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AYURVEDIC MANAGEMENT OF ATOPIC DERMATITIS W.S.R. VICHARCHIKA – A CASE STUDY

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ABSTRACT **Introduction** - Skin reflects our emotions and links the internal and external environment. It provides unique identity of the individual in society. Changes in the skin not only affect person's cosmetic appearance but also person's day to day life. Clinically many types of skin diseases are found, one of them is Atopic Dermatitis. It is often referred to as Eczema, characterized by a range of histological and clinical characteristics including papules, erythematous macules and vesicles. Based on causes, symptoms, and overall presentation i.e. Kandu (~itching), Pidika (~papule), Shyava Varna (~blackish discoloration) and Bahusrava (~excessive dischrge) present in Vicharchika (~atopic dermatits), atopic dermatitis can be corelated with this condition in the present case study. **Patient information** - A 32 year old Female patient was admitted in the IPD of Panchakarma (~five cleansing therapy) department in our hospital with the complain of skin lesion over both hands and neck region associated with severe itching, mild discharge and blackish discoloration of skin. It was diagnosed as Atopic Dermatitis. **Therapeutic Intervention -** Virechana Karma (~therapeutic purgation) with Triphala Kwatha (~decoction of Triphala) along with Trivrit Churna as Sodhana Karma (~purificatory therapy) followed by Sarivadi Vati, Gandhak Rasayana and Manjisthadi Kwatha as Shamana Chikitsa (~palliative therapy) was planned to treat the patient. **Result –** After 4 months with above treatment protocol marked improvement was observed in the Kandu(~itching), Pidika(~papules), Shyavarnata(~blackish discolouration) and Strava (~discharge). **Conclusion** - Study shows that Ayurvedic Sodhana (~purificatory) and Shamana Chikitsa (~palliative therapy) is effective in the treatment of Atopic Dermatitis.

KEYWORDS : Atopic Dermatitis, Vicharchika, Virechana Karma, Shamana Chikitsa, Case report

INTRODUCTION :-

Skin is the largest organ of the body. The diseases affecting the same can range from life-threatening conditions like melanoma, toxic epi-dermal necrolysis to chronic conditions like psoriasis and eczema. Among all these skin diseases, Atopic Dermatitis is the most common form of dermatitis. It is seen in approximately 10% to 30% of children and 2% to 10% of adults in developed countries. In India, the prevalence of Atopic Dermatitis has been reported to be increasing owing to changes in environmental factors.[1] Atopic Dermatitis, which is also called as Eczema is a type of response pattern characterized by range of histological and clinical characteristics. Papules, erythematous macules and vesicle are examples of primary lesion that can combine to produce patches and plaques. Secondary lesions like weeping and crusting may be more common in cases of severe eczema.[2] Long standing eczema is often dry and is characterized by thickened, scaling skin with hyperpigmentation and lichenification. It is believed that atopic dermatitis is associated with other IgE associated disorders like allergic rhinitis, asthma and food allergies. Atopic dermatitis patients have defective skin barrier that is susceptible to xerosis and environmental irritants and allergens that lead to inflammation, pruritis, and the classic clinical findings of atopic dermatitis. While treating any skin disease according to Ayurveda, it is important to diagnose the condition as per Ayurveda- Siddhant (~principles of Ayurveda). Kushtha (~terminology for skin disease) has been taken as the supreme word for all skin diseases in Ayurveda. One which produces discoloration over the skin region is said to be Kushtha(~skin disease).[3] Kushtha(~skin disease) is classified as "Maha Kushtha"(~major skin disease) and "Kshudra Kushtha"(minor skin disease).[4]

As per Acharya Charaka, due to consumption of faulty Aahar (~diet) e.g. Dadhi (~curd), Guda(~jaggery),Matsya(~fish) and Vihar (~regimen) e.g. Diwaswap(~daysleep), Vega-dharan (~suppression of urges) etc. Tridosha (~three regulatory functional factors of body) gets vitiated. Such vitiated Dosha (~humors) spread all over the body producing Shaithilya (~loosness) in the Twak (~skin), Mamsa(~muscles), Rakta (~blood) and Ambu(~watery portion of body). Later These Tridosha (~three regulatory functional factors of body) gets lodged in Kha-Vaigunya (~weakened part) i.e. Twak (~skin), further producing Lakshan (~symptoms) of Kushtha Roga (~skin disease). Eczema and Vicharchika (~atopic dermatitis) are fairly similar in Ayurveda. Vicharchika (~atopic dermatitis) is type of Kshudra Kushtha(~minor skin disease). Acharya Charaka has mentioned Kapha Dominance in atopic dermatitis. The symptoms of Vicharchika (~atopic dermatitis) includes Kandu (~itching), Pidika (~papules), Bahustrava (~excessive exudation) and Shyava Varna (~blackish brown discoloration).[5]

In Morden Science the management is done by oral and topical antibiotics to avoid any infection. Antihistamines likes hydroxyzine and Steroids like Mometasone are given,[6] which may produce many side effect like Blurred Vision, Joint pain, Insomnia, Weight gain, AVN etc.While in Ayurveda there are unique approaches to eradicate skin disease, combination of Shodhana (~purification), Shamana (~pallliative) and Nidana Parivarjana (~avoidance of etiological factors).

Acharya have explained specific treatment for each Dosha(~humors) which is applicable in each condition including Vicharchika. In cases of Vata predominant Kushtha(~skin disease), Ghrita-pana (~consuption of ghrita) have been advised. For Pitta predominant Kushtha, Virechena (~therapeutic purgation) followed by Rakta-mokshna (~bloodletting), and in Kapha predominant, Vamana (~therapeutic vomiting) is utilized. Rakta- mokshna(~bloodletting) with Jalauka (~leech) show a dramatic improvement of the symptoms of Vicharchika (~atopic dermatitis). Thus Ayurveda provides wide range of treatments for Vicharchika like Vamana Karma(~therapeutic vomitting), Virechana Karma (~therapeutic purgation), Rakta-mokshana(~bloodletting), Jalaukava-charan(~application of leech) followed by proper Shamana Chikitsa (~palliative therapy) which gives excellent results.

Case Report

A 32 Year old married female patient came in OPD with the complain of Skin lesion over both hands and neck region, Severe itching, mild discharge, blackish discoloration of skin since 8 month and Agnimandya (~diminished digestive Fire) since 1 month. Before 8 month she had mild itching on hands so she consulted a family physician and took treatment with no relief in signs and symptoms. As the condition worsened, she had taken Ayurvedic treatment in private clinic for 3-4 months but didn't get any significant relief so she came here for further treatment. She tested positive for COVID-19 in 2020 and recovered with medical treatment. She has been experiencing migraine episodes for the past 2–3 years, occurring 2–3 times a month, and managed with Tab. Stopache. She has no history of hypertension or diabetes. She has a single bowel movement per day, though it is described as unsatisfactory. Urination occurs approximately 6–7 times in 24 hours. Appetite was wow. Sleep pattern is normal. Patient follow's vegeterian diet and drinks tea once or twice daily. Menarche occurred at age 13. The last menstrual period was on 10th September 2024, with a cycle lasting 2–3 days and recurring every 25–28 days. She experiences menstrual pain (dysmenorrhea) and typically uses 1–2 sanitary pads during the day and 1 pad at night. No vaginal discharge is noted. Family history reveled that father has Eczema since 20 years.

Clinical Findings:-

In general examination, the patient's vital were observed normal. Patitent's BMI was observed 15.2 which was indicating underweight. No abnormalities were found on systemic examination of the respiratory, cardiovascular, or nervous systems. Skin assessment revealed the presence of lesions on both hands and the neck area. There was discharge from the lesions on the hands, and all the lesions exhibited a blackish discoloration.

Diagnostic Assessment

Samprapti (~ Pathology) - The predominant Doshas(~regulatory functional factors of the body) involved are Pitta and Kapha. The affected Dushyas (~which gets vitiated) are Twaka (~skin), Rakta (~blood), and Lasika (~watery component of the skin), with involvement of Ambu (~fluid). The impacted Srotas (~structural or functional channels) are Rasavaha (~channels carrying nutrient fluids), Raktavaha (~channels carrying blood tissue), and Swedavaha (~channels carrying sweat). There is impairment in Agni(~digestive/metabolic factors), specifically Jatharagni (~metabolic factors located in digestive tract) as well as the Rasa and Rakta Dhatwagni (~metabolic factors located for nutrition and blood tissue).The Sroto Dushti (~deformity in the body channels) is characterized by Vimargagamana (~diversion to the flow of the contents to the improper channels) and Sang (~obstruction). Udbhava Sthana (~site of origin) is the Amashaya (~stomach), Vyakta Sthana (~manifesting site) is the Twaka (~skin). Roga Marga (~disease pathway) is Bahya (~external) and Swabhav (~nature) is Chirkari (~chronic). On the basis of above pathological factors patient was diagnosed Vicharchika [Atopic Dermatitis].

Therapeutic Intervention

Here in this case considering Pitta Dosha Dushti(~vitiation of Pitta), the Virechana Karma (~therapeutic purgation) was done as purificatory therapy. After that based on Ayurveda treatment priciple Shamana Chikitsa(~palliative therapy) with Sarivadi Vati, Gandhaka Rasayana and Manjisthadi Kwatha were given. The detail course of treatment is given in Table no.1 (Detailed therapeutic intervention).

Table 1 Detailed Therapeutic Intervention

Sr.No.	Date	Therapeutic procedure	Medicine with dose and Anupana	Frequency	Duration
1.	14/9/2024 to 19/9/2024	Deepana –Pachana (~enhancing metabolic fire and digestion)	Chitrakadi Vati(~tab-let of Chitrakadi), 500 mg/tab, with Ushno-daka (~luke warm water), before food Sanjivani Vati, 250 mg/tab), with Ushno-daka (~luke warm water), after food	Twice a day	Six days
2.	20/9/2024 to 24/9/2024	Snehapana with Khadir Ghruta (~internal oleation with medicated Ghruta)	Khadir ghruta (~medicated ghruta) in an increasing pattern on an empty stomach (30ml, 60ml, 100ml, 130ml, 160ml) with luke warm water	Once a day	Five days
3.	25/9/2024 to 27/9/2024	Sarvang Abhyang followed by Sarvang Bashpa Swedana (~whole body massage and steam therapy)	Tila Taila (~sesame oil) (Q.s. App.100 ml)	Once a day	Three Days
4.	27/9/2024	Virechan Karma (~therapeutic purgation)	Virechana Yoga = (~medicine for purgation) :- Given at 11.00 AM Triphala Kwatha (~decoction of Triphala) – 100 ml + Trivrut Churna (~pow-der of Operculina turp-ethum) – 3 gm Anupana (~co-administers with medicine) – Draksha Swarasa (~juice of Vitis vinifera) – 100 ml	Once a day	One Day
5.	28/9/2024 to 2/10/2024	Discharged and Sansarjan Karma (~post therapy dietetic regimen for revival)	Sansarjan Karma (~post therapy dietetic regimen for revival)	As per Madhyama Shuddhi	Five Days
6.	3/10/2024 to 3/12/2024	Shamana Chikitsa (~palliative treatment)	Sarivadi Vati(~tablet of Sarivadi), 500mg/tab, After food with luke warm water	Thrice a day	Sixty Days
			Gandhaka Rasayana (~tablet of Gandhak), 500mg/tab, After food with Sharkara (~sugar) and luke Warm water.	Twice a day	
			Manjisthadi Kwatha (~decoction of Manjisthadi) 40 ml, on empty stomach	Twice a day	
			Swadishta Virechana Churna (~powder Swadishta Virechana) of 3 gm with luke warm water.	Once a day at night	
			Karanj Taila (~medicated oil) for LA.	Twice a day	

Follow up and Outcomes:-

Clinical assessments were performed at baseline (before treatment), after 1 month and after 3 month of treatment. Patient achieved complete relief in Kandu(~itching), Pidika(~papules) and Strava(~discharge). The visible changes in patient can be seen in Figures[Figure 1,2].

Figure 1 Before treatment

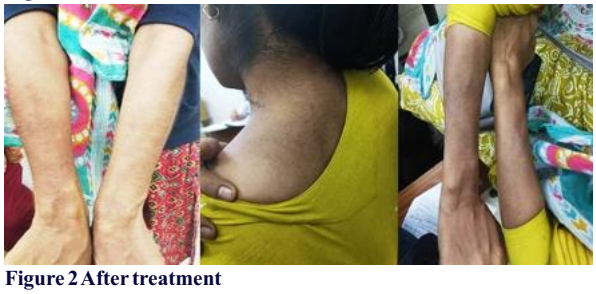

Figure 2 After treatment

Assessment was done on the basis of gradation of sign and symptoms given in Table no.2[7]. Assessment of patient's sign and symptoms at different interval is given Table.no.3.

Table 2 Gradation for symptoms

Sr.No	Symptoms	Gradation	Score
1.	Kandu (~itching)	No itching	0
		Itching present rarely	1
		Itching disturbs patient's attention	2
		Severe itching disturbs patient's sleep	3
2.	Pidika (~Papules)	Absent	0
		1-2 Pidika in one affected part	1
		3-4 Pidika in one affected part	2
		More than 4 Pidika in one affected part	3
3.	Shyava-Varna (~blackish discoloration)	Normal Skin color	0
		Brownish red discoloration	1
		Blackish red discoloration	2
		Blackish discoloration	3
4.	Strava (~discharge)	No Strava	0
		Occasional Strava after itching	1
		Mild Strava after itching	2
		Profuse Strava after itching	3

Table 3 Assessment of patient's symptoms

Parameters	Before Treatment [14/9/2024]	After 1 month of treatment [14/10/2024]	After 3 month of treatment [14/12/2024]
Kandu (~itching)	3	1	0
Pidaka (~papules)	2	0	0
Shyava-Varna (~blackish discoloration)	2	1	0
Strava (~discharge)	3	0	0

DISCUSSION –

Kushtha is a Bahu-Dosha-Janya condition in which Shodhana Karma (~purificatory therapy) is essential to achieve effective and sustainable results. In this case, considering the dominance of Pitta Dosha which evident from severe Kandu (itching) and Strava (~discharge)[8], Virechana Karma (~therapeutic purgation) was selected as the primary Shodhana procedure. Classical Virechana Yoga (~medicine for Virechana) mentioned in the Samhitas was used, excluding Danti, as the patient was underweight (Durbala). In such individuals, Shodhana (~purification) must be performed cautiously, especially in Kushtha.[9]

After Samyak Virechana, Strava(~discharge) and Kandu (~itching) reduced markedly due to the expulsion of vitiated Pitta-Dominant Dosha from the body. Once the Dosha responsible for the Samprapti(~pathogenesis) is removed, treatment must shift toward strengthening the Dushya, especially the Dhatus, because weakened Dhatus may again allow Sthana-Samsraya (~localization) of vitiated Doshas, leading to recurrence.

Along with Virechana, formulations like Sarivadi Vati and Gandhaka Rasayana played a crucial role due to their Rakta-Dhatu Prasadana (blood-tissue nourishing and purifying) properties. Strengthening Rakta Dhatu (~blood tissue) helped prevent disease relapse and supported further improvement, particularly in Shyava-varna (~blackish discoloration).

The Agnidipana (~promotive digestion) property of Manjisthadi Kwatha enhanced digestion and metabolism, improving the formation of a healthy Rasa Dhatu. This eventually reduced the vitiated Lasika, which is one of the important Dushyas in Kushtha, being the Mala of Rasa Dhatu. The primary pharmacological effect of Swadishta Virechana Churna arises from Swarnapatri (Latin name :- Cassia angustifolia), which contains sennoside alkaloids. These stimulate bowel motility and induce effective laxation. Other ingredients in the formulation help reduce the adverse effects of Swarnapatri, contributing to safe detoxification and enhancing the efficacy of internal medicines used in conditions like atopic dermatitis.

For local application, Karanj Taila (~medicated oil) was advised. The lipids present in this medicated oil help rebuild the skin barrier and restore moisture balance, supporting faster healing of the affected skin.

CONCLUSION-

Therapeutic application of Panchkarma (~five cleansing therapy) is an integral part of Ayurvedic therapeutics to give improvement. Kustha(~skin disease) is efficiently manged with Shodhana(~purificatory therapy) along with Shamana Chikitsa (~palliative therapy). One can use any Shodhana therapy for purification, based on this case one can say if there is Strava (~discharge) and Kandu(~itching) dominant condition which indicating Pitta Pradhanata, the Virechana Karma(~therapeutic purgation) would be better option as it not only remove the vitiated Pitta Dosha but also do Rakta-Dhatu Prasadana(~nourishes the blood tissue) which prevent disease relapse and supported further improvement. Gandhakarasayana, Sarivadi Vati along with Manjisthadi Kwatha can helps to enhance functioning of the Dhatus and decresing the Mala production.

Conflict Of Intrest - NIL

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