



Efficacy of Virechana Karma in Psoriasis (Ek Kushta) – A Case Study

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Case Report

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Abstract

Psoriasis is a common autoimmune disease of the skin and joints that is chronic and recurrent. On the physical, emotional, and psychological wellbeing of the affected patients, it may have a profoundly detrimental effect. By alleviating symptoms, modern medicine has significantly improved the treatment of psoriasis. Finding the best course of action for some patients can be challenging since they do not respond to treatment or the treatment loses its initial efficacy. Modern medications also come with long-term negative effects of their own. Ayurveda classify the condition as Ek kushta, a Vata-Kapha predominant Kushta. Here, a traditional Ayurvedic regimen was attempted to treat a 41-year-old male with long-standing moderate to severe erythrodermic psoriasis who had previously received systemic therapy in modern medicine without receiving an adequate response. Samshodhana coupled with Samshamana medications are the cornerstones of treatment for all varieties of Kushta, hence in this study, Virechana was administered first, followed by 30 days of Samshamana medicine. At the conclusion of treatment, a skin lesion assessment was performed.

Keywords: Psoriasis; Ek kushta; Virechana

Introduction

Psoriasis is a chronic dermatosis, characterized by an unpredictable course of remissions and relapses and presence at typical sites of well-defined, erythematous, indurated papules and plaques, which are surmounted by large, loose, silvery scale. Roughly 1% of population affected. It occurs with almost equal frequency in males and females [1]. Ayurveda diagnosis is Ek kushta, a Vata-Kapha predominant Kushta presenting with Aswedanam, Mahavastu, and Matsyashakalopamam [2]. Samshodhana, followed by Samshamana medications, is the basis of treatment for all varieties of Kushta [3].

Case Report

A male patient aged 41 years, visited OPD of Rishikul Campus (Reg. No: 32549/5756), Haridwar, Department of

Panchakarma, with complaints of reddish white irregular dry, scaly lesions over both lower limbs and forearm since 10 years. Also, he complains having extreme itching, especially in the colder months. He had allopathic care and has been using topical steroids for the last past 10 years, but only brief alleviation.

History of Past Illness

No history of DM/HTN/Other systemic disorders.

Personal History

- Diet- mixed
- Appetite- good
- Bowel- irregular
- Micturition- normal
- Sleep- disturbed

Family History

NAD

Dashavidhapareeksha

- Prakruti- Vata Pitta
- Vikruti – Kapha Rakta
- Sara- Madhyama
- Pramana – Madhyama
- Satwa – Pravara
- Satmya – Madhyama
- Ahara Shakti – Madhyama
- Vyayama Shakti – Madhyama
- Vaya – Madhyama

General Examination

- Pallor – Absent
- Icterus – Absent
- Koilonychias – Absent
- Lymphadenopathy – Absent
- Edema – Absent

Systemic Examination

- CNS – conscious, well oriented
- CVS – S1, S2 heard normal
- R.S – normal vesicular breathing sounds heard

Skin Examination

- Lesions – well defined erythematous papules and plaques with silvery white scales
- Surface – dry/rough
- Discharge – Absent
- Temperature – normal
- Auspitz sign – Positive
- Koebner's phenomenon – absent

Investigation

- Hb – 14.27 g/dl

- TLC – 8.10/L
- DLC – Neutrophils: 72.85%
Lymphocytes: 19.12%
Monocytes: 5.82%
Eosinophils: 2.01%
Basophils: 0.20%
- Glucose (Fasting) – 92.1mg/dl
- TSH – 1 microIU/MI
- SGOT – 39.7 U/L
- SGPT – 26 U/L
- Serum Cholesterol – 194 mg/dl
- Serum Triglyceride – 640 mg/dl

Nidana

Excessive intake of Kshira, Dadhi, Kulatha, Masha, Katu Rasa Ahara, Virudha Ahara, Shoka, Chinta and Ratri Jagarana.

Samprapti

According to Acharya Charaka seven Dravyas are involved in the Samprapti. It includes all the three Doshas (Vata, Pitta, Kapha) along with four Dushyas i.e. Twaka, Rakta, Mamsa and Lasika. Acharya Charaka has stressed upon the dual part played by Nidana i.e., simultaneous vitiation of Tridosha and disturbance of normal configuration i.e., 'Shaithiya' in Dhatus. This leads to the final manifestation of Kushtha.

Samprapti Ghataka

Dosha	Tridosha (Vata-Kapha Pradhana)
Dushya	Twakaa, Rakta, Mamsa, Lasika
Srotasa	Rasa, Rakta, Mamsa, Meda
Srotodushti	Sanga and Vimargagamana
Agni	Jatharagni and Dhatwagnimandya
Udbhavasthana	Amashaya, Pakwashaya
Sancharsthana	Tiryag Sira
Adhishthana	Twacha
Vyadhimarga	Bahya
Swabhava	Chirkari

Vyavachedakanidana

Eka Kushta	Kitibha
Aswedanam Mahavastu Matsyashakalopamam	Shyavam Kinakharasparsham Parusham

Vyadhi Vinischaya

Eka Kushta

Therapeutic Intervention

Duration	Medication	Dose	Route	Frequency	Anupana
November 10,2022 –	Chitrakadi Vati	2 tb.	Oral	Twice a day after meal	Warm water
November 14,2022	Ajmodadi Churna	2 gm			
November 15,2022	Panchatikta Ghrita	30 ml	Oral	Morning empty stomach	Warm water
November 16,2022	Panchatikta Ghrita	60 ml	Oral	Morning empty stomach	Warm water
November 17,2022	Panchatikta Ghrita	90 ml	Oral	Morning empty stomach	Warm water
November 18,2022	Panchatikta Ghrita	120 ml	Oral	Morning empty stomach	Warm water
November 19,2022	Panchatikta Ghrita	150 ml	Oral	Morning empty stomach	Warm water
November 20,2022	Panchatikta Ghrita	180 ml	Oral	Morning empty stomach	Warm water
November 21,2022	Panchatikta Ghrita	200 ml	Oral	Morning empty stomach	Warm water
November 22,2022	Coconut oil and Dashmool Kwath Nadi Swedana	-	External	Morning	
November 23,2022	Coconut oil and Dashmool Kwath Nadi Swedana	-	External	Morning	
November 24,2022	Coconut oil and Dashmool Kwath Nadi Swedana	-	External	Morning	
November 25,2022	Trivrit Avleha	60 gm	Oral	Morning	Warm water

No. of Vegas – 24

Shuddhi – Uttama

Antiki Shuddhi – Kaphanta

Peyadisamsarjana Karma was followed after Virechana for next 7 days.

Life style modification

Advised to sleep early and wake up early, morning walk and to follow ideal daily routine, timely intake of food, to

take green leafy vegetables, pomegranate fruit, and barley. Also advised to avoid rice, curd, tea, pickles, fried food and excessive salt.

Results

Signs and symptoms	Before treatment	After treatment
Dryness	Present	Absent
Itching	Present	Absent
Scaling of skin	Present	Absent
Excessive sweating	Present	Reduced
Discoloration of skin	Present	Reduced
Investigation	Before treatment	After treatment
Serum Triglyceride	640 mg/dl	140.7mg/dl



Figure1: Before treatment.



Figure2: After treatment.

प्रयोगशाला के लिए मॉग पत्र दिनांक/DATE 26/07/2022

नाम SR Vinod Kumar उम्र/लिंग 40 वर्ष/पुरुष स्टाफ संख्या 1603604

वार्ड/बहिरंग विभाग किस डाक्टर द्वारा प्रेषित किया गया है Referred By Dr.

संक्षिप्त क्लिनिकल विवरण/निदान Brief Clinical Notes/Diagnosis Lipid profile

वांछित जांच Investigations required.

लेबों का समय प्रातः 8.30 से 10 बजे तक Collection Hours : 8.30 to 10 A.M.

चिकित्सक/Ref. No. 28004-2022

79

Serum Cholesterol	194	(150-250) mg/dl
Serum Triglyceride	640	(50-150) mg/dl
Serum HDL	43	(30-70) mg/dl
Serum LDL	127	(100-150) mg/dl

रोग शास्त्र विशेषज्ञ Pathologist

कृपया अपनी रिपोर्ट अपराहन (साय) 4.30 बजे प्राप्त करें।

Figure 3: Before treatment.

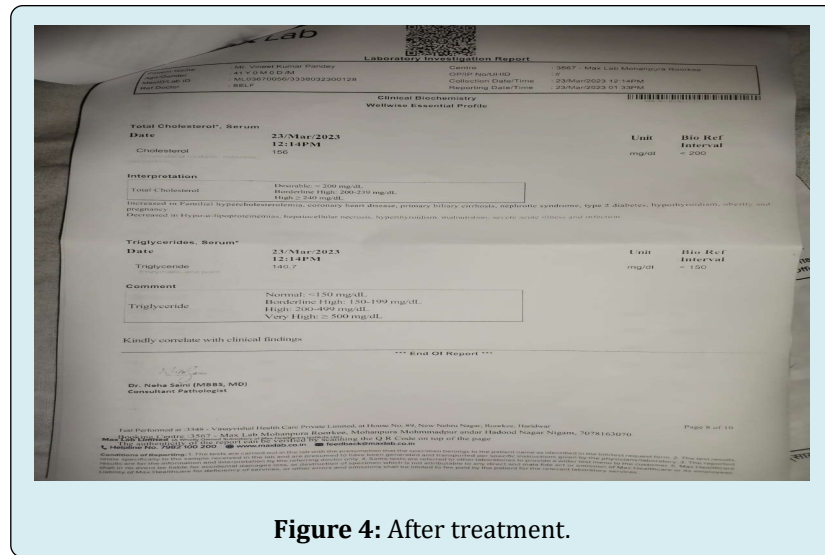


Figure 4: After treatment.

Discussion

According to the Ayurvedic perspective, psoriasis is viewed as a Raktaja condition with Dosha vitiation. Pre-operative, operative, and post-operative care during Virechana Karma is most crucial to produce better results in psoriasis. Virechana Karma is one of the treatment modalities for this condition. The Dosha situated in Twak. In order to normalize the deranged Agni, it is important to take Deepana and Pachana medicine before Snehapana. Typically, Arohana Snehapana is taken for up to seven days or Samyak Snigdha Lakshana. Sneha's ability to disrupt the pathogenesis of psoriasis by gradually increasing dosage helps to loosen the connection between the Dosha, Dushya.

Panchatikta Ghrita was used for the Snehapana. The ingredients of Panchatikta Ghrita include Triphala, Guduchi, Patola, Nimba and Patola. The medication contains Ushna, Tikshna, Vyavayi, Vikasi, Katu, Tiktarasatmaka, and Katu Vipaka. It was found that the Deepana, Pachana, Amapachaka, Shrotoshodhaka, Raktaprasadhana, Raktashodhaka, Kandughna, Kushthaghna, and Varnya mode of action were mostly responsible for the effects of these medications. It also soothed the signs of exacerbated Vata and Kapha Doshas, such as itchiness, discoloration, and dryness.

Trivrit Avleha was used for the Virechana Yoga. The primary ingredient in this preparation is Trivrit, which is included in the group of "ten purgative herbs" (Bhedaniya Mahakashaya), "ten antidote herbs" (Vishaghna Mahakashaya), "ten herbs supportive for therapeutic enema" (Ashthapanopaga Mahakashaya), "colon cleanser, antitumor & antidote herbs" (Shyamadi Gana), Adhobhagahara Gana is of the class of "herbs removing toxins (i.e., vitiated Dosha) from lower half of the body" (Anantaram Sharma, 2008).

Virechana medications bring out the therapeutic purgation due to its Prabhava (potency). These medications can aid in the induction of purgation because they have a natural inclination to go downhill due to the dominance of Jala and Prithvi Mahabhuta. The waste products can be brought into the intestine to maintain homogeneity from where they can be eliminated out of the body by the action of the intestine, which is induced by the Virechana drug, as has already been mentioned. This process can occur wherever the waste products are present in the body, whether they are extracellular, intracellular, or in plasma. The supplied medication's active ingredients will activate the mucosal membrane and momentarily alter the normal permeability of the mucosal lining, causing morbid pollutants that were transported from the cellular to the gut levels via Snehana and Swedana Karma to exude through the anal pathway.

Conclusion

The majority of the psoriasis condition seems to be a keratinization issue. In a psoriatic lesion, fast epidermis displacement is the primary problem (3-4 days instead of 28 days in normal skin). There is proof that biological mechanisms involving hormones and the immune system work together. The increased levels of arachidonic acid metabolites in psoriasis patient's afflicted skin are associated with the clinical alterations. According to *Ayurveda*, psoriasis can be treated with *Shodhana* and *Shamana* therapy. *Virechana Karma* is frequently recommended in the treatment of psoriasis because it assists in addressing the fundamental pathogenic elements of *Pitta*, *Rakta*, *Agni*, and *Twak*. In this specific example, symptoms improved by 60% during *Shodhana* therapy and by 80% following the administration of an oral medication for two months. As a result, purgation therapy followed by internal drugs is seen to be the best course of treatment for skin conditions.

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