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# AYURVEDIC MANAGEMENT OF CHRONIC SPONTANEOUS URTICARIA: A CASE REPORT

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**ABSTRACT** Urticaria is a dermatological condition characterised by transient, pruritic, erythematous and edematous plaques. Chronic urticaria is defined as the occurrence of wheals, angioedema, or both, on most days of the week for six weeks or more. Clinical examination typically reveals infiltrative, well demarcated wheals with significant size and shape variations, raised borders and occasional central pallor. In Ayurvedic literature, chronic urticaria correlates with sheetpitta, primarily associated with the vitiation of pitta and kapha doshas. Conventional allopathic management includes non-sedating H1-Antihistamines as first line therapy, while sedating agents like hydroxyzine and diphenhydramine may be used as adjuncts, but they have restrictions and the potential for recurrence even after prolonged therapy. Ayurvedic herbal formulations aims at dosha pacification and immune modulation and also helps in preventing recurrence.

**KEYWORDS :** Satmya, asatmya, Sheetapitta

## 1.INTRODUCTION

Urticaria is a common dermatological condition characterised by the sudden appearance of transient, erythematous and pruritic wheals resulting from localized dermal edema due to increased vascular permeability. The pathogenesis involves mast cell degranulation with the release of histamine, leukotrienes and other inflammatory mediators. Urticaria is broadly classified into acute (lasting less than six weeks) and chronic (persisting for more than six weeks). Chronic urticaria is further divided into chronic spontaneous urticaria, which occurs without identifiable external triggers and chronic inducible urticaria, which is triggered by physical or environmental stimuli such as pressure, cold, heat or sunlight.

Standard management includes second-generation, non-sedating H1-antihistamines, with dose escalation in refractory cases. However, a subset of patients exhibits partial or no response to conventional therapy, necessitating consideration of immunomodulators or biologics like omalizumab. Long-term pharmacologic use may also be associated with sedation, tachyphylaxis, or recurrence upon withdrawal.

Chronic urticaria correlates with sheetpitta. Two words with opposing meanings make up the word sheetpitta. Here, Sheeta represents the union of Pitta Dosha with Kapha and Vata. Sheetpitta is described in Ayurveda as Tridoshaj Vyadhi, however Ras and Rakta are the main Dushya, and Vata and Pitta Doshas are predominant. Due to contact with different hazardous substances (allergens) and consumption of Asatmya-Ahara-vihara, sheetpitta develops. Individual lesions usually disappear in a few minutes to a few hours, leaving no evidence behind. Depending on the duration of the condition, urticaria can be classified into two types: (a) acute urticaria (less than six weeks) and (b) chronic urticaria (more than six weeks).

The vitiated doshas, which are always circulating throughout the body, are said to be the mechanism behind the development of a disease, which is referred to as samprapti. Due to sheeta maarutadi Nidana (sheeta Maaruta Samsparsha) it resulted in sheetapitta - udarda - kotha with prakupita vata & kapha (pradushta kapha Maaruta) spreading internally and externally when mixed with pitta. Vitiation of kapha and Vata Doshas occurs as a result of exposure to cold or suppression of natural urges. A lifestyle that causes pitta prokopak causes pitta vitiation with more vitiation of vata dosha, which eventually leads to Sheetapitta. Nidan sevan + Agni mandya Creation of Aam along with dosha prakopa Prasara of dosha, Dosha dushya sammurchna in amashya Sthana samsraya in Twak. Ayurvedic formulations are therefore used in urticaria as part of a comprehensive approach aimed at correcting underlying dosha imbalances, enhancing immunity and detoxifying the system. Management strategies focus on both Shodhana and Shamana. These formulations not only address symptomatic relief but also targets the root cause, potentially reducing the frequency of recurrences and improving overall quality of life in patients with chronic urticaria.

## 2.MATERIAL AND METHODS

UAS Score is used to assess the severity of urticaria. In this, score 1 is mild characterised by <20 wheals/ 24 hours and itching is mild. Score 2 is moderate with 20-50 wheals/ 24 hours with moderate itching which does not disturb the daily activities. Score 3 is given to severe urticaria with >50 wheals/ 24 hours with intense itching sufficient to interfere with daily activities or sleep.

### 2.1A Case Report

A diagnosed case of Urticaria, male child of 5 years brought by parents in Kaumarbhritya department OPD with complaints of Elevated itchy rashes:
Size- 3-4 cm in length
Itching ++
Site- Trunk, Few on upper limbs
Colour- Pink
Headache ++
History of previous illness: Started before Diwali (Sharad Hritu), Headache
Birth History: FT/NVD/ MCH/ CIAB

**General Examination:**
Weight- 18 kg
Height- 118 cm
On Examination:
Temp- 98 F
HR- 90/ min
RR- 34/ min

**Systemic Examination:**
CVS- S1S2 N
CNS- Conscious and alert
RS- AEBE clear

**Ashtavidha Parikshan:**
Nadi- Pitta Dominance
Mala- Prakrut
Mutra- Prakrut
Jivha- Niraam

Shabda- Spashta
Sparsha- Anushna
Druk- Prakrut
Akruti- Madhyam

**3.Treatment**

| Sr. No. | Drug | Dose | Time | Anupana |
|---|---|---|---|---|
| 1. | Mahamanjishthadi kashayam with ½ tsp Mahatiktagharita | 5ml | QID | Koshna jal |
| 2. | Raktapachakvati | 1 tablet | BID | Koshna jal |
| 3. | Laghusutshekhar rasa | 1 tablet | BID | Koshna jal |
| 4. | Avipattikar churna vati | 2 tablets | HS | Koshna jal |
| 5. | Urtiplex lotion | Local application | 2-3 times | |

**3.1 Follow Up After 7 Days**:
Rashes gradually decreased in size and subsided in few hours and on 6th day, rashes disappeared. (No Antihistaminics required). Again, treatment was continued for 7 days.

| Sr. No. | Drug | Dose | Time | Anupana |
|---|---|---|---|---|
| 1. | Mahamanjishthadi kashayam with ½ tsp Mahatiktaghrita | 5ml | TDS | Koshna jal |
| 2. | Raktapachak vati | 1 tablet | BID | Koshna jal |
| 3. | Laghusutshekhar rasa | 1 tablet | BID | Koshna jal |
| 4. | Avipattikar churna | 2tablets | HS | Koshna jal |

**3.2 Pathya Apathya**
**Pathya And Apathya For Sheetpitta Are As Follows:**
**Pathya –** Jeerna Shali, Mudga Yusha,Shigru Shaka, Triphala, Ushnodaka, Jangala Mamsa, Kulatha Yusha, Dadima Phala, Madhu, Katu, Tikta, Kashaya Rasa, Lavan-tikta Mamsa Rasa.

**Apathya –** Matsaya, Poorva and Dakshin Disha Pavana, Chhardi Nigraha, Divasvapan, Snana, Virudhaahara, Aatap Sevana, Snigdha, Amla, Madhura Dravya, Guru Annnapana.

**4.RESULT**

| Sr no | Sign & symptoms | Before treatment | At 1st follow-up (after 7 days) | At 2nd follow-up |
|---|---|---|---|---|
| 1. | Rashes | ++ | + | Absent |
| 2. | Itching | ++ | + | Absent |
| 3. | Headache | ++ | + | Absent |

The treatment was aimed to subside the signs and symptoms and reduce the recurrence by using herbo-mineral formulation along with least modern medicines as an integrated approach. By using this integrated approach recurrence of urticaria was reduced in terms of annoying symptoms that have a greater impact on a patient's quality of life. Modern medicine lags in giving a permanent solution for urticaria. Ayurveda has a certain potential to tackle chronic and recurrent diseases.

**5.DISCUSSION**
In the management of Sheetapitta (chronic spontaneous urticaria), the prime therapeutic goal in Ayurveda is the pacification of vitiated Pitta and Kapha doshas, purification of Rakta dhatu, and enhancement of immune resistance to prevent recurrence. In this case, a combination of classical formulations was prescribed with the intention of breaking the samprapti at multiple levels and achieving both symptomatic relief and long-term control.

Mahamanjisthadi Kashaya is a well-known formulation for blood purification and skin disorders. The pharmacodynamic properties of this formulation, dominated by Tikta and Kashaya rasa, Laghu and ruksha guna, sheet virya, and Kaṭu vipaka, make it particularly effective in pacifying Pitta and purifying Rakta dhatu. The formulation is described as Raktashodhaka, thereby reducing itching and burning, and correcting the pathological changes at the level of blood and skin tissue.

Mahatiktaghrita is one of the most potent formulations for pittaja and raktaja disorders, especially those affecting the skin. In this case, Mahatiktaghrita was administered with Mahamanjishthadi kashayam to potentiate Raktashodhaka and pitta shamaka properties. This combination worked synergistically to reduce inflammation, pruritis and erythema while preventing recurrence by restoring doshic balance. Laghu Sutshekhar Rasa, a herbo-mineral preparation was administered to address Amlapitta and systemic manifestations of Pitta prakopa. This formulation reduces the tikṣṇa guṇa of aggravated Pitta, relieves acidity, burning sensation (angadaha), and provides a soothing effect on the gut. It is described as Prasadaka and Stambhaka, which calm down hyperactive Pitta and stabilize the system. Hence, this formulation not only controls gastric irritation but also reduces systemic burning and inflammation commonly associated with chronic urticaria.

Raktapachak Vati was included for its potent actions on digestion and blood purification. By virtue of its Anulomana, Dipana, Pachana, and Raktaprasadana properties, it regulates Agni, eliminates ama, and improves the quality of Rakta dhatu. This is crucial in the pathogenesis of urticaria, where impaired digestion and accumulation of metabolic toxins act as precipitating factors. This formulation not only improve digestion and metabolism but also prevent the pathological accumulation of toxins in blood and skin, thereby reducing recurrence of wheals.

Avipattikara churna vati, a classical formulation described in Bhaishajya Ratnavali, was prescribed to eliminate excess Pitta from the gastrointestinal tract. It acts as a mild Virechaka and also possesses Dipana and Pachana properties. By correcting the deranged Agni and facilitating the elimination of accumulated Pitta, this formulation prevents the upward movement of aggravated doshas, which otherwise manifest as skin lesions.

Together, these formulations worked synergistically. This multidimensional approach achieved both mridu Shodhana and Shamana, correcting the underlying dosha imbalance, alleviating symptoms, and preventing recurrence. Clinically, the patient experienced regression of wheals within a week without the need for antihistaminic medication, which indicates the immune-modulatory and recurrence-preventive potential of this Ayurvedic regimen.

**6.CONCLUSION**
It can be concluded that a noticeable improvement obtained after using a herbo-mineral composition as an adjuvant treatment in a bothering pruritic disease Urticaria in childhood age.

It also stopped the recurrence of the same, in addition to alleviating the signs and symptoms.

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