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Ayurveda

A HOLISTIC AYURVEDIC APPROACH TO SHWITRA (VITILIGO): A CASE REPORT DEMONSTRATING SIGNIFICANT CLINICAL RECOVERY

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ABSTRACT Vitiligo, known as Shwitra in Ayurveda, is a chronic skin condition marked by the development of white, depigmented patches. It significantly affects an individual's appearance and emotional well-being, especially in young adults. Ayurveda offers a comprehensive and time-tested approach that focuses on the root cause of the disease.This case study presents the Ayurvedic management of a 20-year-old female patient with Shwitra, who underwent a structured treatment plan including Shodhana (purificatory therapy), Shamana (internal and external medicines), and Rasayana (rejuvenation therapy) over a 12-month period. Gradual re-pigmentation was observed from the third month, with over more than 80% recovery by the end of the treatment. The patient also experienced improved digestion, psychological well-being, and overall quality of life. No side effects or relapses were recorded during a 3-month follow-up. The case demonstrates the potential of Ayurveda in managing vitiligo through a personalized and holistic treatment approach.

KEYWORDS :

INTRODUCTION

Vitiligo, often referred to as Leukoderma, is an acquired skin disorder characterized by depigmented patches on the skin. Affecting around 1–2% of the global population, it may not pose physical danger, but it deeply impacts the mental and social health of patients, especially in societies where appearance plays a critical role.

In Ayurveda, vitiligo is identified as Shwitra, a form of Kushtha Roga. It involves the disturbance of all three doshas—Vata, Pitta, and Kapha—with Pitta being particularly significant due to its role in skin pigmentation (Bhrajaka Pitta). Ancient Ayurvedic texts, including those by Acharya Vagbhata, describe Shwitra as a complex and chronic condition, symbolizing the destructive potential of doshic imbalance likened to fire engulfing a house.

The modern understanding of vitiligo attributes its pathogenesis to autoimmune responses, oxidative stress, and genetic factors leading to the gradual destruction of melanocytes. Ayurveda, on the other hand, views it through the lens of dosha-dushya sammurchana—an interplay of faulty lifestyle, impaired digestion, toxin accumulation (Ama), and doshic imbalance.

Objective

To clinically assess the efficacy of traditional Ayurvedic treatment modalities in the management of Shwitra (vitiligo) and validate their relevance in today's clinical practice.

Case Profile

A 20-year-old female visited the Kayachikitsa OPD of State Ayurvedic College and Hospital, Lucknow, on 14th May 2024. She reported white patches on the front of her neck developing over several months. Accompanying complaints included mild fatigue and digestive discomfort.

Personal and Clinical Details:

- **Dietary Habits:** Irregular, frequent intake of incompatible food combinations (milk with sour items, cold water after sun exposure).
- **Lifestyle Factors:** Daytime sleep, sun exposure, emotional stress.
- **Physical Examination:** Three well-defined non-scaly depigmented patches (1–3 cm) on the anterior neck. Normal skin texture and intact sensation.
- **Bowel:** Constipation.
- **Sleep:** Disturbed.
- **Appetite:** Normal.

Samprapti (Pathogenesis) – Ayurvedic View:

The condition was identified as Tridoshaja Kushtha, with a predominant involvement of Pitta and Vata doshas, affecting the Rasa, Rakta, Mamsa, and Meda dhatus. Ama formation due to Agni Mandya (low digestive fire) and blockage in the Rasavaha and Raktavaha srotas contributed to disease manifestation.

Therapeutic Intervention

The treatment was designed based on classical Ayurvedic principles and was executed in three phases:

1. **Shodhana (Purificatory Therapy):**
   - Deepana and Pachana: Triphala and Trikatu churna were given to enhance digestion and eliminate toxins.
   - Virechana (Purgation): A mild purgative therapy was carried out to expel excess Pitta dosha, preparing the body for further healing.
2. **Shamana (Pacificatory Therapy):** A combination of internal and topical medicines was administered:

A. Churna:

- Triphala churna – 1.5 g
- Trikatu churna – 500 mg
- Nimbtwak churna – 1.5 g
- Ashwagandha churna – 1 g

These were given twice daily with warm water after meals to improve digestion, immunity, and overall strength.

B. Rasa Aushadhi:

- Udayaditya Rasa 1Tablet
- Shuddha Gandhak – 250 mg
- Swarna Garik – 250 mg
- Tamra Bhasma – 30 mg
- Talkeshwar Rasa – 125 mg

This was given twice daily with honey or warm water to support pigmentation and balance metabolism.

C. Arishta:

- Khadirarishta – 20 ml with equal water

Taken twice daily after meals, primarily for Raktashodhana (blood purification) and to support liver function.

D. Guggulu Formulation:

- Swayambhu Guggulu – 2 tablets

Given twice daily for its anti-inflammatory and immune-supportive effects.

E. Rasa Medicine for Digestion:

- Laghu Sutshekhar Rasa – 1 tablet twice a day

Used to manage abdominal discomfort and enhance Agni (digestive strength), especially helpful during dietary adjustments.

F. Avaleha (Medicated Herbal Jam):

- Kantkari Avaleha – 10 ml

Administered twice daily for its Rasayana effect and to support overall vitality.

G. Supportive Medicine:

- Cartola-E tablet – 1 tablet daily

This was included to provide additional nutritional support for skin repair and regeneration.

H. Local Treatment:

- Leukoskin Cream

Applied topically to the affected areas twice daily. It was chosen for its potential to stimulate melanocytes and encourage regimentation.

3. Rasayana (Rejuvenation Therapy):

Emphasis was placed on immune modulation, tissue regeneration, and restoring melanocyte function through the continued use of Rasayana drugs like Ashwagandha and Kantkari Avaleha.

Clinical Monitoring and Follow up

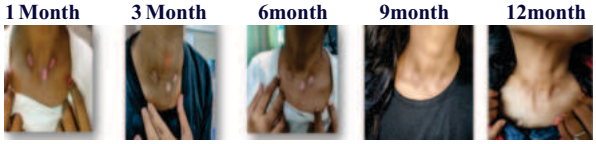
The patient was reviewed every 15 days. During each visit, we assessed lesion size, degree of pigmentation, and overall well-being at every 3 months. The patient showed progressive improvement with reduced depigmented patches and enhanced skin tone, along with better digestive and systemic health. The images provided show progressive healing of multiple lesions over the anterior neck. Based on the Vitiligo Area Scoring Index (VASI) method, which assesses the extent and degree of depigmentation, we can estimate VASI scores at different time points based on these visual changes.

VASI Score Calculation –

VASI = Σ (Hand Units) × (Depigmentation Percentage)

- One hand unit (palm + volar surface of fingers) ≈ 1% of total body surface area (TBSA).
- Depigmentation levels:
- 100%: Complete depigmentation
- 90%, 75%, 50%, 25%, 10% depending on residual pigment.

1 Month **3 Month** **6month** **9month** **12month**



Time Point	Estimated Area (Hand Units)	% Depigmen-tation	Depigmen-tation Fraction	VASI Score	Notes on Appearance
0 Month	0.35	100%	1.00	0.35	Three large, well-demarcated pink/ white macules; maximal size.
1 Month	0.30	100%	1.00	0.30	Slight reduction in size; still fully depigmented.
3 Months	0.30	50%	0.50	0.15	Visible repigmentation centrally; borders remain lighter.
6 Months	0.25	25%	0.25	0.0625	Further pigment return; macules less distinct.
9 Months	0.20	10%	0.10	0.02	Only faint hypopigmented areas; nearly full repigmentation.
12 Months	0.10	5%	0.05	0.005	Almost indistinguishable from surrounding skin; minimal residual spots.

DISCUSSION

Vitiligo (Shwitra) is not only a skin disorder but also a psychosocial burden, particularly in young individuals. Conventional treatments like steroids and phototherapy often yield temporary or inconsistent outcomes, pushing patients toward holistic alternatives such as Ayurveda.

This case of a 20-year-old female with cervical vitiligo, digestive issues, and emotional stress was managed using classical Ayurvedic principles. Contributing factors included incompatible diet, irregular habits, and lifestyle disturbances, leading to Pitta-Vata imbalance, Ama formation, and Agni Mandya. Treatment proceeded in phases:

- Shodhana (Deepana, Pachana, Virechana) to detoxify and balance doshas
- Shamana with herbal and herbo-mineral medicines (e.g., Khadirarishta, Swayambhu Guggulu) and topical Leukoskin.
- Rasayana with Ashwagandha and Kantkari Avaleha to restore immunity and vitality.

By the third month, re pigmentation began, reaching over 80% by the twelfth month. VASI score dropped from 0.35 to 0.005. The patient also reported improved digestion, energy, and emotional stability, with no side effects during or after treatment. This case highlights the potential of Ayurveda in vitiligo through root-cause correction and systemic rejuvenation. Broader studies are needed to further validate this integrative approach.

CONCLUSION

This case demonstrates the effectiveness of a structured Ayurvedic approach in managing vitiligo. By targeting root causes like doshic imbalance, Ama accumulation, and poor digestion, the treatment led to significant and sustained repigmentation without side effects. The integration of Shodhana, Shamana, and Rasayana therapies not only improved skin health but also enhanced systemic well-being. While further clinical research is needed, this case supports the potential of Ayurveda as a safe and holistic alternative in vitiligo management.

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