

# A CASE SERIES ON PSORIASIS: AN EXCELLENT RESULT OF EXTERNAL APPLICATIONS ALONG WITH SHAMANA CHIKITSA

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## ABSTRACT:

**Background:** Psoriasis is a long-lasting autoimmune disease characterized by patches of abnormal skin which are typically red, itchy, and scaly. In Ayurveda, Ekakushtha is compared with psoriasis due to its maximum resemblance. The present study depicts the clinical excellence of Ayurvedic management at Nirmal Clinic with known cases of complicated psoriasis in middle age group. Three diagnosed chronic cases suffering since last 10-15 years with multiple complications were treated with Ayurvedic treatment regimen for the period of 4 months.

**Aim:** To evaluate the clinical effect of Lepana, Malhara (Anubhuta) and Shamanatherapy in the management of Psoriasis.

**Materials and Method:** Patients with different aetiologies were assessed and managed by Lepana, Malhara and Shamana therapy.

**Results:** We observed that all these case of psoriasis took 4-5 months for complete remission. The assessment was done on the basis of relief in symptoms and photographs of every interval.

**Conclusion:** This case series showed that Lepana, Malhara and Shamanatherapy effective in treatment of Psoriasis. No adverse effect, aggravation of the symptoms was found in patient during and after treatment.

**Keywords:** Psoriasis, Ekakushtha, Lepana, Malhara, Shamanatherapy.

## INTRODUCTION

Psoriasis is a common dermatologic disease, affecting up to 1% of the World's population, <sup>i</sup> both males and females suffering equally. <sup>ii</sup> The word Psoriasis is derived from Greek word 'Psora' means itchy and 'sis' meaning acting condition. Psoriasis is a non-infectious, chronic inflammatory disease of skin, characterized by well-defined erythematous plaques with silvery white scale

with a predilection for the extensor surface and scalp, and a chronic fluctuating course <sup>iii</sup>.

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. <sup>iv</sup> Even though the etiology is unknown, the factors involved are genetic, biochemical and immunopathological. <sup>v</sup> Precipitating factors like

trauma, infections, sunlight, some drugs and emotions may flare up the disease.

As there is no available cure for the disease it has remained a great problem for the patients.<sup>vi</sup> Patients not only have physical problems, but also suffer mental and social distress. Diagnosis of the disease is made mainly on the basis of clinical symptoms i.e.<sup>vii</sup>

- Erythematous sharply defined plaques, covered with silvery white scales.
- Extensor surface primarily involved such as the knees and elbows.
- Koebner's phenomenon present in the active phase of the disease.
- Wornoff's ring often present in the healing phase of the disease.
- **Auspitz sign** and **Candle Grease sign** are another classic feature of the disease.

The goal of the treatment for the disease is to alleviate symptoms which interfere with the patient's life both physically and socially. In Modern system of medicine coal tar preparations, retinoid, corticosteroids and ultraviolet radiations are the local measures to manage Psoriasis. The systemic treatment commonly used is photochemotherapy with PUVA, retinoids, methotrexate and Cyclosporine -A and corticosteroids.<sup>viii</sup> These medicines usually provide good symptomatic control, but in long term, cause a number of unpleasant side effects.

There are several types of Psoriasis which can be related to certain diseases described in *Samhitas*, while the description of *Kushtha* is present since *Vedic* Period. There are two types of *Kushtha* mentioned in *Samhitas*: *Mahakushtha* and *Kshudrakushtha*. *Ekakushtha* is described in *Garuda Purana*<sup>ix</sup> and almost all *Ayurvedic* classics after that period i.e. *Brihatrayi* *Laghutrayi* and all texts afterwards.

*Ekakushtha* is mentioned in all *Ayurvedic* classics under *Kshudrakushtha* and has

predominance of *Vata* and *Kaphadosha*<sup>x</sup> to the causative factor of *Ekakushtha* is same as *Kushtha*. *Ayurveda* described that non-compliance of the prescribed rules with regard to the order of restoring to hot and cold regimens, and intake of nourishing and depleting foods are of causes of this disease condition. The etiological factors also loosen the four structural components, viz. *Twaka* (skin or *rasadhatu*), *Rakta* (blood), *Mamsa* (flesh), *Lasika* (lymph). The aggravated casual factors localized in these components vitiate the later due to their looseness and so produce this skin disease.<sup>xi</sup> Dietary factors as *Viruddha Ahara*, Excessive consumption of *Drava*, *Snigdha*, *Guru Ahara*, *Navanna*, *Vega dharana* specially of vomiting are major etiologies. Indulgence in sinful act and ill *Manovritti* (negative mentality) are associated mental factor for causing the disease.<sup>xii</sup>

*Acharya Charaka* has mentioned the symptoms of *Ekakushtha* as *Aswadanam*, *Mahavastu*, and *Matsyashakalopamam*<sup>xiii</sup> and *Acharya Sushruta* described its symptoms as *Krishna aruna Varnata*.<sup>xiv</sup> The etiological factor leads to vitiation of *Tridosha* especially *Vata* and *Kapha*. These *Dosha* through *Tiryakvahinisira* precede to *Bahyarogamarga* i.e. *Twacha*, *Rakta*, *Mamsa*, and *Lasika* and cause the symptoms of disease.<sup>xv</sup> Both *Antah parimarjana* and *Bahiparimarjana* therapies have been indicated in *Kushtha roga*.

#### CASE REPORT- 1 (Fig.-1)

##### Basic information of the patient

- Age-37 years
- Religion – Hindu
- Socioeconomic status- Middle class
- She is a housewife and has mixed diet pattern.

##### Pradhana Vedana (Chief complaints)

- Erythematous rashes at backside of ear since 9 months
- Itching in rashes with scaling on scratching.

**Vartamana Vyadhivritta (History of present illness)**

- The patient was asymptomatic before 9 months.
- After that he developed complaint of very small scaly rashes at back side of ear which gradually progressed.
- There is severe itching in the rashes along with burning sensation and scaling after scratching on enquiry she told that lesions have relation to seasonal variation, it increase in winter.
- She took allopathic medication for about 8 months which provided symptomatic relief till treatment continues, on discontinuity of the treatment again the symptoms aggravated.

**Purva Vyadhivritta (History of past illness)**

- Patient has no significant past history of any chronic illness, burn or trauma.

**Kulaja Vritta (Family history) - NAD****Vaiyaktikavritta (Personal history)**

- Appetite was normal
- Predominant rasa in *Ahara* was *Madhura*
- Sleep was disturbed due to itching
- Habit of incomplete evacuation of bowel.

**On Examination:**

- General condition was fair and afebrile.
- Vitals were normal
- Cardiovascular system, respiratory system and per abdomen examinations had shown no deformity.
- *Prakriti* (constitution) was *Vatapittaja*.

**Ashtavidha Pariksha:**

- *Nadi* (pulse) was *Kaphadhikatri doshaja*.
- Frequency and colour of *Mutra* (urine) was normal with no *Daha*

- *Mala* (stool) was constipated and feeling of incomplete evacuation was there.
- *Jihva* was *Sama* (coated), suggesting improper digestion.
- *Shabda* (Speech) was clear and fluent
- *Sparsha* (touch) was *Ruksha*.
- *Drika* (eyes) were normal
- *Aakriti* (appearance) was *Madhyama*.

**Integumentary system Examination:**

- Lesions were scaly papules, present at back side of ear. They were symmetrical and well demarcated.
- Candle grease sign – Present
- Diagnosis- On the basis of clinical history and examination the condition was diagnosed as Plaque Psoriasis.

**CASE REPORT – 2 (Fig.-2)****Basic information of the patient**

- Age - 44 years
- Religion – Hindu
- Socioeconomic status- Middle class
- She is a chef.

***Pradhan Vedana* (Chief complaints)**

- Erythematous rashes at left upper limb since 1 year.
- Itching and burning in rashes, with scaling on scratching.

**Vartaman Vyadhivritta (History of present illness)**

- The patient was asymptomatic before 1 year.
- After that she developed complaint of scaly rashes on her elbow which gradually progressed all over hand.
- There is severe itching in the rashes along with burning sensation and scaling after scratching.

- On enquiry she told that lesions have no relation to seasonal variation and remained constant for whole year.
- She took allopathic medication for about 10 months which provided symptomatic relief till treatment continues, on discontinuity of the treatment again the symptoms aggravated.

#### **Purva Vyadhivritta (History of past illness)**

- Patient has no significant past history of any chronic illness, burn, trauma or Koebner's phenomenon.

#### **Kulaja Vritta (Family history)**

- Same complaint has occurred in patient's sisters since 2 months (April 2017).

#### **Vaiyaktikavritta (Personal history)**

- Appetite was normal
- Predominant rasa in *Ahara* was *Madhura*
- Sleep was disturbed due to itching
- Habit of incomplete evacuation of bowel

#### **On Examination:**

- General condition was fair and afebrile.
- Vitals were normal
- Cardiovascular system, respiratory system and per abdomen examinations had shown no deformity.
- *Prakriti* (constitution) was *Vatapittaja*.

#### **Ashtavidha Pariksha:**

- *Nadi* (pulse) was *Vatadhikatriidoshaja*.
- Frequency and colour of *Mutra* (urine) was normal with no *Daha*
- *Mala* (stool) was constipated and feeling of incomplete evacuation was there.
- *Jihva* was *Sama* (coated), suggesting improper digestion.
- *Shabda* (Speech) was clear and fluent
- *Sparsha* (touch) was *Ruksha*.

- *Drika* (eyes) were normal
- *Aakriti* (appearance) was lean.

#### **Integumentary system Examination:**

- Lesions were scaly papules, present on left hand. They were symmetrical and well demarcated.
- Auspitz sign – present
- Candle grease sign – Present
- Diagnosis- On the basis of clinical history and examination the condition was diagnosed as Plaque Psoriasis.

#### **CASE REPORT – 3 (Fig.-3)**

#### **Basic information of the patient**

- Age-19 years
- Religion – Hindu
- Socioeconomic status- Middle class
- She is a student.

#### **Pradhana Vedana (Chief complaints)**

- Erythematous rashes on B/L hands, legs, abdomen and lower back since 1 year
- Itching in rashes, with scaling on scratching

#### **Vartamana Vyadhivritta (History of present illness)**

- The patient was asymptomatic before 1 year.
- After that he developed complaint of scaly rashes on her lower abdomen and lower back which gradually progressed and involved his both forelegs and B/L hands.
- There is severe itching in the rashes along with burning sensation, and scaling after scratching.
- On enquiry he told that lesions have no relation to seasonal variation and remained constant for whole year.
- She took allopathic medication for about 6 months which provided symptomatic relief till treatment continues, on discontinuity of

the treatment again the symptoms aggravated.

#### **Purva Vyadhivritta (History of past illness)**

- Patient has no significant past history of any chronic illness, burn, trauma or Koebner's phenomenon.

#### **Kulaja Vritta (Family history) - NAD**

#### **Vaiyaktikavritta (Personal history)**

- Appetite was normal
- Predominant rasa in *Ahara* was *Madhura*
- Sleep was disturbed due to itching
- Habit of incomplete evacuation of bowel.

#### **On Examination:**

- General condition was fair and afebrile.
- Vitals were normal
- Cardiovascular system, respiratory system and per abdomen examinations had shown no deformity.
- *Prakriti* (constitution) was *Vatapittaja*.

#### **Treatment protocol**

#### **CASE REPORT – 1**

Total duration- 4 months

Treatment Procedure	Days required	Drug used	Remarks
<i>Deepana- PachanaChikitsa</i>	14 days	Shivaksharpachan churna 4gm twice daily	Enhance the enzyme activities
<i>Snehana</i> (Oleation)	45 days	Panchatikta Ghrita 10ml-22 days than 5ml-next 23 days for oral consumption	It mitigates <i>Vata-Pitta</i> , improves digestive fire, luster, skin softness
<i>Swedana</i> (Sudation)	45 days	Luke warm water bath	Smoothen skin

#### **Ashtavidha Pariksha:**

- *Nadi* (pulse) was *Vatadhikatriidoshaja*.
- Frequency and colour of *Mutra* (urine) was normal with no *Daha*
- *Mala* (stool) was constipated and feeling of incomplete evacuation was there.
- *Jihva* was *Sama* (coated), suggesting improper digestion.
- *Shabda* (Speech) was clear and fluent
- *Sparsha* (touch) was *Ruksha*.
- *Drik* (eyes) were normal
- *Aakriti* (appearance) was lean.

#### **Integumentary system Examination:**

- Lesions were scaly papules, present on left hand. They were symmetrical and well demarcated.
- Auspitz sign – present
- Candle grease sign – Present
- Diagnosis- On the basis of clinical history and examination the condition was diagnosed as Plaque Psoriasis.

<i>Shamana chikitsa</i>	3 months	Arogyavardhini vati-125mg BD, Gandhaka Rasayana-250mg BD, Tala Sindura-60mg BD, Chandrakala Rasa-60mg BD, Guduchi Churna-3gm BD, Panchtikta Ghrita Guggulu-2 Tab. TDS	
External application	3 months	Nimba Taila, Karanj Taila	Soothing the skin, reduces dryness
<i>Rasayana Chikitsa</i>	28 days	Guduchi Satva-125mg BD, Amalaki Rasayan-500mg BD, Triphala Churna-3gm OD	Healing and rejuvenation of immune system.

**CASE REPORT – 2**

Total duration- 6 months

Treatment Procedure	Days required	Drug used	Remarks
<i>Deepana- pachana Chikitsa</i>	14 days	Shivaksharpachan churna 4gm twice daily	Enhance the enzyme activities
<i>Snehana</i> (Oleation)	4 months	Panchtikta Ghrita 10ml-2 months than 5ml-next 2 months for oral consumption	It mitigates <i>Vata-Pitta</i> , improves digestive fire, luster, skin softness
<i>Swedana</i> (Sudation)	4 months	Luke warm water bath	Smoothen skin

<i>Shamana chikitsa</i>	5 months	Arogyavardhini vati-125mg BD, Gandhaka Rasayana-250mg BD, Tala Sindura-125mg BD, Chandrakala Rasa-125mg BD, Guduchi Churna-3gm BD, Panchtikta Ghrita Guggulu-2 Tab. TDS	
External application	5 months	Nimba Tail, Karanj Tail	Soothing the skin, reduces dryness
<i>Rasayana Chikitsa</i>	28 days	Guduchi Satva-125mg BD, Amalaki Rasayan-500mg BD, Triphala Churna-3gm OD	Healing and rejuvenation of immune system.

**CASE REPORT – 3**

Total duration- 9 months

Treatment Procedure	Days required	Drug used	Remarks
<i>Deepana - pachana Chikitsa</i>	14 days	Shivaksharpachan churna 4gm twice daily	Enhance the enzyme activities
<i>Snehana</i> (Oleation)	6 months	Panchatikta Ghrita 10ml-4 months than 5ml-next 2 months for oral consumption	It mitigates <i>Vata-Pitta</i> , improves digestive fire, luster, skin softness
<i>Swedana</i> (Sudation)	6 months	Luke warm water bath	Smoothen skin

<i>Shamana chikitsa</i>	8 months	Arogyavardhini vati-125mg BD, Gandhaka Rasayana-250mg BD, Tala Sindura-60mg BD, Chandrakala Rasa-60mg BD, Guduchi Churna-3gm BD, Panchtikta Ghrita Guggulu-2 Tab. TDS	
External application	8 months	Nimba Tail, Karanja Tail	Soothing the skin, reduces dryness
Rasayana Chikitsa	28 days	Guduchi Satva-60mg BD, Amalaki Rasayan-250mg BD, Triphala Churna-3gm OD	Healing and rejuvenation of immune system.



Fig. – 1



Fig. – 2



Fig. – 3

## RESULT AND DISCUSSION

Psoriasis is a chronic inflammatory disorder, characterized by the formation of well-defined raised erythematous plaques, with silvery white scales; that preferentially localize on the extensor surfaces. It is correlated with certain diseases in Ayurveda. The actual cause of Psoriasis is not yet known till present day, but the Ayurveda, the science of life, has detail description of aetiological factors of *Kustha* which resembled to the Psoriasis and its related conditions. In *Ayurvedic* perspective, psoriasis could be caused due to the dysfunction and malfunction of intrinsic factors, i.e. *Vata* and *Kapha* doshas. Accumulation of toxins or *Ama*, could also lead to this disease condition. Excessive intake of yogurt, seafood, salty foods, black gram and sour food can cause an aggravation in the disease condition. Psoriasis may also develop due to excess stress.

Here a two cases of Plaque Psoriasis and one case of Guttate Psoriasis has been discussed, which is best correlated to *Ekakushtha*, which one of the *KshudraKustha* and have *Vata-Kapha* dominance and even involvement of *Tridosha* can be evident from its signs and symptoms. The vitiated *Doshas* reaches to *Shithila* in *dushya* like *Twaka* etc. and results into *Sthana samshraya avastha* and then produces symptoms of *Ekakushtha*. *Acharya Charaka* says that in *Kushtha*, *Shithilta* is in whole *Twaka* while the lesions are produced at the site of lodgement of *Doshas*. In this disease onset of *Matsyashakalopamam* (silvery scales) in *Mahavastu* (large surface area) along with *Aswedana* (loss of perspiration) is seen.

## CONCLUSION

This case report showed that combined *Ayurvedic* regimen is potent and effective

in treatment of Psoriasis. No adverse effect and aggravation of the symptoms was found in the patient during and after the treatment.

In nutshell, all *Ayurvedic* therapies were found to be significantly effective and clinically safe as no events of adverse drug reaction were reported during treatment period. It is concluded that *Shamanaa* therapy followed by external application along with *Pathya Ahara* is found as a suitable treatment plan to manage Psoriasis within 1 year duration. In *Shamanaa Chikitsa*, some *Medhya Aushadha* (brain tonics) should be prescribed along with other drugs to alleviate the disease triggering factors such as emotional stress. Along with drug interventions, emphasis must be given to promote a healthier diet and lifestyle plans among affected individuals.

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