

CASE STUDY

# A Case Study on Ayurvedic Management of Vicharchika

Author: Jyoti Meghadambar<sup>1</sup>

Co Authors: Himani Giri<sup>2</sup>

<sup>1,2</sup> Dept. of Rognidan, R.A. Podar Ayurvedic Medical College, Worli, Mumbai, MS, India

## ABSTRACT

In *Ayurveda*, the skin diseases are included under *Kushtha rogas* under two main categories as *Mahakushtha* and *Kshudrakushtha*. There are eleven subtypes of *Kshudrakushtha*, *vicharchika* is one among them. In *Ayurveda*, it is characterised by *Kandu*, *Shyava*, *Pidaka*, *Bahusrava*, *Raji*, *Atiruja* and *Rukshata*. In *Ayurveda*, Management of *Vicharchika* is given as *Nidanparivarjana*, *Shodhanachikitsa* and *Shamanachikitsa*. Present case deals with a 54 years old female patient with complaints of severe itching (pruritis)(+++), and blackish discoloration at left lower limb with marked, dryness and thickened skin at the affected site for 5-6 months. Pt. was diagnosed as *Vicharchika*. *Vicharchika* can be correlated with *Eczema*, based on its clinical presentation. It is characterised by itchiness, dry skin and rash. As we know *Ayurvedic* science explains the said disease as “*Vicharchika*”, it can be correlated to “*Eczema*”. *Ayurvedic* classics showed detailed information about various skin manifestations and solution of *Jalaukavacharan* (Leech therapy) to discard them. This is an effort to prove the effectiveness of *Jalaukavacharana* in management of *Vicharchika* alongwith the *shaman aushadhis*. For treatment *Shamanachikitsa* was given to the patient along with *nidan parivarjana* for 1 month duration, which resulted into significant relief in sign and symptoms of patient.

**Key Words** *Ayurveda*, *Kushtha*, *Vicharchika*, *Jalaukavacharan*, *Shamanachikitsa*

Received 07<sup>th</sup> June 23 Accepted 17<sup>th</sup> April 24 Published 10<sup>th</sup> May 2024

## INTRODUCTION

Skin diseases are increasing day by day in our society due to environmental pollution and adoption of ill lifestyle. Skin diseases not only affect the patient physically but it also affect mentally. In *Ayurveda*, most of the skin diseases are discussed under *Kushtha*. *Acharya Sushruta* states that *Kushtha* occurs in *Tamra* and *Vedini* layers of *Tvak*. It is a *Raktavaha srotadushtijanya vikara*. It occurs due to vitiation of *Tridosha* with further vitiation of *Tvak* (skin or *Rasadhatu*), *Rakta* (blood), *Mamsa*

(muscle tissue) and *Ambu* (lymph). These seven entities together Entitled as ‘*Saptakodravya sangraha*’ of *Kushtha*<sup>1</sup>. *Kushtha* are eighteen in numbers. Further categorised as, *Mahakushtha* as main seven types and *Kshudrakushtha* as eleven subtypes. *Vicharchika* belongs to subtype under *Kshudrakushtha*. According to *Acharya Charaka*, *Vicharchika* lakshanas are described as *Kandu*, *Shyavata*, *Pidaka*, *Bahusrava*<sup>2</sup>. According to *Sushruta Acharya*, *Vicharchika* is characterised by *Raji*, *Rukshata*, *Atiruja*, *kandu*<sup>3</sup>. There is predominance of *Kapha* (as per *Acharya*

## CASE STUDY

*Charaka*<sup>[4]</sup> or *Pitta* (as per *Acharya Sushruta*)<sup>5</sup> or *Vata-pitta* (as per *Acharya Madhavakara*)<sup>6</sup>. *Vicharchika* can be correlated with Eczema on the basis of similarities in sign and symptoms. *Ayurvedic* Management of *Vicharchika* can be efficiently done with *Nidana Parivarjana*, *Shodhana Chikitsa* and *Shamana chikitsa*. *Acharya Sushruta* has mentioned administration of shodhan therapy with duration. *Sushruta acharya states that, Chhardana* i.e. *Vamana* should be done once in every 15 days i.e. '*Pakshat chhardanam*'; *Virechana* should be done once in every month i.e. '*Masat Sramsana*'; *Raktavisravana* should be done twice in a year and *Nasya* should be done once in every three days<sup>10</sup>. The patients suffering from *Vata Pradhan Kushtha* should first be administered *Abhyantar snehapan*. *Vaman* should be administered to patient suffering from *Kapha Pradhan Kushtha*. *Pitta Pradhan* should first be managed with *Rakta visravan* and *Virechana*<sup>11</sup>. For present Case Study, patient was managed with *Shamana chikitsa* along with *Jalaukavacharana*.

## AIMS AND OBJECTIVES

To evaluate the effect of *Shamana chikitsa* along with *Shodhan Chikitsa* i.e. *Raktamokshan (Jalaukavacharan)* in *Vicharchika*

## MATERIALS AND METHODS

**Place of study:** OPD of Dept. of Kayachikitsa, R.A.Podar Ayurvedic College.

**Type of study:** Open random single case study.

## CASE REPORT

Basic information

**Patient's name**– XYZOPD

**Registration no.** – 89237

**Age**– 54 years

**Gender** – Female

**Religion**– Hindu

**Occupation** – Housewife

**Marital status**– Married

### CHIEF COMPLAINTS WITH DURATION:

Severe itching and blackish discoloration at left lower limb associated with thickening of skin at the affected site since 5-6 months.

### HISTORY OF PRESENT ILLNESS:

At first patient developed itching along with dryness at affected region. Itching was gradually increased. There was formation of lichenified lesions due to continuous scratching.

### HISTORY OF PAST ILLNESS:

No history of diabetes mellitus, hypertension or any other disease present.

### PERSONAL HISTORY

**Sleep**–Normal

**Appetite**–Normal

**Bowel**–irregular,hard,

**Bladder**–Normal

**Addiction**–Nil

**Diet**–Mixed (veg. and nonveg. both)

### FAMILY HISTORY:

No any major familial history

### GENERAL EXAMINATION:

### CASE STUDY

**Pallor / Jaundice / Cyanosis / Clubbing /**

**Oedema –Absent**

**Pulse rate –86 beats/min**

**Blood pressure –130/90 mm of Hg**

**Respiratory rate –22 times/min**

**Temperature –Afebrile, 98.6° F**

#### SYSTEMIC EXAMINATION:

**Cardiovascular system –S1, S2 audible, no added sound**

**Respiratory system –Air entry both sides equal, no added sound.**

**P/A –Soft, non-tender, no signs of organomegaly present.**

**LOCAL EXAMINATION** Lichenified lesions along with marked thickening of skin, lining and

dryness at left lower limb. There was blackish discolouration and presence of reddish spots at the affected site.

#### INVESTIGATIONS

Complete Blood Count, Fasting Blood Sugar level, Post-Prandial Blood Sugar level and Liver Function Test were within normal limits.

#### DIAGNOSIS

Patient was thoroughly examined and detailed history was obtained, present sign and symptoms were noted, on the basis of which diagnosis was done as *Vicharchika* as per *Ayurvedic* science.

As per modern science, can be correlated to Eczema on the basis of presenting symptoms.

#### TREATMENT PLAN

DU RATION OF TREATMENT – 1 month Follow up – Every 2 weeks

**Table 1** Duration of Treatment

Sr. No.	MEDICINE	DOSAGE	ANUPANA	ROUTE OF ADMINISTRATION
1.	<i>Mahamanjsthadi kwath</i>	20ml BD	With equal amount of water	Oral 1 month
2.	<i>Arogyavardhini vati</i>	250mg BD	Luke warm water	Oral 1 month
3.	<i>Panchatikta ghritha guggulu</i>	500mg BD	Luke warm water	Oral 1 month
4.	<i>Gandhaka rasayana</i>	250mg BD	Luke warm water	Oral 1 month
5.	<i>Mahamarichyadi tailam</i>	-	-	Local application

#### ASSESSMENT CRITERIA

**Table 2** Arbitrary scoring pattern

Sr. No.	SIGN & SYMPTOMS	NONE	MILD	MODERATE	SEVERE
1.	<i>Kandu</i>	0	1	2	3
2.	<i>Shyavata</i>	0	1	2	3
3.	<i>Raji</i>	0	1	2	3
4.	<i>Rukshata</i>	0	1	2	3

#### RESULTS

Effects of treatment mentioned above are shown in table 3, figure 1,2 and 3.

**Table 3** Arbitrary score of relief in symptoms before treatment and after treatment

Sr. No.	SIGN & SYMPTOMS	BEFORE TREATMENT	AFTER 2 WEEKS OF TREATMENT	AFTER 4 WEEKS OF TREATMENT
1.	<i>Kandu</i>	3	2	0
2.	<i>Shyavata</i>	3	2	1
3.	<i>Raji</i>	2	1	0
4.	<i>Rukshata</i>	3	2	1

## CASE STUDY

### IMAGES OF SKIN LESIONS BEFORE AND AFTER THE TREATMENT :



**Figure 1** Before treatment



**Figure 2** After treatment



**Figure 3** *Jalauvacharana*

## DISCUSSION

In present case study *Shamana chikitsa* was advised to the patient for the management of *Vicharchika*. *Shamanachikitsa* is an *Ayurvedic* form of palliative care. It helps to reduce or eliminate the sign and symptoms of a disease by treating its root cause. It causes pacification of aggravated *Doshas* without expelling them from the body. Here different *Ayurvedic* medicines are used in the management of said disease i.e. *Vicharchika* which are discussed below.

### ***Mahamanjsthadi kwath:***

It is indicated in all types of *Kushtha*. It helps in the pacification of aggravated *Kapha* and *Pitta*. It acts as *Raktashodhaka*. It has antioxidant, anti-inflammatory and anti-microbial activities.

### ***Arogyavardhini vati:***

It is also indicated in all types of *Kushtha*. It is digestive stimulant, appetiser, anti-inflammatory, anti-pruritic and liver tonic. It has *Bhedana* and *Mala Shuddhikara* activity.

### ***Panchatiktaghrita guggulu:***

It helps in the pacification of *Tridosha*. It has anti-pruritic, anti-inflammatory, analgesic, anti-ulcerogenic and carminative properties. Used in treatment of *kushtha*

### ***Gandhakarasayan vati:***

It is *Tridoshashamaka*. It acts as antimicrobial, anti-pruritic and anti-inflammatory agent. It is a very good blood purifier.

### ***Mahamarichadi taila:***

## CASE STUDY

It is *Vata-kaphashamaka*. It has *Raktashodhaka* and *Kandunashak* properties. It also reduces dryness and scaling. So, it is very useful in skin diseases.

### **Jalaukavacharana:**

Ayurveda has emphasized on *Shodhan Chikitsa* in management of *Kushta* as *Shodhan Chikitsa*. Hence, *Raktamokshan* by *Jaukavacharan* was selected as *shodhan chikitsa* under *Panchakaarma*. *Jalaukavacharana* was found to be very effective in management of *Vicharchika* as a *Shodhan Chikitsa*.

### **PATHYA-APATHYA (DO'S AND DON'TS):**

One should follow proper *Pathya-apathya* during treatment. This makes the treatment very effective. For present study, different *pathyapathya* were advised to the patient which are as follows.

### **Pathya- Ahara Pathya-Vihara:**

*Laghuahara*(light food), *Tiktashaka*, *Nimbapatra*, *Patolashaka*, *Puranadhanya* (old cereals), *Yava* (barley), *Godhuma* (wheat), *Shalirice*, *Mudga*, *Adhaki*, *Masura*, *Puranaghrita*, *Madhu*, *Lasuna*, *Tilataila* (sesame oil), *Sarsapataila* (mustard oil), *Jangalamamsa* (meat of animal inhabiting arid land) etc. *Laghuvyayama*(light exercise), *Siddharthakasnana*, *Abhyanga* (massage), *Lepa* etc.

### **Apathya- Ahara Apathya -Vihara:**

*Guru ahara*(heavy food), *Viruddha ahara*(incompatible food), *Vidaliahara*(food that causes burning sensation), *Vishtambhi ahara*(food that causes constipation),excessive

intake of *Amla*(sour) and *Lavana* (salty) food, *Navaanna* (new grain), *Dugdha*(milk), *Dadhi*(curd), *Urad* (black gram),*Tila* (sesame), *Mulaka* (radish), *Madya* (alcohol), *Matsya* (fish), *Guda* (jaggery), *Anupa mamsa* (meat of marshy animal) etc. *Divaswapna* (day sleep), *Malamutradi vegadharana*, stress, *Ativyayama* (excessive exercise) etc.

## CONCLUSION

*Vicharchika* is among the commonest skin diseases. It can be cured by proper *Ayurvedic* treatment. In this case study, patient got relief by administration of above said *Shamana ausadhis*. No side effects noticed during treatment. Hence, it can be concluded that *Shamana Chikitsa* alongwith *Shodhan Chikitsa (Jalaukavacharan)* is effective in the *Ayurvedic* management of *Vicharchika*.



## CASE STUDY

### REFERENCES

1. Sharma RK, Dash B. CARAKA SAMHITA, Vol – III (cikitsa sthana -7/9) Reprinted. Varanasi; Chowkhamba Sanskrit Series Office, 2012; p.320.
2. Sharma RK, Dash B. CARAKA SAMHITA, Vol- III (Cikitsa sthana-7/26). Reprinted. Varanasi; Chowkhamba Sanskrit Series Office; 2012, p. 325-326.
3. Murthy KRS. Illustrated Sushruta Samhita. Vol. I (Nidan Sthana-5/12½). Reprinted. Varanasi; Chaukhambha Orientalia; 2016. p. 496-497.
4. Sharma RK, Dash B. CARAKA SAMHITA, Vol- III (Cikitsa sthana-7/30). Reprinted. Varanasi; Chowkhamba Sanskrit Series Office; 2012. p. 326.
5. Murthy KRS. Illustrated Sushruta Samhita. Vol. I (Nidan Sthana-5/16). Reprinted. Varanasi; Chaukhambha Orientalia; 2016. p. 497.
6. Upadhyay Y. Madhava Nidanam. Part II (Chap.-49, Shlok-33½). Reprinted. Varanasi; Chaukhambha Prakashan; 2018. p. 195.
7. Longo, Fauci, Kaspar, Hauser, Jameson, Loscalzo. Harrison's Principles of Internal Medicine. Vol. 1. 18th ed. New York; The McGraw –Hill Companies; 2012. p. 396.
8. Munjal YP. API Textbook of Medicine. Vol. 1. 9<sup>th</sup> ed. Mumbai; The Association of Physicians of India; 2012. p. 483.
9. Charifa A, Badri T, Harris BW. Lichen Simplex Chronicus. [Updated 2020 Aug 10]. In: Stat Pearls [Internet]. Treasure Island (FL): Stat Pearls. Publishing; 2020 Jan. Available from: <http://www.ncbi.nlm.nih.gov>.
10. Murthy KRS. Illustrated Sushruta Samhita. Vol. II (Cikitsa Sthana-9/43). Reprinted. Varanasi; Chaukhambha Orientalia; 2016. p. 111.
11. Sharma RK, Dash B. CARAKA SAMHITA, Vol- III (Cikitsa sthana-7/39). Reprinted. Varanasi; Chowkhamba Sanskrit Series Office; 2012. p. 329.