# AYURVEDIC MANAGEMENT OF KITIBHA KUSHTA W.R.T. GUTTATE PSORIASIS – A CASE STUDY

#### Dr. Sneha Dhakite\*

Assistant Professor, Department of Kayachikitsa, Dr.Vandanatai Jagannathrao Dhone Gramin Ayurved Mahavidyalaya, Patur, Akola, Maharashtra, India

PhD Scholar, Department of Kayachikitsa, Mahatma Gandhi Ayurved College, Hospital & Research Centre, Constituent College of Datta Meghe Institute of Higher Education & Research (DMIHER), Sawangi, Wardha, Maharashtra, India

#### **Abstract**

We are living in 21<sup>st</sup> century. External beauty matters much more than any other thing. Skin diseases are the most common disorder which occurs in all age group due to not following proper lifestyle. It is one of the alarming issues having tremendous social importance. Kushta is among the oldest known disorder to mankind. The skin disease in Ayurveda has been classified under the heading Kushta which is further classified as Maha Kushta and Kshudra Kushta. Kitibha Kushta is one of the types of Kshudra Kushta. Ayurveda provides long lasting and permanent treatment of skin disease which minimises the risk of recurrence of disease. Aim and Objectives: The present study was performed to see the effect of combination of Ayurvedic modalities on *Kitibha Kushta*. **Material and Method:** A 26-year-old male patient having brown colour rough to touch hard and dry in nature lesions on lower limb with itching from last 2 years has been successfully treated with Shodhan treatment (Vaman) along with Shaman treatment. The disease was treated with combination of Shodhan and Shaman chikitsa. Shaman chikitsa included internal medicines like Gandhak rasayan, Panchatikta ghrita after Shodhan chikitsa for 15 days and for local application Vetapalai oil and Atrisor cream was given for 1 month. **Observation**: The PASI score was 5.4 before treatment which came 0 after the treatment. **Result:** In the present case study after giving the *Shodhan* and Shaman chikitsa the patient got relived from the symptoms. Conclusion: By using the Ayurvedic modalities we can find much better result in case of *Kushta*.

**Keywords:** *Kitibha*, Guttate Psoriasis, *Shodhan chikitsa*, *Shaman chikitsa*.



#### Introduction

Psoriasis is a dreadful and long-standing disease. The utmost human beings are affected with the prevalence rate of 2-3% seen in northern European Caucasian. Guttate Psoriasis is a chief clinical form and more often found in adolescent and young adults.<sup>1</sup> Guttate Psoriasis is also called as Eruptive Psoriasis. The Guttate Psoriasis accounts for about 2% of patients suffering from Psoriasis. The commonly used treatment for Guttate Psoriasis is topical tar, topical steroids, anthralin and UVB photo therapy.<sup>2</sup> Skin disease mentioned in the modern medicine can be compared with *Kushta roga*. It is said that it is one among the chronic disease which is much difficult to cure and treat. Behavioural, immunological factors, genetic, dietic and environmental factors said to play a major role in pathogenesis of *Kushta* and Psoriasis. *Kushta* is among the oldest known disorder to mankind.<sup>3</sup> The skin diseases in Ayurveda has been broadly classified under the heading *Kushta* and Acharya Charaka has told it as one of the *Ashtamahagada* that is difficult to treat.<sup>4</sup> *Kushta* is further classified as *Kshudra Kushta* and *Maha Kushta* in which all kinds of skin disease mentioned in ayurveda are involved.<sup>5</sup> The *Kitibha Kushta* is the type of *Kshudra Kushta* having symptoms like *khara sparsha*, *shyava*, *ruksha pidika*, *kandu* and *kina*.<sup>6</sup> The manifestation of *Kitibha Kushta* is due to seven factors including four dhatu (*mamsa*, *rakta*, *lasika*, *twaka*) and three *doshas* (*vata*, *pitta*, *kapha*).<sup>7</sup>

#### Nidan: 8

		Nidan		
1	Kulaj Nidan	8	8	Virudha Ahara
2	Poorvajanma Kritya	Ç	9	Mithyaahara
3	Janmottara Kalaja	-	10	Viharaja Nidan
4	Aharaj Nidan		11	Kayika
5	Atisevana & Atyasahana		12	Vachika
6	Adhyashana & Ajirnashana		13	Mansika
7	Visha Mahana			



# Case study:

A 36-year-old male patient approached with chief complaints of brownish black colour rough to touch hard and dry in nature lesions with itching for 2 years.

#### **Brief history of patient**

A 36year old male patient who was apparently well before 2 years. But suddenly started complaining about the skin lesions over the lower limb which were rough and hard to touch and dry in nature associated with itching. He was a worker belonging to lower socioeconomic class, Hindu family background. He went to local allopathic physician before a year but got only symptomatic and temporarily relief. So, later he consulted to Dr. Vandanatai Jagannathrao Dhone Gramin Ayurved Mahavidyalaya, Patur, Akola for taking Ayurvedic treatment. After the further examination of the patient *Shodhan* and *Shaman chikitsa* was advised.

No family history was found, on examination it was found that the lesions were hard rough in nature with dark brown colour. The patient had the habit of taking very spicy and oily food, intake of nonvegetarian food with consumption of alcohol sometimes.

#### **Personal History**

Ahar	Mixed (non -vegetarian)
Nidra	7-8 hours but disturbed
Vyasana	Alcohol (occasionally)
Occupation	Worker

#### Ashtavidha Pariksha

Nadi: 80/min	Shabda: spastha
Mala: saam	Sparsha: khara
Mutra: samyaka	Druks: prakruta
Jivha: saam	Akruti: Madhyama



**Skin examination:** 

# 1. Inspection

• Size shape: well, defined, scaly, erythematous small round lesions on lower limb

• Colour: dark brown

• Lesion: small brown

# 2. Palpation

• Moisture: dry ness

• Temperature: warm to touch

• Texture: rough and hard

# **Laboratory Investigation:**

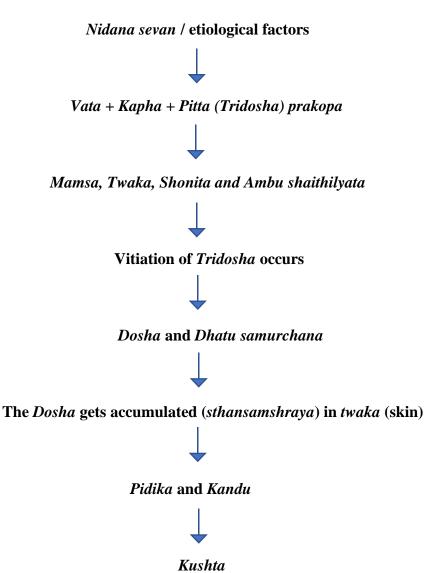
Blood routine: Normal

Other systemic examination was normal.

# Samprapti Ghatak

Samprapti Ghatak
Dosha: Tridosha
Dushya: Twaka, Shonita, Mamsa, Lasika
Ama (undigested food particle): Jatharagnijanya
Agni (Digestive fire): Jatharagni
• Srotas(inner transport system of the body): Rasavaha, Raktavaha.
Strotodushtiprakara: Sanga
• Roga marga (pathway of disease): Bahya
Udhbhavasthana (location): Amashaya
Vyaktasthana: Twaka
Rogaswabhava: Chirkari
Sadhyasadhyaata: Sadhya

# Samprapti:



#### **Material and Method:**

#### Given treatment plan:

Shodhan chikitsa (Vaman) along with that Shaman chikitsa was given. In the Shodhan chikitsa Vaman therapy was planned followed by samsarjan krama of 5 days, sequencing of Purva karma, Pradhan karma and Paschayat karma (**Table no.1**). After the Shodhan chikitsa, Shaman chikitsa was started using Antarparimarjan chikitsa including panchatikta ghrita, gandhak rasayan (after interval of 7 days) for 15 days and bahirparmarjan chikitsa using Atrisor cream and Vetapalai oil for 1 month (**Table no.2**)

#### **Observation:**

Within the area, the severity is evaluated by the three clinical signs. The measurement of severity parameters is on the scale of 0-4 that is from none to maximum. The human body is bifurcated in four sections. They are

- Head (H) (10% of the persons skin)
- Arm (A) (20%)
- Trunk (T) (30%)
- Legs (L) (40%)

Each of these areas are scored by itself, and from the combined score of all four gives PSAI score. From each section, the percent of the area of the skin involved is evaluated and afterwards transformed in the grade from 0-6 (**Table no. 3-5**).

#### Result:

Kitibha Kushta is a twacha vikara mentioned in Kushta roga as one of the types of Kshudra Kushta. It is having symptoms like shyava, kina khara sparsha, parushya. After the completion of the Shodhan chikitsa (Vaman therapy) patient got relief. Then after that from the Shaman chikitsa patient got symptomatically improved.

#### **Discussion**:

The word *Kushta* means a pathological situation which vanishes the skin. It is one among the five *gyanendriyas* which is accountable for *sparsh* or the touch sensation. The skin is the biggest organ of the body having the surface area of 1.8 m² and measuring about 18% of the body weight. About 10-15% of the physician works in the field of dermatology. Guttate Psoriasis is mostly related with a streptococcal throat infection or a rise in anti-streptococcal serum titre. The acharya *Charaka* has told that the skin has the perpetual relationship with *mann* (mind). Prevention and cure are the major aim of Ayurveda. The *doshas* which are subsided by the *Shodhan chikitsa* never reoccurs hence to destroy the disorder from root level is the main feature of *panchkarma* therapy. Ayurveda gives a practical alternative to contemporary Psoriasis medication. The *panchkarma* suggest that it can be act from deep within the body and expel the harmful accumulates in the affected part and clears the body channels. It is said that the *tridosha* individually are responsible for *Kushta*. The *kapha dosha* disturbances are responsible for immunological variations that indulges in the development of Psoriasis. The *pitta dosha* is responsible for spreading of hyper proliferation of the keratinocytes in the epidermis. A growth in the epidermal cell turnover rate is because of vitiated *vata* 



dosha. Ayurveda focuses on three-fold curative management of disorder containing Shodhan (purification), Shaman (pacification), and nidan parivarjan (avoiding the causative factors). For almost every disease. In this case study Vaman was choosed for the Shodhan chikitsa. Vaman have the efficacy of removing the vata and kapha dosha which are the main doshas involved in the skin disorder such as Kitibha Kushta. After this therapy sansarjan krama was planned for 5 days to increase the sharir bala and agni. After this Shaman

therapy was started in which *Panchatikta ghrita*, *Gandhak rasayan* for internal use and Atrisor cream and

Action of Gandhak rasayan:

Vetapalai oil for local application.

The *Gandhak rasayan* have the *Kushtaghna, kandughna, dahapra. Shaman, rakta shodhak, vranaropaka, twachya, krumighna* mode of action. It is mainly used in *Kushta roga*. It has the properties like antimicrobial, antibacterial and antiviral. The purified sulphur is used in all types of *twacha roga*. It is helpful in reducing the itching. It is mainly used externally and internally for skin disorder. The oil is helpful in reducing the itching and increases the complexion along with improvement in digestion.<sup>12</sup>

Action of Panchatikta ghrita:

The *ghrita* is used for *Shodhan* treatment in *purvakarma* as internal *snehana* and in *Shaman chikitsa* for oral intake. The ingredients of the *Panchatikta ghrita* have *tikta* (Bitter), *madhura* (sweet), *ruksha* (rough), *katu* (pungent), *kashaya* (astringent), *sheeta* (cold) and *snigdha* (oily) properties along with *ushna virya* that helps to pacify the *tridosha* involved in the disorder. The pacification of *vata dosha* is responsible to subside the symptoms such as *khara sparsh*, *kina*, *parusha*, as well as the *shyava varna* in the *Kitibha Kushta*. The pacification of the *pitta dosha* helps in reducing the *daha* and *srava*. And lastly the *kapha dosha* pacification is responsible for decreasing *kandu*, *vruttan vruddhimanthi*.<sup>13</sup>

Action of abhyanga with Marichyadi tail:

For performing the abhyanga procedure *Marichyadi tail* was used. The *dravya* which are present in the oil have the properties such as *katu*, *kasahaya* and *tikta rasa* which are responsible for the *Shaman* of *vata* and *kapha dosha*. The *snigdha guna* of the *tail* is responsible for reducing the *rukhsta*, *khartva* and *parushta*. The *tail* has antifungal, anti-inflammatory, antiseptic hence this oil is effectively used in disorder like *Kitibha kushta*.<sup>14</sup>



**Action of Vetapalai oil** 

Vetapalai oil is the *twachya* oil and is having qualities such as *kushtaghna*, antibacterial, antifungal, antioxidant, antimicrobial, anti-inflammatory. It is used in skin disorders, itching, pruritus, Psoriasis. It is responsible for improving the complexion, relieving pain and is capable of wound healing.

**Action of Atrisor cream:** 

The cream is used as the topical application. It is an herbal anti-Psoriatic cream which is responsible for reliving the symptoms like itching, dryness. The cream is indicated in all types of *twacha roga*. The cream helps in bringing back the normal texture of the skin.

Mode of Action of Vaman Therapy:

As per the Ayurveda, the process of *Vaman karma* starts with *deepan pachana* which are responsible for reducing the *aamdosha* and increasing the *agni*. *Kitibha Kushta* in which the *kapha* is predominant and hence *Vaman* is performed.

The *vama dravyas* have the properties like *tikshna*, *sukhshma*, *vyavayi*, *ushna* and *vikasi* which gets absorbed and comes to heart due to the *virya* it has. The drugs act on the sites where the vitiated *doshas* are found. The drugs are responsible for liquefaction of the complex material. The liquefied molecules reach to *amashaya*. The *udan vayu* gets stimulated and the molecules march in upward direction to remove the vitiated *doshas*.

By the process of *Vaman* therapy the vitiated *doshas* gets pacified and symptoms gets subsided. 15

**Conclusion:** 

Kitabh Kushta which is one of the types of Kshudra Kushta can be correlated with the Guttate Psoriasis in modern medicine. From the above case study, it can be concluded that from ayurvedic treatment that contains Shodhan and Shaman chikitsa Psoriasis can be treated successfully where the chances of reverences are very less. Panchkarma treatment can expel the harmful accumulates in the affected part and clears the body channels. This is a very effective way of treating Psoriasis.



#### SJIF Rating: 8.176 ISSN: 2582-3930

# Shodhan chikitsa:

# Table no. 1:

The table showing Shodhana chikitsa by following Purva Karma, Pradhan karma, Paschyat karma.

Procedure		Medicine	Dose	Duration	Route
Purvakarma	Deepan	Trikatu	3 gm BD before	For 3 days	Oral
For Vaman	Pachana	Churna	meal with	,	
			lukewarm water		
	Snehapana	Panchatikta ghrita	Starting from the	For 7 days	Oral with empty
			30 ml – 1 <sup>st</sup> Day		stomach at
			60 ml – 2 <sup>nd</sup> Day		morning
			90 ml – 3 <sup>rd</sup> Day		
			120ml – 4 <sup>th</sup> Day		
			160ml – 5 <sup>th</sup> Day		
			180ml – 6 <sup>th</sup> Day		
			220ml – 7 <sup>th</sup> Day		
	Sarvanga	Marichyadi	Quantity	For 1 days	External
	Abhyanga	Tail	sufficient	(After	application
				completion	
	F/B			of 7 days	
		Dashmool	Quantity	of	
	Nadi	Decoction	sufficient	Snehapan)	
	Swedana				
Pradhan	Vaman	Madanphal	Antarnakha-	For 1 day	Oral
karma		Yoga	mushti Matra	(on the 9 <sup>th</sup>	
	(F/B			At	
				morning	
				time after	

© 2023, IJSREM DOI: 10.55041/IJSREM26168 www.ijsrem.com Page 9



# nternational Journal of Scientific Research in Engineering and Management (IJSREM)

**Volume: 07 Issue: 10 | October - 2023 SJIF Rating: 8.176**ISSN: 2582-3930

	Sansarjan		Snehana		
	karma for 5		and		
	days)		Swedana		
Paschyat	Dhoompan	Aguru Stick	5 min	By	each
karma				Nostril	
	Sansarjana		5 Days	Oral	
	Karma		after		
			Vaman		

# Shaman Aushadi and Bahirparimarjana Chikitsa:

# • Table no. 2:

Table showing medication given after samsarjana karma

Medicine	Dose	Anupan	Route	Duration
Panchatikta	10 ml (morning	Luke warm	Oral	15 Days
Ghrita	at 7 AM with	water		
	empty stomach)			
Gandhak	2 BD	With water	Oral	15 Days with 7
rasayan				Days of interval
Atrisor cream	Quantity	-	External	1 month
	sufficient		application	
	Twice a Day			
Vetapalai oil	Quantity	-	External	1 month
	sufficient		application	
	Twice a Day			

# Table no. 3:

Table Showing the area involved in involvement with gradation:

No involved area	Grade:0
<10% of involved area	Grade:1
10-29% of involved area	Grade:2
30-49% of involved area	Grade:3
50-69% of involved area	Grade:4
70-89% of involved area	Grade:5
90-100% of involved area	Grade:6

ISSN: 2582-3930

#### Table no. 4:

Table showing assessment criteria:

Leg (L)				
	Before	First follow up	Second follow	
	Treatment		up	
Skin area involved Grade - A	3	2	1	
Erythema (Redness)	3	1	0	
In duration (Thickness)	3	1	0	
Desquamation (scaling) E, I, D, B	3	1	0	
Total PASI Score	5.4	1.8	0	

# Table no. 5:

Table showing overall result:

	Before	First follow up	Second follow up
	Treatment		
Area involved	30-49%	10-29%	<10%
Erythema (Redness)	Moderate	Mild	Absent
In duration (Thickness)	Moderate	Mild	Absent
Desquamation (scaling)	Moderate	Mild	Absent

© 2023, IJSREM DOI: 10.55041/IJSREM26168 Page 11 www.ijsrem.com



#### Picture no. 1



#### **References:**

- Asumalahti, K., Ameen, M., Suomela, S., Hagforsen, E., Michaelsson, G., Evans, J., Munro, M., Veal, C., Allen, M., Leman, J. and Burden, A.D., 2003. Genetic analysis of PSORS1 distinguishes Guttate Psoriasis and palmoplantar pustulosis. Journal of investigative dermatology, 120(4), pp.627-632.
- 2. <a href="https://www.healthengine.com.all/info/Psoriasis">https://www.healthengine.com.all/info/Psoriasis</a>
- 3. Singh, S. and Rai, P.B.N., 2015. Concept of Dermatological Disorders in Ayurveda. medicine, 4, p.5.
- 4. Shukla and Ravi Dutt Tripathi, Agnivesh, Charak samhita, Chakrapani Commentary, IndriyasthanChapter 9, shloka 8, Varanasi:Chowkhamba Sanskrit Pratishthan 2009.
- 5. Vidyadhar, S., Dutt, T. R. 2019. Agnivesha, Charak-Samhita, Nidansthan 5/4. Delhi, Chaukambha Sanskrit Pratisthan. Pg.514.
- 6. Venkatesh, P. and Belavadi, S.N., 2018. MANAGEMENT OF KITIBHA KUSHTA (PSORIASIS): A CASE STUDY. International Journal of Ayurveda and Pharma Research.

# International Journal of Scientific Research in Engineering and Management (IJSREM)



Volume: 07 Issue: 10 | October - 2023

**SJIF Rating: 8.176** ISSN: 2582-3930

- 7. Asthana Alok Kumar, Asthana Monika and Sahu Renu 2019. "Prevention and cure of Kushta roga through ayurveda", International Journal of Development Research, 09, (04), 27160-27164.
- 8. Ling, A.L.M., Yasir, S.M., Matanjun, P. and Bakar, M.F.A., International Journal of Pharmaceutical and Phytopharmacological Research (eIJPPR).
- 9. Satyapal, S., Tripathi, J.S. and Rai, N.P., 2015. Preventive measures for dermatological disorders: An Ayurvedic perspective. World J Pharm Sci, 3(3), pp.678-681.
- 10. Satyapal, D.S., 2010. Clinical study of Kitibha Kushta (Psoriasis) and its management with SamShodhan (Virechan) and SamShaman therapy. MD (Ay.) thesis. Banaras Hindu University: Varanasi.
- 11. Mitra, A., Radhakrishnan, P., Das, D., Deep, V.C., Jameela, S., Khanduri, S., Rana, R., Maheswar, T., Gupta, B., Hazara10, J. and Padhi11, M.M., 2019. Clinical Study to Evaluate the Efficacy and Safety of Comprehensive Ayurvedic Therapy in Plaque Psoriasis: An Open-label Multicentric Prospective Study.
- 12. Saokar, R.M., Sarashetti, R.S., Kanthi, V., Savkar, M. and Nagthan, C.V., 2013. Screening of antibacterial and antifungal activity of Gandhaka Rasayana—an ayurvedic formulation. International Journal of Recent Trends in Science and Technology, 8(2), pp.134-137.
- 13. Gunarathna, E.P. and Kulathunge, R.D.H., 2018. Effect of Panchatikta Ghrita and Gandhakadi Taila in the Management of Kitibha (Psoriasis)-A Case study. International Journal of AYUSH Case Reports, 2(3), pp.9-17.
- 14. Bramhashankar Mishra, Bhaishajya Ratnavali, Vol-III edition 1st, 54/301- 302, New Delhi: Chaukhamba Sanskrit Bhavan; 2006. p.92.
- 15. Mukherjee, A., Khuje, S.M.R., Dwivedi, O.P. and Jain, J., 2019. Potency of Nasya Karma. Journal of Drug Delivery and Therapeutics, 9(6-s), pp.261-266.