

SWITRA: A CLINICAL APPROACH THROUGH AYURVEDA

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ABSTRACT

Skin is the best indicator of general health. Skin is a mirror that reflects external and internal pathology, and thus helps in diagnosis of disease. It is the major sensory organ, as skin covers the whole body and is the first organ of the body interacting with environmental stimuli and has natural immunity. *Switra* is mentioned along with other types of *Kushtha* in *Ayurvedic* classics, caused due to vitiation of *Tridosha* and *dhatu*s like *Rasa*, *Rakta*, *Mamsa* and *Medas*. *Shwitra* or *Shweta-Kushtha* can be co-related with skin disease "Vitiligo" in contemporary medicine. Vitiligo is an auto-immune disease against melanocyte characterised by depigmentation or hypo-pigmented patches. Vitiligo have major impact on quality of life of patients, many of Vitiligo patients feel distressed and stigmatized by their condition. Treatment available in contemporary medicine has its own limitations and side effects. Main line of treatment for *switra* in *Ayurveda* is *punaha punaha Shodhana* and *Shamanoushadi*.

Keywords: *Switra*, *Nidana*, *Chikitsa*, *Vitiligo*

INTRODUCTION

The skin is the largest and visible organ of the human body. The skin is one of the essential sense organs as the skin covers the whole body, *bhrajaka pitta* should be maintained in a proper state, and it needs continuous care. An imbalance in *Vata* and *bhrajaka pitta* may cause skin diseases.

Switra is just not a disease of today's era. The description of *Switra* is available since *Vedic* literature. The word *Switra* has its root in the *Sanskrit* word 'Shweta', which white patch¹. According to *Kashyapa Samhita*, *Switra* is, 'ShwetaBhavaMicchantiSwitram'², This means reflection of white colour. *Susruta* called the disease as *Kilasa* instead of *Switra*³. 'Twagatm Eva Aparisravi', means there is

only involvement of skin and is *Aparisravi* i.e. non-exudative. *Acharya Charaka* has mentioned various causes out of which *Virudhaaharsevana*, *Pap karma* important one.

According to clinical manifestations *Switra* is more similar to Vitiligo. Vitiligo is a long term dermatological disorder characterized by patches of the skin losing their pigment. The patches of affected skin become white and the hairs from the affected skin may also become white. Vitiligo is hypopigmentation of the skin. It is also called hypo melanosis condition of the skin. This results in the destruction or hypo function of melanocyte. Melanocyte cell of the skin contains the Melanin which is very

important factor in respect of pigmentation. Proper Melanin synthesis into the melanocyte cell is essential for normal colour of the skin. According to modern medicine the cause of the Vitiligo is unknown till date. It may onset at any age but usually in childhood at 10 years of age or in second decade of life. It is Multifactorial disease. Genetic susceptibility is important factor in this case. Risk factors are positive family history, sufferings from inflammatory diseases or autoimmune diseases. Worldwide incidence of Vitiligo is observed in 1% of world population⁴. Confirm diagnosis is possible by skin biopsy or tissue biopsy⁵.

Cardinal symptoms of *Switra* white coloured patches. So it is a cosmetic disfigurement, it affects human's life psychologically. Treatment for Vitiligo in conventional medicine includes topical steroids, systemic steroids, topical PUVA, systemic PUVA, sometimes surgically grafting also done. PUVA therapy is having side effects like photo toxicity, hyperpigmentation, solar elastosis, cataract and squamous cell carcinoma in white skin individuals. UVB phototherapy is a safer alternative to PUVA therapy but is relatively expensive.

It is a progressive disease, so treatment should start as quickly as possible. *Acharya Vagbhata* quotes that the fire should be controlled within time before it engulfs the burning forest⁶. *Acharya Charaka* coated *Switra* under the *Rakta Pradoshaja Vikara*⁷. Repeated application of *Shodhana Karma* as well as *Shamana* therapy is beneficial in this condition.

Nidana:

Nidana of *switra* can be classified as 3 categories, i.e.

1. *Aharaja*,
2. *Viharaja* and
3. Miscellaneous causes.

1. **AHARAJA NIDANA:** *Ahara* plays more important role than the medicine. Food is able to build up or repair tissue, protects against disease as supply material for the production of health

and energy. *Aharja Nidana* can be divided as follows:

- A. *Ati sevana*
- B. *Mithya Ahara*
- C. *Viruddha Ahara*

A. Ati Sevana: Increased frequency of diet, increased consumption of *Amla*, *Lavana*, *Katu* and *Kshara rasas*, *Guru* and *Snigdha Ahara*, *kshira*, *Payasaya*, *dhanya*, *Nishpava*, *Hayanaka*, *Udalaka*, *Kordusha*, *Kulutha*, *Masha*, *Tila*, *Sarshapa*, *Matsya*, *Mahisha*, *Gavya*, *Varaha*, *Madhu*, *Phanita*, *Guda sidda dravaya*. Frequent consumption of such food or food habit leads to the formation of improperly metabolized substances and toxins.

B. Mithya Ahara: *Mityahara* as that which is not taken according to the *Astavidhi viseshayatanani*. *Ajirna Bhojana*, *Adhyashana*, *Athyasana*, excessive use of *Madhu*, *Matsya*, *Mulaka*, *Lakucha* etc. during *Ajirna*. This kind of meal interferes with normal metabolism and leads to disease.

C. Viruddha Ahara: Any *Viruddha Ahara* (*Matsya & Dadhi sevana*) at just single time may not cause the disease. For disease manifestations continue consumptions must be there. *Acharya Charaka* has compared *Viruddha Ahara* with *Visha* and has also emphasized that, diseases originated by *Amavisha* are most uncurable and difficult to treat.

2. **VIHARAJA NIDANA:** Common *Vihara hetu* for *Kushta* are described like *Diwaswapna*, *Vegavidharana*, *Ati Shrama*, *Santapa*, *Vyayama*, *Vyavaya*, *Diwaswapa*, *Chikitsa Vaishmya* (*Panchakarma* with improper manner), *Manasika karana* like *Bhaya*, *Shoka*, *Krodha*, *Chinta* etc.

3. MISCELLANEOUS CAUSES:

- a) Due to *Kulaja nidana: Beejadushti*,
- b) **Due to papa karma:** *Shvitra* is a *Karmaja Vyadhi*, *Vachansi atathyani*, *Krutaghna Bhava*, *Suranam Ninda*, *Guru Gharshan*, *purvakrutam karma*,

4. NIDANRTHAKARA ROGA: TYPES OF SWITRA:

After burns, not treated *Vrana* and *Krimi Roga*,

Table 1: According *doshika* predominance and involvement of *dhatu*

Dosha	Dhatugata	Symptoms
Vataja	Rakta gata	Aruna Varna & Krushna Varna
Pittaja	Mamsa gata	Tamra varna, Roma Shatana, Vidaha
Kaphaja	Medo gata	Sweta varna, Bahu Sitam & Sakandu, Balavan

According to Aetiology:

1. Doshaja
2. Vranaja

Again *Doshaja* variety was subdivided into

- A. *Atmaja* - Due to Vitiating of *Doshas*
- B. *Paraja* - Due to *Sansparshana* (According to *Acharya Susrutha* and *Vagbhata* – this disease spreads from one man to another due to *prasanga*, *Gasrasamsparsa*, *Nishwasat*, *Sahabhojanat*..etc

SAMPRAPTI:

Detailed *Samprapti* of *Switra* has not been described by *Acharya Charaka*, *Sushruta*, *Vagabhatta* and other *Samgraha Kalina* workers, except *Harita*, *Harita* endeavours to mention the *Samprapti* of *Switra* separately and says that *Vata* provokes the *Pitta*, which is situated in *Twak*. This vitiated *Pitta* along with *Rakta* produces *Pandura Varna*, which is known as *Switra*⁸.

Nidana Sevana causes to vitiated *doshas* spread from *Koshtha* to *Shakha*. While travelling through all over the body wherever there is *Sthaanavai-gunya*. it gets lodged and shows the symptoms of the diseases. Then, these *doshas* move in *triyakgata siras* and get lodged in *tamra* layer of *twacha* causing *sanga* to the local *rasavaha* and *raktavaha srotas*. leads to the impairment of local *Bhrajakapitta* and causes *Twak shwetata*. Further the *Samprapti* continues and the deeper *dhatu*s like *mamsa* and *medas* are also involved. The involvement of each *Dhatu* exhibits specific discolouration on the lesion. *Doshas* settled in *Rakta Dhatu* produces *Aruna*

varna, *Mamsa dhatu* produces *Tamra varna* and *Shweta varna* when settled in *medo Dhatu*.

Here mainly affected *Udana*, *Vyana*, *Bhrajaka pitta* and *Shleshmaka Kapha* which is responsible for *Varna* and related to *Twak*.

Acharya Charaka has described particularly *Papakarma* as the *Nidana* causative factors of this disease. Also the hereditary involvement of the disease is described by *Acharya Sushruta*. *Purva Janam Krut Karma* and *Papa Karma* are also called as *Khavaigunya Karaka Nidana*, as *Sparshnendriya* is *Adhishthna*. *Shariraka dosha*, *Indriya* and *Mana* are related each other. is stated to be under the control of *Vata*. Vitiating of *Shariraka dosha* causes to Vitiating of *Manasika Dosha* (*Rajas & Tamas*).

LAKSHANA:

White patches on the skin are the main sign of *Switra*. The skin remains of normal texture and there are usually no itching or other symptoms. These patches are more obvious in sun-exposed areas including the hands, feet, arms, legs, face and lips, patches to appear are the armpits and groin and around the mouth, eyes, nostrils, navel and genitals. The colour of the skin is *Pandura- Varna* due to *parakupita pitta* vitiated by *rakta*⁹. *Acharya Sushruta* has also given the word '*Kilasa*' for *Switra*. He clarified that *Kilasa* is *Aparisravi* in nature and only *Twak* is involved. *Acharya charaka* has mentioned three varieties, namely *Daruna*, *Aruna* and *Kilasa* depending on Vitiating of *dosha* and involvement of *dhatu*.

SADHYASADHYATA:

Sadhya Lakshana:

- only one *Dosha* is involved,
- The patches are not fused,
- Hairs are normal in colour (*Arakta Loma, Ashukla Loma*)
- having short duration of pathogenesis (*Natichirothitha, Navama*)
- Involvement of *Uttana Dhatu*

Asadhya lakshana:

- *Tridoshaja*
- Involment of *Gambhira dhatu (rakta, mamsa and meda)*
- *Agnidagdham* and manifested in palms, soles, lips and genital organs⁸
- *Rakta loma*
- *Chirakari*
- Patches are fused
- *Janmataha*

MANEGEMENT:

In *Switra* roga, all three types of treatment i.e. The principal of treatment are threefold in Ayurveda as *Nidana Parivarjana, Apakarshana* and *Prakriti Vighata* are to be followed while treating. Selection of any of them depends upon *Roga Bala, Rogi Bala, Kala, Vaya, Agni, And vyadhi Avastha* etc. When the morbid *Dosha* are more potent, the patient should be treated with *Shodhana*. General line of *Kusta*, also can adopt in this condition i.e. *Rakta Mokshana* is to be done at every six months, *Virechana* is to be given at every one month; *Vamana* is to be given at every 15th day respectively¹⁰. This long term course of treatment is to eliminate vitiated *Dosha* and brings *doshas in equilibrium state*. The patient with *Switra* requires quick approach towards management, because it becomes *Asadhya* very quickly. *Acharya Vagabhatta* says that if the sinfulness of the person followed by *Daana, Tapa* etc. only then the *Shodhana Raktamokshana, Rukshan* and *Saktupana* can control the disease¹¹.

1. *Nidana parivarjana:*

The factors which are responsible for of disease. It is fact that *Viruddha Ahara* is the main causes of *Switra*. So the first step to avoid the *Nidana*; i.e. *Viruddha Ahara, Ajir nabhojana, Vishamasana* etc.

2. *Apakarshana:*

Shodhana:

Shodhana has its own important in this disease, Before *shodhana Purvakarma (Snehana and Swedana)* is must to get proper purification. The treatment should be started with *snehapana* with *Tiktka Ghrita, Mahatiktka Ghrita*¹². After that *Swedana* is applied and this procedure liquefies the *Dosha* i.e. *Pitta* and *Kapha* which makes them ready to expel. *Virechana* is line of treatment for *Pittaja* and *Raktaja Vyadhi* and involvement of *Rakta* and *Pitta* are very clear in *Switra*. After *Virechana* the *Vata Dosha* increases in *Koshtha* so it is necessary to give again *Snehapana*¹³.

Raktamokshana:

Rakta Mokshana should be preceded by *Shodhana* and *Virukshana*¹⁴. *Sira Vedha* should be applied on fused lesions and it requires surgical skill. If the number of patches is more and appears all over the body then *Siravedha* should done. If patches are small and less in number then *Prachhanna* is indicated¹⁵.

Kshara prayoga:

The conditions where *Rakta Mokshana* is contraindicated, *Kshara* is to be beneficial.

Palasa kshara with *phanita* is beneficial in this condition¹⁶.

3. *Prakriti Vighatana:*

Shamana Therapy:

Shamana includes local application and internal medication

Lepana: *Lepa* should be applied after completion of the *Shodhana*¹⁷.

- *Manahsila, Vidanga, Kasisa, Gorochana, Kana-kapushpi and Saindhava*
- *Kadalikshara and Kharasthi Bhasmawith blood of cow*

- *Hastimada along with Malati Koraka Kshara*
- *Nilotpala, Kushtha, Saindahva with Hastimutra*
- *Mulakabija, Avalguja with Gomutra*
- *Kakodumbara or Avalguja Chitraka with Gomutra*
- *Manashila with Mayurpitta*
- *Avalgunja Bija, Laksha,,Gopitta, two types of Anjana, Pippali, Kalaloha Raja.*
- *Shodhana Lepa ((SU.Chi.9/6)*

Table 2: Acharya Charaka mentioned *shamana prayoga* for treating Switra

No	Formulations	Drugs
1	<i>Kwatha</i>	<i>Malapuyadi Kwatha</i>
2	<i>Churna</i>	<i>Hapushadi Churna</i>
3	<i>Ghrita</i>	<i>Nilinyadi Ghrita</i>
4	<i>Asava</i>	<i>Lodrasava, Madhukasava</i>
5	<i>Arishta</i>	<i>Abhayarishta, Punarnavadyarishta</i>
6	<i>Avalehya</i>	<i>Endriya Rasayana</i>
7	Animal Product	<i>Astha Mutra</i>

DISCUSSION

Switra is a *pitta pradhana tridoshaja Vyadhi*. Progression of this disease is rapid, so the management should be taken in proper time to arrest the pathogeneses. In *switra roga*, All three types of treatment i.e. *Nidana Parivarjana, Apakarshana* and *Prakruti Vighatana* are to be followed while treating. *Bhrajaka Pitta* and play major role in the repigmentation of white patches. *Ushna, tikshna, sara, sukshma guna* and *katu tikta pradhana rasa dravya* should select to improve *agni* and helps to remove *srotavarodha* and *sanga* and drugs having *Lekhana, Ropana* and *Varnya* properties. *Lekhana* property is to form blister, *Ropana* for healing of blister and *Varnya* to enhance Melanogenesis. By activate the *Bhrajaka pitta*, bring equilibrium in *doshas* and *dhatu*s and ultimately breaks the chain of *samprapti* of *Switra* (vitiligo) effectively. A person is made to undergo all *shodhana* procedures first, after patient is fully evacuated, *samsrama karma* is done as primary step of treated by giving *malapu rasa* (*Kakodumbara*) along with *guda*.(Cha.Chi.7/ 165). The mixture should be given according to the *bala rogi*, after that he should be exposed to the sun. This procedure continued for 3days. During this event if patient feels thirsty, *peya* is given to quench his thirst. By doing this patient develops blisters on the patches all over

the body. The blister should be pricked and remove the fluid, after all the blisters are opened, a *kwatha* prepared from bark of *kakodumbara, priyangu, asana* and *shatapushpa* should be given early in the mornings for 15 days or *phanitham* prepared from *palasa* can also be given.

Yogas beneficial in *kusta roga*, are recommended in *switra* also. *Khadira proyogas* are useful, it has *tikta, kashaya rasa, sheeta veerya* properties, both *Pitta* and *kapha dosha shamaka*. Laboratory studies have identified constituents shown to regenerate liver cells, as well as providing anti-fungal and anti-inflammatory effects. Various *Gomutra prayoga* are explained in classics. *Gomutra* stimulates the *Bhrajaka pitta* (melanocytes) and effects the proper formation of the pigments. Seeds of radish and *Bakuchi* powdered mix with *Gomutra* apply paste for leucoderma, for external application is help in *Krishneekarana* of *twacha*. *Gomutra* stimulates the *Bhrajaka pitta* (melanocytes) and effects the proper formation of the pigments. *Bakuchi* is having *Madhura, Tikta, Katu, Sita virya, tridoshahara* properties and helps in absorb long wave ultraviolet radiations after exposure to sun light and become photoactive which stimulate the melanocytes. *Mallasindoora, Talakeshwara Rasa* which contains *Haratala*, having

Vyavayi, *Ashukari* properties breaks the pathogenesis and prevents the self-destruction of melanocytes. The preparations like *Panchatiktaghrita guggulu*, *Tiktaka-ghrita*, *Khadiraristam*, *Amritabhallatakalehya*, all these internally and the medicines like *Doorvadithailam*, *Mareechadi thailam* and *Avalgujabeejadilepa choornam* used externally in treating used externally in a judicious combination in this condition. *Nimba*, *Manjista*, *Khadira*, *Guduchi*, *Katuki*, *Haridra* and *Bhallataka prayoga* are beneficial. *Chitraka Rasayana*¹⁸, *Eindriya rasayana*¹⁹ are best for roga *Apunarbhava chikitsa*.

CONCLUSION

- Beauty and attraction of individual depends upon skins health including physical and psychological health. The colour of skin plays very important role in the society.
- Vitiligo is an important skin disease having major impact on quality of life of patients.
- *Ayurvedic* management give a blissful life by improving the immune system of the individual by doing repeated application of *Shodana karma* along with *shamanaoushadhi*.
- Following *pathya sevana* is important preventive measure by improving immunity.
- Early intervention should adopt for better results.

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Source of Support: Nil

Conflict Of Interest: None Declared

How to cite this URL: Vasantha Lakshmi. C & Abdul Khader: Switra Clinical Approach Through Ayurveda. International Ayurvedic Medical Journal {online} 2018 {cited November, 2018} Available from: http://www.iamj.in/posts/images/upload/2524_2530.pdf