

AYURVEDIC TREATMENT IN PSORIASIS : A CASE STUDY

Henry¹, Shital S. M. Prasad², Aravind Prasad

¹PG Scholar 1st year, Department of Swasthavritta & Yoga, Shri Krishna AYUSH University, Kurukshetra, Haryana.

²Associate Professor, Department of Swasthavritta & Yoga, Shri Krishna AYUSH University, Kurukshetra, Haryana.

Assistant Professor, Department of Research & Innovation, Shri Krishna Ayush University, Kurukshetra (Haryana)

Corresponding Author-

Dr. Rama Chandra

Associate Professor, Department of Swasthavritta & Yoga, Shri Krishna AYUSH University, Kurukshetra, Haryana.

Abstract

INTRODUCTION: Psoriasis is a skin condition characterized by the rapid inflammatory growth of diseased skin cells caused by the immune system's reaction to unknown stimuli. Many herbs have been shown to be effective in treating psoriasis in Ayurveda; nevertheless, due to the disease's complex etiology, an approach to treatment with no recurrence is necessary. In Ayurveda, *Kustha* is the term used for skin diseases.

PATIENT INFORMATION: A 68-year-old male patient with psoriasis since last 20 years on his scalp, back, limbs, palm and soles was reported. Auspitz sign was found positive and signs of bed nail psoriasis was also found.

THERAPEUTIC INTERVENTION: *Vamana* (emesis therapy) and *Virechana* (purgation therapy) were done before starting medicines. *Kaishor guggulu*, *Makoy ark*, *Saunf ark*,

Manjistha ark, *Mahamanjisthadi kwath* and *Giloya ghan vati* were given as *Shamana aushad* (palliative medicine) and *Rasayana* (rejuvenating). *Pathya – Apathya* (wholesome and unwholesome diet) and *Nidana parivarjan* (avoidance of etiological factors) was strictly followed by patient. When doshas are high, elimination is the only way. Just as, the crops in the field don't grow well unless the excessive water drain out. Purification therapy followed by Palliative medicine and Rejuvenation therapy was given.

RESULTS: After following the treatment plan for 3 months, the patient showed fully recovery. Psoriasis area and severity index score reduced from 71.4 to 0 which is a marked significant difference. The treatment resulted in a significant and rapid healing from a persistent psoriasis patient. There is no recurrence even after discontinuing treatment for last 1 year which makes it worth reporting.

CONCLUSION: The Ayurvedic procedures and interventions demonstrated significant effects in psoriasis, with no reported adverse events.

Keywords: Psoriasis, Auspitz sign, Case Study, *Kustha*.

Introduction

Psoriasis is a long-term inflammatory immune-mediated disease that mostly affects the joints and skin. In India, the prevalence ranges from 0.44 to 2.8%. Psoriasis affects men twice as frequently as it does women.^[1] Psoriasis affects several parts of the body including the scalp, trunk, back, limbs, palms, and soles. Among the clinical patterns observed in psoriasis cases are plaque psoriasis (*Psoriasis vulgaris*), inverse psoriasis, guttate psoriasis, pustular psoriasis and erythrodermic psoriasis.^[2] Psoriasis's chronic nature, recurrent pattern and visibility have asignificant negative influence on a patient's social and psychological wellbeing. Skin conditions are all grouped together under the Ayurvedic name *Kushtha*.

The majority of the formulations mentioned in *Kushtha Chikitsa* have been effectively used by doctors to treat various skin conditions. When doshas are high, elimination is the only way. Just as, the crops in the field don't grow well unless the excessive water drain out. However *Shodhana* (purification therapy) followed by *Shamana* (palliative medicine) and *Rasayana chikitsa* (rejuvenating therapy) has been chosen due to the complicated pathophysiology and chronic relapsing character of psoriasis. In management of psoriasis, recurrence of disease is major challenge. In this study, there is no recurrence even after discontinuing treatment which makes it worth reporting.

Patient Information

A 68-years old male has been diagnosed as psoriasis and was treated by a consulting dermatologist where from patient was taking allopathic treatment since last many years with regular follow - ups. Symptoms somehow came in control but every year in winter season symptoms gets provoked. Patient has history of alcohol and smoking since past many years. On 20 June 2023 patient has severe signs and symptoms of Psoriasis all over the body associated with severe itching. However, due to a recurring pattern caused by the unknown aggravating factors, the patient discontinued allopathic treatment and consulted for Ayurvedic treatment. The patient presented with Psoriasis all over the body and signs of bed nail Psoriasis were also found associated with severe Itching on scalp, back, limbs, hands and soles. At the time of case presentation, the Auspitz Sign was found positive. In this case, the involvement of *pitta* and *kapha dosha* ascertained by observing the clinical presentation such as itching, redness and the nature of skin lesions. Vitiating *pitta* and *kapha dosha* found involved in the pathological progress.

Clinical Findings : Lesion type - scaly raised patches, Colour - Red

Pulse - *Pitta – kaphaj* (pitta and kapha dosha)

Stool - *Pichchhil* (slimy)

Urine - *Prakrit* (normal)

Tongue - *Shweta- Sama* i.e coated

Sound - *Prakrit* (normal)

Touch - *Ushna* (warm)

Vision - *Prakrit* (normal)

Aakriti - *Madhyam* (medium)

Before Treatment - Raised, red patches of skin that are covered by silvery - white scales on limbs, trunk. (Fig-1.1 , 1.2, 1.3, 1.4)

Figure-1.1 Patches on Arm, 1.2 Patches on Back, 1.3 Patches on Hand, 1.4 Patches on leg



Table [1]: PASI score = 71.4 Before Treatment

Sign	HEAD	ARMS	TRUNK	LEGS
Erythema(Redness)	4	4	4	4
Induration(Thickness)	3	4	4	4
Desquamation(Scaling)	4	4	4	4

In this scoring system, four sites, including the head (h), upper limb/arms (u), trunk (t) and lower limbs/legs (l), are separately scored on three parameters: erythema (E), induration (I) and scaling (D). And each one of these parameters is graded on a severity scale of 0 – 4 (where 0 stands for nil; 1 is mild; 2 is moderate; 3 is severe; and 4 is considered very severe).

The final formula for PASI score is: $PASI = 0.1 (E_h + I_h + D_h) A_h + 0.2 (E_u + I_u + D_u) A_u + 0.3 (E_t + I_t + D_t) A_t + 0.4 (E_l + I_l + D_l) A_l$.

Timeline

On 20 June 2023 patient came for ayurvedic treatment. He was known case of psoriasis since last 20 years. Table[2]

Date	Events
20/06/2023	First consultation.
28/07/2023	Second visit. Scaling of the skin was reduced to a great extent.
19/08/2023	Significant improvement in all signs and symptoms
06/09/2023	Final visit. Recovered completely. No itching, No Dryness, No Discoloration. The patient was instructed to report if any of the symptoms relapsed.

Diagnostic Assessment

All routine blood tests were found to be within a normal range. So, based on clinical presentation, distribution of lesions and positive Auspitz sign the case diagnosed was confirmed as Psoriasis.

Ayurvedic Intervention

On 20/06/23 emesis and purgation were planned. *Deepan pachan* (appetizer and digestive) with *Chitrakaadi Vati* and *Dadimastak Churan* for 5 days. *Abhyantara Snehana* (Internal) with *Panchtikta Ghrita* for 7 days in increasing order from 30 ml to 180 ml followed by *Mridu Snehana* and *Swedana* for 2 days. Emesis was performed with *Vaman yoga*. Medicine mix with

paste of purified *Randia dumetorum* LAM, *Acorus calamus* L., rock salt, honey, etc. Total 7 *vega* were found on administration of *Vamana Yoga*, it was *Pittant Vamana* (lastly pitta came), patient felt lightness in the body. Purgation with *Trivrut Churna*. Total 18 *Vega* were found on administration of *Virechana Yoga*, it was *Kaphant Virechana* (lastly kapha came) and patient felt lightness in the body.

Table [3] - List of Internal medication with Timeline

Sr No.	Name of medicine	Dosage and frequency	Duration	Remarks
1.	<i>Kaishor guggulu</i>	Two tablets twice a day after food.	28/07/23 to 06/09/23	Considerable changes were noted.
2.	<i>Makoy ark</i> <i>Saunf ark</i> <i>Manjistha ark</i>	10 ml each twice a day before food with equal amount of water.	28/07/23 to 06/09/23	Given continuous for this period of time.
3.	<i>Mahamanjisthadi kwath</i>	50 ml twice a day after food.	28/07/23 to 06/09/23	For action on <i>rakta</i> dhatu.
4.	<i>Giloya ghan vati</i>	Two tablets twice a day after food with lukewarm water.	28/07/23 to 06/09/23	For rejuvenation purpose.

Pathya (wholesome diet) - *Tikt rasa* (bitter food), Barley, Green gram, Bitter vegetables, *Laghu Aahar* (light food) and Fasting.

Apathya (unwholesome diet) - Salt, Sour food items, Curd, Milk and Sweet products, Meat and Fish, Overeating etc.

Treatment assessment parameters

The treatment outcomes were assessed as improvement in Psoriasis (*Eka Kustha*) symptoms grading and PASI score.

Follow - Up and Outcomes

After treatment for 3 months, Psoriasis area and severity index (PASI) score reduced from 71.4 to 0 which is a marked significant difference and patient got significant decrease in symptoms grading.

After Treatment – No patches (Fig -2.1, 2.2, 2.3)

Figure 2.1 No patch on ventral aspect of hand, 2.2 No patch on leg, 2.3 No patch on dorsal aspect of hand



Table [4]: Improvement in PASI Score = 0 after treatment

Sign	HEAD	ARMS	TRUNK	LEGS
Erythema(Redness)	0	0	0	0
Induration(Thickness)	0	0	0	0
Desquamation(Scaling)	0	0	0	0

Discussion

In this case *pitta*, *kapha* and *rakta* were the *Doshas* and *Rasadhatu*, *Raktadhatu* and *Mamsadhatu* were the *Dushyas*. The treatment protocol was adopted for *Samprapti bhedana* (to counteract the pathophysiology) where *Pitta-kaphahara*, *Kushthaghna aushadhiyogas* (curing skin diseases medicines) along with rejuvenation were preferred. The intake of *Viruddha aahara* (the unwholesome dietary practices) is one of the important causative factors in the etiopathogenesis of skin diseases. The patient should avoid *Viruddha aahara* for better treatment response and speedy recovery. Emesis therapy and purgation therapy were done for evacuation of vitiated *kapha* and *Pitta* respectively and to remove toxins from the body. *Panchatikta Ghrita* has Anti-inflammatory property which helps provide relief from itching and irritation caused due to psoriasis. It's *Pitta* balancing and *Snigdha* (oily) properties help to control dryness which is also beneficial in psoriasis. Emesis therapy is the prime treatment told for all the *Kaphaja* disorders. Purgation therapy is indicated in *Kushtha*, as it pacifies vitiated *Pitta Dosha* and also help in eliminating vitiated *Kapha Dosha*, also corrects *Dushit Rakta Dhatu*. *Guggulu* is well known for its *yogavahi* (synergism) property in Ayurveda. *Guggulu* can act as a drug carrier by entrapping active pharmaceutical ingredients and mediate their sustained release action.^[3] *Gugulipid* found as effective as tetracycline in the treatment of nodulocystic acne proving the anti-infective and antibacterial properties of *Guggulu*.^[4] *Kaishor guggulu* is a polyherbal preparation indicated in *Vatarakta* and well known for its *Kantikara* (restores skin's natural radiance and suppleness) property in Ayurveda.^[5] It reduces inflammation and pain associated with *Vatarakta* by purifying blood. Furthermore, *K. guggulu* acts as an antiallergic, antibacterial and blood purifying agent.^[6] According to Ayurveda, *Makoy ark (Solanum nigrum)* is recommended as a rejuvenating measure, which possesses anti-allergic properties. Besides this, the antimicrobial properties and

antioxidants present in *Makoy* make it an excellent remedy for treating various kinds of skin allergies. It initiates the regeneration of new skin cells that helps in treating the underlying cause of various skin allergies by replacing the old, dead, and infected cells.^[7] *Saunf ark (Foeniculum vulgare)* is appetizer, digestive and blood cleanser. *Manjistha ark (Rubia cordifolia)* is beneficial against chronic skin diseases. *Manjistha* is known for its blood purifying, pacifying pitta and kapha doshas, wound healing and *Kushthaghna* (curing skin diseases) properties. *Manjishthadi Kwath* has contents like *Manjistha (Rubia cordifolia)*, *Guduchi (Tinospora cordifolia)*, *Bakuchi (Psoralea corylifolia)* etc., which helps in detoxification and purification of the blood. Thus, through its *Rakta Prasadan* (blood cleansing) property it helps in reliving psoriasis. *Guduchi* is an important drug of Ayurvedic System of Medicine and mentioned in various classical texts for the treatment of diseases such as jaundice, fever, diabetes and skin disease etc.^[8] *Guduchi's* role as an adaptogen, a potent herb that increases the body's resistance to stress. Thus *giloy ghan vati* is anti-inflammatory and act as rejuvenation therapy. However, these combination of therapy and medicines reverses the condition of patient.

Conclusion

In skin disorders, purification therapy for elimination of vitiated *doshas* and rejuvenation therapy for retaining the normalcy of *doshas* and *dhatu*s is necessary. Where there's chronicity in disease, purification therapy is must because due to previous medicines which were taken by patient, somewhat produces resistant or *Avarana* (obstruction in body channels). For removal of that *shodhana* (Purification therapy) is necessary. Thus, it can be concluded Emesis therapy and purgative therapy then followed by palliative medicines and rejuvenation therapy is highly effective in treating psoriasis with no recurrence.

Conflicts of interest

There are no conflicts of interest.

References -

1. Thappa DM, Munisamy M. Research on psoriasis in India: where do we stand? *Indian J Med Res.* 2017;146(2):147–149.
2. Rendon A, Schäkel K. Psoriasis pathogenesis and treatment. *Int J Mol Sci.* 2019;20:1475. doi: 10.3390/ijms20061475.
3. Sarup P, Bala S, Kamboj S. Pharmacology and phytochemistry of oleo-gum resin of *Commiphora wightii* (guggulu) *Sci Tech Rep.* 2015:138039. doi: 10.1155/2015/138039.
4. Thappa DM, Dogra J. Nodulocystic acne: oral guggulipid versus tetracycline. *1994;21(10):729–731.* doi: 10.1111/j.13468138.1994.tb03277.x.
5. Shrivastava S, Sharangadhar samhita of acharya sharangadhar, Madhyam khand, 7/70-81, poorva khand, 1/37, Varanasi: Chaukhambha Orientalia; 2016, p. 204
6. Bharati PL, Agrawal P, Prakash O. A case study on the management of dry gangrene by kaishore guggulu, sanjivani vati and dashanga lepa. *Ayu.* 2019;40(1):48–52. doi: 10.4103/ayu.ayu_244_18.
7. Makoy – Uses, Benefits and Medicinal Properties. Available at <https://www.iafaforallergy.com/herbs-a-to-z/makoy-solanum-nigrum/> Last accessed on 18/08/24 at 8:33pm
8. Sinha Kirti, Mishra N P, Singh J, Khanuja S P S. *Tinospora cordifolia* (Guduchi): A Review. *Indian J Traditional Knowledge.* July 2004; 3(3).