INTRODUCTION

Skin is one among the five Gnanendriya adhisthana as described in Ayurvedic texts, which is responsible for ‘Sparsha Gyanam’ or touch sensation; therefore it plays a great role in physical and mental well being of any individual. The unbroken skin is the nature’s dressing over the body. Psoriasis is a lifelong autoimmune disorder characterised by itchy white or red coloured scaly patches. A chronic disease affecting about 2-3% of worldwide population. A non epidemic infection which include multiple systems. The prone areas are scalp, forearm, shins & navel. In Ayurveda, psoriasis can be correlated with Ekakushta due to similarity of symptoms. The basic principles of ayurvedic treatment are unique like nidanaparivarjana, shodhana, shamana and rasayana. Shodhana therapy is adopted for various chronic, auto-immune, hormonal, degenerative disorders etc, where other treatment modalities have no satisfactory answer. Nidana parivarjana, shamana & rasayana are equally beneficial in managing this condition.

Case history

A 49 year old male, N/K/C/O DM and HTN approached SJIIM hospital with C/O elevated silvery scaly lesions, associated with severe itching, burning sensation predominant over scalp, lower abdomen, hip and extensor part of the limbs since 15 days.

Patient had previous H/O blackish, itchy, marginally elevated lesion, over B/L lower limbs above the ankle joint since 20 years. The condition was said to be progressive in nature. For these complaints patient underwent different modalities of treatment with no satisfactory relief. So he approached SJIIM for further management.

Family history: His father and younger brother had same lesions in B/L lower limbs above ankle joints.

Local examination

Blackish coloured, elevated, dry, scaly lesions of size 2x3cm seen in extensor part of B/L upper limbs, thigh, ankle joint, lowback and scalp.

Special tests

1. Auspitz’s sign - positive.
2. Candle grease test - positive

Personal History

Diet: Non vegetarian, Madhura – snigdha - Abhishyandi ahara sevana.

Appetite: Normal

Sleep: Disturbed sleep

Micturation: 5-6 times a day

Bowel: Regular (once a day)

Habits: Nil
Samprapti Ghataika

Dosha: Pitta pradhana tridoshaja,
Dushya: Rasa, Rakta, lasika, ambu, ojas.
Agni: Jataragni, Dhatwagni
Ama: Jataragnijanya, Dhatwagnijanya
Srotas: Rasa, Rakta, ashihavha.
Srothodushthapakara: Athipravruti, vimargagamana of dhatu carried by vata.
Uddbhavasthana: Amapakwashaya
Vyaktasthana: Shaka
Sadyaa- sadyataa: Chirakari

Treatment Protocol adopted
- Deepana, Pachana.
- Shodhana: Virechana.
- Shamanachikitsa.
- Rasayana chikitsa

Observation criteria (Gradings)

Subjective criteria

Showing grading’s of Matsyashakala.

1. Non scaling - 0
2. Mild scaling from all lesions - 1
3. Moderate scaling from all lesions - 2
4. Severe scaling from all lesions - 3

Showing grading’s of Aswedana.

1. Normal - 0
2. Mild swedana - 1
3. Mild sweating on exercise - 2
4. No sweating after exercise - 3

Showing grading of Kandu

1. No Kandu - 0
2. Kandu present not disturbing routine activities - 1
3. Kandu disturbing patient attention - 2
4. Intolerable Kandu disturbing patient - 3

Showing grading of color

1. Normal - 0
2. Near to normal which took like normal to distant observe - 1

Table 1 Showing the details of treatment protocol adopted

<table>
<thead>
<tr>
<th>Sl no.</th>
<th>Date</th>
<th>Treatment</th>
<th>Duration</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>10/10/2018</td>
<td>Deepana - pachana with Chitrakadi vati [6],</td>
<td>3 days</td>
<td>Agni deepi, samyak amapachana</td>
</tr>
<tr>
<td>02</td>
<td>13/10/2018</td>
<td>Shodhanangapachana with Mahathiktakagritha [7],</td>
<td>4 days</td>
<td>Adasthatsnehadarshana, snigdhaverchas, vathanulomana, agnideepana</td>
</tr>
<tr>
<td>03</td>
<td>17/10/2018</td>
<td>Sarvanga abyanga with Yashimadhatu taila</td>
<td>3 days</td>
<td>Samyak sweda lakshanas was observed.</td>
</tr>
<tr>
<td>04</td>
<td>20/10/2018</td>
<td>Virechana karma with Nimbamur Restr hinda evanda taila</td>
<td>1 day</td>
<td>Had Madhya shuddhi -14 vegas.</td>
</tr>
<tr>
<td>05</td>
<td>20/10/18 to 24/10/18</td>
<td>Sumvarjuna karma.</td>
<td>5 days</td>
<td></td>
</tr>
<tr>
<td>06</td>
<td>25/10/18 to 25/12/18</td>
<td>Shamanoushadhi.</td>
<td>2 months</td>
<td></td>
</tr>
<tr>
<td>07</td>
<td>20/10/18 to 25/12/18</td>
<td>BahyaChikitsa.</td>
<td>2 months.</td>
<td>Manjishhadi kepam.</td>
</tr>
<tr>
<td>08</td>
<td>25/11/18</td>
<td>RasayanaChikitsa.</td>
<td>1 months.</td>
<td>Amrutahallatakavaleha 5gms bd.</td>
</tr>
</tbody>
</table>

OBSERVATION AND RESULTS

Sl.No | Signs/Symptoms | Before treatment | After treatment |
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>01</td>
<td>Kandu</td>
<td>03</td>
<td>00</td>
</tr>
<tr>
<td>02</td>
<td>Aswedana</td>
<td>02</td>
<td>00</td>
</tr>
<tr>
<td>03</td>
<td>Twak Varma</td>
<td>03</td>
<td>02</td>
</tr>
<tr>
<td>04</td>
<td>Matsyashakala</td>
<td>03</td>
<td>00</td>
</tr>
</tbody>
</table>

Elevated Lesions Present Absent

*Table 1*

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**DISCUSSION**

Among *shodhana* therapies described in ayurveda, *virechana* is most commonly used procedure & specially for vitiated *pitta & rakta* which have an inevitable role in the pathogenesis of *Kushta*. Along with this, it is also useful in the disorders in which *pitta* is associated with *Kapha* or *Dushita Kapha* in *Pitta shhana*.[8]

Deepana-paachana: It is very essential process before any purification, for digestion of ama. It also helps for the digestion of higher doses of sneha administered later.

Shodhananga snehapana by “Mahatiktakagritha” which is prepared with drugs having the properties like deepana, paachana, srotoshodhaka, raktaprasadana, raktashodhaka, kandugna, kushtagna, varnya, mechanism of actions. As per the classical reference it has special indication in *Kushtavikaras*.

*Nimbamrutadi Eranda taila* is used for *virechana karma*, which is processed with drugs like *Nimba*, *Amruta*, *Patola*, *Vidanga*, *Suradara*, *Nagara*, *Nisha*....etc which are having the properties of *raktashodhana* and *kushtagna*. According to Vagbhata it is specially indicated in *Twakvikaras*.

Shamanoushadhi’s which are prepared by drugs having the property of raktashodhaka, kushthagna....etc are given.

*RasayanaChikita* with amrutaballataka avaleha was administered, as it is kaphavathara & specially mentioned in twak vikara.

**CONCLUSION**

*Ekakushta* is a non-infectious chronic relapsing inflammatory skin disease having unknown aetiology which is difficult to manage in modern medical science with PUVA & corticosteroids with serious side effects like hepatic & neurotoxicity, bone marrow depletion etc.

But ayurveda provides long lasting results and a better life to patients with its treatment modalities of *nidana parivarjana*, *shodhana*, *shamanoushadi’s* & *rasayana chikita*. In this case study we found significant results in signs and symptoms with *virechana* followed by *shamanoushadhi* and *rasayana karma*. By this we conclude that various *panchakarma* procedures especially *virechana* and internal medicines can be best option for management of this condition.

**Bibliography**

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7. Agnivesh, Chikitsasthana 7:148 Hindi commentary by Acharya Vidyadhar Shukla and Prof Ravi DuttTripathi, Charakasamhita Dehli, Chaukamba Sanskrit Prakashan; 2013.p199

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