

WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

Coden USA: WJPRAP

Impact Factor 8.453

Volume 14, Issue 22, 902-907.

Case Study

ISSN 2277-7105

AN AYURVEDIC APPROACH IN THE MANAGEMENT OF EKA KUSHTHA (PSORIASIS): A SINGLE CASE STUDY

Dr. Simran Rathod*1, Dr. Mayuri Patil²

Article Received on 22 Oct. 2025, Article Revised on 12 Nov. 2025, Article Published on 16 Nov. 2025,

https://doi.org/10.5281/zenodo.17615540

*Corresponding Author Dr. Simran Rathod

PG Scholar, Dept. of Kayachikitsa, SMBT Ayurved College and Hospital, Igatpuri, Nashik.



How to cite this Article: Dr. Simran Rathod*, Dr. Mayuri Patil. (2025). An Ayurvedic Approach In The Management of Eka Kushtha (Psoriasis): A Single Case Study. World Journal of Pharmaceutical Research, 14(22), 902–907.

This work is licensed under Creative Commons Attribution 4.0 International license

ABSTRACT

Background: Psoriasis is a chronic, immune-mediated skin disease, often recurring and resistant to long-term conventional management. It resembles Eka Kushtha in Ayurveda, a Tridoshaja Kshudra Kushtha with predominant Vata-Kapha involvement. **Objective:** To evaluate the efficacy of Ayurvedic Shodhana and Shamana Chikitsa in a case of chronic plaque psoriasis. **Methods:** A 35-year-old male diagnosed with chronic plaque psoriasis was treated at an Ayurvedic clinic using a classical protocol involving Snehapana, Virechana, followed by internal medicines and topical applications. The treatment lasted 60 days with follow-up for 3 months. Results: Significant reduction in erythema, itching, scaling, and lesion size was observed within 45 days. No recurrence was reported during follow-up. The patient also reported improved quality of life. Conclusion: The combination of Shodhana and Shamana therapies based on Ayurvedic principles offers promising

results in the management of Eka Kushtha (psoriasis), reducing relapse and side effects.

KEYWORDS: Eka Kushtha, Psoriasis, Virechana, Kushtha Chikitsa.

INTRODUCTION

Psoriasis affects about 2–3% of the global population and is marked by hyperproliferation of keratinocytes, leading to scaly plaques. In Ayurveda, similar features are found in Eka Kushtha, described under Kshudra Kushtha in the Brihattrayi. The disease is primarily

<u>www.wjpr.net</u> Vol 14, Issue 22, 2025. ISO 9001: 2015 Certified Journal 902

^{1*}PG Scholar, Dept. of Kayachikitsa, SMBT Ayurved College and Hospital, Igatpuri, Nashik.

²Associate Professor, Dept. of Kayachikitsa, SMBT Ayurved College and Hospital, Igatpuri, Nashik.

World Journal of Pharmaceutical Research

Rathod et al.

Tridoshaja, but Vata and Kapha play a dominant role, leading to dryness (Rukshata), scaling (Parushata), and discoloration (Vaivarnyata).

Ayurveda emphasizes Shodhana (bio-purification) followed by Shamana (palliative care) to break the Samprapti of Kushtha. This case study illustrates a comprehensive Ayurvedic approach to managing chronic plaque psoriasis.

AIMS AND OBJECTIVES

 To demonstrate the effectiveness of classical Ayurvedic therapies in the management of Eka Kushtha (psoriasis).

CASE PRESENTATION

Patient Profile

Patient Name: ABC

• **Age/Gender:** 35/Male

• Occupation: Software Engineer

• **Date of First Visit:** 14 July 2025

• Location: Nashik, Maharashtra

Chief Complaints

Scaly, dry, raised reddish plaques over elbows, knees, back, and scalp – 6 years

Severe itching and occasional burning

Aggravation during winter and stress

Disruption in social and professional life

History of Present Illness

Lesions began as dry, scaly patches on elbows 6 years ago. Progressively worsened to large plaques on knees and back. Temporary relief was achieved through topical corticosteroids and antihistamines. Symptoms relapsed within weeks of discontinuation. Recent flare-up involved scalp and ear margins.

Modern Diagnosis

• **Disease:** Chronic Plaque Psoriasis

• **ICD-10 Code:** L40.0

Ayurvedic Diagnosis

Component	Observation
Roga	Eka Kushtha
Dosha	Tridoshaja (Vata-Kapha dominant)
Dushya	Twak, Rakta, Lasika, Mamsa
Rogamarga	Bahya
Vyadhi Swabhava	Yapya
Srotas	Rasa, Rakta, Lasika

Nidana

• Aharaja Nidana: Viruddha Ahara (milk + fish), heavy and untimely meals, excess Amla and Katu Rasa

• Viharaja Nidana: Diwaswapna, Ratri jagarana, mental stress, sedentary routine

• Manasika Nidana: Chinta, Krodha, Shoka

Lakshana

Aswedanam

Rukshata

Parushata

Vaivarnyata

Matsyashakalopamam

Daha, Kandu

Mahavastu

Samprapti

Due to Aharaja and Viharaja nidana, all three doshas become vitiated, primarily Vata and Kapha. These doshas affect the Twak, Rakta, Lasika, and Mamsa dhatus, manifesting as thick, dry, itchy skin plaques. Obstruction of Srotas and accumulation of Ama aggravate the pathology.

Treatment Protocol

Poorva Karma (7 days)

• **Deepana-Pachana:** Trikatu + Shunthi Churna 3 g BID

• Snehapana: Panchatikta Ghrita (incremental doses up to 100 ml)

Abhyanga & Swedana: Dashamoola Taila with Nadi Swedana

Pradhana Karma

• **Virechana:** Trivrit Lehya 30 gm with Triphala decoction

• **Vegas:** 18 Pravartana

• **Samsarjana Krama:** Manda → Peya → Vilepi (5 days)

Shamana Chikitsa (45 days)

Medicine	Dose	Anupana	Duration
Khadirarishta	20 ml	Equal water	45 days
Mahamanjishthadi Kwatha	40 ml	Empty stomach	45 days
Arogyavardhini Vati	2 tabs	Warm water	30 days
Gandhak Rasayan	250 mg	Milk	30 days
Panchatikta Ghrita	10 ml	HS with warm water	45 days
Psorolin Oil	External	Local application	45 days

Outcome Assessment

Symptom	Before	After 60 Days	Follow-up (3 months)
Scaling	++	-	-
Itching	+++	+	-
Erythema	++	+	-
Lesion Thickness	++	-	-
Psychological distress	+++	+	-

DISCUSSION

Psoriasis is considered Yapya Vyadhi in both Ayurveda and modern medicine. The principle of Shodhana Purva Shamana Chikitsa was applied here, with Virechana selected for its efficacy in removing vitiated Pitta and Kapha from the body.

- Panchatikta Ghrita acts on Rasa-Rakta-Mamsa Dhatus, beneficial in Kushtha (Tikta Rasa is Kledashoshaka).
- Mahamanjishthadi Kwatha and Khadirarishta have proven Raktashodhaka and antiinflammatory effects.
- Arogyavardhini Vati promotes Yakrut–Pliha Shuddhi and balances Pitta.
- Gandhak Rasayan offers Rasayana effect, improving skin immunity.

The holistic Ayurvedic approach, including diet, lifestyle advice (Pathya-Apathya), and stress management, further contributed to sustained results.

CONCLUSION

This case study demonstrates the efficacy of a classical Ayurvedic treatment protocol, combining Shodhana (Virechana) and Shamana Chikitsa, in managing a chronic case of Eka Kushtha (Psoriasis). The approach followed the guidelines laid out in the Brihattrayi texts,

targeting the Tridoshic imbalance, with particular emphasis on Vata and Kapha dosha as the principal causative factors.

The use of Panchatikta Ghrita Snehapana, Trivrit Virechana, and internal medications like Mahamanjishthadi Kwatha, Khadirarishta, Arogyavardhini Vati, and Gandhak Rasayana produced remarkable symptomatic relief. The reduction in scaling, itching, lesion thickness, and discoloration was evident by the 45th day. Notably, there was no recurrence for three months post-treatment, suggesting a deep-rooted correction of pathogenesis (Samprapti Vighatana).

This case reaffirms the concept of Vyadhi Pratyanika Chikitsa in Ayurveda—treating the disease at its root by addressing the vitiated doshas and dushyas. The Raktashodhana, Srotoshodhana, and Twak-Prasadana actions of the formulations collectively contributed to disease regression and improved patient quality of life.

In comparison to modern approaches, which primarily manage symptoms and suppress immune response, Ayurveda offers a holistic and sustainable model of healing, enhancing the patient's overall health and immunity (Ojas) without side effects.

While this is a single case study, it opens avenues for larger clinical trials and interdisciplinary research, integrating classical Ayurvedic wisdom with modern evidence-based methods for chronic skin disorders like psoriasis.

REFERENCES

- 1. Acharya Charaka Charaka Samhita. Chikitsa Sthana, 7/21. Edited by Vaidya Jadavji Trikamji Acharya. Chaukhambha Orientalia; 2017.
- 2. Acharya Sushruta. Sushruta Samhita. Nidana Sthana, 5/5. Edited by Kaviraj Ambikadatta Shastri. Varanasi: Chaukhambha Sanskrit Sansthan; 2018.
- 3. Vagbhata. Ashtanga Hridaya. Uttara Sthana, 40/1–5. Edited by Dr. Brahmanand Tripathi. Varanasi: Chaukhambha Prakashan; 2020.
- 4. Sharma PV. Chakradatta. Kushtha Chikitsa. 1st ed. Varanasi: Chaukhambha Sanskrit Series Office, 2006; 125–129.
- 5. Shastri A. Bhaishajya Ratnavali. Kushtha Rogadhikara. Varanasi: Chaukhambha Prakashan; 2013; 279–283.

906

- 6. Government of India. The Ayurvedic Pharmacopoeia of India. Part-I, Volume I–VI. New Delhi: Ministry of AYUSH; 2008–2012.
- 7. Singh RH. Panchakarma Therapy. 1st ed. Varanasi: Chaukhambha Sanskrit Pratishthan, 2002; 78–85.
- 8. Paranipe P. Studies on the use of Khadira in dermatological disorders. J Res Ayur Siddha, 2004; 25(1): 55–60.
- Organization. **Psoriasis** Sheet. 2022. Available from: 9. World Health Fact https://www.who.int/news-room/fact-sheets/detail/psoriasis
- 10. Bedi MK, Shukla V. Clinical assessment of Ayurvedic management in psoriasis. AYU., 2019; 40(3): 195–200.
- 11. Gokhale AR. Role of Panchatikta Ghrita in skin diseases: A clinical review. J Ayurveda Integr Med., 2018; 9(2): 101–105.
- 12. Kaur P, Kumar B. Psoriasis: Current Concepts and Future Perspectives. J Cutan Med Surg., 2020; 24(1): 22–28.
- 13. Sharma RK, Dash B. Agnivesha's Charaka Samhita. Vol. II. Chowkhamba Sanskrit Series Office; 2009. Chikitsa Sthana.
- 14. Bhavanani AB. Psychosomatic factors in skin diseases: Ayurvedic perspective. Anc Sci Life., 2017; 36(4): 200–205.
- 15. Joshi S. Clinical application of Gandhak Rasayana in Twak Vikara. J Res Ayurveda., 2016; 37(2): 84–90.
- 16. Kulkarni A. Efficacy of Arogyavardhini Vati in liver and skin diseases: A case series. Int J Ayurveda Med., 2021; 12(1): 102–106.
- 17. Puri HS. Rasayana herbs in dermatological conditions. J Ethnopharmacol., 2005; 99(3): 219-226.
- 18. Patwardhan B, Warude D, Pushpangadan P. Ayurveda and Traditional Medicine: A Global Perspective. Evid Based Complement Alternat Med., 2005; 2(4): 465–473.