



**ORIGINAL RESEARCH PAPER**

**Ayurveda**

**CLINICAL MANAGEMENT OF SWITRA: A CASE REPORT**

**KEY WORDS:** Switra, Bakuchi, Lepana, Rasayana

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**ABSTRACT**

Switra (vitiligo), a common pigmentation disorder is a serious cosmetic problem that affects emotional and social well-being of the affected person. A 24-year-old unmarried male visited OPD of Department of Swasthavritha, Government Ayurveda College, Tripunithura with the complaints of whitish patches over both legs, palm, neck region, eyelids and lip. He was managed with Sodhana, Samana, Bakuchi as Lepana and Rasayana for a period of 3 months. Assessment was done before and after treatment. After 3 months of treatment, significant results were obtained. In the absence of an effective remedy in the conventional interventions, this as a single case report is studied. The revalidation through well designed clinical trials can prove an effective remedy to the suffering population.

**INTRODUCTION:**

In the current era, due to faulty food habits and wrong lifestyle, various skin diseases occur. Among them Switra (vitiligo) is a disease with cosmetic issue. In Ayurveda, skin disease usually called as kushta and switra develop basically due to raktadushti. Switra the term is derived from Sweta meaning white. So in switra white patches develop. In Ayurveda the twak has 7 layers and switra occurs when the fourth layer of twak is affected.<sup>1</sup> Among the causative factors, food that vitiates pitha and raktha causes progression of disease. If the vata and pitha dosha are predominantly vitiated, the lesions will be dry and hairs over the lesions will be coppery red in colour.<sup>2</sup> Regarding the samprapti ghatakas, the disease causes obstruction to rasavaha and raktavaha srotas, and has a chirakari swabhava (chronicity).<sup>3</sup>

**CASE REPORT:**

A 24-year-old unmarried male (OP NO.20678) visited OPD of Department of Swasthavritha, Government Ayurveda College, Tripunithura with complaints of whitish patches over both legs, palm, neck region, eyelids and lip. The hypopigmented areas were with intact sensation and complaints of itching and burning sensation were absent. The lesion started at 14 years of age as a small white spot over medial aspect of right leg. Gradually he noticed the increasing area of the patches which slowly progressed and got spread completely over both legs below knee. Due to lack of treatment and adherence to unwholesome food habits, aggravated the symptoms and the lesions gradually appeared over palm, neck region, eyelids and lip. He consulted an allopathic physician and took medications for about 3 years, but the condition persisted. Therefore, he stopped the medications and approached the Swasthavritha OPD on 11th May 2018. On examination it was found that the patient was accustomed to non-vegetarian diet with almost daily intake of chicken, katu, amla, vidahi ahara. He had reduced appetite and a constipated bowel which had inturn resulted in kapha pitha prakopa leading to raktadushti and developed the above said manifestations.

Dasavidha pareeksha was done and it was revealed that the patient was of vatapitha prakruti, madhyama vaya, madhyama samhanana, asthisarapurusha with madhyama satwa guna, avara satmya, jarana sakti reduced and the vikrutha dosha was kapha pitha. On physical examination of integumentary system, skin had hypopigmented patches with intact sensation over bilateral legs below knee joint, over scalp, eyelid, lip, palm with no burning sensation or itching.

Considering the dosha, dooshya, prakruthi of the patient, the following treatment protocol was adopted:

**Table 1: STAGE 1 (1.5 MONTHS)**

TREATMENT	MEDICINE
INTERNAL MEDICATION	1) Gandharvahastadi kashaya 90 ml BD 2) Drakshadi kashaya as toya 3) Hinguvachadi choorna 5g BD with hot water 4) After one week of the above medication, Vicharana snehapana with Mahatiktaka gritha 10g with food for 3 days 5) Swedana 6) Virechana with Avipathy choorna 20g with hot water 7) Mahatiktaka gritha 5g HS (continued after virechana )
EXTERNAL APPLICATION	1) Somaraji tailam external application and sunbath once in a day 2) Bakuchi choorna+udumbara twak choorna+ gomutra external application twice daily (Started after virechana)

**Table 2: STAGE 2 (1 MONTH) – After the appearance of blisters**

TREATMENT	MEDICINE
INTERNAL MEDICATION	1) Patoladi gana Kashaya 90ml BD 2) Ayaskriti 20ml BD 3) Avipathy choornam 5g HS 4) Kodna tab 1-0-1
EXTERNAL APPLICATION	1) Bakuchi choorna+udumbara twak choorna+ gomutra external application twice daily 2) Murivenna external application over blisters
RASAYANA THERAPY	5g Bakuchi choorna with 20ml Khadirarishtam BD

**RESULT:**

Significant changes were noted with reduction in the size of patches over legs, neck, scalp and eyelids at the time of discharge on 26/07/2018. The discharge medications were Mahatiktaka gritha 10 ml HS for 3months with Virechana done on every 10th day. Follow up visit after 3 months revealed complete disappearance of hypopigmented patches over both legs, neck region, eyelid, scalp, and the disease had not recurred.

**DISCUSSION:**

The disease switra is a challenging case, but with utmost care and minute observations on dosha dooshya and prakruthi of a person, we can tackle it with much ease. The progression of the disease is rapid, so the management should be done in

proper time to arrest the pathogenesis.<sup>4</sup> The above patient was of vatapitha prakruthi, had severe constipation and decreased agni at the initial stage. Gandharvahastadi Kashaya was given for increasing agnibala and for malasodhana.<sup>5</sup> Hinguvachadi choorna mentioned in Gulma adhikara was also given in the same perspective to increase agni and pacify vata because an increased agnibala is pivotal in a pitha raktha predominant disease like switra.<sup>6</sup> Drakshadi Kashaya toya was given in order to vitalise his cells and considering his vata pitha prakruthi. Drakshadi Kashaya mainly acts on rasa and raktavaha srotas which are the mainly involved srotas in case of switra. Along with these, the external application of somaraji tailam and sunbath was done as mentioned in our classics.<sup>7</sup> This taila was selected as it is switrahara.

After correcting agni, sodhana therapy was scheduled. Vicharana snehapana with Mahatiktaka gritha was selected as a sodhana poorvaka snehapana since the patient was reluctant to take the gritha as such in increased amount. For sodhana Avipathy choorna was selected as it is kapha pitha samaka. After evacuation of aggravated doshas through sodhana therapy, a combination of bakuchi choorna, udumbara twak choorna and gomutra was adopted for external application since bakuchi has switrahara property and is given as rasayana in kushta, udumbara twak choorna is kaphapithahara. Gomutra also has switrahara property.

In stage 2, blisters had appeared and kapha pitha predominance was evident. Therefore, murivenna was externally applied for ropana along with patoladi Kashaya as internal medication which is kaphapitha hara and is explained in kushta prakarana. For kledasoshana, Ayaskrithi mentioned in Prameha adhikara was given. Kodna tablet with switrahara drugs as major ingredients was also given. Bakuchi was started as rasayana with khadirarishta which is blood purificatory and pithahara medicine used widely in skin disease. This combination was given as a tertiary prevention to avoid the recurrence of the disease. For pithasamanatwa, Avipathy choorna was given daily in a samana dose. With the above therapies and medication, the hypopigmented patches reduced. During the follow up period, Mahatiktaka gritha was given as a rasayana and Avipathy choorna was advised every fortnight to prevent the recurrence of the disease as explained in Kushtachikitsa prakarana.

#### CONCLUSION:

The rationale behind the treatment of Switra is the reduction of emotional and cosmetic concerns of the affected individual. On the consideration of agni, dosha and srotas involved, the treatment was found to be effective without any recurrence. In the absence of an effective management in the modern science, it is important to explore the potential management strategies in Ayurveda to give a supporting hand to the suffering population.

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