



## A CASE STUDY: EFFECT OF PRACCHANA KARMA ON VITILIGO WSR SHWITRA

**Dr. Shalini Jhanwar**

MD Kayachikitsa (medicine), Bhu, Varanasi Assistant Professor, Deptt Of Kayachikitsa, Shivalik Ayurvedic Medical College, Azamgarh

### ABSTRACT

Vitiligo is an acquired skin disease that is characterized by circumscribed, depigmented macules and patches. This skin ailment is considered as one of the kind of *kushta* 'Shwitra' because of similarity in symptoms. It affects the person's quality of life without any organic damage due to social stigma. Besides in biomedicine, no satisfactory management of Vitiligo is present. In this case study, subject was 30 years old female and had multiple discrete hypopigmented macules and patches approximately all over the body since one and half year. *Pracchana karma induced raktamokshana* measures were used every 7<sup>th</sup> day for 6 months. The assessment criteria were size and colour of the patches. The effect of *Pracchana karma induced raktamokshana* measures is to enhance pure blood circulation at hypopigmented area. At end of 6 months pigmentation enhanced at hypopigmented area.

**KEYWORDS :** Shwitra, Pracchana karma, raktamokshana

### INTRODUCTION

*Pracchana karma induced raktamokshana* measures for *Shwitra* has been mentioned in classical *Ayurvedic* literature, but it is not widely practiced in all over India. Search of bibliographic databases like Pubmed did not fetch any research papers dealing with clinical trials or case studies on this subject.

Vitiligo is a primary pigmentary skin disorder that is characterized by depigmented macules and patches. There is a gradual loss of pigment melanin from the skin layers which results in white patches. These patches look ugly, especially in persons with dark complexion. Vitiligo affects approximately 1% of the world population<sup>1</sup>, may be associated with other autoimmune diseases such as Diabetic mellitus, Addison disease etc. It occurred in every age group and no gender predilection. It is a multi-factorial polygenic disorder which is related to both genetic and non genetic factors but exact aetiology is not known. The condition does not cause any organic harm. But it is not just a dermatological disorder but affects the entire identity of a person. It is creator of huge mental tension and social stigma.

Biomedicine uses Psoralen + Ultra Violet-A exposure therapy and corticosteroids in the treatment of vitiligo<sup>2</sup>. But they are associated with side effects like burning, itching, nausea, tanning, eye damage, skin aging and skin cancer etc. Besides satisfactory treatment still not present in biomedicine. There is a continuous search for better remedies to combat vitiligo. Hence, there is a need to research an effective formulation with less adverse effects.

All skin disorders in *Ayurveda* come under the name of *Kushtha*. In *Ayurveda*, *Shwitra* is considered as one of the varieties of *Kushtha* that can be correlated with Vitiligo based on the similarities of signs and symptoms. It is caused due to vitiation of *Tridosha* and *Dhatu*s like *Rasa* (lymph), *Rakta* (blood), *Mamsa* (muscles) and *Meda* (fats). *Mithya Ahar* (vitiating, incompatible diet), *Vihar* (life style), disobey of *Guru* and parents order, misbehaviour, misconduct and *Poorvajanmakrita Karma* are main cause of *shwitra*.<sup>3,4</sup> Continue practice of cause leads to vitiation of *doshas*. If resides in *Rakta Dhatu* then its appears red if resides in *Mansa Dhatu* then its color become *Tamra* and if resides in *Meda Dhatu* then it appears white.<sup>5</sup> Depending upon chronicity and involvement of deeper tissue (*Dhatu*s), disease becomes difficult to treat.

*Ayurveda* has ample of formulations and therapy that can be used safely in *Shwitra*. *Pracchana karma induced raktamokshana* are procedures of *Raktamokshana* which indicated in *Kushtha*.<sup>6</sup> By this procedure the blood oozes out from the local area. Thus the vitiated *doshas* are expelled out and pure blood circulation is enhanced and skin pigmentation become normal.

Therefore, this paper is being written to document the typical

method and outcomes of *pracchana karma induced raktamokshana* in management of *shwitra*.

The study design is retrospective but all relevant tests and observations were rigorously documented.

### CASE REPORT

A 30 year old female came with complaining multipule discrete hypopigmented patches over skin of right & left hand, Rt & Lt leg, abdomen and back irregular sized. On taking history she explained that Initially lesions were small discrete, later progressively increased in their size and the spread gradually over duration of one and half years with negative family history and no associated complaints like itching or burning sensation and also no history of environment, occupation and related to contact with harmful dietary substance.

### EXAMINATION

Hypopigmented patches were of different sizes with dispersed area on whole body.

**Table No: 1**

	At 1st time	After 6 month
<b>General condition</b>	Fair	Fair
<b>Vitals (BP, PR, RR)</b>	Normal	Normal
<b>Appetite</b>	Normal	Normal
<b>Bowel evacuation</b>	Normal	Normal
<b>Bladder evacuation</b>	Normal	Normal
<b>Sleep</b>	Normal	Normal
<b>Systemic examination of CNS, CVS, RS, PA</b>	NAD	NAD

### EVALUATION OF SYMPTOMS

Evaluation of lesion are based on the following criteria-

**Table No: 2**

Before treatment	After treatment
1. Size (Diameter) of mostly patches was around 2-3 inch.	1. most of patches was disappear, only few patches was remaining(size 1-2 cm)
2.Number of patches- many large patches on bilateral upper and lower limb with back & abdomen	2.Number of patches- only few patch on upper limb
3. Colour of patches- depigmented area exceeds the pigmented area.	3. Colour of patches- mostly normal pigmented, some area has only specks of depigmentation.

**Before treatment: Fig. 1****During treatment: Fig. 2****After treatment: Fig. 3**

## MATERIAL & METHODS

### Procedure:

- Identification of hypopigmented area
- Clean with spirit swab then dry

**-Pracchana:** By using a sterilized scalpel with sharp edged small sized blade, multiple superficial small sized (1-2cm x 0.2cm) cut are made over the hypopigmented area. The incisions are made in a specific manner as mentioned below.

- Incisions are made from bottom to upward direction
- Incisions are to be made parallel to each other
- Incisions shouldn't be too superficial or too deep.
- Incisions over the prick should be avoided.
- In one sitting of this procedure, approximately 1/5 part of the whole area of the disease should be covered.

-induced raktamokshana : When free flow of blood started, then the blood was sucked with the help of vacuum creating instrument. 1-2 ml blood sucked at each *pracchan* area.

-Then clean blood and apply *arjun churna*.

### Duration

Every 7<sup>th</sup> day

## SUMMARY

*Pracchana karma* was started at hypopigmented area. Its effect is not yet fully understood. By this procedure vitiated blood expelled out, so *raktadosha* samyta occurred and normalcy developed. At the procedure site local circulation enhanced. It may stimulate melanocyte to the increase in their numbers and migratory capacity. After 15 days, some scatter dark pigmented macules developed at hypopigmented area. Then no of dark pigmented macules gradually increased & merged and became patchy of dark colour. Now this change occurred as improvement in punch grafting. At last hypopigmented areas became normal within 6 months. *Arjun churna* was used for coagulation of blood at *pracchana* site after proper *raktamokshana*. During this procedure, haemoglobin level was properly maintained. In present day practice, *pracchana* therapy is found to be a safe, efficacious, and cost-effective method for management of Vitiligo. Compilation of case reports and clinical studies are needed to standardize the treatment protocol and define outcome measures. In this way, comprehensive treatment guidelines can be formulate

## CONCLUSION

*Pracchana therapy* was found effective in re-pigmenting of the hypopigmented maculae and patches. This therapy slow and gradually increase pigmentation. This case is being reported after a follow up of 1 year non-recurrence of Vitiligo and no side effect. The patient was on active treatment for a period of six months. Diet restrictions were followed for another year. This case study shows that a combination of *pracchan karma*, diet restrictions and life style modifications administered over a period of one year is effective in decreasing the hypopigmented maculae and patches as well as preventing recurrence on a long-term basis.

## REFERENCES

1. Neena khanna (2016.), illustrated synopsis of dermatology and sexually transmittes diseases, 5th edition, reed elsevier india pvt. Ltd. pp160
2. Neena khanna (2016.), illustrated synopsis of dermatology and sexually transmittes diseases, 5th edition, reed elsevier india pvt. Ltd. pp165
3. Pt. Kashi Nath Shastri & Dr Gorakha natha Chaturvedi (2011.), commentator Charak Samhita, hindi commentary, chikitsa sthan 7/4-8, chaukhambha bharati academy, Varanasi.
4. Pt. Kashi Nath Shastri & Dr Gorakha natha Chaturvedi (2011.), commentator Charak Samhita, hindi commentary, chikitsa sthan 7/177, chaukhambha bharati academy, Varanasi.
5. Pt. Kashi Nath Shastri & Dr Gorakha natha Chaturvedi (2011.), commentator Charak Samhita, hindi commentary, chikitsa sthan 7/174, chaukhambha bharati academy, Varanasi.
6. Pt. Kashi Nath Shastri & Dr Gorakha natha Chaturvedi (2011.), commentator Charak Samhita, hindi commentary, chikitsa sthan 25/59, chaukhambha bharati academy, Varanasi.