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## AYURVEDIC MANAGEMENT OF PSORIASIS: A CASE STUDY

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### Abstract

Psoriasis is chronic, non-infectious and relapsing inflammatory skin disease having unknown aetiology, characterized by well-defined dry scaly erythematous patches and covered with adherent silvery white scales. Its prevalence rate is 1-2% of world population the word 'Kushtha' is a broad term, which covers almost all skin disorder and it is further classified into *MahaKushtha* and *KshudraKushtha*. In Ayurveda "Ekkushta" has been described under the disease "*KshudraKushtha*". According to *Acharya Charak*, *Ekkushta* is due to vitiation of *Vata & Kapha*. The clinical feature of *Ekkushta* described by *Acharya Kashyap* represents remission, relapse and seasonal variation which are present in Psoriasis. Modern medical science treats psoriasis with the drugs having serious untoward effects if used for long term. In Ayurveda Psoriasis can be correlated with *Ekakushta* due to resemblance in their symptoms In present case study a 38 years old male patient with the features of Psoriasis (*Ekkushta*) has been taken from Outpatient departmet of kaya chikitsa Shubhdeep Ayurved Medical college Indore. Patient had been treated with *Panchakarma* procedures and *shamanaushadis*. After the course of 15 days treatment including *samsarjana karma*, there were marked improvement observed on symptoms like swelling, stiffness, pain lesions itching and rashes. After the course of 15 days treatment, there were marked improvement observed on symptoms like swelling, stiffness, pain lesions itching and rashes. Reduction in Subjective parameter like ESR was also observed with *Panchtikta Ghrita guggul* and *raktamokshana*.

**Keywords:** *Ekakushta, Psoriasis, Panchtikta Ghrita guggul, Raktamokshana.*

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## INTRODUCTION

Psoriasis is one of the most common dermatologic diseases, affecting about 3-5 to 7-10 percent of total number of skin diseases. About 3 percent of the world population suffers from Psoriasis. It usually occurs before age of 40, most commonly between the ages of 15 and 25 years; affects equally in men and women [1]. In India prevalence of Psoriasis varies from 0.44 to 2.88% [2]. Psoriasis consist of itchy, deep pink to reddish, well demarcated, indurate plaques with silvery scaling present particularly over extensor surface & scalp. The aetiology of psoriasis is still poorly understood, but there is clearly a genetic predisposition. Psychological stress is emphasized as one of the major triggering factor in the exacerbation of the disease. Evidence has accumulated and clearly indicating a role of T- cells in the pathophysiology of psoriasis. Further, psychological stress, injury of skin, an environmental influence especially of cold weather, systemic factors i.e. infections, incomplete protein digestion and bowel toxemia and immunological factors have definite role as triggering factors in worsening Psoriasis. Modern medical science treats psoriasis with PUVA and corticosteroids. But these therapies give serious side effects like hepato & nephrotoxicity, bone marrow depletion etc [3]. Hence, it is the need of time to find out safe and effective treatment for Psoriasis and here Ayurveda plays an important role. In Ayurveda, Psoriasis can be correlated with *Ekakustha* [4] due to very much similarity in their symptoms. The unique treatment modality of Ayurveda provides long lasting results and a better life to patients through its three basic principles of treatment i.e. *Shodhana*, *Shamana* and *Nidana Parivarjana* [5].

## CASE REPORT

A 38 years old male patients, reported in the opd of Shubhdeep Ayurved Medical college khandwa road Indore with the complaints of itching and rashes Bilateral Lower limb since 8 month . Itching was severe on scratching whitish powder like particles were noticed by the patient, itching use to aggravate during night. After couple of months he developed maculo-papular eruptions over both hands and legs.

For the past 6 months he was under steroidal therapy along with analgesics as advised by allopathic physician. Later he was referred to dermatologist and was under topical applications and oral medications (details of which are not known). There was relapsing episodes of skin manifestations on discontinuing the medicines. Later he started with the complaints like heaviness of body.

### Past History

According to patient before 7 years, he was healthy, later (end of 2009) started with mild red erythema-tous scaly patches on back, abdomen and scalp with dryness. He had diagnosed psoriasis by dermatologist and accordingly treated. At that time all the complaints were relived within 6-8 months. But all complaints reappeared again in next win-ter. Since then he was many times treated with anti-psoriatic medicine, which pro-vided relief for some times but afterwards it reappeared again.

**Family History:** No.

### Dietary Habit

Non-Vegetarian, Junk food, daily curd. Excessive con-sumption of *Amla Rasa and Lavana Rasa*. Irregular in diets, late night sleep and late morning get up.

Associated complaints: Appetite decrease, disturbed sleep, constipation , stress factor .

### MATERIALS AND METHODS

Patient was examined by inspection, palpation, and auscultations of necessary systems. Skin lesion area was examined for the texture, discoloration, secretions, Auspitz sign [6] and Candle grease sign<sup>7</sup>. *Panchakarma* treatment modalities Raktamokshana [7] was adopted.

The whole Treatment plan have been applied in this case is given below:

Step1: *Nidan parivarjana* i.e. advised gradual stop of addiction, addiction of cigarettes and non-veg items etc.and start of light diet.

Step 2: *Deepan-Pachana Chikitsa* for 5 days with Chitrakadi vati 2 tablets

Step 3: *Panchtiktaghrita gugglu* 500 mg twice a day with lukewarm water. And raktmokshana with scalp vein set done and 20 ml blood was removed from site of patches.

Patient was called for follow up after 15 days.

After fifteen days there was reduction in the size of patches and but scaling was not reduced . Patient having head ache since morning.

Tab stresscom (dabur) 2 tab twice a day along with Panchtikta ghrita guggulu 500 mg twice a day with lukewarm water and patient was called after next 15 days .

After treatment of next15 days (one month) when patient came for follow up reduction in the size of patch and redness was observed white scaling was reduced again bloodletting was done and 20 ml blood was removed from nearest vein to patch.



**Fig. 1: Before Treatment**



**Fig.2: (on 30 th day)**

Follow up: Patient has come under follow-up per week regularly for 8 weeks duration.

In first 4 weeks he has no complaint of scaling, itching and erythema except some discoloration existed. In next 4 weeks of follow-up his complaint of discoloration nearly treated.

## CONCLUSION

In this case, it can be said that Panchtikta ghrith guggulu [8] having contents like guduchi , nimba, patola vasa kantkari all of these are pitta shamak due to rasa and ghritha decreases dryness of the patches thus reduce the scaling. Raktatamokshana as indicated in samhitas is the best treatment for blood purification thus both external as well as internal therapy helps to reduce the disease significantly.

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