

EFFECT OF AYURVEDIC TREATMENT IN LICHEN PLANUS

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ABSTRACT

Lichen planus is a difficult entity to manage. It is an autoimmune disease with an unknown initial trigger. Steroids have been the drugs of choice in modern treatment whether topical or systemic. Their hazards, side effects and contraindications are well known. Non-steroidal anti-inflammatory drugs have also less beneficial effects. In *ayurved* Lichen planus can be included under the disease '*kushtha*' and can be treated by the general principles of treatment mentioned in *kushtha*. As we see encouraging results of *ayurvedic* treatment in autoimmune diseases we decided to treat a 42 year female having Lichen planus. *Panchakarma* therapy has the immunomodulatory effect; we carried out *virechan* therapy (purgation therapy) and *kushthaghna* drugs according to *doshic* dominance in the patient. Along with *nidanparivarjana* (avoiding causes) patient was also given *raktaprasadan* drugs after purification. The disease in this patient was not so chronic; step by step pathogenesis was reduced and patient was completely cured in one year. For hyper pigmented spots '*savarnakar*' *chikitsa* was given at the end.

Keywords: Lichen planus, *ayurved*, *kushtha*, *panchakarma* therapy.

INTRODUCTION

Lichen planus is a common inflammatory disorder of the skin characterized by a dense band like infiltrate on the skin with intense itching. ; Since the lesion resembles lichen the condition is termed as Lichen planus¹. As it is autoimmune disease topical and intralesional steroids are effective for localized lesions. Widespread disease frequently requires systemic steroid therapy². *Ayurvedic* treatment has a better scope for treating Lichen planus. As a holistic approach of *Ayurved* the whole body is purified by *panchakarma* treatment and then systemic treatment is given according to *dosha* dominance in all skin diseases. We used the same protocol of treatment for the case of Lichen planus of 42 years of a female patient.

CASE REPORT

A 42 year old female came with chief complaints of *pitika* (flat topped polygonal papules). The papules were 2-3 mm size, blackish in colour on forearms, ankles, anterior thighs and flanks. The onset of the disease started one year ago. Initially the papules were only on thigh region and then spread on forearm, wrist and ankles. *Kandu* (itching) was at the time of morning and evening. Patient had taken allopathy treatment and got symptomatic relief; discontinuation of treatment resulted in the fast progress of disease. There was neither any previous history of skin disease nor any autoimmune disorder. Patient's *dinacharya* (daily activities) was also normal. Some causative factors like *guda*, *masasevan*, *katu* and *amla rasasevana*³ were present in routine diet which can aggravate *dosh* and the disease. The

prakruti of the patient was *pittapradhan vatanubandhee, dhatusarata* was *madhyam*. Agni (appetite), *malamootrapravrutti* (bowel habit), *nadi, jivha parikshan* was also normal.

MANAGEMENT

Initially patient was taken on *shaman chikitsa* (conservative treatment). A combination of *eladi churna* (125 mg), *rasamnikya* (60mg), *chopachini* (125mg), *manjishtha* (125mg), *sariva*⁴ (125mg) was given orally three times daily with *mahamanjishthadi kwath* and luke warm water. At the same time external application of '*mahamarichyadi taila*' was advised once in a day. This treatment was given for fifteen days to see initial response; on fifteenth day the *kandu* was reduced up to 20%. So same treatment was continued for one month, after one month *kandu* was reduced to 30% and rare new papules were formed on the body. Old papules were slightly reduced and colour of papules also became faint. To take the benefit of *shodhanyogya rutu* i.e. *sharad rutu* one of the *panchakarma* therapy *virechana*⁵ (purgation therapy) was carried out. For that patient was given *aabhyantarsneha* '*mahatiktaka ghrit*' in increasing quantity i.e. 30,60,90,120 and 150ml for 5 days in which *samyak snigdh lakshan* were observed in patient. After two days *vishram kala* two tablets of '*abhayadi modaka*' were given in the morning. After *uttam shudhi sansarjan kram* was carried out. At the end of *virechan karma* the papules became soft, their colour also gets faint and *kandu* was reduced up to 60-70%. No new papules were formed during the treatment.

After *panchakarma* procedure previous *shaman chikitsa* was continued by adding *swarnavang*⁶ (30mg) for next two months. No recurrence of symptoms was observed. Repeat *virechan* and *raktamokshan* procedure was carried for *rak-*

tashodhan and to enhance *dhatubala*. At the end of the treatment previous *raktashodhak* drugs were replaced by *raktaprasadak* drugs like *sariva* (250mg), *yash-timadhu* (250mg), *tapydee loha* (250mg) with the *anupan* of '*panchatiktaka ghrit*'. Patient was completely cured after one year. Post treatment follow up was also performed to see whether the disease relapses or not; no relapse was found after two years. Patient was advised to follow *pathyakar aahar* and *vihar*.

DISCUSSION

Diagnosis in this case was made on the basis of classical black to purple papules on thigh, forearm, wrist and ankles accompanied with intense itching. As steroids have their side effects, contraindications and nonsteroidal drugs have less beneficial effects, *ayurvedic* treatment is a better option for the skin diseases like Lichen planus. Till date *ayurved* has given the solution for many complicated skin diseases like psoriasis, eczema, vitiligo, etc. So we accept the challenge of treating a case of Lichen planus. As the disease is autoimmune we decided to carry out *shodhan chikitsa (panchakarma)* in this patient because *shodhan chikitsa* is a good remedy for treating autoimmune disorders. It purifies all the body parts and systems leading to improve the immune system of the body. In between the *shodhan* procedures we applied *shaman chikitsa* which include *kushthahar* drugs like *manjishtha*, *swarnavanga*, *chopachini*, *eladi churna*, *gandhaka rasayan* etc. By this treatment the *vitiated dosha* get in balance state, also *adhishthan* of the disease (skin) get purified and properly nourished to defend the disease. Thus step by step *samprapti* (pathogenesis) of Lichen planus was reduced. During the treatment period patient was advised to avoid *kushthkar hetoosevan* (causative factors). Besides this the disease

was not so chronic (within 1 year), patient was young, there was no history of previous immune disorder or skin disease, *bala* (immunity) of the patient was good, so patient was completely cured within one year. In other cases the result may vary.

CONCLUSION

Ayurvedic treatment can cure auto-immune skin disease like Lichen planus. A combination of *shodhan* and *shaman chikitsa*, *nidanparivarjan*, *kushthahara dravyprayog* are useful in treating Lichen planus, if it is not so chronic and other conditions are favourable.

SUMMARY

A 42 year old female patient of Lichen planus was treated with *virechan*, *shamanchikitsa* including a combination of *raktashodhak*, *raktaprasadak*, and *kushthahar* drugs. Along with this *nidanaparivarjan* is also very important because it can aggravate the symptoms or relapse the disease. At the end of one year patient was completely cured; only some hyper pigmented dark spots were remained on the

body for which ‘*varnya taila*’ was given for external application.

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Table 1: Improvement in complaints of Lichen planus patient after Shaman chikitsa

Complaints		Improvement	
		After one month	After two months
Papules	Multiple	No change	No change
Size	2-3 mm	No change	No change
Shape	Flat topped polygonal	Slightly reduced	Slightly reduced
Site –	Both fore arms, thigh & flanks	Same site	Same site
Colour –	Black to purple	Slightly faint	Slightly faint
Itching -	++++	+++	++
Scaling	+	+	Nil
New papule formation –	2-4 / week	1-2 papules/week	0-1 papules/week

Table 2: Improvement in complaints of Lichen planus patient after Shodhan (Virechan) chikitsa

Complaints		Improvement	
		After 1 st Shodhan	After 2 nd Shodhan
Papules	Multiple	No change	Markedly reduced

Size	2-3 mm	1-2 mm	<1 mm
Shape	Slightly reduced	moderately reduced	moderately reduced
Site –	Both fore arms, thigh & flanks	Same site	Same site
Colour –	Slightly faint	More faint	More faint
Itching -	++	+	occasionally
Scaling	Nil	Nil	Nil
New papule formation –	0-1 papule / week	Nil	Nil

Table 3: Improvement in complaints of Lichen planus patient after Raktaprasadan chikitsa (After one year)

Complaints		Improvement
		After Raktaprasadan Chikitsa
Papules	Markedly reduced	Very few papules remained
Size	< 1mm	Completely regressed
Shape	Moderately reduced	Flattened
Site –	Both fore arms, thigh & flanks	Up to normal structure of the skin
Colour –	More faint	Nearer to skin colour
Itching -	occasionally	Nil
Scaling	Nil	Nil
New papule formation –	Nil	Nil

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