

MANAGEMENT OF EKAKUSHTA WSR TO PLAQUE PSORIASIS WITH VIRECHANA KARMA AND TAKRADHARA - A CASE STUDY.

Hivarale A.U.*¹, Ghungaralekar R.R.², Rewdkar-Kole M.S.³ and Patil L.D.⁴

^{1,4}P.G. Scholar, ²HOD, Professor and Guide, ³Assistant Professor

Department of Kayachikitsa R A Podar Medical (Ayurved) College, Worli, Mumbai, Maharashtra, India.

Article Received on
05 Oct. 2016,

Revised on 25 Oct. 2016,
Accepted on 15 Nov. 2016

DOI: 10.20959/wjpr201612-7441

*Corresponding Author

Hivarale A.U.

P.G. Scholar, Department of
Kayachikitsa R A Podar
Medical (Ayurved) College,
Worli, Mumbai,
Maharashtra, India.

ABSTRACT

Psoriasis is a non-infectious chronic relapsing inflammatory skin disease having unknown etiology, characterized by well-defined dry scaly erythematous patches and covered with adherent silvery white scales. The eruption is usually symmetrical and most commonly affects extensor surfaces of elbows, knees, scalp, nails and the sacral regions. Its incidence is 1-2% of world population. Exact cause for this disease is unknown but there is an inherited predisposition. The strong genetic influence may result from a single dominant gene with poor penetrance or a number of genetic influences. Psychological stress is emphasized as one of the major triggering factor in the exacerbation of the disease, so the cause of psoriasis is best regarded as being multifactorial.

Modern medical science treats psoriasis with PUVA and corticosteroids. But these therapies give serious side effects like hepato & nephrotoxicity, bone marrow depletion etc. 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 *Ekakushta* due to very much similarity in their symptoms. *Ayurveda* propounds a holistic treatment approach for psoriasis. The unique treatment modality of *Ayurveda* provides long lasting results and a better life to patients through its principles of treatment i.e. *Virechana* and *Takradhara*. A 32-year-old male patient, Having complaining of well demarcated raised red scaling patches on trunk and back region since 1 years. The patient was treated with *Virechana* (purgation therapy) and *Takradhara*.

KEYWORDS: *Ekakushta*, *Virechana*, *Takradhara*, Psoriasis.

INTRODUCTION

Psoriasis is a chronic inflammatory and proliferative disorder of the skin clinically manifested as well-circumscribed, erythematous papules and plaques covered with silvery scales typically located over the extensor surfaces and scalp. The disease affects more than 7 million people in the developed country such as America with an annual incidence of 150,000 to 260,000 new cases. The situation is similar in India, with 0.5% to 1.5% of the Indian population affected by the disease.

The cause of psoriasis is not known, but it is believed to have a genetic component. Several factors are thought to aggravate psoriasis. These include stress, physical injury, digestive upsets, excessive alcohol consumption and smoking. Individuals with psoriasis may suffer from depression and loss of self-esteem. As such, quality of life is an important factor in evaluating the severity of the disease. Modern medical science treats psoriasis with PUVA and corticosteroids. But these therapies give serious side effects like hepato & nephrotoxicity, bone marrow depletion etc. Hence it is the need of time to find out safe and effective treatment for Psoriasis. In Ayurvedic texts, all skin disease described under the heading of Kushtha (Ayurvedic Dermatology). Psoriasis is considered as a type of Kushtha and may be correlated as Ekakushtha.

CASE PRESENTATION

A 32-year-old male patient, Hindu by religion, paper meal worker by occupation, Having complaining of well demarcated raised red scaling patches on trunk and back region. The affected skin was a variable shade of blackish red. He complained of itching and burning all over the body and on scraping, white scales (silvery scale) like substances falls down and leaves behind a shiny bleeding surface. On history, patient had above complaints since 1 years and diagnosed of Plaque psoriasis by allopathic physicians. Initially lesions were coin shaped and started from back of trunk, Hence, it was clear case of plaque psoriasis. For this, patient took allopathic treatment for 6 Months but got no relief.

EXAMINATION

His general health was good and both physical examination and all blood tests (routine test) were within normal range. Vitals are normal. The skin lesion was sent for culture and sensitivity test and report showed no growth.

TREATMENT

The patient was administered *Virechana* (purgation therapy) and *Takradhara*. All oral and local modern medicines were stopped. The details of the procedures are described below:

Method of *Virechana* Procedure (purgation therapy)

The *Virechana* Process comprises of three stages, which are as follows:

- Purva Karma* (initial procedure)
- Pradhana Karma* (main procedure)
- Pashchat Karma* (post procedure)

1) *Purva Karma* (initial procedure viz. oleation and fomentation)

Purva Karma of *Virechana* is

1. *Deepana – Pachana*
2. *Snehana*
3. *Abhyanga-Svedana*.

Deepana and *Pachana* was done by administration of *Arogyavardhini vati* 500mg t.d.s. for 5 days. *Snehana* (oleation) before *Virechana* procedure is performed by '*Snehapana*'. '*Snehapana*' (internal oleation therapy) was done by *Panchatikta ghrut*. After obtaining of '*Samyaka Snigdha Lakshana*' (symptoms of proper internal oleation like oiliness of skin, passing stool containing fat, feeling of aversion of Ghee), after 7th day of '*Snehapana*', patient was subjected to perform '*Abhyanga* (oleation and massage) with '*Sesame oil* and *Svedana* by '*Peti Swed* (fomentation done by using vapour to whole body) For 3 days. During all these days, light and liquid warm diet was given. Thereafter, on the fourth day morning, *Virechana* was performed.

2) *Pradhana Karma* (main procedure viz. purgation therapy)

Before administration of *Virechana* (purgation) Drug, *Abhyanga* (massage) by *Sesame Oil* and *Svedana* (fomentation) by '*Peti Sweda*' was carried out in the morning of *Virechana* day. Pulse, blood pressure, respiration and temperature were recorded. It was recorded at Two Hourly during the *Pradhana Karma*. Patient was advised for empty stomach in the morning of *Virechana* day. As mentioned in classics, *Virechana* drug was administered after passing of morning time. Accordingly, the appropriate time for administration of *Virechana* drug was 10:00 a.m. on empty stomach. '*Virechana Yoga*' (purgative formulation) was prepared from 100 ml decoction of 25gm of *Triphala* powder (powdered form of *Terminalia chebula* Retz +

Eblica officinalis Gaertn. + *Terminalia bellirica* Gaertn), *Trivruta* (*Operculana turpethum* Linn.) powder – 15 gm, *Aragwadh Falmajja* (*Cassia Fistula.*) – 15 gm.+20 ml Castor oil(*ricinnus Communis*) + 2 Tab *Abhayadi Modak*. Patient was given hot water repeatedly in little quantities. After that patients were observed carefully to avoid complications. Number of motions after administration of *Virechana* drug were counted till the symptoms of proper purgation like stopping of purgation on its own, passing of stool with mucus in the last one or two motions, feeling of lightness in the body and later improvement in sign and symptoms of the disease appeared.

3) *Pashchat Karma* (post procedure of dietetic indication)

The time period from the completion of *Vegas*, till the patient reached his normal diet is crucial and the specific management that has to be taken at this juncture is known as *Paschat Karma*. After the completion of *Virechana* (purgation), patient was kept on *Samsarjana Krama* (post procedure of dietetic indication) of considering the '*Shuddhi*' as '*Madhya*' type of '*Shuddhi*' (moderate purification). Patient was advised to take rest and eat thin rice gruel was given as a food and special diet is advised for 3 to 5 days.

TAKRADHARA

For *Takradhara*, *Musta* (*Cyperus rotundus*) *choorna* 20 gm, *Amalaki* (*Emblica officinalis*) *choorna* 20gm, 6 litres water and 1.5 litre of fresh *Takra* (buttermilk) taken. The contents are heated on moderate fire until all water evaporates. *Takradhara* was given for 1month after *virechana*.

RESULTS AND DISCUSSION

After purgation therapy and *Takradhara* the reddish silvery patches all over body and scaling were disappeared at the end of 1 month leaving some area of hyper pigmentation over back. Itching and burning was completely relieved. Then he was prescribed some oral medication viz. *Arogyavardhini vati*. 500mg b.d. after meal with plain water for next 4 weeks and *Mahamanjishtadi Kwath* 30 ml b.d. after meal for next 2 months.

Along with the above medicines, he was advised to avoid intake of junk food, incompatible diet, sour food items (curd & citrus fruits) and salty food, day-sleep and advised to take simple dietary & lifestyle modifications.

With a follow up for a period of 6 month, till today the patient has shown no signs of recurrence.

BEFORE TREATMENT**AFTER VIRECHANA****AFTER TAKRADHARA****CONCLUSION**

Psoriasis is a heredo-familial disease that is triggered by some local and systemic factors. It is concluded that, *Ayurvedic* line of management gives satisfactory answer as well equally beneficial for the promotion and preservation of health by removing toxic wastes by *virechana* and *Takradhara*. Researches with *Takradhara* containing *Amalaki* & *Musta* which has anti-inflammatory & antioxidant property, lactic acid in *Takra* may help in the transdermal absorption of these drugs & have systemic anti-inflammatory, antioxidant effects in psoriasis.

ACKNOWLEDGEMENT

I express my deepest gratitude to respected VD. RAMAN R GHUNGARALEKAR HOD of Department of Kayachikitsa, R. A. Podar Medical College, Worli, Mumbai – 18 and VD. MEENAKSHI REWDKAR-KOLE, assistant professor, Department of Kayachikitsa R. A. Podar Medical College, Worli, Mumbai – 18 for their valuable suggestions & ideas during this case study.

REFERENCES

1. Paul K Buxton. Psoriasis. ABC of Dermatology; 4th edi. London: BMJ Publishing group Ltd, BMA House, Tavistock Square, 2003; 11.
2. Kaviraj Shri Ambikadatta Shastri (editor). Rasaratna Samuchchaya of Shri Vagbhatacharya, chapter 20, verse no. 87-93, 4th edi., Varanasi; Chaukhamba Sanskrit Series; 1970; 400.

3. Brahmanand Tripathi (editor). Sharangdhara Samhita of Pandita Sharangadhara, Madhyamakhandha chapter 7, verse no. 70-81, 1 edi. Varanasi; Chaukhambha Surbharti Prakashana, 2011; 205.
4. Ibidem(1), Psoriasis, 2003; 12.
5. Agnivesha, Charaka, Dridhabala, Charaka Samhita Siddhithana, Kalpanasidhhidhyaya 1/7, edited by Acharya Vidyadhara Shukla and Prof. Ravi Dutt Tripathi, 1st edi. Chaukhambha Sanskrit Sansthana, Varanasi. 2007; 876.
6. Ibidem (3), Kalpanasidhhidhyaya 1/8; p. 876.s.