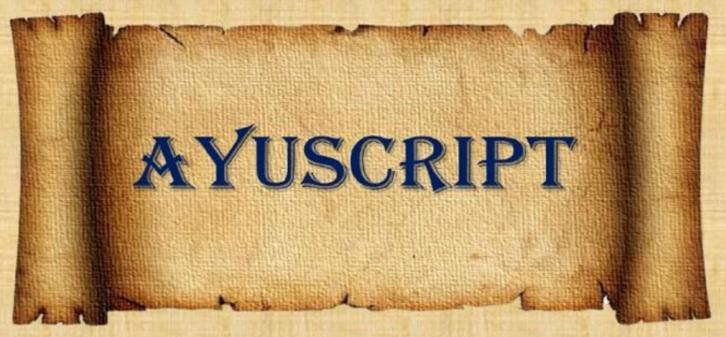
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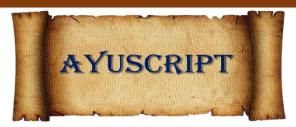
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TRADITIONAL AYURVEDIC PRACTICES IN THE MANAGEMENT OF VICHARCHIKA W.S.R ECZEMA: A CASE REPORT

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ABSTRACT:

Introduction: Kushtaroga is are divided into two categories: Mahakushta and Kshudrakushta. The Kshudrakushta describes Vicharchika. The form of Kshudrakushta that Ayurvedic dermatologists frequently encounter is called Vicharchika. Based on the clinical manifestations, vicharchika is frequently associated with eczema, like Shyava Varna, Pidika, Astrava, and Kandu. Eczema, a chronic inflammatory skin condition, is a rakta pradoshaja category affecting the face, neck, wrist, ankle, and cubital regions, with an incidence rate of 15% to 20% in India. This study demonstrates the remarkable results of Ayurvedic management in Vicharchika (eczema), highlighting its holistic approach through natural remedies and lifestyle modifications. Aim & Objective: To explore the Efficacy of Ayurvedic Treatments for Vicharchika w.s.r Eczema. Methods: The patient, a 37-yearold woman, was treated at an Ayurvedic facility for moderate to severe eczema symptoms. The management strategy comprised lifestyle advice, external applications, herbal formulations, and dietary changes based on the condition's nature (*Dosha*) and the individual's constitution (*Prakriti*). Results: The patient experienced significant improvement after 22 days of treatment, including decreased skin lesions, itching, redness, and burning sensations, and improved quality of life in follow-up evaluations. **Conclusion:** *Vicharchika* is a chronic skin disease treated with *Ayurvedic* practices, lifestyle changes, and herbal medicines. Avoiding Pathyasevan and Apathya ahar is crucial for effective management. Further studies are recommended.

KEY-WORDS: Vicharchika, eczema, Ayurveda, case report, holistic treatment, herbal medicine.

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INTRODUCTION:

Ayurveda uses the general term "Kushta" to skin describe conditions. Dosha preponderance differs in each kushta, considering the reality that they are all tridoshaja. Vicharchika is classified as a kshudra kushta, with kaph dosa being the most common of the 20 kushtas. The symptoms of Vicharchika include Shyava Varna, Pidika, Asrava, and Kandu. Eczema and vicharchika share a similar appearance and are classified under rakta pradoshaja category.(1)Eczema, sometimes referred to atopic dermatitis, is a chronic inflammatory skin condition that is characterised by regions of poorly defined erythema and scales on top of dry, itchy skin that is prone to infection. The disease's appears significantly course to be influenced by hereditary or environmental causes.(2) Eczema is a skin disorder causing pruritus, erythema, oedema, and itching, affecting the face, neck, wrist, ankle, and cubital regions.(3) According to the WHO, eczema affects people of all ages in India and has an incidence rate of 15% to 20%.(4)

Case Report: A 37-year-old female patient came to the OPD section of the Kayachikitsa department in SMBT Ayurved Hospital, Dhamangaon, Nashik. Patient name: OPD/IPD ABCD No.: 1-100924with complaints of section of the with recurrent skin rashes over bilateral characterised by redness, itching, flaking, burning sensation, Discolouration of skin The patient was suffering from these symptoms for 6-8 months. The patient not taken any other treatment. The symptoms got worse with the time and started affecting his personal life. So, the patient decided to take Ayurvedic treatment. The Ayurvedic diagnosis is considered

Vicharchika. The involvement of Vata results in dry, blackish lesion of Vicharchika, itching in the affected area is due to Kapha.

Name: ABCD Age: 37 years Sex: Female

Occupation: Farmer Religion: Hindu Diet: Vegetarian Drug History: No Personal History:

- 1. Bowel movement Samyaka
- 2. Appetite Excessive Hunger,Irregular meal time
- 3. Sleep- Sleep disturbed
- 4. No history of any type of addiction like smoking, alcohol, tobacco.
- 5. Oedema: Not present
- 6. Blood Pressure: 120/80 mmHg
- 7. Icterus: Not present
- 8. Clubbing: Not present

History of past illness:

- 1-Medical history- No Past History of Hypertension, Asthma, Dibetic Milletus or any other major illness.
- 2-History of Blood Transfusion No history of blood transfusion.
- 3-Drug History- He was not taking any other treatment.
- 4-Family History –No significant history. 5-Surgical History- No significant history.

Samanya Pariksha

Pulse rate -84/min

B.P.-120/70 mm hg

R.R.- 19/min

Spo2 -99%

Temperature – Afebrile

Systemic Examination:

CNS: Conscious and well oriented to person, place, and time.

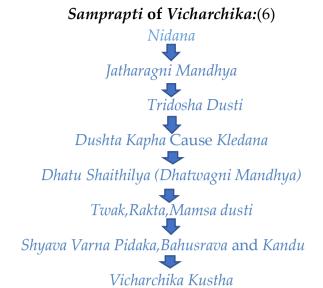
CVS: S1, S2 is audible, No murmur sound.

Respiratory System: B/L Symmetrical, Normal vesicular Breathing heard, No added Sounds heard.

P/A: -Umbilicus Centrally placed, Soft, non-tenderness,no-organomegaly.

Digestive System: Normal *Asthavidha Pariksha*:

Sr.No	Asthavidha	
	Pariksha	
1	Nadi (pulse)	84/ min,Regular
2	Mala (stool)	Samanya(once/day)
3	Mutra	Samanya
	(urine)	
4	Jihwa	Nirama
THE N	(tounge)	or mercens, and the manufactures
5	Akruti	Madhyama
6	Shabda	Spashtha
	(speech)	
7	Sparsha Sparsha	Rooksha
	(skin)	TITC
8	Druka	Prakrit(Normal)
	(eyes)	



Aim & Objective: To explore the Efficacy of *Ayurvedic* Treatments for *Vicharchika* w.s.r Eczema

Material and methods: Study type: Simple Random Single Case Study.

Center of study: OPD section of the *Kayachikitsa* department in SMBT Ayurved Hospital, Dhamangaon, Nashik. The patient is chosen on the basis of the following criteria: *vicharchika* signs and symptoms are present in this patient.

Material with daily Treatment and Prognosis Clinical examination of the patient revealed regression of symptoms due to our *Ayurvedic* Management

Depending upon sign and symptoms, the patient was diagnosed as *Vicharchika* (Eczema).

Samana oushadhi were given to the patient along with some other *Ayurvedic* Medication.

Assessment criteria:

Subjective Parameters

Kandu (itching)

Rukshta (dryness)

Srava (oozing)

Pidika (vesicles)

Shyava Varn (skin discoloration)

Gradation of symptoms/subjective parameters of Vicharchika[8]

Symptoms	Gradation	Score
Kandu (Itching)	No itching	
	Itching present rarely	1
	Itching disturbing patients' attention	2
	Severe itching disturbing patients sleep	3
Strava (Discharge)	No Strava	
	Occasional Strava after itching	1
	Mild Strava after itching	2
	Profuse Strava making clothes wet	3
Pidaka (Papules)	Absent	0
_	1-2 Pidaka in one affected part	1
The second secon	3-4 Pidaka in one affected part	2
THE PARTY OF THE P	More than 4 Pidaka in one affected part	3
Shyavata /vaivarnyata	Normal skin colour	0
(Discoloration)	Brownish red discoloration	1
	Blackish red discoloration	2
	Blackish discoloration	3
Rookshata (Dryness)	No dryness	0
T T	Dryness with rough skin	1
	Dryness with scaling	2
	Dryness with cracking	3
Daha (Burning sensation)	Absence of Burning sensation in affected part	0
	Rarely burning sensation in affected part	1
The second second	Continues burning sensation in affected part	2
MIN' REPLIE CHIE	Disturbing patients sleep	3

VYADHI VINISHCHAYA (DIAGNOSIS): Astravi Vicharchika. TREATMENT:

Prognosis of Treatment:

Days	Treatment	Dose
1st f/u after 10days	Mahatiktak Ghrut Guggul	2-0-2 (Bhojanpacchat)
	Arogyawardhini vati 2-0-2	2-0-2 (Bhojanpacchat)
	Gandhak Rasayan 2-0-2	2-0-2 (Bhojanpacchat)
	Triphala Kwathane Dhavana	2 times
	Siravedha	
	Sushma Triphala 2-0-2	2-0-2 (Bhojanpacchat)
2 nd f/u after 7days	Panchtikta Ghrut Guggul	2-0-2 (Bhojanpacchat)
	Mahamanjistadi kwath	20ml -20ml (Bhojanpacchat)
	Arogyawardhini vati	2-0-2 (Bhojanpacchat)
	HaridraKhand vati	2-0-2 (Bhojanpacchat)

	Gandhak Rasayan	2-0-2 (Bhojanpacchat)
	Triphala Kwathane Dhavan	one time (morning)
3 rd f/u after 5 days	Siraveda on 18 th day	
	Mahamanjistadi kwath	20ml -20ml(Bhojanpacchat)
	Arogyawardhini vati	2-0-2 (Bhojanpacchat)
	HaridraKhand vati	2-0-2 (Bhojanpacchat)

Observation and Result:

Showing the comparison of Symptoms Before and After Treatment

Symptoms	Before Treatment	After Treatment
Kandu (itching)	3	0
Asrava (oozing)	0	0
Pidika (Papules)	0	0
Shyava Varna (Skin Discoloration)	2	0
Rookshta (dryness)	3	1
Daha (Burning Sensation)	2	0



During treatment, the patient had begun to improve, and by the end of the 22nd day, they had fully recovered. Every subjective parameter is improved by *Ayurvedic* treatment.

DISCUSSION:

Vicharchika is a kushta that is primarily kapha and a rakth pradoshaj vikar. Dooshivish and Virudh ahar are the key hetus that cause a variety of skin conditions. Therefore, changing eating habits and embracing a healthy lifestyle are part of the Nidan Parivarjan. The goals of the saman oushadhi were to increase

jadharagni, rectify ama, and eliminate toxins from the body. Haridrakhand is a fantastic medication that improves skin quality and has anti-oxidant, anti-allergic, and anti-histaminic qualities. In addition to serving as Kaphahar and Kandughna, it also lowers inflammation and helps remove toxic compounds like cytokines from the blood.(7)Gandhak Rasayan is an herbomineral formulation with antibacterial, antiviral, and antimicrobial properties. It contains Agnimandya, Tridoshaj, and Rakta dushti, purifying blood with Bhavana dravyas like Guduchi,

Nagkeshar, Haritaki, Sunthi, and others having Katukashay rasa and Ushnavirya. It therefore executes Kledhar, Kaphghna, Pachana, and Dipana. In this process, it also acts as Kandughna, Kushtaghna, dahanashak, raktaprasadan, and ugra visha doshaghna properties, promoting the recovery from It also promotes recovery from ailment and cures all 13 types of kshudra kushtha. Gandhak is a good Rasayan. (8)

Arogyawardhini Vati, which balances our tridosha and is body's helpful irregular indigestion and bowel movements, is part of the ayurvedic treatment in this case study. It increases the body's capacity for digestion and acts as a tonic for the respiratory, excretory, skeletal, liver, heart, kidney, uterine, rectum, and intestine. In vicharchika, it functions as bhedan, Twachya, agni deepana, and pachana karma.(9)

Mechanism of action: Panchatikta ghrita guggulu is a powerful medication that can be used to cure any kind of kushtha. Additionally, Bhaishajaya Ratnavali kushtharogadhikar explains it. The tikta rasa, laghu, and ruksha gunas in all the contents serve to boost the immune system and Vicharchika is a chronic disease that reduce kandu.(9) Mahamajisthadi kwath includes medications like Arishta. Patolamula, Katuka, Bhringa, Magadha Piper, Trayanti, and Patha. These medications have qualities similar to Varnya, Kapha Pittashamak, Shothahar, Kushtaghna, and Vranropak. They have Kapha Pittahara or Tridoshaghna properties, such as Katu purification Vipaka. Blood remedies include Manjistha, Nimba, Haridra, and Vacha. These medications follow the Samprapti Vighatana Chikitsa Siddhanta.Mahatiktak ghrita's Guggule mode of action: Mahatikta ghrita Guggule is

recommended for a number of illnesses. When used, it relieves boils, rashes, pus discharge, and other skin conditions. Mahatikta ghrita Guggule is also used to treat chronic fever, vat-rakta, or gout, jaundice, and hyperacidity and mounds of blood.(9)

Mode of action of Triphala dhawan and Siraveda: When Triphala Kwatha Dhawana removes pollutants from the area, healthy granulation tissue forms and has a greater capacity to heal. The following three astringent plants make up this herbal mixture: 1. The Haritaki 2. The Bibhitaki 3. The Amalaki. Beneficial skin revitalisation with triphala kwatha: exfoliates dead skin cells, reviving the skin for a more radiant and clear appearance. According Siraveda, pain is instantly relieved by the removal of morbid humour (vitiated Doshas) that has collected as a result of an inflammatory response. Due to Siravedha's enhanced blood circulation, the Ushna Guna of the Rakta masks the Sheet Guna of the Vata. (10)This may have an analgesic effect by lowering intravascular volume and pressure.(11)

CONCLUSION:

can be easily treated with ayurvedic samanaoushadhis with nidan along parivarian and correcting lifestyle and food habits. Localised skin lesions can be effectively treated with herbal medicines after proper evaluation dosha predominance at OPD level. The case report demonstrates the treatment of eczema with only Ayurvedic medicinal intervention. No surgical intervention was given. Pathyasevan plays a major role in the treatment of vicharchika. Apathya ahar should be avoided. The present case study concludes that use of Ayurvedic medicines

like Aarogyavardhini vati, Gandhak rasayan, Mahamajishtadi kwatha, Mahatiktak Ghrit Guggule, Pachatilta Ghrit Guggule, Arogywardhini vati, Tiphala kwatha dhavan, and Siraveda Vicharchika vyadhi, with some dietary and lifestyle changes, is very effective management. The case report showcases the effectiveness of traditional practices Ayurvedic in managing Vicharchika, recommending further largerscale studies for validation and promotion of integrative dermatological care.

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