

A CASE STUDY ON MANAGEMENT OF ERYTHRODERMA

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ABSTRACT

Erythroderma also known as generalized Exfoliative dermatitis which refers to a scaling involving 90% or more of the cutaneous surface. Clinicians are challenged to find the cause of exfoliative dermatitis by eliciting history of illness prior to erythema. Patients presenting acutely with exfoliative dermatitis often require admission because their total body functions can require monitoring. In western medicine, the principle management is to maintain skin moisture, avoid scratching, apply topical steroids; prolonged glucocorticoids therapy often is needed. From Ayurvedic perspective it could be correlated to *Eka Kusta*. *Eka Kusta* is the *Vata Kapha Pradhana Vikara*. Where skin lesions are *Mahavastu*, *Masthyashaklopamam*, *Krishna Aruna* in *Varna*. Here presenting a case of 48 years old female with erythroderma who was on long-term steroidal therapy. Treatment was planned with *Shamana* line of management based on her *Bala*. The treatment is carried out for one and half month in OPD and IPD section, all the western medicine was stopped and there was total remission of symptoms with *Shamana Aushadhis*.

Keywords: *Erythroderma*, *Eka Kusta*, *Shamana Aushadhis*

INTRODUCTION

Exfoliative dermatitis is a definitive term that refers to a scaling erythematous dermatitis involving 90%

or more cutaneous surface. It is characterized by erythema and scaling involving the skin surface.

Kusta is a chronic disorder of skin. Exfoliating dermatitis can be correlated with *Eka kusta* where skin lesions are *Mahavastu* (extensive in nature), *Masthya shaklopamam* (resembles scales of fish). It is not always possible to treat the diseases with *Shodhana* (purifying) because of various underlying factors. To undergo purification therapy, good strength is required; hence it is not suitable for weak or debilitated individuals. In such cases, a milder method of palliation is employed by gradual reduction of the aggravated *Dosha* (bodily humours) at their respective sites.

Patient information:

Brief history of the patient:

A female patient aged 48 years is a K/C/O bronchial asthma since childhood. Gradually she developed itching around skin fold area of bilateral elbow joints for which she has applied topical ointment for 3 years where there was considerable relief from her symptoms. Again, from last one year, the above symptoms were reappeared in the same area which was intense in nature; even after applying topical ointment further no relief was found. After a period of one week, she developed an itching in her both upper and lower limbs and also swelling in her feet. Hence, she followed different allopathic medications, however no relief was found. Rather, her condition was further worsened, and she developed a scaling & brownish discoloration all over the body, associated with discharge and foul smell. On intense itching she developed bleeding spot in the scratched area. Aggravation of such symptoms were observed during cold season, on exposure to dust and on consuming food articles like pulses, potato, leafy vegetable, chicken, fish (esp. mackerel fish) and further, relief was found only by medications.

Drug history: Terbinoforce ointment e/a, Prednisolone 10mg 0-0-1 *3 months, Roxithromycin 150 mg 1-0-1, Zanclo nm ointment E/A

Family history: Mother is having a history of bronchial asthma.

Clinical findings:

Integumentary examination: Inspection:

Site of lesion: All over the body, face, scalp; Lesion: Secondary lesion: Scale (erythema craquele), fissure; Distribution: Generalized; Colour: Blackish discoloration; Discharge: Present, Odour: Present; Nails, Mucous membrane No abnormality detected.

Palpation: On palpation, it is not associated with tenderness, surface is not raised, and is rough in nature, and there is no enlargement of lymph nodes.

Tests: Candle grease test – Positive, Auspitz sign-Positive

Nidana panchaka:

Nidana:

Ahara: For Breakfast she used to have dosa, idli (most of the time); lunch- Brown rice along with fish (daily) curry/fried, curds. Buttermilk (occasionally) Vegetables like Leafy vegetable, potato, elephant yam; Night- Rice gruel (*Vilepi*) added with a pinch of salt taken along with fish, curd. **Vihara:** *Divaswapna* (day sleep). **Mental status:** Under stress due to financial status. **Medication:** Intake of steroid (prednisolone) for 3 months

Poorvaroopa: *Kandu* (itching)

Roopa: Scaling of whole body, face, minimal in scalp, reduced sweating, blackish discoloration of skin, Roughness (*Parushya*)

Upashaya: Medication

Investigation: Complete blood count:

Hb- 7.8 GM %, TC-9000CELLS/CUMM

Differential count: Neutrophils- 47%, Lymphocytes- 46 %, Eosinophil- 06%, Monocyte- 1%, Basophils- 00%, ESR-52mm/1hr, Platelet count- 3.8lakhs/cu.mm

RBC count- 4.3 millions/cu.mm, PCV-

25.4%, MCH- 17.8 picogram, MCV- 58.2 fl, MCHC- 30.7%, RDW- 21.5%

Random blood sugar, serum urea and serum creatinine were under normal

Treatment plan:

1. *Shamana* line of therapy
2. Dietary regimen

1. Shamana Chikitsa:

Prescribed medications are:

1. *Patoladi ghrta* 10 ml bd.
2. *Neelitulasyadi Kashaya* 15ml tid

3. *Manibadra guda* 1tsp HS
4. Tab. Alargin 2tid
5. *Laghusoothashekara vati* 1tid
6. Cap. Efiplus 1 bd
7. *Panchavalkala Kashaya* for wash
8. Psoro-rid oil for E/A

Table 1: Prescribed medications with ingredients and karma:

Yoga	Ingredients	Action
<i>Patoladi ghrta</i>	<i>Patola, Nimba, Katuka, Darvi, Sevy, Triphala, Vrisha, Djanyavyasa, Tarayanti, Parpata, Amla, Ghrta, Musta, Bhunimba, Yastimadhu, Kutaja, Udichya, Chandana, Pippali</i>	<i>Vidradi, Jwara, Visarpa, Apache, Kusta, Timira, Nakthandhya,</i>
<i>Neelitulasyadi kashya</i>	<i>Neli, Tulasi, Nirgundi, Lashuna, Maricha, Pippali, Shunti, Ashwagandha, Chandana, Madhuka, Tagara, Kusta, Sariva, Ishwari</i>	<i>Vishagna, Kustagna, Vedanasthapana, Rakthaprasadana, Vranasodhaka</i>
<i>Manibadra guda</i>	<i>Vidanga, Amla, Haritaki, Trivrit, Guda</i>	<i>Kusta, Shwitra, Kasa, Arsha, Pleha, Granthi, Janthu, Gulma</i>
Tab Alargin	<i>Shunti, Patra, Marichavidanga, Pippali, Nagakeshara, Twak, Musta, Haritaki, Ela, Vibhitaki, Amalaki, Haridra, Nishotha</i>	Allergy, inflammation, allergic dermatitis, acute and chronic urticarial
Laghusoothashekara vati	<i>Swarnagairika, Shunti, Nagavalli Swarasa</i>	<i>Suryavarta, Shiro Ruja, Nidrannasha, Pittajaunmada, Dhaurgandha, Daha, Urdwaraktapitta,</i>
Cap. Efiplus	<i>Shuddha Kasisa, Musta, Shunti, Pippali, Yastimadhu</i>	<i>Pandu (iron deficiency anaemia)</i>
<i>Panchavalkala kwatha</i>	<i>Nygradha, Udumbara, Ashwattha, Palksha, Parisha</i>	<i>Ropanartha, (prakshalanartha)</i>
Psoro-rid oil	<i>Manjista, Khadira, Ashoka, Svetakutaja, Nalpamaradi Oil</i>	For psoriasis and related skin diseases

2. Dietary regimen: Patient was advised to take *Vilepi* (rice gruel), *kichidi*, and to avoid oily and spicy food substances, nonveg, curd, leafy vegetable, day sleep during the course of treatment.

Observation and results: Patient were observed under IPD section for 15 days and was advised to

follow strict diet along with oral medications. And there was symptomatic improvement i.e. there was reduction in oedema and itching. For 1-month same medications was continued and there was total remission of the symptoms was found. (Images are shown below)

Pictures showing lesions before and after treatment





DISCUSSION

In this case the aetiology factors like intake of steroidal drugs, intake of curd, fish, and black gram regularly favoured the aggravation of the condition. Here initially the *Shamana* line of management along with dietary regimen was opted as patient was not fit for *Shodhana* line of management and was having low haemoglobin percentage.

The *Shamanaoushadhi* comprised of

- ***Patoladi ghrita*¹**: Here the drugs are having *tiktha* (bitter) and *Kashaya rasa* (Astringent) and acts as *Kapha pitta Shamaka* (pacification). It has the properties like *Kustagna* (pacifies skin diseases), *Kandugna* (relieves itching sensation), *Dahaprashana* (relieves burning sensation) properties. *Ghrita* is one such ingredient which helps in easy transportation of ion to the target organ as it is lipophilic in nature due to which there will be easy penetration of medicaments to each cell, which helps in normalising the skin cell. Thus, along with the medicinal property of drugs this *Ghrita (ghee)* acts as *Kleda hara*
- ***Neeli Tulasyadhi Kashayam*²**: This formulation contains ingredients which are having maximum of *Tiktha rasa*. And are having *Laghu* (light) and *Ruksha* (dry) *Guna* (nature) which helps in easy spreading of the medicinal property. It acts as *Kapha Vatashamaka* and majority of the drugs are *Kustagna*, *Vedanasthapana* (reduces pain), *Vishagana (Gara & Dushi)* (anti toxic property), *Raktaprasadhana* (blood purifier) and
- *Vranashodhanartha* (wound healing property), *Kleda hara* (reduce moistness).
- ***Manibadra guda*³**: The ingredients in the formulation are having the properties *Kaphapittashamaka*, *Kustagna*, *Raktashodhaka*, *Kandugna*, *Anulomaka*, *Rasayana* (rejuvenation) in nature. *Manibadra guda* is specially an indication for *Kledadikya Vikara* such as *Udara*, *Kusta*, *Shwitra* (vitiligo). As it is having *Anulomaka* property it helps in eliminating *Kleda* from the body there by acting mild variety of *Nityashodhana*.
- ***Tab Alargin***: *Alargin* tablet is a proprietary ayurvedic medicine, manufactured by Ajmera Pharmaceuticals Pvt. Ltd, Indore. The medicine contains drugs which pacify *Vata and Kapha*, where it helps in allergic conditions, inflammation, and allergic dermatitis, acute and chronic urticaria.
- ***Laghusootha shekara vati*⁴**: *Laghusoothashekara* contains *Swarnagairika* as chief ingredients which are indicated in *Netraroga* (eye disorders), *Rakta pitta* (bleeding disorders), *Hikka* (hiccups), *Udarda* (Skin manifestation), *Udara roga* (ascites), *Vishagna* (acts as antidote), *Raktagna* i.e. helps clearance of impure blood. Thus, helps in pacifying pitta and *Rakta kleda*. Thus, *Swarnagarika* helps in eliminating excessive *Kleda* from the body. Whereas *Shunti* and *Nagavalli Swarasa* has *Deepaniya* property.

- **Cap. Efiplus:** Capsule Efiplus is an ayurvedic preparation manufactured by Soulmiks Herbaceuticals limited. The chief ingredient of this preparation is *Kasisa* which *Keshya*, *Netrya* (promotes good eyesight), *Rajapravarthaka* (increases menstrual flow), *Balya* (promotes strength) and *Raktavardhaka* in nature thus it acts as *Pittarechaka*, *Raktaprasadaka* and *Raktarechaka*.
- **Panchavalkala kwath⁵:** *Panchavalkala kwatha* is made up of four varieties of *Ficus* plants. It has the *Kaphavatahara* property. The drugs like *Nyagrodha Udumbura*, *Plaksha* contains saponin. The amphipathic nature of saponins acts as surfactants with potential ability to interact with the cell membrane components. And tannin present in *Nyagrodha* and *Udumbura* will acts as antioxidants, anti-microbial & anti-inflammatory. The drug *Ashwattha* contains beta-sitosterol-3-O-glucoside which has antimicrobial properties. Thus, *Panchavalkala kwatha* is majorly acts as *Vranaropana*, *Vranaprakshalana*, *Shothahara* (reduces oedema).
- **Psoro-rid oil:** Psoro-rid-oil is an ayurvedic preparation manufactured by Malbar Ayurveda Ashram. The preparation contains ingredients which have *Kapha-Pittara*, *Varnya*, *Raktashhodaka*, *Shothahara*, *Shonithasthapana*, *Kustagna*, *Kandugna* properties and *Tikta - Kashya rasa*. The preparation also comprises of *Nalpamaradi Taila* which contains soluble and water soluble Phyto active principles of medicines herbs. Thus, this preparation is helpful in skin related disorder.

CONCLUSION

Erythroderma is a clinically challenging disease. The present case study concludes that even if patient is having *Bahu Dasha Avasta* & when patient is not fit for *Shodhana* line of management, proper planning of *Shamana* Therapy & diet plan will be helpful for remission of the symptoms. However, clinical trial

on large population should be done to draw final conclusion.

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