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## An Analysis of *Virechana Karma* with *Hridya Virechana Leha* in the Management of Psoriasis

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### ABSTRACT

*Virechana* is a procedure in which orally administered drug acts on morbid *Doshas*, especially *Pitta*, expelling them out through the *Guda Marga* (rectal route). Psoriasis is a non-infectious, chronic inflammatory disease of the skin, characterized by well-defined erythematous plaques with silvery scale, and having a chronic fluctuating course. In Ayurveda, almost all the skin diseases have been described under the heading '*Kushtha*'. Psoriasis can be considered as one type of *Kushtha* and may resemble *Ekakushtha*, *Kitibha* or *Mandala Kushtha* depending upon the presentation. *Kushtha* is a *Tridoshaja Vyadhi*, wherein *Virechana* is described as one of the treatment modality.

In this clinical study, 25 patients diagnosed with psoriasis were taken and were subjected to *Virechana Karma* by giving *Hridya Virechana Leha*. Prior to that, *Deepana* and *Pachana* were done as per necessity, followed by *Snehapana* with *Moorchhita Tila Taila*. The outcome showed statistically highly significant results in the two aspects that were assessed- PASI score and 5 D Itch scale.

### KEYWORDS

*Kushtha*, psoriasis, *Virechana*, PASI score, 5 D Itch scale



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## INTRODUCTION

*Virechana* is a procedure in which the morbid *Doshas* are eliminated through *Adhobhaga*, where *Acharya* Chakrapani while commenting on *Adhobhaga* clarifies it as the *Guda* (anal route)<sup>1</sup>. Psoriasis is a chronic inflammatory skin disorder clinically characterized by erythematous, sharply demarcated papules and rounded plaques, covered by silvery micaceous scale<sup>2</sup>. It is one of the most common dermatological conditions, affecting around 2% of the world population<sup>3</sup>. Studies have shown the disease hampers the quality of life of the patients in a varying degree, both physically and psychologically.

In Ayurveda, almost all the skin diseases have been described under *Kushtha*. Psoriasis is considered as one type of *Kushtha* and may resemble *Ekakushta*, *Kitibha*, or *Mandala Kushtha* depending upon the presentation. *Kushtha* is a *Tridoshaja Vikara*<sup>4</sup>, and for it, *Shodhana* in the form of *Virechana* has been presented as a treatment modality in Ayurveda Texts. Also the way *Virechana* (*Shodhana*) should be done in those patients has been described (i.e., it should do *Dosha Nirharana* in mild to moderate degree only and it should be done in repeated fashion)<sup>5</sup>. In *Sahasrayoga*, *Hridya Virechana Leha* is presented as one of the *Vairechanika Yoga*<sup>6</sup>. It is one of the

preparations of *Trivrit*, and *Trivrit* is considered as best *Sukha Virechana Dravya*<sup>7</sup> as well as best drug for *Rechana*<sup>8</sup>. So, with this background, the study was taken to evaluate the efficacy of *Virechana Karma* using *Hridya Virechana Leha* in the management of psoriasis.

## MATERIALS AND METHODS

Ethical Committee Approval No.  
03 A009 67189

### Source of data:

Patients diagnosed with psoriasis were randomly selected for the study from IPD/OPD of S.D.M. Ayurveda Hospital, Udupi. The total number of patients enrolled for the study was 25.

### Method of collection of data:

The study was an open-label clinical study to evaluate the efficacy of *Virechana Karma* with designated drug (*Hridya Virechana Leha*) in the patients of psoriasis. A detailed proforma was prepared pertaining to history, signs, symptoms, and examination as mentioned in Ayurveda as well as allied science. Patients with signs and symptoms of psoriasis, having age between 16 to 70 years, and who were fit for *Virechana* were selected.

Intervention:

*Poorva Karma*:



- *Deepana, Pachana* with *Shunthi Qwatha* (20ml tid ) until *Agnideepti* and *Aamapachana* attained
- *Abhyantara Snehana* with *Moorchhita Tila Taila* (with *Ushna Jala* as *Anupana*) until *Samyak Snigdha Lakshana* appeared (*Snehapana* for 3-7 days)
- *Karanja Qwatha Pariseka Swedana* (for 4 days, including the morning of the *Virechana* day)

*Pradhana Karma:*

*Hridya Virechana Leha* was administered at around 9:30 am, in the dose fixed priorly after considering the *Roga Bala, Rogi Bala, Koshtha, Agni* etc. Instructions were given to the patients to follow on the day of *Virechana*.

*Pashchata Karma:*

*Samsarjana Krama* depending on the *Shuddhi Lakshana* (3-7 days), and *Parihara Vishaya* (restrictions to be observed) were explained to the patient.

Assessment was done using PASI score (Psoriasis Area and Severity Index, which takes into account- erythema, thickness, and scaling), and 5D Itch scale (that takes account of itching). Calculations of those

parameters were done before treatment, after treatment, and after follow-up. Routine haematological investigations were carried out to avoid complications and which included Hb%, TC, DC, ESR, and blood sugar.

## RESULTS

A total of 25 patients, who were registered for the study, were subjected to *Virechana Karma* and there were no drop-outs.

In the study, highest portion of the patients (i.e. 40%) attained *Samyak Snigdha Lakshana* on 4<sup>th</sup> day followed by 32% of patients on 3<sup>rd</sup> day, 16% on 5<sup>th</sup> day, 8% on 6<sup>th</sup> day and 4% on 7<sup>th</sup> day of *Snehapana*. Similarly, 88% of patients exhibited *Samyak Yoga Lakshana* of *Virechana*, while 12% exhibited more of *Ayoga Lakshana* of *Virechana*.

The effect was evaluated using PASI score and 5D Itch scale, and the results were found as follows:

### Effect on PASI Score:

The effect is shown below in Table 1 and Table 2.

**Table 1** Result after *Virechana*

N	BT Mean	AT Mean	Difference	%Change	SD	SE	d.f.	t	p
25	18.364	14.208	4.156	22.63%	2.45103	.49021	24	8.478	<0.001

**Table 2** Result after follow-up

N	BT Mean	AF Mean	Difference	%Change	SD	SE	d.f.	t	p
25	18.364	9.504	8.86	48.31%	3.18591	.63718	24	13.905	<0.001



### Effect on 5D Itch Scale:

The effect is shown below in Table 3 and Table 4.

**Table 3** Result after Virechana

N	BT Mean	AT Mean	Difference	%Change	SD	SE	d.f.	t	p
25	12.48	10.32	2.16	17.30%	.68799	.13760	24	15.698	<0.001

**Table 4** Result after follow-up

N	BT Mean	AF Mean	Difference	%Change	SD	SE	d.f.	t	p
25	12.480	7.88	4.6	36.86%	.91287	.18257	24	25.195	<0.001

The results showed that the changes seen after *Virechana* as well as after follow-up, both were statistically highly significant in both the parameters, i.e. PASI score and 5D Itch scale.

## DISCUSSION

*Virechana* is a procedure in which orally administered drug acts on vitiated *Pitta*, *Samsrishta Kapha*, and also on vitiated *Vata*. The reason for the last being that in *Sannipataja* condition, *Virechana* has been advised by *Acharya Bhela*, and in *Vata Vyadhi*, *Mridu Virechana* has been described as treatment modality by *Acharya Charaka*. So, it may be inferred that *Virechana* acts on all the three morbid *Doshas*.

*Kushtha* is a *Tridoshaja Vyadhi*, along with the involvement of *Twak*, *Rakta*, *Mamsa*, and *Ambu*. *Virechana Karma* does have its effect on the three *Doshas*, as well as significant effect on the *Rakta Dhatu*. Hence, the procedure is expected to have its effect on the disease *Kushtha*.

In the present study, *Virechana* was performed after *Deepana*, *Pachana*, and then *Snehapana*; *Virechana* drug being *Hridya Virechana Leha*. The *Leha* contains *Trivrit* as a main ingredient and *Trivrit* is considered as best *Sukha Virechana Dravya* as well as best *Rechana Dravya*.

### Probable Mode of Action of *Virechana* Drug:

*Virechana* drugs have properties like *Ushna*, *Tikshna*, *Sukshma*, *Vyavayi*, *Vikashee*. They have predominance of *Prithvi* and *Jala Mahabhuta* along with *Prabhava Adhobhaga Doshaharatwa*. *Virechana Aushadhi* by virtue of their *Ushna*, *Tikshna*, *Sukshma*, *Vyavai* and *Vikashee Guna*, and by their *Swa Virya* (*Swo Prabhava*), reach to *Hridaya* and spread through *Dhamani* to all the macro and micro channels of the body. *Acharya Chakrapani* here clarifies that it is not the *Aushadhi* in its physical form itself that traverses through the *Dhamani* in the body; rather it is the *Virya* of *Aushadhi* that gets spreaded to the body through the *Dhamani*.



Then, *Ushna Guna* causes liquefaction of *Dosha Samuha* in the body; *Tikshna Guna* causes disintegration (*Vichchinnata*) of the *Dosha*. Those disintegrated (*Vichchhinna*) *Dosha* by virtue of the *Anu Pravana Bhava* (property to traverse through microchannels) move smoothly to *Amashaya* of *Sneha Bhavita* patient, without getting adhered en route, in a similar manner as honey moves smoothly in a properly anointed mud pot. Then being the *Virechana Aushadha Dravya* predominant of *Prithvi* and *Apa Mahabhuta* along with it having *Adho Bhagahara Prabhava*, it causes the the *Dosha* that were brought to *Amashaya*, to get expelled out through the *Guda Marga*.

It is assumed that *Virechana Dravya* are mild irritant to the intestinal mucosa, and thus, cause inflammation to the layer. Due to this, the permeability of the membrane changes and those substances are facilitated to come out, which would not come out under normal condition, thereby helping the morbid matters to come out and get expelled from the gut mucosa<sup>9</sup>.

Also, liver performs many vital metabolic and homeostatic functions like excretory functions, defensive and detoxification functions<sup>10</sup>. Psoriasis is an immune-mediated disease, and it may be exacerbated by external factors like infection, stress and medications<sup>11</sup>. So,

derangement in the functions of liver may also add up for skin conditions like psoriasis. And, *Virechana* has a significant role in bringing liver to its normalcy and to help perform its functions properly. Because liver (*Yakrit*) is a *Pittasthana*, and *Virechana* has profound effect on *Pittasthana*. So this way also, *Virechana* is seen to have a role to play in improvement of skin conditions like psoriasis.

## CONCLUSION

So, in this study, the results obtained after *Virechana* with *Hridya Virechana Leha* in the disease psoriasis were statistically highly significant. The results dealt with the changes in the signs and symptoms of psoriasis viz. erythema, thickness and scaling (given by PASI score) and itching (given by Itch scale).



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