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Managing Psoriasis Through Classical Ayurvedic Principal Of Kushtha: A Case Study

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Abstract:-

Psoriasis is a complex, chronic, multifactorial, inflammatory disease which involves hyper proliferation of the keratinocytes in the epidermis, with an increase in the epidermal cell turnover rate. At present time, Psoriasis is one of the most common human skin diseases. In ayurvedic it classified under kusta a group of skin disease with doshic imbalance of vata and kapha though pitta and rakta are involved. **Case presentation**: A 48-years old male, diagnosed with a case of psoriasis, came to our hospital with complaints of itching in the whole body, scaling, with red patches all over the body for 2 years. He was tired of trying all kinds of medicine and depressed. After a thorough examination, an ayurvedic treatment plan was designed in the form of Panchakarma and oral medicines. Outcomes: significant improvements were noticed in all symptoms; the duration of treatment was 3 months. And then follow-up was done after every month.

Keywords: Psoriasis, Kustha, Ayurvedic management, Shodhan.

INTRODUCTION

Psoriasis, affecting 2%–3% of the global population, is recognized by the World Health Organization as a significant chronic autoimmune skin disorder and a major public health concern worldwide. Beyond its physical effects, the visible symptoms can significantly impact mental well-being and overall quality of life. Vata, pitta, kapha along with impaired tvak, rakta, mamsa and ambu together constitute seven essential entities which play role in pathogenesis of kushtha. Psoriasis in ayurvedic known as kusta (KITIBHA). "Kushnati iti Kustha"

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means that which makes once skin look disgraceful or ugly or which destroys twak and other dhatus is called Kustha.²

Psoriasis is a long-term inflammatory condition that not only affects the skin and nails but also increases the risk of other health problems (non-communicable diseases). Stress, injury, infections, and certain medicines can trigger or worsen psoriasis. It often starts in early adulthood and can appear in different forms, such as plaque, guttate, flexural, pustular, and erythrodermic types. The condition causes the skin to grow too quickly and become inflamed. This happens because of problems in the immune system, where different immune cells like T cells, dendritic cells, neutrophils, and macrophages interact and release chemicals (cytokines) that cause inflammation. In Ayurveda, psoriasis is sometimes linked to a group of skin disorders called Kushtha Vikaras. However, this comparison may be too simple, as psoriasis has a complex cause involving genes, immunity, and the environment. Therefore, treating psoriasis requires a more detailed and holistic approach, rather than relying on just one type of Ayurvedic treatment^{3,4}

Aharaja Nidana - Taking excessive amount or constant usage of certain foods like new formed rice, heavily digestible foods, citrus fruits, buffalo milk, curd, fish, jaggery, unrefined sesame oil, Horse gram, black gram, field beans, food articles (sweets) prepared by sugars, and carbohydrate rich foods. Improper food habits play an important role in the etiology of Kustha.⁵

Viharajanidana- Day sleep, sexual intercourse, suppressing the natural urge of the body, excessive exposure to sunrays, excessive worry/grief, excessive physical exercise⁶

Poorva Janmakrata: According to Sushruta, if a person had Kushtha in a previous life, they may be reborn with the same condition in their current life⁷

Case Study

Information of patient

Age - 48 male

- Religion- Hindu
- Socio economic status- Middle

Chief complaints

Itchy skin lesion covered with silvery scales

scattered over whole body – 12 months

History of Present Illness:

The patient was relatively healthy before 3 years, he noticed itching and red patches which started from the scalp. Gradually itching occurred to the whole body, and patches widened. So he came to our hospital for further treatment.

Family History: Negative for HTN, DM and any skin diseases.

Personal history:

Diet- Mixed: usually skip lunch / breakfast items intake curd + fish daily prefer Amla, Lavan, Madhura ahar prefer curd, pickles, fried item dishes, bakery items

Bowel- Frequency-2/day

evacuation- Complete

Stool consistency- Well formed

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Appetite- Moderate

Micturition-Regular

Sleep- adequate;

Day sleep- present

Allergy- Not yet detected

Addiction- Nil

Exercise-Poor

General examination

The vital signs were all within normal limits: body temperature at 98.0 °F, pulse rate at 82 beats per minute, and blood pressure measuring 120/82 mmHg.

Systemic examination

In systemic examination, respiratory and cardiovascular system found normal. The patient was restless due to itching and burning sensation over psoriatic lesions.

Asthavidha pariksha

Nadi (pulse) – Pittakaphaja; Mala (stool) – Sandra-picchila, bowel habit was regular; Mutra (urine) – Prakrita; Jivha (tongue) – Shveta-picchila, Sama (coated); Shabda – Prakrita; Sparsha (touch) – Ushna; Drika (vision) – Prakrita; Aakriti – Madhyam (medium built).

Samprapti

SampraptiNidana Sevana

Tridosha Prakopa

1

Twak, Rakta, Mamsa and Ambu Shaithilyata

 \downarrow

Further Vitiation of Doshas occurs

 \downarrow

Doshas gets accumulated at the place of DhatuShaithilyata

 \downarrow

Dosha and DushyaSamurchhana

Kustha⁸

Line of treatment.

1 st -6 th day	Shodhnarth Snehpan with Panchatikta Ghrita (started from 40 ml, 15 ml	
	increased every day till 6th day)	

7 th day	Abhyang with Jatyadi oil, Sarvang Bashpa Svedan with Nimb Patra.
8 th day	Vaman Karma with Madanphal Churna- 4 gm.
9 th -15 th	Samsarjan Karma.

Vaman process:-

Chatan taken -8:00 am with $\frac{1}{4}$ glass of Madhanphal phant

 $B.P-114/74\ mmHg$

list of internal and external medications with dose, adjuvant, and duration.

SR. NO	TIME	DRVYA		VEGA	LAKSHAN
1	8:15 AM	MADANPHAL 1/4 +	YASTI ¾(3 Glass)	HEEN	Udgar, Tikthasyata, alpa
					shirogaorov.
2	8:20 AM	MADANPHAL 1/4 +	YASTI ¾(2 Glass)	HEEN	Udgar
3	8:25 AM	MADANPHAL 1/4 +	YASTI ¾(4Glass)	MADHYAM	Udargaurov aksisrrav.
4	8:30 AM	MADANPHAL 1/4 +	YASTI ¾(3Glass)	MADHYAM	Madhruasyata, udarlaguta shirogaurov.
5	8:35 AM	MADANPHAL 1/4 +	YASTI ¾(3 Glass)	UTTAM	Udarlaguta, Shirolaguta
					Madhruasyata.
6	8:40 AM	MADANPHAL 1/4 +	YASTI ¾(4 Glass)	MADHYAM	Alpa udrgaurav.
7	8:50 AM	MADANPHAL 1/4 +	YASTI ¾(3 Glass)	UTTAM	Madhruasyata.
8	9:00 AM	MADANPHAL 1/4 +	YASTI ¾(3 Glass)	UTTAM	Udarlaguta.
Sr. No.	Formul	ation	Dose, Adjuvant, fr	requency, and t	ime Duration
1	Mahatiktaka ghrita 200ml		Local application All over the body		dy 3 months
2	Kaishor guggulu (Tablet)		2 tablets (with lukewarm water), twice daily after food.		iter), 3 months
3	Ampachak (Tablet)		2 tablets, containing 250 mg (with water), twice daily after having food.		•
4	Kanduguna (Tablet)		2 tablets, containing 250 mg (with lukewarm water), twice daily in between food.		•
5	Chandrakala (Tablet)		2 tablets, containing 250 mg (with lukewarm water), twice daily in between food.		
6	Usher varnya	+ Manspachak + + shoutik bhasma +	1/2 spoon churi lukewarm water, t		

	praval pisti + Rasmanikya (mix it)		
7	Vasaguduchigan (Tablet)	2 tablet, containing 250 mg (with water), twice daily after having food.	3 months
8	Pso ll	2 tablet, containing 250 mg (with lukewarm water), twice daily in between food.	3 months

RESULTS:- After Vaman & one months of Shaman chikitsa, patient was reviewed. He got excellent recovery. He was advised to continue with same treatment.



Discussion:-

Sodhana plays a crucial role in the treatment of Kushta, as applying external therapies without first purifying the body through internal cleansing can worsen the skin condition. Psoriasisisa chronic inflammator skin disease with a strong genetic predisposition and autoimmune pathogenic traits. The dermatologic manifestations of psoriasis are varied. Plaque psoriasis or psoriasis vulgaris is the most prevalent one.

Psoriasis, known as Kushtha in Ayurveda, is mainly caused by poor diet and lifestyle, which disturb digestion and aggravate the three doshas—Vata, Pitta, and Kapha. This leads to toxin buildup in the skin. In this case, since scaling was the main symptom, Vata and Kapha were primarily involved. According to Ayurvedic treatment guidelines, herbs with bitter, pungent, and astringent tastes are used to balance the doshas and purify the blood. The patient was advised to avoid heavy, sour foods, milk, and curd. Because the disease was chronic and the patient had taken medications before that may have caused resistance or blockages (Avarana), detoxification (Shodhan) was necessary. Treatments like Niruh Basti and Erand Bhrishta Haritaki were given. It's important to understand that Shodhan isn't limited to Panchakarma; it also includes medicines that eliminate doshas through the most appropriate route.

Chandra kala - Chandrakala Rasa is one of the important kharaliya rasayana. The primary ingredients—Kajjali, Tamra, Abhrak Bhasma, and predominantly sheeta virya herbal dravyas—help Chandrakala Rasa to pacify aggravated pitta and vata doshas, especially pitta, which is disturbed by ushna and tikshna qualities. As per ingredients, it has rasayana, yovahi, deepan, pachan, raktaspittahara, mutrala, dahashamana, raktavardhak properties.

Kandugna – Chandana, Nalada, Krithamala, Nakthamala, Nimba, Kutja, Sarshapa, Madhuka, Haaridra, Mustha these are the in kandugna. Kandu is one of the lakshana of kapha, pitta and even in vata because of its ruksha and khara guna. And drugs have Anti- bacterial, Anti septic, Anti- fungal and haemostatic actions.

Kaishor Guggulu - Haritaki (Terminalia chebula), Vibhitaki (Terminalia bellirica), Amlaki (Emblica officinalis), Marich (Piper nigrum), Pippali (Piper longum), Shunthi (Zingiber officinalis), Vidang (Embelia ribes), Nishoth (Operculina turpethu), Danti (Baliopermum montanum), Guduchi (Tinospora cordifolia) Prominent herbs in this formulation are Guduchi, Guggulu, Triphala Trikatu, and which are having the unique actions on various health conditions. is a Guduchi Liver and Blood -Rejuvenating herb, that focuses on Also, helps Pittashudhhi Trikatu to reduce. aids as a Laxative Shvayathu and Shoola. Triphala works by clearing bodily toxins, ultimately eliminating waste from degenerative areas, which supports enhanced healing and rejuvenation throughout the body.

Panctiktaghrita Guggulu- Panchatikta ghrita guggul can be said as all contents are having tikta rasa, laghu & ruksh guna, soit acts as anti- itching property, kled & vikrut meda upashoshan, vranashodhak. It mainly acts on body wastes(kleda), fat(meda), lasika (plasma), rakta (blood), pitta, swed (sweat) & shleshma Nimb (Azadirecta indica) has chemical composition of Nimbin, Nimbidin possesses significant dose dependant anti-inflammatory activity & significant anti-ulcer effect.

Conclusion:

In the present case, the treatment protocol was formulated based on the Ayurvedic principle of samprapti, which emphasizes understanding the pathogenesis and progression of disease. The patient exhibited a notably faster and more substantial response to Ayurvedic treatment compared to previous allopathic interventions, with no recurrence reported following the completion of active therapy. This highlights the significance of Pathyapathya—a wholesome diet and lifestyle—as a vital component in managing chronic autoimmune conditions. The integrated use of both internal and external Ayurvedic therapies effectively addressed the complex pathophysiology of psoriasis, demonstrating that a comprehensive, multimodal Ayurvedic approach can lead to rapid and sustained recovery in chronic cases.

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