



ORIGINAL RESEARCH PAPER

Ayurveda

AYURVEDIC MANAGEMENT OF VICHARCHIKA WITH SPECIAL REFERENCE TO DERMATITIS- A CASE REPORT

KEY WORDS: *Vicharchika*, *Dermatitis*, *Shodhana*, *Shamana*, *Nidanaparivarjana* and *EASI*.

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ABSTRACT

In Ayurved, *Vicharchika* is mentioned as a type of *Kshudra Kushtha*. *Vicharchika* literally means the disease which erupts on skin and spreads all over body. The modern equivalent of *Vicharchika* is *Dermatitis*. *Dermatitis* is an inflammatory skin disease which is mostly relapsing in nature in spite of treatment. It is the most common skin disease for any age. The present case report deals with a 32 year old male patient having *Dermatitis* who has received modern line of treatment for successive four months without getting any sustained relief. Though Ayurveda mentions *Shodhana* therapy as a major part of the treatment, present study shows effect of *Shamana* therapy on *Vicharchika*. The patient was given internal and external *Ayurved* treatment for two months along with *Nidanaparivarjana*. The efficacy of the treatment was mainly assessed on *EASI* (*Dermatitis* / *Eczema Assessment and Severity Index*) scale. The scoring was calculated as before treatment and after treatment. The symptomatic relief was also assessed during treatment. *Shamana* therapy was found to be effective for sustained relief of the disease. *Nidanaparivarjana* also played an important role during the course of the treatment.

INTRODUCTION-

Skin is supposed to be the mirror of the body. It reflects physical, mental and psychological state of an individual. It needs much attention and concern compared to other organs in both states of disease and health. There are a lot of skin diseases, out of which *Vicharchika* is most common for any age.

Vicharchika is the disease in which skin erupts especially at upper and lower limbs of an individual. "*Vichar*" also means to move or to spread. So, in other words, the disease which spreads all over body is called as *Vicharchika*.

In Ayurved texts, it is mentioned as a type of *Kshudrakushtha* by all *acharyas*. *Acharya Sushrut* mentioned its symptoms as *Raji* (lines/ striae/furrow/thickening), *Atikandu* (excessive itching), *Atiruja* (extremely painful) and *Rukshata* (dryness),² whereas according to *Acharya Charak*, *Kandu* (itching), *Shyavapidaka* (blackish brown eruptions) and *Bahusrava* (excessive exudation) are the symptoms of *Vicharchika*,³ where *Rukshata* is a *Vatajalina* (symptom) and *Kandu* and *Bahusrava* are *Kaphajalina*. The *Dushyava* involved in it are *Twak*, *Rakta*, *Mamsa* and (*Ambu*) *Lasika*.

Dermatitis is an inflammatory reaction of the skin due to various internal and external factors.⁴ It is a superficial inflammation of the skin primarily affecting epidermis which causes itching and red rash often accompanied by blisters that weep and crust. It is followed by scaling, thickening and discoloration of the area.⁵

CASE REPORT-

A 32 year old male patient reported in the OPD of *Kayachikitsa* department of SVERDCT's Swami Vivekanand Ayurved Medical College, Pargaon, Shrigonda, Ahmednagar, Maharashtra complaining with blackish scaly patches with severe itching at left arm since last six months. The patient had very dry skin. The symptoms started with mild papular rash on left arm. It was associated with severe itching. Then he approached a local doctor for seeking allopathic treatment, got no relief. Then he was referred to dermatologist for treatment but only during medication would he get relief. After discontinuing medicines, the symptoms would relapse. This cycle continued for four months. He was unable to tolerate the condition and also not having any sustained relief. Then he came to the Hospital in the search of Ayurvedic treatment.

General Examination-

General condition- Good
Pulse- 78 / min.
Respiratory System- Air Entry Bilaterally Equal
Cardiovascular System- S, S₂ Normal

Ashtavidha Parikshana-
Nadi- Vatapradhana Pitta
Mutra- Samyak Pravritti
Mala- Samyak Pravritti
Jivha- Saama
Shabda- Prakrit (normal)
Sparsha- Samashitoshna, ruksha
Druka- Prakrit
Akriti- Madhyama
Prakriti Parikshana- Vata-pitta Pradhana
Koshtha- Madhyama

Local Examination- The lesion at the left arm was associated with excessive dryness, induration, peeling and hyper pigmentation leading to blackish discoloration at the site.

Brief history-
Socioeconomic status- Higher middle class
Occupation – Engineer at IT sector

Aharaitivritta (Dietic history)- Excessive usage of curd, pickles and salty food stuff.

Viharaitivritta- Irregular patterns of sleep and diet due to job.

Investigations- Routine haematological (CBC and ESR) and Urine microscopic examinations were done and were found to be within normal limits.

Diagnosis- It was based on Ayurvedic texts specially *Sushrut Samhita*. The signs and symptoms of the patient were as per *Acharya Sushruta* mentioned e.g. *Raji*, *Atiruksha* and *Atikandu* and *Karshnya*.

Nidanapanchaka-
Nidan- Habitual eating of *Ati-amla* and *lavana rasapradhana ahara* and improper following of *Dinacharya*
Poorvarupa- Kandu (pruritus), *Shotha* (inflammation) and *Rakta vaivarnya* (redness)
Rupa- Raji (Thickening and scaling), *Kandu*, *Atirukshata* (dryness) and *Karshnya* (blackish discoloration)

Samprapti- Due to habitual eating of *Ati- amla*, *lavana rasa pradhana ahara*, *Vatapradhana Tridosha* vitiated and impurified *Rakta*, *Mamsa Dhatu*, *Lasika* and *Twacha* causing *Shotha*, *Twakavaivarnya* and *Kandu* resulting in *Vicharchika*

Dosha- Vatapradhana Tridosha
 Dushya- Rakta, Mamsa, Twak, Ambu (Lasika)
 Srotasa- Raktavaha.
 Sadhya- asadhyata- Kashatasadhy

MATERIALS AND METHODS-

First of all, *Nidanaparivarjana*⁶ (avoidance of cause) was advised. The patient was asked to stop eating curd, pickle & excess salty items. Also he was asked to follow proper *Dinacharya* (Regular pattern of sleep and diet).

The patient was mainly subjected to *Shaman chikitsa* (pacification therapy) as *Bahya* (external) and *Abhyantar* (internal) *chikitsa*.

The patient was followed up every 15 days at OPD of Dept. of Kayachikitsa, SVERDCT's Swami Vivekanand Ayurved Medical College, Pargaon, Shrigonda, Ahmednagar, Maharashtra

Table no.1 showing Shamana Chikitsa – Internal Therapy-

	Medicines	Dose	Anupana
1.	<i>Arogyavardhini vati</i> - 250 mg	2 tablet twice a day Mor. - eve. After meals	With lukewarm water
2.	<i>Gandhaka Rasayana</i> - 250 mg	2 tablet twice a day Mor. - eve. After meals	With milk
3.	<i>Panchatikta ghritha guggulu</i> - 250 mg	1 tablet twice a day Mor. - eve. After meals	With lukewarm water

External Therapy-

Throughout the therapy of two months, *Karanja Taila* was prescribed for local application twice a day i.e. at morning-after bath and at night- before sleep.

OBSERVATIONS-

1. Based on Subjective Criteria-

Table no. 2 showing remarkable effect of therapy on Subjective Criteria-

Symptoms	BT	After 15 days	After 30 days	After 45 days	After 60 days
Rukshata (dryness)	++	+++	++	+	--
Kandu (itching)	++	+++	--	--	--
Raji (thickening / scaling/ induration)	++	+++	+	+	-
Karshnyata (blackish discolouration)	++	+++	+++	++	+

Table no. 3 showing Grading scale of Subjective Criteria

Grade	Score
Very Severe	++++
Severe	+++
Moderate	++
Mild	+
Absent	--

2. Based on Objective Criteria-

Efficacy of treatment was assessed on EASI (Dermatitis / Eczema Area and Severity Index) scale.⁷ EASI Scale is a tool to measure the extent (area) and severity of Dermatitis. The assessment was done before treatment i.e. BT and after treatment i.e. AT.

Table no.3 showing effect of therapy on EASI scale

Body region		Redness	Thickening	Scratching	Lichenification	Severity index	Area score	Region score
Head/ Neck	BT	0	0	0	0	0	0	0
Trunk	BT	0	0	0	0	0	0	0
Upper limbs	BT	0	2	2	2	6	2	3.6
	AT	0	1	0	1	2	0	0
Lower limbs	BT	0	0	0	0	0	0	0



Figure 1- First visit



Figure 2- After 45 days of treatment



Figure 3- after treatment

DISCUSSION-

In modern point of view, the treatment of Dermatitis mainly revolves around local application and systemic corticosteroids which may mask infection and its sudden withdrawal can lead to aggravation of symptoms. Its Side Effects are well known for long term toxicity.⁸

In Ayurved context, considering *Bahudoshavastha* (increased levels of *Doshas*) of *Kushtha*, all *Acharyas* emphasized primarily on *Shodhana Chikitsa* (elimination or purification therapy). *Charak Acharya* mentions *Chikitsa-Siddhant* (line of treatment) according to *Doshapradhanata as- Sarpi-pana* in *Vatapradhana Kushtha*; *Vamana* in *Kaphapradhana Kushtha* and *Raktamokshana* (blood-letting) and *Virechana* in *Pittapradhana Kushtha*.⁹ As the patient was unwilling to do continuous management via *Shodhana* therapy, we adopted *Shamana* Therapy for him on OPD basis.

Also *Nidanaparivarjana* always remains a first stream of management of Ayurved treatment. This patient has habitual diet history as eating curd, pickles and salty foodstuffs on regular basis. The strict restriction of *Nidan* showed significant improvement in the symptoms like *Kandu* and *Raji*.

Orally administered *Arogyavardhini Vati* has been specifically indicated in *Vata-Kaphapradhana Kushtha*; it also has *Deepana* (appetizer), *Pachana* (digestive) and *Malanashaka* (destroying waste products) properties.¹⁰ Therefore it was prescribed to the patient. The main impact of *Gandhaka Rasayana* is found to be on *Raktadhatu* and *Twacha* which are main *Dushya* in *Vicharchika*. Therefore *Gandhaka Rasayana* was selected for oral administration.¹¹

For *Shamana Snehapana*, *Panchatikta Ghritha* having *Kushtha* as *Rogadhikara* was selected but considering the palatability of the *Tiktarasatmaka Ghritha*, the patient was prescribed its modified and palatable form as *Panchatikta-ghrita-Guggulu*.¹² It specifically helped in *Vatashamana* (alleviation of *Vata*) by decreasing the symptom like *Rukshata*.

Locally applied *Karanja Taila*¹³ was found to be helpful in

soothing the texture of the skin by relieving the symptoms like *Rukshata* and *Kandu*.

After taking this treatment for two months, patient got sustained relief without any recurrence however he was advised to avoid curd, salty items and pickles lifelong.

CONCLUSION-

Vicharchika is a skin disorder which not only disturbs body but also mind. An Ayurvedic approach of management aims to give blissful life to the patient by decreasing the vitiated *Doshas*.

From this study, it can be concluded that the *Shamana Chikitsa* can also be very effective in the management of *Vicharchika*.

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