

A CASE REPORT – VIRECHANA IN THE MANAGEMENT OF PSORIASIS

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ABSTRACT

Psoriasis is a long lasting autoimmune disease characterized by patchy skin lesions which is typically red in colour associated with itching and scaling. It may vary in severity from localized to generalized to cover all parts of the body. Because of its recurrent nature, the disease is remained always a great problem. The disease has been associated with low self-esteem and depression due to less cosmetic acceptability. In India, the reported prevalence of psoriasis amongst patients of skin disorders ranges between 0.44% - 2.2% from overall incidence of 1.02%. In Ayurveda, diagnosis of psoriasis depends on the clinical symptomatology. The management depends on assessment of dosha dooshya and its avastha. The bahudoshavastha of kusta needs shodhana. Keeping this intention in mind, a 48 year old male patient of psoriasis was diagnosed as Ekakusta having bahudoshavastha. The lesions were well demarcated, raised, red, scaling, silvery patches on whole body with itching. The pitta dominant state was managed by snehapana using tiktaka gritha for 4 days followed by virechana with trivrit avalehya. After the shodhana, the patient had relief from almost all the symptoms. The photos will be presented in the presentation. Hence snehapana poorvaka virechana is proved to be efficacious in the management of Ekakusta. The normalized skin appearance, texture will contribute to the cosmetological aspect of skin and enhance the confidence of the patient.

Keywords: Psoriasis, Shodhana, Snehapana, Virechana

INTRODUCTION

Psoriasis is put under the broad category of Kushta in Ayurveda. As per the different presentations observed in different varieties of Psoriasis, Eka Kushta, Kitibha, Mandala Kushta are having resemblance with Psoriasis. Psoriasis is defined as chronic recurrent inflammatory skin disease characterized by circumscribed erythematous, dry patches of various sizes covered by silvery white scales. The reported prevalence of psoriasis in countries ranges between 0.09-11.43% making it a serious global issue with at least 100 million individuals affected worldwide⁵. In India, it is found that the incidence of psoriasis amongst patients of skin disorders ranges between 0.44 - 2.2% with overall incidence of 1.02%. Psoriasis is one of the most common dermatologic diseases, affecting up to 2% of the world population, it is an immune-mediated disease, characterized by erythematous, sharply demarcated papules and rounded plaques covered by silvery micaceous scale

CASE REPORT:

A male patient aged about 48 years reported in our OPD complaining of well demarcated raised red scaling silvery patches on head, trunk, back, upper and lower limbs with itching and powdery discharge. The condition was gradual onset in head and the condition developed in upper and lower limbs associated with itching and silvery colour powdery discharge. On cold season condition aggravates and on medication relieves. He had taken ayurvedic treatments and felt relieved. On medication due to alteration of food condition got aggravated, and spreads to all over the body associated with swelling in upper and lower limbs. For further management she came to our hospital. Examination done as per ayurvedic perspective also in contemporary science. Because of bahudoshavastha and more involvement of pittaja and raktaja laxanas in patient posted for classical virechana.pachana deepana done by agnitundi vati 2 tid, chitrakadi vat 2 tid, triphala churna, 10 gms hs, followed by abhyanthara

snehapana with thiktaka grita until attainment of samyak snigdha laxanas . this was followed by four days karanja patra parisheka followed by karanja taila abhyanga. On fourth day virechana karma

administered by giving 60 gms trivrit leha with 250 ml of hot water. Patient attained 24 vegas based on shuddhi 5 days samsarjana karma advised.

ON EXAMINATION

Nature – maculopapular

Colour- reddish

Distribution –generalized

Number-many

Itching –present

Discharge -On scratching watery discharges

Scailing –when dries silvery powdery discharge Intervention

Tests

Candle grease test- positive

Auzpitz sign - positive

Quatity	Time administration of	Jeeryamana Laxanas observed	Jeerna laxanas observed	Samyak snigdha laxana noted
50 ml	6.00 am	Head ache, lalassava	Trishna travruti Kshuda pravruti Vatanulomana Udgara shuddhi	Vatanulomana, agni deepti
85 ml	6.00 am	Headache	Trishna travruti Kshuda pravruti Vatanulomana	Vatanulomana, agni deepti
110 ml	6.00 am	Head ache, lalassava,	Vatanulomana	Vatanulomana

Deepana pachana agnitundi 2 tid

Triphala 10 gms HS

Snehapana with tikthaka grita

SNEHAPANA CHART

210 ml	6.00 am	Angamarda, trishna	---	
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After attaining samyak snigdha laxana

Abhyanga with karanja taila for 4 days

Fourth day virechana administered with trivrit leha 60 gm with ushna jala as anupana

Dravya	Trivrit leha
Quantity	60 gms
Time of administration	9.30 am
Anupana	Ushna jala
Vegiki	24 vegas
Shuddhi	Madhyama
Langiki	Laxanas observed
Samsarjana karma	Advised for 5 days

VIRECHANA CHART

RESULTS:

Tests

Candle grease test-negative

Auzpitz sign – negative

Before treatments After treatment



DISCUSSION:

Psoriasis is a common genetically determined inflammatory skin disorder of unknown cause which in its most usual form is characterized by well demarcated raised red scaling patches that preferentially localize to extensor surfaces. Most of the skin diseases are mentioned in Ayurvedic classics

under the broad classification of kusta. It is said to be deerghakaleena vyadhi and bahudoshavastha. It is tridoshaja vyadhi also affecting the dushyas like twak, rakta, mamsa, lasika as said in saptakodravya sangraha of kusta. Shodhana is the preferable line of management in such cases because there is requirement to eliminate vitiated doshas from its root. In classics vamana and virechana us the ideal line of

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shodhana in kusta, depends upon the involvement of dosha datu one can select the treatments. Here in present study since it has the ashraya-ashrayi sambandha of rakta dhatu and pitta dosha which is of importance because it is one of the dushya in kusta which is responsible for the prasara stage in kusta samprapti. Hence keeping all the above said factors in backdrop this case managed with classical method of virechana.

CONCLUSION:

Psoriasis is the disease having high impact on the body as well as the mind. In Ayurvedic parlance this case has the similarity with ekakusta. This case study demonstrates that Ayurveda management may be gives the blissful life by boosting immune system as well as the symptomatic relief in the condition of the individual. Shodhana line of management help to remove the root cause of the disease and aslo it prevents the recurrence of the condition.

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