



## AYURVEDIC MANAGEMENT OF VIPADIKA: A CASE STUDY

## Ayurveda

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## ABSTRACT

Skin is the first organ of the body interacting with the environmental agent like physical, chemical and biological agents. The skin disorders are intrinsic in origin, all skin diseases in Ayurveda have been considered under the heading of kushtha.[1] Kushtha are mainly divided into two group i.e. Mahakustha and kshudra kushtha. Vipadika is one of the diseases which have been included under the heading of kshudra kushtha; it is characterized by Sphutanam either in palms or soles or in both with teevra Vedana.[2]. In present case report a patient with complaint of fissuring, itching, scaling, roughness and pain in both palms and soles, treated Sanshaman chikitsa with significant results. The combination selected for the management of vipadika is explain below in detail.

## KEYWORDS

vipadika, shamana chikitsa , Skin Disorder, Ayurveda.

## INTRODUCTION :

Skin is one of the five Gyanendriya which responsible for Sparsha Gyan or touch sensation. Kushtha means a pathological condition which despises the skin. When the three vitiated Doshas provoke the four body ailments (viz. Twak, Mansa, Rakta and Ambu) and if this derangement of the seven Dravyas[4] not cured a disease is formed inside the body manifest itself on the skin and which is called, kushtha. There are numerous skin diseases and they are amongst the frequently occurring health problems, affecting population of all ages. In this Vata and Kapha Doshas[5] get vitiated, Vipadika destroys skin of both palms and soles. The pain in vipadika is so intense that it severely affects the quality of life of the patient. In spite it is a minor condition but it cripples the routine activity of the patient.

## MATERIAL AND METHODS

## CASE REPORT

The present case study shows successful Ayurvedic management of vipadika. A 36 year old female patient Came to OPD of P.G. Department of Kayachikitsa R.A.Podar ayu. Hospital worli Mumbai. On date 23/09/2023, with chief complaint of rough, painful, fissured, itchy and scaly lichenified hyperpigmented lesion over both palms and soles since 2 years.

## History of Present Illness

According to the patient, she was asymptomatic 2 year back, but since then she has been suffering from dry, rough and scaly skin of both palms and soles which was increasing gradually and became painful and fissured. He took various treatments like homeopathic, allopathic and advertisement related ointment too but got mild relief and after sometime again developed same problem s Ri o now she came to our hospitals, OPD of P.G. Department of Kayachikitsa, for proper and better management of her complaint.

## Personal History

General condition: Average

Nadi (pulse) = 70/min.

Mala (stool) = Vibandha

Mutra (urine) = Normal.

Taap-man (temp.) = 97.4o F

Agni = Samagni

Shabda (speech) = khar.

Drika (eyes) = Normal.

Akriti = Madhyama

Bala = Madhyama

Raktadaaba (B.P) = 110/80

Jihva (tongue) = Eshata saam (slightly coated)

Addiction: Nil

Nidra (sleep) - sound

## Past History

No previous H/O any other severe illnesses

## Treatment History

Patient took allopathic, Homeopathic and local medication for present complaint but could not get satisfactory relief.

## Surgical History

No H/O any surgery

## Family History

Family history was negative for similar condition or skin disorder and no H/O severe illnesses.

## Investigation

All routine investigation (Hb, TLC, DLC, ESR, RBS etc) done and were within normal range.

## Differential Diagnosis

According to modern science, based on the symptoms of vipadika, it can be co-related with palmo-planter keratoderma, Palmo-planter psoriasis[6] Palmo-planter xerosis, Palmo-planter Dermatophytes.

Table 1: Assessment Criteria Grading.

S.N	Criteria	Absent	Mild	Moderate	Sever
1	Pani-sphutanam (fissures in palm)	0	1	2	3
2	Paad-sphutanam (fissures in Soles)	0	1	2	3
3	Vedana (pain in palm)	0	1	2	3
4	Vedana (pain in soles)	0	1	2	3
5	Kandu (itching in palm)	0	1	2	3
6	Kandu (itching soles)	0	1	2	3
7	Scaling in palm	0	1	2	3
8	Scaling in soles	0	1	2	3
9	Lichenified hyper pigmented lesion in palm	0	1	2	3
10	Lichenified hyper pigmented lesion in soles	0	1	2	3

## Treatment Given

Ayurveda emphasizes on three fold therapeutic management of the disease viz: Sanshodhan (biopurification), Sanshaman (pacification) and Nidana Parivarjana (avoiding causative factors) for almost all type of disorders including dermatological disorders. Sanshodhan (Virechan) followed by Sanshaman Aushadh (to subside remaining doshas after sanshodhan) is the mainstay of present study in the management of vipadika. But our patient was contraindicated for the shodhana so we have planned shamana chikitsa along with local treatment in the form of awagaha and malahar application.

## Bahya chikitsa:

## 1.Awagaha:

Dryva selected for the awagaha- Khadira + aaragwadha + aamragandhi haridra + triphala + yashtimadhu + sariva

2.Vipadikahar malahar for 2 months

**Abhyantar chikitsa:**

1. Aampachak vati 2BD for 7 days -Apane
2. Aarogyawardhini vati 2BD for 15 days -Rasayankali
3. Mansapachak kwatha 30ml for 1 month
4. Rasamanikya ras + guduchi satwa + saptaparna + aaragwadha + sariva + manishtha with mahakhadir ghruta – Vyanodane for next 1 month
5. Bramhi vati 2 tab – Nishi kali

**OBSERVATION AND RESULT**

The improvement in the lesion (vipadika) on admission, after bahya chikita (i.e. 2 weeks later), after Sanshaman (i.e 2 months later) is as shown in figures (fig 1a, 1b, 1c; fig 2a, 2b, 2c; and fig 3a, 3b, 3c, respectively) and Table-2.



**Table 3: Improvement in Symptoms after Treatment**

Criteria palms	BT	AT	% Improvement
Pani sphutanam (fissures)	2	0	100%
Vedana (pain)	3	0	100%
Kandu (itching)	3	1	95%
Scaling	1	0	100%
Lichenified hyper pigmented lesion	1	0	100%
Roughness	2	1	90%
Criteria (Both Soles)	BT	AT	% Improvement
paad sphutanam (fissures)	3	0	100%
Vedana (pain)	3	0	100%
Kandu (itching)	3	0	100%
Scaling	3	0	100%
Lichenified hyper pigmented lesion	3	0	100%
Roughness	3	0	100%

**DISCUSSION**

In present case, the Bahya chikitsa (Awagaha and malahar ) and Sanshaman chikitsa (drugs) are selected on the basis of the Doshik involvement (vata & kapha) in vipadika their ability to pacify the involved Doshas and to provide relief in symptoms.

In Bahya chikitsa awgaha is targeted to expel lichenified hyperpigmented skin of both palms and sole and reduces the itching and scaling. Vipadikahar malahar helps in reducing the dryness of skin and helps in healing cracks of both palm and sole.

Shaman drugs which were taken here for the management of vipadika are already proved drug for skin disorders. Mode of action described below-

1. Aampachak vati – Enhances appetite and it pacifies vitiated Vata and kaph dosha.
2. Aarogyawardhini vati—It scavenges free radicals from body and its antipruritic nature alleviates itching sensation.
3. Mansapachak kwatha— It contains nimba, patola, triphala mrudvika, vatsaka (indrayav) these drugs have laghu ruksha guna so helps in kleda shoshan and helps in samprapti bhanga. Also twacha (skin) is the upadhatu of mansadhatu so mansapachak kwatha helps in regeneration of new skin.
4. Rasamanikya ras—Used as apunarbhav chikitsa.

**CONCLUSION**

This case study demonstrated that Ayurvedic management as bahya chikitsa and Sanshaman Aushadh seems very effective for the treatment of vipadika like skin disorders. On the basis of the result of this study, it may be concluded that addition of bahya karma along with administration of Sanhaman Aushadh significantly increases the cure rate of vipadika.

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