Effective Treatment of Psoriasis (*Ekakushtha*) through Ayurveda - A Case Report

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ABSTRACT

Psoriasis (*Ekakushtha*) is non-infectious chronic inflammatory disease of skin characterized by well-defined erythematous plaques with silvery scale which have a predilection for extensor surface and scalp. The disease not only affects the patient physically but also disturbs the mental and social health of the patient. The disorder may affect people of any age, but it most commonly begins at the age of 15 to 40 years. In modern medicine the cure of this disease is out of question as the cause is unknown. Ayurveda propounds a holistic treatment approach for psoriasis. The present case study is upon a 17 year old male patient with complaints of well demarcated raised scaling patches on scalp and other parts of body with itching since 1 years. There was positive Candle grease sign, Auspitz sign. On the basis of this clinical presentation diagnosis of psoriasis was made which can be correlated as *Ekakushtha* in Ayurveda. The patient was treated with *Virechana* therapy followed by Oral medications. The therapies yielded marked improvement in all the sign and symptoms of psoriasis including Candle grease sign, Auspitz sign and pasi scale. On the basis of the results obtained it can be concluded that *Virechana karma* along with oral medication as *Shaman* therapy from Ayurveda can be used as effective treatment in the management of psoriasis.

KEYWORDS

Psoriasis, Ekakushtha Virechana Karma
INTRODUCTION
Psoriasis is one of the most common dermatologic disease, affecting up to 2% of the World’s population\(^1\), in India 0.8% population is suffering from Psoriasis\(^2\). Both males and females suffering equally\(^3\). Psoriasis is a common, chronic and non-infectious skin disease characterised by erythematous well-defined silvery scaled plaques over the extensor surface of elbows and knees as well as on the scalp region\(^4\). In psoriasis, main abnormality is of increased epidermal proliferation due to excessive multiplication of cells in the basal layers. The transit time of keratinocyte is shortened and epidermal turnover is reduced to 5-6 days from 28-30 days\(^5\). Increased stress and life style are main predisposing factor which is accounting for wide spread prevalence of this disease. Other factors like trauma, infections, sunlight, winter season, some of the drugs and emotions may flare up the disease.

In Ayurveda all skin diseases have been described under the umbrella of Kushtha. One among the most prevalent kind of Kushtha is Ekakushtha. According to Charaka, the Kushtha which does not sweat (Aswedanam), and which is extensively spread (Mahavastu) and resemble in the form of fish scale (Matsyashakalopamam) is known as Ekakushtha\(^6\). According to Sushruta in which the skin becomes black and pink colour (Krishna Aruna Varna) is known as Ekakushtha\(^7\). This can be compared with sign and symptoms of Psoriasis. Hence it has been taken as analogue to Psoriasis in the present case study. There are many treatments available but because of its chronic and recurrent nature, psoriasis is a challenge to treat. Modern medical science treats psoriasis with PUVA (psoralen and ultraviolet A radiation) and corticosteroids. But the therapy gives side effects like liver& kidney failure, bone marrow depletion etc.\(^8\). Hence it is the need of time to find out safe and effective management for Psoriasis and here comes the role of Ayurveda.

CASE REPORT
A 17 years male patient (UHID-202476) visited Department of Panchakarma, All India Institute Ayurveda, New Delhi on 23\(^{rd}\) November 2017 with chief complaints of well demarcated raised scaling patches on scalp and other parts of body with itching since 1 years. The affected skin was a variable shade of red and the surface was covered by large silvery scale. He complained of itching on scalp region and on scraping, white powder (silvery scale) like substances falls down and leaves behind a shiny bleeding surface (Figure 1).
Initially patient was managed with allopathic medicines from which mild relief in itching was noticed. But, Dandruff of scalp region were persisting with silvery scaling. The Shareera Prakriti (physical constitution) of the patient was Kaphavataja, had Krura Koshta (on the basis of bowel habits), Madhyama Bala (moderate physical strength) with Madhyama Satva (psychological strength). Patient was thoroughly examined and detailed history was taken. Patient did not have history of any other major illness.

### THERAPEUTIC INTERVENTION

**Figure 1** Status of patient before treatment

<table>
<thead>
<tr>
<th>Table 1</th>
<th>Panchakarma procedures adopted</th>
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<tr>
<td>Sr. No</td>
<td>Procedures</td>
</tr>
<tr>
<td>1</td>
<td>Deepana-Pachana</td>
</tr>
<tr>
<td>2</td>
<td>Snehapano(oral administration of Ghrita)</td>
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<tr>
<td>3</td>
<td>Sarvanga Abhayang(full body massage)</td>
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<tr>
<td>4</td>
<td>Vashpa Swedana(full body fomentation)</td>
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<td>5</td>
<td>Virechana(purgation)</td>
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**Deepan-Pachan** was done with Nagarmotha Choorna\(^9\)3gm twice a day for 3 days. **Snehapano** was done with Maha Tikak Ghrita\(^10\) which was gradually increased from 40ml on the 1\(^{st}\) day to 210 ml on the 6\(^{th}\) day, respectively. After obtaining the Samyak Sneha Lakshana\(^11\) like Passing of flatus, increase in appetite, softness of body parts, lightness of body, loose and oily stool etc., **Snehapano** was stopped. He was advised Abhyanga with Eladi Taila\(^12\) and Vashpa Swedana with Dashmool Kwath for 3 days. **Abhyanga** followed by **Vashpa Swedana** was done on the day of Virechana in morning. **Virechana Yoga** in the form of Trivrita Avleha\(^13\) 50gm, Triphala Kwatha 100ml, Katuki Choorna\(^14\) 10gm and Nimbaamrtadi Erandam Taila\(^15\) 50 ml was administered orally in empty stomach at 10 A.M. Patient was advised to have sips of Luke warm water in between to continue the bowel movements. Emergency medicines like Kutaj Ghana Vati and Shankha Vati were kept at hand if needed in any conditions.
After one and half hour, *Virechana Vega* (Loose Motion) was started. 25 *Virechana Vegas* passed in 12 hours. Pulse Rate and Blood Pressure after completion of *Virechana Vega* were within normal limit. The patient got 25 *Vegas* of *Virechana* considering as *Pravar Shuddhi* (high cleansing of body). He was kept admitted till the *Samsarjan Krama* (specific diet regimen after *Shodhana*) of 7 days. He was advised strict rest and diet only in the form Rice gruel in the form of *Peya*, *Vilepi* and green gram soup as *Yush* in gradual successions.

### Table 1

After completion of *samsarjana karma* some oral medicine has been given as *Shaman chikiisa* i.e.1.*Manjishtadi Kwath* 160 ml with 30 ml Luke warm water TID 2. *Kaishore Guggulu* 17500 mg 2 tab TID 3.*Panchanimbadi Choorna* 18 3gm TID 4. *Sarivadyasava* 19 3gm TID 5. *Guduchi Choorna* 20 (Tinospora cordifolia) 3gm BD with Luke warm water. The results are discussed in table 2.

### DISCUSSION

*Nagarmotha Choorna* (*Cyperus scariosus*) was used for *Deepana- Pachana* which improves the digestive power of the patient, reduce *Ama* and help in proper digestion of the *Sneha*. *Snehapan* was done with *Maha Tiktaka Ghrita* which is specially indicated in classics for *kushtha Roga*. It is widely used in treatment of psoriasis, eczema, and ulcer like conditions because of its blood purifying action. *Ghrita* has properties of *Dipana, Pachana, Strostoshodhaka, Raktaprasadan, Raktashodhaka, Kandughna, Kushthaghna*. *Sarvang Abhyanga* was done with *Eladi Taila* which is indicated in *Kandu*(itching) in Ayurveda. *Trivruta* (*operculina turpethum*) has *Virechak Prabhav, Doshas* expel out through anal route (*Gudamarga*) by means of purgation. Thus *Virechana* pacified itching, diminished red scaly patches, reduced dryness, decreased silvery scales and mildly normalized the discoloration. *Triphala kwatha* had *Rechak* (laxative) action along with elimination of *Kapha* and *Pitta Dosha*. *Erand Tail* (*Ricinus communis*) is *Virechak, Krumnissarakand* also did *Shodhana* of *Kapha* from *Aamashaya*. *Katuki Choorna* (*picrorhiza kurroa*) is indicated for *Pitta Rechana*. It helps for elimination of *Dushta Pitta* and for cleansing of *Rakta*.

**MODE OF ACTION OF INTERNAL MEDICINE**
Manjishtadi Kwath is specially indicated in Kapalika Kushtha in classics and it is also useful in many other skin disorders like eczema, ulcer etc. Manjistadi Kwatha is a Blood purifier (Rakta Prasadaka), Immuno-modulator and Vataraktahara. Kaishor Guggulu is Vata-kapha Nashaka, hence used in treatment of Vata-kapha Pradhana Ekakushtha. It is anti-bacterial, anti-microbial, anti-inflammatory and Rakta Prasadaka in property, therefore, corrects Rakta dushti (vitiation of blood). Nimba (Azadiracta indica) acts as Vran Shodhak Kushthhara And Krimihar. The active ingredients in these drugs shows antibiotic, antiseptic, anti-pruritic property. Due to its Tikta Rasa it purifies blood and acts on diseases caused by impure blood. Panchanimbadi Choorna is indicated in Kapala Kushtha in classics. Sarivadyasava is a Rakta Shodhak, Rakta Prasadak, used in Twaka Vikaras and acts as Vataraktahar. Guduchi acts as Rasayana which improves immune response of body. Guduchi acts as Vata-Kaphahara as well as Raktadoshghna.

CONCLUSION

In this case study there were encouraging results of Panchakarma particularly Virechana Karma and Ayurvedic medicines. The treatment given for Ekakushtha (Psoriasis) was Deepana, Pachana, Virechana Karma and oral medications which helped in Aama pachan, removal of vitiated Dosha from body and to bring Samyavastha (homeostasis) of Doshas. So above treatment help to relieve sign and symptoms of disease (Figure 2) and also an attempt to provide safe and effective treatment to the patient suffering with psoriasis.

AFTER 2 MONTHS

Figure 2 Status of patient after treatment

It is concluded that, Ayurvedic line of management gives satisfactory answer as well as equally beneficial for the promotion and preservation of health by removing toxic wastes, by balancing morbid humours which gives the healthy and peaceful life to patient and showed very promising results.
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