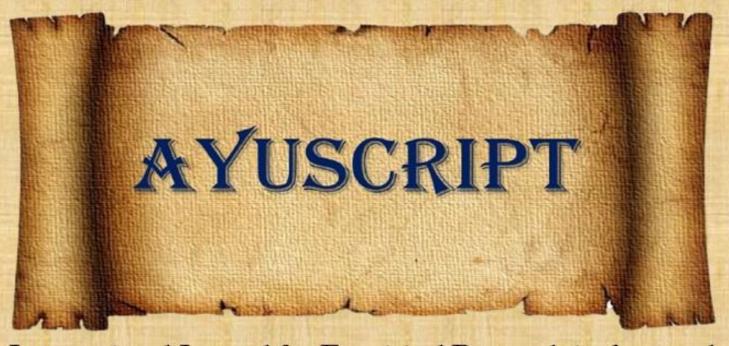
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# Importance of Shodhana in the Management of Skin Disease with special reference to Psoriasis – A Case Study.

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**ABSTRACT:** Psoriasis is an autoimmune disorder with high recurrence rate. In modern science there is no specific medicine available for the complete cure of the disease. Ayurveda has explained the disease under the heading of Kushta. It is advised to administer Shodhana Karma in such disease. So it was an attempt done to show the effect of Shodhana in the management of Psoriasis (Vamana, Virechana and Raktamokshana) because the Dosha involved in the pathogenesis of any disease may aggravate even after Shamana therapy but not after Shodhana if done in appropriate manner after Dashavidh Pariksha. A male patient of 57 years old having psoriatic patches all over body since 6 years with sever itching started with a single patch over abdomen but ignored by him and treated with local ointments but the result was a big zero. Patient came to the OPD of Jupiter Ayurved College, Nagpur. After detailed history of patient and his life style patient was advised to do Nidana Parivarjana and a chart of do's and don'ts i.e. Pathyapathya given to him to strictly follow it. Then it was decided to treat the patient with Shodhana as per classical references. Before starting with the Vamana he was first treated with Rukshana Churna for 7 days (A.H.S. 16/37) with the help of Triphala, Vidanga, Mustha and Khadir 500mg each in combination trice a day for 7 days. Then the assessment of his patches, itching sensations, discharge was noted. Then he was administered Vamana by Yashthimadhu Phanta and Nimbatwaka Kwatha preceding Snehapana by Panchatikta Ghrita. After Sansarjana Krama patient was taken for Virechana by Jayapala containing medicine i.e. Ichcchabhedi Rasa followed by Raktamokshana by Siravedha. A very well significant result was obtained in resolution of psoriatic patches, itching and discharge through the patches. Before and after treatment data in each process was collected in form of photographs. Details will be provided at the time of presentation. May this will help many students, scholars, physicians in future.

**Keywords:** Psoriasis, Kushta, Nidan Parivarjan, Shodhan, Vaman, Virechan, Raktamokshan

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Introduction: **Psoriasis** is an disorder with autoimmune high recurrence rate. It is a complex, chronic, multifactorial, inflammatory disease that involves hyper proliferation of the keratinocytes in the epidermis with an increase in the epidermal cell turnover rate. Environmental, genetic, and immunological factors appear to play a role. It is diagnosed clinically. There are various types of psoriasis like vulgaris, plaque, guttate, inversus, pustular. In modern science there is no specific medicine available for the complete cure of the disease. Ayurveda has explained a disease having similar symptomology under the heading of Kushta. In this Kushta it has been advised to administer Shodhana [1].

So it was an attempt done to show the effect in the management of Psoriasis through Shodhana Karma (Vamana. Virechana and Raktamokshana) because Acharya Charaka the Dosha involved in the pathogenesis of any disease may aggravate even after Shamana therapy but their elevation is not possible once they are removed from the body through Shodhana Procedure(2) done in appropriate manner after Ashtavidh Pariksha.In Charak Samhita it has been clearly mentioned that a physician should not get embarrassed if he is not able to diagnose any disorder by its name. Instead of that he must find the Dosha predominant and their imbalance in such patient and should treat these Dosha instead of disease {3}. Treating Dosha should be the prior goal of any physician because their imbalance is

solely responsible for the production of any disorder <sup>{4}</sup>.

# **Patients Information**

A male patient (XXX) of age 57 years came to the Panchakarma OPD of Jupiter Ayurved College, Nagpur on 12/6/2021. He belongs to Muslim community with the middle class economic status. He was complaining about the patches spread all over the body having severed itching in them and oozing of a watery discharge from the patches since 6 years making his life worsen. The pitchers from different angles were taken with his due permission. In the OPD patient was asked to write down in his own handwriting and understandable language that how the disease he has been suffering since years commenced and progressed furthermore.

# **Case History**

On next day patient came with the note of his own handwriting that he was well before 6 years. Then he developed one indurated patch on abdomen with itching over it in 2015. He ignored it for some days and applied local ointments. But it was not multiple patches resolving. Then started appearing over the body (2016). Then he got to know that that was a serious problem. He took medicines from general practitioner near his residence, still he did not satisfactory relief. He tried each and everything he could but the result was a big zero. Some of his friend advised him to take Ayurvedic treatment since he had got a good relief on skin disease he suffering was from. With this background patient came to us.

#### Ashtavidha Parikshan (5)

Nadi (Pulse) : 76/min Mala (Stool) : Samyaka.

Mutra (Urine : Ati mutra

pravartana

Jivha (Tongue) : Alpa Sama

Sparsha (Touch): Samashitoshna.

Shabda (Speech) : Spashta
Drika (Eyes) : Prakrita
Akriti (Built) : Madhyama

# **Systemic Examination:**

• RS : Air entry bilaterally equal, No Adventitious sounds

• CVS : S1S2 normal, Apex beat in position. No murmurs.

• CNS : Conscious, well oriented.

#### Per abdomen examination

Soft, NT

• Liver/Spleen/Kidney : NP

Percussion : Resonant

# **Investigations**

All the basic blood investigations were done at the Jupiter Ayurved college, Nagpur like Complete blood count, fasting and post meal blood sugar levels, electrocardiogram, bleeding and clotting time, and all the investigations were within normal limits which are as follows -

CBC: Hb - 11 gm%, RBC - 4.25 millions/cumm, TLC - 6500 /cumm, Neutrophills - 58 %, Lymphocytes - 26, Eosinophil - 4%, Monocytes - 6%, Basophils - 01 %, Platelet - 174000/cumm, ESR - 11 mm/hr, Fasting BSL - 89 mg/dl, Post prandial - 126 mg/dl, Bleeding Time: 2 min, Clotting Time: 6 min

# **Other History**

• Known case of Hypertension (since 8years) and on tab Amlodep AT (5-50) once a day

- Known case of Type 2 Diabetes
  Mellitus and on tab Metformin 500 mg
  twice a day before meal
- No history of Ischemic heart disease, Asthma, tuberculosis or any other major illness
- No any surgical history.
- No documented drug allergy.
- Family History is also not significant

#### Hetu

- Aharjanya: Excessive salt consumption, non-veg (fish, chicken etc) very frequently.
- Vyasana : Madyapana (Wine-180ml) Once or twice in a week since many years. Smocking 8-10 cigarettes daily, 10-15 cups tea daily, Kharra (tobacco) daily
- **Vikrit Srotasa :** Raktavaha, Rasawaha, Swedovaha.
- Vikrit Dosha : Tridosh (Kapha dominance)

Vikrit Dushya : Tvacha, Rakta, Mansa, Lasika <sup>{6}</sup>.

# Management

It has been said in *Ayurved* that avoiding the causes of disease is one of the treatments of that disease, that's why *Nidana Parivarjana* is advised to the patient and a life style modification chart was given to him having indications from waking up in the morning to going to the bed. A chart of Do's and Don'ts (*Pathyapathya*) is also provided to the patient.

#### Rukshana

As per the reference from *Astanga Hridaya*, it was decided to give Rukshana <sup>{7}</sup> in this patient with the help of following drugs.

Triphala (500mg), Vidanga (500mg), Nagarmotha (500mg), Khadira

(500mg) in combination thrice a day for 7 days (15/6/2021 – 21/6/2021)

Lakshan	Before Rukshana	After Rukshana
Patches	Endurated patch	Enduration decrement in some patches
Itching	Sever and continuous itching	Intensity of itching decreases with occasional itching
Discharge	Discharge was present from the patches	No discharge since 4 <sup>th</sup> day of Rukshana
Patients estimate	Patient was fed up of his disease	A light of hope developed in patient





#### Vamana

After *Rukshana* it was planned to give *Vamana* to the patient and for that *Snehapana* is started from (23/6/2021 – 29/6/2021) with the help of *Panchatikta Ghrita* in *Vardhamana Matra* for 5 days

Madhyam Snhena <sup>{8}</sup>. During this period all the instructions has been given to the patient as per text and his life style. And finally, Vamana was conducted on (01/07/2021) with the help of Nimbatwak Kwatha and Yashthimadhu Phant.

#### **Results:**

Laingiki	Daurbalya (Weakness),		
	Laghavata	(Light	and
	fresh)		
Antiki	Pittanta	9 15	
Vaigiki	8 Vega	A7/ E.	
		Very	-

After *Vamana* also the assessment was done as above and found an improvement than the former assessment. Pitchers were taken in the angles taken previously for comparison.







Vaman Procedure

Before Vaman

After Vaman

Virechana was done with the

# Virechana:

After Sansarjana Krama for Vamana, Virechana was planned in a row. For that Snehapana was given for 3 days with Panchatikta Ghrita

#### **Results:**

<b>Laingiki</b>	Laghavata
Antiki	Kaphanta
Vaigiki	18 Vega
Part of the second	

help of Ichchhyabedi Rasa 2 tab along with Shita Jala as Anupana having Jaipala as its main content The same assessment was done

after Virechana also showing better

assessment. Pitchers collected from the

same angles as that of previous.

improvement than

the

previous



# Virechana Virechana

#### Raktamokshana

Raktamokshana was done from a great sephanous vein with 18 number needle in a quantity of 250 ml.







**Raktmokshan Procedure** 

Before Rakamokshan

After

Raktamokshan

Similar assessment criteria are applied here also.

# Patient's Estimate

According to the patient there was a gradual fainting and resolution in

the patches all over the body with no itching and no discharge at all during all *Shodhana* procedures.

# Follow up and Result:

	1 <sup>st</sup>	16 / 9 /21	No itching, No discharge, Patches size decreasing and the
	Follow	3.3	colour started fading and elevations also started becoming
	Up		flat
-	2 <sup>nd</sup>	20 / 10 /21	No itching, No discharge, Patches size decreasing and the
è	Follow		colour started fading and elevations also started becoming
	Up	ought.	flat comparing with the previous follow up, No new patch
		1	was noticed.
	3 <sup>rd</sup>	22 / 11 /21	No itching, No discharge, Patches size decreasing and the
÷	Follow		colour started fading and elevations also started becoming
	Up	N. ETYCE	even flat merging with the skin surface now. No new patch
	1	- The state of the	was noticed. Patient was happy

At a glance assessment of the patient's disease is shown from the photographs at different intervals of different treatment by various *Shodhana Karma* and final assessment after three follow ups was also recorded in the form of pitchers before and after the *Shodhana*.









**Before** 

After

Before

After

#### Consent:

Written consent of the patient was taken before conduction the *Panchakarma* procedures in the Hindi language.

Discussion: Kushta is Saptadushta Sangraha Vikara as per Ayurveda, including Twak (skin), Rakt (blood), Mans (Tissue) and Lasika (Serous fluid) along with the Tridosha [9]. Vaman and Virechana procedure help to remove the vitiated Dosha from the body resulting in non-relapsing condition of the *Kushta*. Through Vamana the vitiated Kapha Dosh is expelled out of the body resulting in reduction in the size of the patches and relief in the itching as the elevation in the patches are caused by Kapha and itching to results from vitiated Kapha. Virechan removes vitiated Pitta from the body resulting in improvement in the metabolic procedures in the body reducing the production of the Ama resulting in good Raktmokshan removes the vitiated Shakhagat Dosha circulation in the blood through bloodletting.

# **Conclusion:**

From the study done above it is clear that, *Shodhana Karma* have the power to treat the dreadful diseases in the society if used properly. It does not cause any sensitivity reactions to the body, neither form a resistance in someone, In *Ayurved* also frequent *Shodhan* procedures are advised in the patient suffering from *Kusht*.

Through repeated application of various *Panchakarma* procedures along with the oral medication's complete removal of the vitiated and deranged *Dosha* in the body occurs. Along with these *Panchakarma* procedures patient also been advised various oral medications like

Arogyavardhini Vati, Gandhak Rasayan, Sukshma Triphala, Krumikuthar Ras, Vidagarisht and Khadirarisht and it is also been advised to the patient to be ready for regular Panchakarma procedures.

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