

**PANCHAKARMA APPROACH TO KITIBHA KUSHTA (PSORIASIS) -A CASE STUDY**Gadilinga<sup>1</sup>, Ananta S Desai<sup>2</sup>, Smita S<sup>3</sup>, Shaila B<sup>4</sup><sup>1</sup>PG Scholar, Dept of Panchakarma,<sup>2</sup>Pro&Hod Dept of PG Studies in Panchakarma,<sup>3</sup>Guide Dept of PG Studies in Panchakarma,<sup>4</sup>Associate Professor, Dept of Panchakarma,

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(Published Online: February 2022)

**Open Access**

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Article Received: 12/01/2022 - Peer Reviewed: 18/01/2022 - Accepted for Publication: 19/01/2022

**ABSTRACT**

All the skin diseases in *Ayurveda* have been discussed under the broad heading of “*Kushta*”. Psoriasis is a proliferative autoimmune skin disease which is affecting 2% of the worldwide population. In India, the overall incidence of Psoriasis among total patients attending skin OPD is 0.28 to 0.44%. This disease is characterised by scaling, thickened-rough skin lesions, itching, in severe cases covers the entire body. Skin being the largest organ of the body is the reason behind beauty and the cause for confidence. WHO has classified skin diseases as Psychocutaneous diseases. This emphasizes the relation between Skin and Psyche. Hence Skin ailments are given high priority by any Victim. Skin diseases are commonly observed due to altered lifestyle, Lack of physical exercise, Poor hygiene, Mental stress and Improper food habits. *Kushta* is being further divided into *Maha Kushta* and *Kshudra Kushta*. *Kitibha Kushta* is one of the *Kshudra Kushta*, a disorder that is commonly encountered in today’s clinical practice. Here, *Tridoshasa*, *Rasa*, *Rakta* and *Mamsa Dhatu* are affected. *Kitibha Kushta* is a disease mainly affecting the beauty of the subject, thus its management would be a challenging task. Modern medical science treats Psoriasis with Psoralen and Ultraviolet therapy A (PUVA). But the disease has a high recurrence rate, and the modern medications have serious side effects like a Liver failure, Renal failure, Bone marrow depletion etc. Guttate psoriasis is a type of psoriasis that presents over the upper trunk and proximal extremities, it is small

(0.5 to 1.5 cm in diameter) lesions; it is found frequently in young adults. As per its clinical features, we will compare it with *Kitibha Kushta*. So here in this case by using *Shodhana Shamana and Bahirparimarjana chikitsa* we successfully treated the case of *Kitibha kushta*. It is a single case study, A 26-year male patient approached *Panchakarma* OPD having complaints of multiple small, red, brownish lesions over the chest, abdomen, and back region also on both upper limbs and itching over them for 3 years. The patient was treated with *Shodhana* and *Shamana Chikitsa*.

**Keywords:** Psoriasis, *Kitibha Kushta*, *Shodhana*, *Shamana*, *Bahirparimarjana chikitsa*

## INTRODUCTION

*Ayurveda* has given some codes and conducts of life which everyone should follow to be healthy physically and mentally, but nowadays lifestyle is changed. Now we are in the 21st century, people have changed their lifestyle as per the so-called Western lifestyle. These all factors play important role in *Raktadushhti* and *Dosha Vrudhhi* <sup>(1)</sup>, Which leads to skin diseases, especially *Kushtha*. *Acharya Charaka* mentioned it in *Ashtamahagadas* <sup>(2)</sup> (difficult to treat). *Acharya Charaka* described *Kushtha rogadhikar* in which he classified *Kushtha* into two major types: *Maha-Kushtha* (Major skin diseases) and *Kshudra Kushtha* (Minor skin diseases). *Kitibha kushta* is one of the types of the *Kshudra Kushtha* <sup>(3)</sup>, which is having *Lakshanas* like *Shyava*, *Kina*, *Khara Sparsha*, *Parushya*, *Ruksha pidika* and *Kandu* <sup>(3)</sup>. *Kitibha Kushta* is having a predominance of *Vata* and *Kapha dosha*, which are having *lakshanas* of the individual *doshas*. *Kitibha Kushtha* manifests due to vitiation of *Sapta dhatus*, they are *Tridosha*, *Twak*, *Rakta*, *Mamsa* and *Lasika* <sup>(4)</sup>. In *Samhitas*, according to the *Bala*, *Dosha* and *Vyadhi avastha Shodhana* and *Shamana Chikitsa* is described for the *Kushtha*. Repeated *shodhana* is indicated in *Kushtha* due to *Bahu doshavastha*, to eliminate the aggravated doshas which help to treat the root cause of disease. So here a case of *Kitibha kushta* is successfully treated with *Vamana*, *Virechana* and *Shamana Chikitsa* <sup>(5)</sup>. Psoriasis is a chronic skin disease characterized by dry red patches covered with scales; occurs especially on the scalp, ears, genitalia and the skin over bony prominences <sup>(6)</sup>. Modern medical science treats Psoriasis with PUVA (Psoralen+ultraviolet light A) and Corticosteroids <sup>(7)</sup>. But the disease recurrence and gives serious side ef-

fects like Liver, Kidney failure and Bone marrow depletion. Here, *Ayurveda* plays an important role; a Present study is undertaken to provide a safe and effective remedy for Psoriasis.

### CASE REPORT:

A 26-year male patient came with a chief complaint of multiple small red lesions over the chest, abdomen, back region also on both upper limbs and itching over them for 3 years.

**PAST HISTORY:** No H/o Type2 Dm, Hypertension, No Other Comorbidities

### HISTORY OF PRESENT ILLNESS:

The patient was healthy 3 years back, then he developed with *shyava rooksha mandalas* (blockish rounded discolouration) on both feet then scalp associated with *kandu*, after few months it got spread to, *udara*, *ubhaya urdhwa* and *adho shaka*. The patient experienced continuous *kandu*, bleeding of the *kandu* (itching)spot. He consulted an allopathic physician and was advised with antibiotics, antihistamines and topical steroids. But there was no considerable relief and also taken Acupuncture therapy for the same. For 3 months he observed spreading of lesions all over the body complaints aggravating during cold weather associated with severe itching followed by peeling off of greyish skin (powdery discharge) for these complaints patient consulted our hospital and got admitted to this hospital for further better management.

### PERSONAL HISTORY:

Diet –Mishra Hari (Both Veg-Non-Veg)

Daily Dietary Routine

8:30 am Breakfast -Dosa-Vada, uppittu, avalakki, chitranna, poori, parota

2:00 pm lunch –Rice sambar, rasam, non-veg twice in a week (chicken and fish), Veg curry with pickle& curd

9:00 pm dinner –chapati veg curry, rice sambhar, egg, curd, fried food, parota +nonveg

10:00 pm sleep.

- ▶ ADDICTION: - He is not addicted to alcohol, tobacco and other addictive substances
- ▶ OCCUPATION: - Student
- ▶ SOCIO-ECONOMIC –Upper Middle-class family
- ▶ TREATMENT HISTORY: - Taken allopathy medicine and acupuncture therapy for 4 months.

#### ASHTA STHANA PARIKSHA:

- ▶ Nadi - 82/Min (Vata++, Pitta+)
- ▶ Mala - Once A Day, Occasionally Hard Stool
- ▶ Mutra - 4/5 Times /Day
- ▶ Jihwa - Alpa Lipta
- ▶ Shabda -Prakrutha
- ▶ Sparsha -Rukshatha (Roughness) Of Twak
- ▶ Druk - Prakrutha (Intact)
- ▶ Akruiti - Madhayama

#### DASHA VIDHA PARIKSHA

- ▶ Prakrititaha -Vatapittaja
- ▶ Vikrutitaha - Vata Kapha
- ▶ Sarataha -Asthisara (Long Bones, Firm Joints)
- ▶ Satwataha - Madhyama
- ▶ Samhananataha -Madhayama
- ▶ Satmyataha -Madhyama
- ▶ Aharashakti - Abhyavara
- ▶ Shakti- Madhayama
- ▶ Jarana Shakti - Madhyama
- ▶ Vyayama Shakti -Madhyama
- ▶ Pramanataha - Weight-68kg Ht-159cm
- ▶ Vayataha -Madhayama

#### METHODOLOGY/TREATMENT GIVEN

TABLE 1

Date	Treatment	Medicine
08-09-2021 to 10-09-2021	Deepana pachana	Chitrakadi vati <sup>(8)</sup> (500mg), panchakolaphanta <sup>(9)</sup> 15ml bd
11-09-2021 to 14-09-2021	Snehapana	Mahatiktakam gritha <sup>(10)</sup>
15-09-2021	Iday Vishrama, abhyanga with Marichadi taila <sup>(11)</sup>	Kaphotkleshakara ahara adviced

#### INTEGUMENTARY SYSTEM EXAMINATION

- ▶ Colour - Blackish border with red spots
- ▶ Pigmentation - Hyperpigmented
- ▶ Border - Irregular
- ▶ Shape - Circular
- ▶ Haemorrhagic spots - Absent
- ▶ Scalining - ++
- ▶ Plaque - +
- ▶ Oozing - +
- ▶ Itching - ++

O/E

- ▶ Candle greese test - positive
- ▶ Auspitz sign - positive
- ▶ Koebner phenomenon - Positive

#### SAMPRAPTHI GHATAKAS

- ▶ Doshas - **Tridosha** (Vata (Vy, sa, uda)), Pitta (Br, pa), Kapha(kled,)
- ▶ Dushya - Rasa, Rakta, Mamsa, Lasika
- ▶ Upadhatu - Tvacha
- ▶ Agni - Jatharagni & Dhatwagni Mandya
- ▶ Srotas - Rasa, Rakta, Mamsavaha & sweda-vaha
- ▶ Srotodusti Prakara - Sanga
- ▶ Udbhavasthana - Amashaya
- ▶ Sanchara sthana - Tiryaka gami siras
- ▶ Adhithana - Tvacha, Rakta, mamsa, lasika
- ▶ Vyakta sthana - Tvacha
- ▶ Roga marga - Bahya
- ▶ Swabhava - Chirakari
- ▶ Sadhyasadyata - Krichrasadya
- ▶ Rupa - Pidaka, shyava aruna varnatha, kandu, srava, ruksha
- ▶ Upasaya - nill
- ▶ Anupasaya - During winter Season.

16-09-2021	Vamana karma	Madanaphala yoga <sup>(12)</sup>
16-09-2021 to 20-09-2021	Samsarjana krama	Peyadisamsarjana krama <sup>(13)</sup>
21-09-2021 to 01/10/2021	Shamanaushadi's	1)Arogya vardhini vati <sup>(14)</sup> bd 2)Gandha Rasayana <sup>(15)</sup> tid 3)Manjishtadi kashaya <sup>(16)</sup> 30ml tid 4)777oil <sup>(17)</sup> for external application
02-10-2021 to 04-10-2021	Snehapana	Panchatikta gritha
05-10-2021 to 07-10-2021	3days Vishrama kala, abhyanga with marichadi taila	Pittavardhaka ahara,
08-10-2021	Virechana karma	Manibhadra guda <sup>(18)</sup>

## SHODHANA KARMA

### POORVA KARMA:

After assessing the *Desha, Kala, Vaya* etc *Deepana Pachana* medicines like *Chitrakadi vati* (500mg) tid and *Panchakola phanta* 30ml tid was given up to *nirama lakshana*, after attaining the *nirama laxmana*

patient was given *Snehapana* with *Panchatikta gritha* up to *Samyak Snigdha laxmana* (Table-01) and one-day *Vishrama Kala Abhyanga* with *Marichadi taila* followed by *Ushnajala Snana* was advised and advised to take *Kaphotkleshakara Ahara* during this period.

**TABLE 2**

PROCEDURE	DOSE	DATE
<i>Sneha pana</i>	30ml	11-09-2021
	70ml	12-09-2021
	120ml	13-09-2021
	150ml	14-09-2021

## PRADHANA KARMA

All the instructions regarding *Vamana Karma* were explained to the patient. After examining the blood pressure, pulse, respiratory rate, and abdominal examination, the patient was found fit for the procedure. The patient was given *Sarvanga Abhyanga with Marichadi Taila* followed by *Ushnajala Snana* at 5:30 am.

*Akantapaana* with *Ksheera* – 2ltrs, after 15 minutes *Vamana Aushadha* was administered.

### VAMANA AUSHADHA

- ▶ *Madanaphala Pippali Choorna* - 4gm
- ▶ *Vacha Choorna* -1gm
- ▶ *Nimba Choorna* -1gm
- ▶ *Saindhava Lavana* -1gm
- ▶ *Madhu* Quantity Sufficient to Mix.

- ▶ The *Vamanopaga Aushadhi's* Used Are *Yash-timadhu Kashaya* – 2 ltrs, *Saindhava Lavana Jala*- 1.5 ltrs

### ASSESSMENT CRITERIA

- Antiki* – *Pittanta*
- Vaigiki*– 8 vega, 4 *upavega*
- Laingiki* – Observed

During *Vamana- Kale Pravrutti, Yathakrama Kapha Pitta Vata Harana, Swayam Cha Avasthanam.*

After *Vamana –Indriya Shuddhi, Murdha Shuddhi, Parshwa Suddhi, Kanta Shuddhi, Sharira Laguta*<sup>(18)</sup>.

- Manika* – 1.5 *prastha*

### PASCHAT KARMA

- Dhoomapana* with *Haridra Varti*
- Samsarjana Krama: Peyadi Krama* is advised for 5days considering 3 *annakaala*

**BEFORE THE TREATMENT (IMAGE-1) AFTER THE VAMANA KARMA (IMAGE-2)**



**SHAMANAUSHADI'S (10 DAYS)**

**TABLE 3**

MEDICINE	DOSE	ANUPANA	DURATION
<i>Arogyavardhini Vati</i>	1-0-1	<i>Koshna Jala</i>	10 days
<i>Gandhaka Rasayana</i>	1-1-1	<i>Koshna Jala</i>	10 days
<i>Manjisthadi Kashaya</i>	30ML-30ML-30ML	With Equal Q <i>Koshna Jala</i>	10 days
777 OILS	For External Application		10 days

After 10 days *Shamanaushadi's*, the Patient was advised *Shodhananga Snehapana* followed *Virechana* was planned. *Poorva karma*

*Sneha Pana* with *Panchatikta Gritha*

**TABLE 4**

SNEHAPANA	DOSE	DATE
	30 ML	02/10/2021
	70ML	03/10/2021
	160ML	04/10/2021

*Vishrama Kala* 3 Days – *Abhyanga* with *Marichadi Taila* (05-10-2021 To 07-10-2021)

**PRADHANA KARMA:**

All the instructions regarding *Virechana Karma* were explained to the patient. After examining the blood pressure, pulse, respiratory rate, and abdominal examination, the patient was found fit for the procedure. At 7 AM patient was given *Sarvanga Abhyanga* with *marichadi taila* followed by *Ushnajala snana*. Then the patient was given *Manibhadra guda* 60grams

Along with 200ml of *Ksheera* as *Virechanayoga* at 8 AM. The patient was advised not to do *Vegadharana* and stay in a room where there is no direct entry of air, and not to touch cold water. The patient was instructed to take a sip of *Ushan Jala* frequently and wait for *Vega*. The patient was advised not to strain during defecation. 1<sup>st</sup> *Vega* was observed after 1 hour of intake of *Ausadha*. Total 28 *Vegas* were observed.

TABLE-05

Vegas	22
Antaki	Kaphanta Seen
Laingiki	Indriya Prasada, laghuta, vatanulomana, kramat Vit, pitta, kapha And Vata Nissarana

**PASCHYAT KARMA:**

The patient was asked to take a rest in IPD, instructed not to sleep in the daytime. Patient was asked to do *Pani-Pada-Mukha Prakshalana*. Later *Samsarjana Karma* was given which includes *Peya, Vilepi, Yusha, Krushara* for 7 days as patient *Pravara Shud-*

*dhi* (28 Vegas). The patient was asked to follow up after 7 days of *Samsarjana Karma* is done. The patient showed relief after *Virechana*. The patient was having a feeling of lightness of body, skin lesions and itching reduced.

AFTER 10 DAYS OF VAMANA (IMAGE-3)



AFTER VIRECHANA (IMAGE-4)



SHAMANAUSHADI'S

MEDICINE	DOSE	ANUPANA	DURATION
1. Gandhaka Rasayana	1-1-1 (AFTER FOOD)	Koshna Jala	15 days
2. Guggulu Tiktaka Gritha	10ML-0-10ML (BEFORE FOOD)	Koshnajala	15 days
3. Maha Manjishtadi Kashaya	30ML-30ML-30ML	Koshna Jala	15 days
4. Eladi Taila	For External Application		

**ASSESSMENT OF CLINICAL FEATURES BASED ON GRADATION SYSTEM**

**1. Shyavam:** Normal Skin Tone- 0, Mild Brownish Discoloration- 1, Moderate Brownish discoloration - 2

Severe Brownish Discoloration – 3

**2. Kinakara Sparsha:** Normal Skin texture- 0, Mild rough lesions on touch- 1, Moderate rough lesions on touch- 2, Severe rough lesions on touch with scaling- 3

**3. Parushatwa:** Normal Skin- 0, Mild Hardness of lesions - 1, Moderate Hardness of lesions – 2, Severe Hardness of lesions with scaling- 3

**4. Kandu:** No itching- 0, Mild / occasional localized itching which is tolerable- 1, Moderate generalised itching – 2, Very severe itching disturbing sleep and other activity- 3

**Result and Discussion:** After starting treatment symptoms were decreased in 1 month.

**ASSESSMENT OF RESULTS:**

SYMPTOMS	BEFORE TREATMENT	AFTER TREATMENT
<i>Shyava</i>	3	1
<i>Kinakharasparsha</i>	3	0
<i>Parushatva</i>	3	0
<i>Kandu</i>	3	0

**DISCUSSION**

*Kitibha-Kushtha* is a type of *Kshudhra Kushtha* that comes under the umbrella of *Kushtha*. Even all Acharyas opines that it is a variety of *Kshudra Kushtha*. According to Charaka *Kitibha -Kushtha* is *Kaphavata* predominant *Tridoshaja Vyadhi* <sup>(19)</sup>. *Kitibha-Kushtha* is compared with Psoriasis because most of the symptoms resemble Psoriasis. Psoriasis is a disease that affects the skin and joints. Psoriasis is hypothesized to be immune-mediated and is not contagious. 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, excessive alcohol consumption and smoking. An individual with psoriasis may suffer from depression and loss of self-esteem. This study was designed to have a review on the effect of *Vamana and Virechana karma* in *Kitibha-Kushtha*. The first line of treatment of *Kitibha-Kushtha* in *Purvarupa Avastha* is *Ubhayatah Samshodhanam*. Specific treatment of *Kitibha-Kushtha*, if *Vata* predominant then *Sarpi Pana*, *Kapha* predominant then *Vamana* and *Pitta* predominant then *Raktamokshana* or *Virechana* <sup>(20)</sup>. For *Deepana* and *Paachana Chitrakadi vati* and *Panchakola phanta* was given for 3 days. After *Deepana* and *Paachana Snehapana* was administered with *Pancha Tiktaka Ghrita* starting from 30ml for 5 days (table) which is highly beneficial in *Twak Vikara's*. *Snehapana* is *Vata Shamaka*, causes *Mruduta* in *Deha* (decrease scaling and dryness), *Malasanga* in *Deha* is removed. *Snehapana* was stopped after the appearance of *Samyak Snigdha Lakshanas* such as *Vatnulomana*, *Deeptagni*, *Varcha Snigdhatata*. On the day of *Vishrama Kala Abhyanga* was done with *Marichadi taila* and *Swedana with Ushnajala Snana* to facilitate the movement of *doshas* to lower GIT which has been loosened due to

oleation for 1 day. *Kapha Utkleshakara Ahara* is advised to increase the *Kapha*. By *Vamana* procedure, the *Kapha Dosha* gets eliminated from the body and reduces itching. *Deepana-Pachana* followed by *Vamana Karma* increases metabolic activity and helps to digest and excrete the metabolic waste products accumulated in tissues and systems of the body. The *Vamana Karma* is done in the morning when the levels of *Kapha* are high. The secretion rates of CRH, ACTH, and cortisol are also high in the early morning but low in the evening. *Vamana* process stimulates the defence mechanism of the body to protect against further damage. These types of changes may compel the body to increase cortisol secretion in large amounts to achieve immediate effects of blocking most of the factors that are promoting inflammation. After completion of *Samsarjana Karma*, *Virechana* was planned *Snehapana* was given with *Panchatik-taka gritha* after *Samyak Snigdha lakshana* patient was advised 3 days *Vishrama kala* in this period *Sarvanga abhyanga* with *Marichadi taila* followed *Ush-najala snana*, *Pittotkleshakara ahara* advised and *Virechana* was given with *Manibhadra guda* to expel the *dhooshita pitta dosha* along with *Vata* and *Kapha*.

**CONCLUSION**

This case study is documented evidence for the effective management of *Kitibha Kusta* through *Vamana* Followed by *Virechana* and *Shamanaushadis*. *Kitibhakustha* is one among *KshudraKustha* which is relapsing in nature. Hence according to the classics repeated administration of *Shodana* along with *Shamanaushadis* and *Nidana Parivarjana* can help in managing the disease. This protocol should be evaluated in a greater number of patients for its scientific validation.

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**Source of Support: Nil**

**Conflict of Interest: None Declared**

How to cite this URL: Gadilinga et al: Panchakarma Approach To Kitibha Kushta (Psoriasis) -A Case Study. International Ayurvedic Medical Journal {online} 2022 {cited February 2022} Available from: [http://www.iamj.in/posts/images/upload/574\\_581.pdf](http://www.iamj.in/posts/images/upload/574_581.pdf)