



AYURVEDIC MANAGEMENT OF ICTHYOSIS W.S.R. UTTAN VAATRAKTA

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ABSTRACT Ichthyosis is a relatively uncommon group of skin disorders characterized by presence of excessive amount of dry surface scales. The word itchy means- fish. It is the disorder of keratinisation cornification and is due to abnormal epidermal differentiation or metabolism. Ichthyosis affects people of all age groups and gender. Specific signs and symptoms of Ichthyosis depend on the particular for Common signs include dry scaly skin, redness or excessive skin shedding. Symptoms include itching, overheating and pain. Patient was treated with Ayurvedic management. According to Charak Basti is best treatment for vaatrakta in this case patient with uttan vaatrakta were treated with Bastikarma-Guduchyadi niruh kalbasti krama, followed by Panchatikta ksheerbasti along with deepan-pachan medicine. There was remarkable improvement in the patients after treatment He got significant relief from the signs & symptoms of Ichthyosis. This article presents a single case report in which Ichthyosis has been controlled by Ayurvedic means.

KEYWORDS : Uttan Vaatrakta, Guduchyadi Niruh Basti, Ksheerbasti, Ichthyosis

INTRODUCTION

Skin is one among the five Gnanendriya adhistana as described in Ayurvedic texts, which is responsible for „Sparsha Gyanam□ or touch sensation; therefore, it plays a great role in physical and mental wellbeing of any individual. The unbroken skin is the nature□□ dressing over the body. Ichthyosis vulgaris¹ is a genetic skin condition of autosomal dominant inheritance. The term “ichthyosis” implies a generalized scaly dermatosis, without the component of erythema. The ichthyoses are disorders of cornification and are classified as inherited or acquired.

Acquired ichthyosis² is a rare condition with onset in adulthood that is usually associated with underlying disease. It is clinically similar to ichthyosis vulgaris, a benign hereditary disorder that manifests in childhood Acquired ichthyosis may be associated with underlying malignancies, infectious, inflammatory, or metabolic disorders, or with medication.

Acquired ichthyosis is often seen in human immunodeficiency virus (HIV) infection, usually with a low CD4+ count Acquired ichthyosis may be seen with chronic metabolic disturbances (malnutrition, malabsorption, renal failure, hyperparathyroidism, hypopituitarism, hypothyroidism, and diabetes). Drug-induced acquired ichthyosis may be caused by cholesterol-lowering agents, isoniazid, acitretin, butyrophenones, dixyrazine, maprotiline, cimetidine, allopurinol, hydroxyurea, and clofazimine

Vatarakta, is a manifestation of Prakupita Vata and Rakta where the best depictions of Margavarana can be seen in the pathogenesis. Prakupita Vata is impeded by Prakupita Rakta in Vatarakta. As a result, Gati or Chala Guna of Vata Dosha get hampered. In Ayurveda, it is a Tridoshaja Vyadhi (But mainly Vata Pradhana) and Rakta is the main Dushya. There are two types of Vatarakta that is uttan Vatarakta and gambhir Vatarakta. Uttan Vatarakta produces symptoms like burning sensation, pain, blackish discolorations of skin, itching.

There is vitiation of Rakta in Uttan Vatarakta, which leads to Sthanika Pitta Dosha Vruddhi in Twacha, which leads to Lakshana in the manner of Daha. In case of Uttan Vatarakta, Kandu results due to action of both Vata and Rakta

As Basti karma is Ardchikitsa described by Charakacharya and is best Panchakarma procedure for treatment of Vaatrakta. Along with basti deepan-pachan, vatanulomaka ,raktshodhak chikitsa should be given. Still basti plays a vital role in the line of treatment, as it functions at a cellular(molecular)level and helps in the removal of toxins.

MATERIAL AND METHODS

Case Reports

A 60-year-old male patient, fruit seller by occupation visited the OPD of Kayachikitsa dept of

R. A. Podar Ayurvedic College Worli (Maharashtra) with presenting complaints as follows

Main complaints

- Small and flaky scales brown in colour on both the upper limb and lower limb.
- Dryness of skin
- Severe itching, warmth
- Tightening of skin
- Mental Irritation due to continuous itching

30 yr

Other complaints -No any associated complain seen.

History of present illness-

Patient was not having any complaints since childhood and then dryness of skin gradually occurs at the age of 30 yrs at lower limb and then developed all over body. Patient have been taking treatment since then as topical application and oral medication but did not get significant relief so far for proper treatment patient came to R A Podar hospital, Mumbai.

Family history- No any family illness of such history to any relatives.

Past history- No any past illness.

Addiction- Tobacco chewing (Irregular) since 20yrs

Surgical history- Hernia operative done 1989

General examination

| | |
|-------------------|--------------|
| General condition | Moderate |
| Blood pressure | 130/80mmhg |
| Pulse rate | 80/min |
| Respiratory rate | 20/min |
| Temperature | 97 F |
| Built | Medium built |
| Lymph node | Absent |
| Pallor | Present |
| Icterus | Absent |
| Clubbing | Absent |
| Cyanosis | Absent |

Astavidha pariksha

| | |
|---------|---------------------|
| Nadi | 80/min |
| Mutra | Burning micturition |
| Mala | Malbadhta |
| Jivha | Saam |
| Shabda | Prakruta |
| Sparsha | Ushna Sparsha |

| | |
|--------|----------|
| Druk | Prakrita |
| Akriti | Madhyama |

Systemic examination

| | |
|------------------------|-----------------------------------|
| Respiratory system | Air entry bilateral equal clear |
| Cardio Vascular system | S1 S2 normal No added sounds |
| Central Nervous System | Conscious, co-operative, oriented |

Lab Investigation

| | |
|-------------|--------------|
| HB | 13.9 |
| WBC | 7.27 |
| RBC | 4.79 |
| PLT | 168 |
| NEUT | 56.2 |
| LYMPH | 27.9 |
| MONO | 11.3 |
| EO | 4.0 |
| BASO | 0.6 |
| ESR | 20 |
| BSL | F=76 PP=95 |
| SGOT | 36 |
| SGPT | 14 |
| TOT.BIL | 0.7 |
| DIRECT .BIL | - |
| SR.CREAT | 0.9 |
| HBsAG | NON REACTIVE |
| HIV | NON REACTIVE |
| URINE | NIL |

Local Examination

Twak-sankocha (Stretching of skin)
 Twak-parushyam (Roughness of skin)
 Twak-Karshnaya (Blackening of skin)
 Swedo-Na-Va (very decreased sweating)

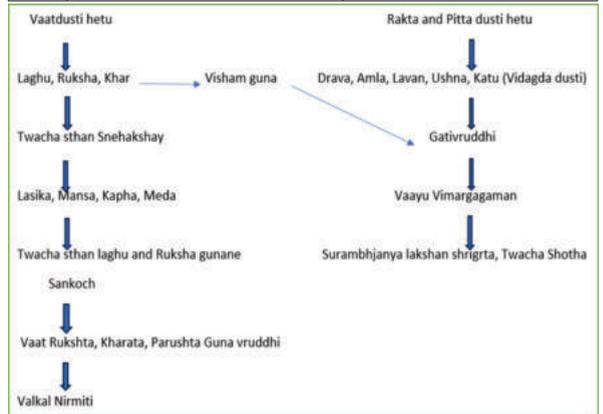
Criteria Of Assessment

| Sr. No | Symptoms | Grade 0 | Grade 1 | Grade 2 | Grade 3 | Grade 4 |
|--------|---------------|--------------------|--|--|--|--|
| 1. | Discoloration | Normal colouration | Near to normal which looks like normal to distant observer | Reddish coloration | Slight reddish black discoloration | Blackish discoloration |
| 2. | Itching | No itching | Occasionally feel itching | Mild itching (less than 5 times a day) | Moderate (itching more than 5 times a day) | Severe itching (continuous during day) |
| 3. | Scaling | No scaling | Scaling off after 15 days | Scaling off 7 days | Scaling off 3 days | Scaling off daily |

Hetu Sevan

| Sr.no. | Aetiological factor | |
|--------|--|---|
| 1 | Aaharaj nidan Ati Madhur ras Ati Amla ras Ati Lavana ras Ati katu ras Ati kashay ras Ati kshara sevan | Vitiation of kapha vitiation of rakta vitiation of rakta vitiation pitta vitiation of vaata vitiation of rakta and pitta |
| 2 | Gunaja nidan Snigdha Ushna Tikshna Ruksha | vitiation of rakta vitiation of rakta vitiation of rakta vitiation of vaat |
| 3 | Vidahi Annapana Mash (blackgram) ³ Nishpava (beans) Lentils, legumes Shaak (green vegetables) Ikshu (sugar cane) Mulak(raddish) | vitiation of rakta and pitta |

| | | |
|---|--|---------------------------------------|
| 4 | Vidahi pana Takra (buttermilk) Dadhi(curd) (vitiation of | vitiation of rakta and pitta |
| 5 | Faulty dietary habit Adhyashana (overeating) Ajeerna (eating during indigestion) ⁴ Virudhashana (incompatible food intake) Kalateet bhojana | vitiation of vata and rakta |
| 6 | Viharaaj nidan Diwaswapana (sleeping during day) Ratri jagaran(nocturnal awakening) Ativyayama (doing excessive work) | vitiation of rakta and pitta and vata |
| 7 | Vegavidharan | vitiation of vata |
| 8 | Veganighraha Mala Mutra | vitiation of vata |
| 9 | Mansika Chinta | vitiation of vata |



Samprapti⁵

Treatment

Shodhan treatment

According to Ayurveda line of treatment considers Shaman and shodhana therapy. On understanding proper Nidana, Lakshana and Samprapti of Vatarakta one can find and treat it successfully with Panchakarma treatment, here patient got relief from symptoms within 15 days. The treatment given to the patient mainly Basti is Kaphavatahara or Pittavatahara, mainly used for Deepana Paachana and Rakta Prasadana with Shoolahara and Shothhara Karma. Therefore, the given Ayurvedic treatment was successful in curing the disease without further complications

- 1) Shodhan and Pachana
- 2) Shaman

Guducyadi Asthapan Basti⁶

Guduchi, Trifala, Rasna, Bala kwath

Kalka dravya

Priyangu, Nagarmotha, Sauf Vacha, Pippali, Kusta Bilva, Ajwayana, Madanfa

Madhukadi Tail⁷

Yashtimadhu, Khas, Gambhari, Kutaki, Kamal, Chandan, Shyama Padmakhya, Jimuta, Indrayava, Atisa, Sugandhavala, Patol, Nimba, Bhunimba, Rasna, Saptaparni

| Basti | Matra | Kaal |
|----------------|------------------|-------------|
| Niruh basti | 350 ml kwatha | Before meal |
| Anuvasan basti | 60 ml tail | After meal |
| Ksheer basti | 40ml ksheer paak | After meal |

Basti plan

| Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 |
|-------|-------|--------|--------|--------|--------|-------|
| AB | NB | NB | AB | NB | NB | AB |
| Day 8 | Day 9 | Day 10 | Day 11 | Day 12 | Day 13 | |
| NB | NB | AB | NB | NB | AB | |

NB -Niruh basti

AB-Anuvasan basti.

Niruh Basti prepared by mixing ingredients in following sequence:-

Madhu + Saindhav + Tail + Kalka + Kwath.

Panchtikta Ksheer Basti

Guduchi, Nimba, Vasa, Kantakari, Patol with panchtikta ghrita

Basti plan

| | | | | | | |
|-------|-------|--------|--------|--------|--------|--------|
| Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 |
| KB | KB | KB | NB | KB | KB | KB |
| Day 8 | Day 9 | Day 10 | Day 11 | Day 12 | Day 13 | Day 14 |
| NB | KB | KB | KB | NB | KB | KB |

NB -Niruh basti

KB-Ksheer basti

Strict diet was maintained throughout the treatment.

DISCUSSION:-

| | | |
|---|------------------------------|---|
| 1 | GUDUCYHADI ASTHAPAN BASTI | kapha-pittahara, dahahara, kushtahara, antibacterial, srotoshodhaka and does prasadana of dhatus. Therefore, a combination of Basti prepared by using the above mentioned kalka and kwatha dravyas helps in kapha-pitta shamana and rakta prasadana thereby pacifying dosha. |
| 2 | MADHUKADI TAIL | Sneha used in basti helps in proper gati of vaat. Acts as anti-inflammatory. Raktashodhak and raktaprasadak properties. |
| 3 | PANCHTIKTA KSHEER BASTI | Milk is emulsion or colloid of butterfat globules within a water-based fluid that contains dissolved carbohydrates and protein aggregates with minerals, one in every of the important factors about the milk is that it contains calcium; it is absorbed without the assistance vit D, Under the influence of lactose within the distal intestine via the paracellular route. This promotes the absorption of calcium and provides simultaneous intake of phosphorus that it essential for bone deposition, Hence Ksheer Basti have a large and effective applicability in Sroto Vikara. |

2)Shaman treatment

| No | Medicine | Route | Dose |
|----|---------------------------|-------------------|----------------------------------|
| 1 | MAHAMANJISHTHADI KWATH | Oral | 20 ml twice a day with kosha jal |
| 2 | AROGYAVARDHINI VATI | Oral | 2 tab twice a day |
| 3 | KAISHOR GUGGULU | Oral | 2 tab twice a day |
| 4 | TAB.AQUASOL A8 | Oral | 1 tab once a day |
| 5 | PANCHTIKTA GHRITA 9 | Oral | 5 ml morning |
| 6 | PANCHTIKTA GHRITA | Local application | 3 times a day |
| 7 | MALHAR (KOKAM BUTTER) | Local application | 3 times a day |

Pathya-Apathya

Pathya apathya was explained to the patient and instructed to follow strictly

Pathya-

In Aharaja mainly Shuka dhanya- Shashtika shali, Yava, Laja, Godhuma, Jala varga- Ushna jala and Ksheera varga- Goksheera, Aja kseera and for Viharaja Abhyanga.

Apathya-

In Aharaja Katu, Ushna, Guru, Lavana, Madhya, Dadhi, Kshara, Kulutta, Amla, Abhishyandi etc and for Viharaja Diva swapna, Atapa Sevana, Ati Vyayama, Ati Maithuna etc.

Upashaya

Hot climate, Appling Moisturising lotions and oils

Anupshaya

Cold and Dry climate worsen the condition

Mode Of Action

| SR.NO | DRUGS | MODE OF ACTION |
|-------|------------------------------------|---|
| 1 | MAHAMANJIS HTHADI KWATH | Varnya, Kapha Pittashamak, Shothahar, Kushtaghna, Kapha Pittahara, Rakta prasadana |
| 2 | AROGYAVARD HINI VATI | Paachan of Drava and Kleda. Vaat kaphhar dushti. ↓ Corrects Ras Dhatwagni mandya and then further facilitate prakrut dhatu formation. |
| 3 | KAISHOR GUGGULU | Kleda Guna of Rakta ↓ pacifies Pitta Dosha |
| 4 | TAB.AQUASO L A | <ul style="list-style-type: none"> vitamin A compounds include regulating cell growth, cell differentiation, protein synthesis maintain normal skin keratinocyte differentiation process Exfoliates – making skin smooth and eventoned. Repairs the cellular structure of the Epidermis – optimizing your UV protection. Decreases clustering of Melanin granules – thus reducing brown spots or pigmentation. Promotes a healthy Cellular Membrane – improving hydration |
| 5 | PANCHTIKTA GHRITA | <ul style="list-style-type: none"> Lipophilic action of ghee easily facilitates transportation to the target organ and final delivery, inside the cell, as the cell membrane also contains lipids. This lipophilic nature of ghee facilitates entry of formulation into the cell and its delivery to the mitochondria, micro some and nuclear membrane". According to Ayurveda, Goghrita (cow ghee) is beneficial for Rasdhatu (lymph) and Raktadhātu (blood). enhances the Rasagni and Raktagni kandugna, Kushtagna, Dahaprashamana, shothagna anti-inflammatory, anti-ulcer effect. Pacification of vaat and pitta dosha Dhatuvaradhaka |
| 6 | PANCHTIKTA GRITA APPLICATION | <ul style="list-style-type: none"> Due to Snigdha guna helps to decrease the dryness and burning sensation. Helps in penetration of drug molecules. Improves local blood and lymphatic circulation and there by improving local tissue metabolism. |
| 7 | MALHAR KALPANA | <ul style="list-style-type: none"> Drugs like vranashodhan taila and narikel tail enhances blood circulation and having anti-oxidants slows the aging process, reduces rukshata due to snigdha guna and provides moisture to the skin peripheral circulation and might augment the movement of accumulated inflammatory materials. Agni into circulation Pittashamaka, increase the moisture content, helps in cooling and hydration therapy to skin. Lipid soluble substances penetrate the skin, so absorption of particular drugs will be more and absorption will be carried through skin. |

Malahara Kalpana

Malahara kalpana¹⁰ is the ointment preparation which has Vranashodhan tail+ kokam butter+Narikel tail as the basic constituent.

Absorption and penetration

- a) Effect on skin function.
- b) Miscibility with skin secretions and serum
- c) Compatibility with skin secretion and emollient properties
- d) Ease of Application and Removal

Malaharakalpna is ointment preparation in Ayurveda. It holds a widespread reference area from Brihatrayee to Yogaratnakar, Rasatantrasara & Siddaprayoga Sangraha to Rasatarangini¹¹. The very first adaptation of the word “Malahara” from the Unani medicine “Malaham” has been taken by Acharya Yogaratnakar. The classical text Rasa Tarangini by Vaidya Sadanand Sharma explains the different methods of preparation of Malahar.

RESULTS

Post complaints were compared and results assessed showing significant improvement

| No. | Symptoms | Before treatment | After treatment |
|-----|----------------|------------------|-----------------|
| 1 | DISCOLOURATION | 4 | 1 |
| 2 | ITCHING | 4 | 0 |
| 3 | SCALING | 4 | 0 |



CONCLUSION

So, from the above discussion it can be concluded that Ayurveda has better approach to treat Ichthyosis. A significant relief could be offered in signs and symptoms of Ichthyosis with the use of Ayurvedic drugs. In this case patient got relief from itching. Presentation and look of both the upper limb lower limb and trunk changed to almost like normal, which also provided him a mental satisfaction. Thus, we can say that patient got relief symptomatically as well as psychologically. This approach is safe, cost effective and have no adverse effects. It is simply adaptable in regular practice.

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