test) were within normal range. The skin lesion was sent for culture and sensitivity test and report showed no growth.

Treatment

The patient was administered classical *Virechana* (purgation therapy) and internal medication. All oral and local modern medicines were stopped. The details of the procedures are described below:

Method of *Virechana* Procedure (purgation therapy)

The *Virechana* Process comprises of three stages, which are as follows:

- Purva Karma (initial procedure)
- *Pradhana Karma* (main procedure)
- Pashchat Karma (post procedure)
- 1) Purva Karma: Purva Karma of Virechana is Deepana - Pachana, Snehana and Abhyanga-Svedana. Deepana and Pachana were done by administration of Panchakola powder 2gm t.d.s. for 3 days. Snehana before Virechana procedure is performed by 'Snehapana'. 'Snehapana' was done by pure Ghee. After obtaining of 'Samyaka Snigdha Lakshana' (symptoms like oiliness of skin, passing stool containing fat, feeling of aversion of Ghee), after 5th day of 'Snehapana', patient was subjected to perform 'Abhyanga with 'Dashmoola oil' and Svedana by 'Sarvanga Bashpa Sveda' (fomentation done by using vapour to whole body) by using 'Dashamoola decoction' for 3 days. During all these days, light and liquid warm diet was given. Thereafter, on the fourth day morning, Virechana was performed.
- 2) Pradhana Karma: Before administration of Virechana (purgation) Drug, Abhyanga (massage) by 'Dashmoola oil' and Svedana (fomentation) by 'Dashamoola decoction' was carried out in the morning of Virechana day. Pulse, blood pressure, respiration and temperature were recorded. It was recorded at regular interval during the Pradhana Karma. Patient was advised for empty stomach in the morning of Virechana day. As mentioned in classics, Virechana drug was administered after passing of morning time. Accordingly, the appropriate time for administration of Virechana drug was 9.45 a.m. on empty stomach. 'Virechana Yoga' (purgative formulation) was prepared from 100 ml decoction of 25gm of Triphala powder (powdered form of Terminalia chebula Rets + Eblica officinalis Gaertn. + Terminalia bellirica Gaertn), Trivruta (Operculana turpethum Linn.) powder - 15 gm, Danti (Baliospermum montanum Willd.) powder –

15 gm. Patient was given hot water repeatedly in little quantities. After that patients were observed carefully to avoid complications. Number of motions after administration of *Virechana* drug was counted till the symptoms of proper purgation like stopping of purgation on its own, passing of stool with mucus in the last one or two motions, feeling of lightness in the body, and later improvement in sign and symptoms of the disease appeared.

3) Pashchat Karma: The time period from the completion of *Vegas*, till the patient reached his normal diet is crucial and the specific management that has to be taken at this juncture is known as *Paschat Karma*. After the completion of *Virechana* (purgation), patient was kept on *Samsarjana Krama* (post procedure of dietetic indication) of considering the '*Shuddhi*' as '*Madhya*' type of '*Shuddhi*' (moderate purification). Patient was advised to take rest and eat thin rice gruel was given as a food and special diet is advised for 3 to 5 days.

RESULTS

After purgation therapy, the reddish silvery patches all over body and scaling were disappeared at the end of 15 days leaving some area of hyper pigmentation over abdomen. Itching and burning was completely relieved. Then he was prescribed some oral medication viz. *Arogyavardhini Rasa*². 250 mg b.d. after meal with plain water for next 4 weeks and *Kaishora Guggulu*³. 250 mg b.d. after meal with warm water for next 2 months.

Along with the above medicines, he was advised to avoid intake of junk food, incompatible diet, sour food items (curd & citrus fruits) and salty food, day-sleep and advised to take simple dietary & lifestyle modifications.

With a follow up for a period of 2 year, till today the patient has shown no signs of recurrence. The result of above medication before and after treatment is shown in figures. (Figure 1- Figure 6)

DISCUSSION

The disease psoriasis appears to be largely a disorder of keratinization. The basic defect is rapid displacement of epidermis in psoriatic lesion (3-4 days instead of 28 days in normal skin). There is evidence that both hormonal and immunological mechanisms are involved at a cellular level. The raised concentrations of metabolites of arachidonic acid in the affected skin of people with psoriasis are related to the clinical changes⁴.

MODE OF ACTION

Purification procedure (purgation therapy)

Deepana and **Pachana** Drugs: Due to *Ushna*, *Laghu Guna* (hot and light property) of *Panchakola* powder enhances the digestive capacity and metabolic activity of the cells & facilitates the easy digestion of *Sneha* (unctuous ghee) during *Snehapana* (intake of unctuous ghee).

Snehapana: 'Snehanapana' before Virechana procedure is effective to remove 'obstructed toxic materials'⁵. So they can be easily removed from body. It is prerequisite procedure which is carried for 5-7 days based on the receiving ability of patient and manifestation of symptoms of proper internal oleation like oiliness of skin, passing stool containing fat, feeling of aversion of Ghee). Due to properties of Sneha (unctuous material like ghee) helps to prevent the lodging of transported morbid humours and toxic waste materials from Shakha (periphery) to Kostha (center of excretory channels like intestine) in the way in Srotasa (micro-channels). Cell membrane acts as a barrier to the passage of water soluble molecules, but provides free passage to lipids and lipid soluble substances. Sneha by its Sukshma Guna (fine property) reaches at the cellular level. Lipid consuming is helpful in excretion of lipid soluble substance. It suggests that Sneha liquefies the compact morbid humours and destroy morbid Mala (waste products).

Abhyanga- Svedana (whole body external oleation and massage and sudation therapy): After obtaining symptoms of proper internal oleation, which ap-

peared after 5th day of 'Snehapana', patients was subjected to perform 'Abhyanga and Svedana'. Abhyanga (whole body external oleation) softens morbid humours & localizes them. 'Svedana' (sudation therapy) liquefies the morbid humours which are being situated in micro channels⁶. So they can easily reaches from periphery to center of excretory channels from where they can be removed from body.

Virechana (Purgation): oleation therapy & sudation therapy administered for the purpose of Virechana liquifies morbid humours & brings them from Shakha to Koshtha wherein they are made ready for easy elimination just by irritating local organ. Since morbid Pitta & Kapha Doshas which are in Drava (liquid) form are brought to nearest route wherein administration of purgative drugs eliminates them without any exhaustion, since the route selected for elimination is anal route. The main seat of Vata i.e. Pakvashaya is also cleansed thereby alleviation & normalization of Vata occurs which proves that Virechana (purgation) is beneficial for Tridoshas. In short, the toxins collected in the excretory channels will be expelled out through anal route. After the administration of purgative drugs, patient was purgated for 18 times considered as 'Madhya' type of 'Shuddhi' (moderate purification).

Samsarjana Krama (post procedure of dietetic indication): After the completion of Shodhana (purification) procedure like Virechana, normal diet should not be given immediately as the Agni (digestive fire) is hampered due to the Shodhana procedures and vulnerable to diet which is beyond its capacity to digest. Hence the intention of Samsarjana Krama is to bring resurgence to impaired Kosthagni (digestive fire) and proper bowel functioning. In this process, strict bland diet was maintained for 3 days.

Internal Medication

Kaishora Guggulu: *Kaishora Guggulu* is good herbal combination which corrects the function of stomach and intestine, which helps improving digestion and removing toxins from the body. The ingredients of *Kaishora Guggulu* are Tinospora cordifolia

Willd., Emblica officinalis Gaertn., Terminalia bellirica Gaertn., Terminalia chebula Rets., Commiphora mukul Hook., Zingiber officinale Roscoe, Piper nigrum L., Piper longum L., Embelia ribes Burm f. Operculana turpethum Linn. and Baliospermum montanum Willd. It has antibacterial, anti-inflammatory, anti-oxidant, antimicrobial property which helps in treating wounds. It is good blood purifier therefore, corrects *Raktadushthi* (vitiation of blood).

Arogyavardhini Rasa: Arogyavardhini Rasa is a formulation which improves good health. It promotes digestive fire, clears body channels and has laxative action which helps to eliminate toxins out of the body; therefore it is recommended skin disorders. As the patient was boutique worker by occupation and having a habit of sleeping at late light due to work load and also he was consumed an incompatible diet like excessive amount of curd, fish+milk, sour fruits, milk shakes etc. So according to my opinion, due to stress of work load and mental stress of living with Psoriasis, digestive upset due to faulty dietary habits and lifestyle may aggravates his disease condition. So patient was advised for proper diet and also for yoga and meditation during treatment procedure. All oral and local allopathic medicines were stopped. The patient was managed merely on Ayurvedic treatment modalities.

The holistic approach of *Ayurvedic* system of medicine provided purification procedure like *Virechana* procedure which removes the toxic waste materials from the body and also boost the immune system and provides both subjective and objective relief to the patient. In addition if internal medication of some herbal compound is administered after taking the proper course of purification procedure like purgation, then it provides additional relief and thus helps in eradicating the diseases (psoriasis) completely.

CONCLUSION

Psoriasis is a heredo-familial disease that is triggered by some local and systemic factors. There is evidence that both hormonal and immunological mechanisms are involved at a cellular level. It is concluded that, *Ayurvedic* line of management gives satisfactory answer as well equally beneficial for the promotion and preservation of health by removing toxic wastes, by balancing morbid humours and by correction of *Agni* (digestive fire) which gives the healthy and peaceful life to patient.

REFERENCES

- Paul K Buxton. Psoriasis. ABC of Dermatology; 4 th edi. London: BMJ Publishing group Ltd, BMA House, Tavistock Square; 2003; 11.
- Kaviraj Shri Ambikadatta Shastri (editor). Rasaratna Samuchchaya of Shri Vagbhatacharya, , chapter 20, verse no. 87-93, 4 th edi., Varanasi ; Chaukhamba Sanskrit Series; 1970; 400

- Brahmanand Tripathi (editor). Sharangdhara Samhita of Pandita Sharangadhara, Madhyamakhanda chapter
 verse no. 70-81, 1 edi. Varanasi; Chaukhambha Surbharti Prakashana; 2011; 205.
- 4. Ibidem(1), Psoriasis, 2003; 12.
- Agnivesha, Charaka, Dridhabala, Charaka Samhita Siddhisthana, Kalpanasidhhidhyaya 1/7, edited by Acharya Vidyadhara Shukla and Prof. Ravi Dutt Tripathi, 1st edi. Chaukhambha Sanskrit Sansthana, Varanasi. 2007; 876.
- 6. Ibidem (3), Kalpanasidhhidhyaya 1/8; p. 876.

Figure 1: Before Treatment



Figure 3: Before Treatment



Figure 2: After Treatment



Figure 4: After Treatment



Figure 3: After Treatment



Figure 6: After Treatment



Source of Support: Nil

Conflict Of Interest: None Declared

How to cite this URL: Pravin G.Jagtap & Snehal Sherikar: Ayurvedic Management Of Psoriasis - A Case Study. International Ayurvedic Medical Journal {online} 2018 {cited May, 2018} Available from: http://www.iamj.in/posts/images/upload/1152 1157.pdf