

## Ayurvedic management of Psoriasis vulgaris: A case study

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### Abstract

Psoriasis is a Chronic, autoimmune Papulo - squamous, recurrent inflammatory disease of the skin characterised by Circumscribed, erythematous, dry, Silvery Scaly Plaques with fluctuating manifestation and frequent re-currence. patients suffering from Psoriasis experiences physical, emotional and Socioeconomic stress and embarrassment. The Incidence is about 0.4 % to 2.8 % amongst Indians and prevalence is high in third and fourth decades of life. In Ayurveda all skin Conditions are observed under 'Kushtha' where Psoriasis Can be closely correlated with Kitibha Kushtha having Vata- kapha dominance. the term 'Twacha' is derived from the Dhatu - twacha samvarne which means body covering. It is described as upa-dhatu of Rasa dhatu and considered as one of 'Jnanendriyas' for perception of sense of touch. 'Twacha' or skin serves as barrier and first line defense against the external environmental factors. like physical, Chemical and biological assaults.

The Characteristic Pathophysiological events occurring includes epidermal proliferation, Expansion of dermal Vasculature and accumulation of Inflammatory Cells.

In the present study an effort has been made to treat 46 year female patient suffering from Psoriasis vulgaris Through Samshodhan and sanshaman treatment modalities described in Ayurveda. Initially Vichchan chikitsa was administered along with appropriate measures of poorva karma, and then followed by Sanshaman yoga. PASI score is used as a tool to assess the Severity of lesion.

**Keywords:** Psoriasis Vulgaris; Kitibha Kushtha; Ayurveda; Case

### 1. Introduction

According to Ayurveda the term 'Twacha' is derived from the Dhatu - Twacha samvarne which means body coverings. It is described as upa-dhatu of Rasa Dhatu and considered as one of 'Jnanendriyas' for perception of sense of touch. 'Twacha' or skin serves as barrier and first line defense against the external environmental factors like physical, chemical and biological assaults.

Psoriasis is a multifactorial diseases showing genetic susceptibility and combined effect of various precipitating factors like trauma, infections, drugs, sun exposure and psychological stresses. The characteristic pathophysiological events occurring includes epidermal proliferation, expansion of dermal vasculature and accumulation of inflammatory cells.

In Ayurveda classical texts all skin conditions are discussed under 'Kushtha' which are mainly sub classified as 'Mahakushtha' and 'Kshudrakushtha'. Acharyas has emphasized on vitiation of sapta dushya viz. vata, pitta, kapha,

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Twak, Mamsa, Rakta and Lasika in the samprapti of Kushtha. Even Dhatugatavastha is mentioned which indicates the deep rooted condition and explain the need of Samshodhan chikitsa.

In accordance with acharya charaka the ailments treated with shashodhan chikitsa will never reappear unlike the isolated shaman chikitsa. Virechana as a part of samshodhan chikitsa followed by samshaman chikitsa is selected and administered as advocated by Acharya.

Psoriasis vulgaris, the most common presentation clinically manifests as silvery scales, symmetricaly located on scalp, knees, elbow and lowerback manifesting koebners phenomenon, positive Auspitz's sign and candle greese sign. Present therapeutics modalities like PUVA therapy has been used for decades but it involves the risk of skin cancers. So there is a need to develop safe, effective and rational therapeutics way to treat such ailment.

### *Aim And Objective*

To evaluate the efficacy of Samshodhan and Samshanan therapy in psoriasis vulgaris.

#### **1.1. Place of Study**

The present case study was conducted at Late Kedari Redekar Ayurved College & Hospital Gadhinglaj, Dist: Kolhapur

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## **2. Case Report**

Basic information of patients.

- Age – 46 Yrs., Sex – F, Weight – 57 kg.
- Religion – Hindu, Socialconoruc status – Middle class
- Occupation – House wife.

### **2.1. Chief Complaints**

Silvery scales with moderate Itching, reddish circular patches over both hands, both feet and abdomen.

#### *2.1.1. H/O Present illness*

46 yrs old female patients present with complaints of Dry, silvery, scaly plaqueswith mild to moderate itching over hands, feet and abdomen. She had these symptoms since 8 to 10 yrs on and off aggravating during rainy season. The circular, dry, itchy, silvery scaly, lesions were present symmetrically on both flexors and extensor surface of arms and feet. Pin point bleeding spots appears on removal of scales. There was no H/O any fever, oozing and no involvement of genitalia observed.

#### *2.1.2. H/O Past Illness*

No H/O any other major illness.

#### *2.1.3. Family H/O*

- Father – HTN
- Mother – Healthy
- No family H/O of psoriasis.

#### *2.1.4. Personal H/O*

- Diet – Preferably madhur,Addiction – No
- Non Vegetarian frequently
- Bowel – frequency 1 to 2 times
- Appetite – Normal
- Micturition – Normal
- Sleep – sleep disturbances
- Allergy – Not yet detected

## 2.2. On Examination

- GC fair
- Afebrile
- Vitals - WNL
- CNS/ CVS / RS / GI System examination shows no abnormality -
- Prakriti - Vata Kapha

### 2.2.1. Integumentary System

- Site of onset – Around both elbows
- Mode of spread – centripetal
- Appearance – papules and plaques, erythematous with silvery scales.
- Size – varying size
- Consistency – moderately thick and dry
- Configuration – Grouped on abdomen
- Margination – well demarcated
- Distribution – bilaterally symmetrical
- Surface Characteristics – Dry, well demarcated
- Primary Lesion - Erythematous papules over abdomen
- Secondary Lesion – Dry, thick, scaly lesions
- Involvement of genitalia – No
- Nail Changes – Pitting present

### 2.2.2. Signs

Auspitz sign – positive

### 2.2.3. Diagnosis

Based on clinical history and examination the condition was diagnosed as psoriasis Vulgaris.

## 2.3. Treatment Protocol

**Table 1** Virechan Karma

Snehapana	Mahatiktaka Ghrita	Vardhamana matra for 5 days 30ml-60ml-90ml 120 ml- 150 ml
Bahya Snehan followed by Bashpa sweda	Brihanmarichyadi Taila	On 6 <sup>th</sup> & 7 <sup>th</sup> day
Virechana	Tabs Ichhabhedi rasa- 2 tab	On 8 <sup>th</sup> day
Samsarjan krama	For 3 days	
Raktamokshana (Siravedha Vidhi)	150ml blood Letting is done by using 18 no. needle on 4 <sup>th</sup> day of Samsarjan procedure.	

### 2.3.1. Internal medicine

- 1) Chandraprabha Vati - 250mg 4tab 3 times a day
- 2) panchatikta ghrita guggulu - 250mg 2 tab 3 times a day
- 3) Rakta pachak yoga - 250mg 2 tab 3 times a day
- 4) Amrutadi Kwath - 10ml 2 times a day

For 15 Days

**2.4. PASI Score**

Psoriasis Area severity index is widely used Tool to grade Psoriatic lesions and to assess response to treatment. It calculates the severity of erythema, indurations and percentage of affected area.

Score of 1 to 10 is considered moderate and above 10 is severe.

PASI Score = (E+I+S) x Area Score X Area multiplier

**Table 2** Lesion Score

Erythema (E) Induration (I) Scaling (S)	No symptoms	Mild	Moderate	Marked	Very Marked
Score	0	1	2	3	4

**Table 3** Area Score

Area	0	1%-9%	10%-29%	30%-49%	50%-59%	70%-89%	90%-100%
Score	0	1	2	3	4	5	6

**Table 4** Area Multiplier

Head (H)	0.1
Upper Limb (UL)	0.2
Trunk (T)	0.3
Lower Limb (LL)	0.4

**Table 5** Before Treatment

Lesion Score	Head (H)	Trunk (T)	Upper limb (UL)	Lower limb (LL) including buttocks
Erythema (E)	0	2	2	1
Induration (I)	0	3	2	1
Scaling (S)	0	2	1	2
Sum : E+I+S	0	7	5	4
Percentage of affected area				
Area Score	0	2	3	3
SUBTOTAL : Sum*Area Score	0	14	15	12
Body area: subtotal * amount Indicated	0	14 x 0.3 = 4.2	15 x 0.2 = 3	12 x 0.4 = 4.8
Total	0	4.2	3	4.8

*2.4.1. Before Treatment*

PASI Score H+T+UL+LL=12

#### 2.4.2. After Treatment

PASI Score H+T+UL+LL= 0

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### 3. Result and Discussion

As mentioned in Classical texts 'Samshodhana' is very important and Primary management of Kushtha Vikaras. In this Case Study both shodhan therapies ie Virechana & Raktamokshan are administered according to Avastha of dosha. As in Initial presentation Leenavastha of Dushyas was observed indicating bahya- Abhyantar Snehan and Swedan as Poorva karma followed by Virechana as pradhan Karma.

After Samsarjan Krama Shesha Doshas are evacuated though Raktamokshan.

Hence Dosha Shuddhi is achieved by using both Shodhan upakrama. For Shaman purpose Chandraprabha Vati, Panchatikta ghrita guggulu, Raktapachak yoga and Amrutadi Kwath was advised.

It was observed that during 2nd day of Samsarjan Krama.

Itching & scaling was completely reduced. But Erythema persists, which was completely relived after Raktamokshan.

For the assessment of Improvement in Lesions, PASI scale was considered. Before Starting The treatment her PASI score was 12 and after treatment PASI score was 0.

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### 4. Conclusion

The Case study highlighted the effectiveness of Combined effect of Samshodhan and Samshaman treatment modalities as prescribed in classical Ayurvedic texts. The study Shows Complete recovery in Psoriasis Vulgaris case within 15 days.

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#### Compliance with ethical standards

##### *Disclosure of conflict of interest*

No conflict of interest to be disclosed.

##### *Statement of informed consent*

Informed consent was obtained from all individual participants included in the study.

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