

## A CASE STUDY AYURVEDIC MANAGEMENT OF ALOPECIA AREATA W.S.R. OF INDRALUPTA

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### ABSTRACT

*Indralupta* (Alopecia areata) is a disease of the scalp in which hair loss is the primary clinical symptom. The pathophysiology of *Indralupta* is the vitiated *Tridosha* and *Rakta* affecting the scalp and also blockage of hair follicles with aggravated *Rakta* and *Kapha* which further prevents regrowth of hairs. An autoimmune condition known as alopecia areata causes patchy hair loss on the body or scalp without any obvious evidence of inflammation. *Indralupta* is a disorder characterized by patchy hair loss, especially across the scalp, and is described as *kapalagata roga* by *Acharya Vagbhata* and as *kshudra roga* by *Acharya Sushruta* and *Madhava*.

### INTRODUCTION

Alopecia areata is an autoimmune disease characterized by hair loss on body especially on scalp without any clinical inflammatory signs. Its prevalence in general population was estimated at 0.1-0.2% with a lifetime risk of 1.7%.<sup>[1]</sup> Male was reported to be more affected with the disease in comparison to children and women, but it cause more emotional problems in woman and children due to cosmetic concern.<sup>[2]</sup> Its main treatment in contemporary science is Corticosteroids which is having harmful side effects and not advisable for long term use.<sup>[3]</sup>

So, world is expecting some remedies from Alternative medical sciences. *Ayurveda* offers different effective treatment modalities for the management of different autoimmune diseases like psoriasis, eczema, etc.<sup>[4]</sup> Alopecia areata can be correlated with *Indralupta* disease

described in *Ayurveda*. In *Ayurveda*, both shodhana (Internal and external cleansing procedures) and shamana treatment (Disease specific internal medications) are prescribed for *Indralupta*. Here a case of female patient suffering from Alopecia areata was successfully treated with Ayurvedic Shamana therapy along with *nidanaparivarjana*.

**KEYWORDS:** *Indralupta*, *Jaloukavacharana*, Leech therapy, Alopecia areata.

## CASE REPORT

A 32 yrs old married female was presented with history of patchy hair loss on scalp, with mild itching over affected area and gradual increment since 4 years. There was no personal history of autoimmune disorders (like Atopic dermatitis, psoriasis, Vitiligo, Asthma, Urticaria, Rheumatoid arthritis, Thyroiditis) or family history in first degree relation suggestive of these disorders. There was no personal history of recurrent patchy skin lesion either on scalp or on other body parts, major psychological disorder, or history of treatment from psychiatrist, endocrinal disorder (Diabetes), hair plucking habit, local recurrent friction or trauma or surgery, prolonged medicinal treatment before appearance of lesions. Patient didn't notice any exaggerating or relieving factors. She didn't conceive in last 4 and 1/2 yrs and there was no bad obstetric history or menstrual disorder.

There were patchy hair loss measuring about 4x6 cm and 2x2 cm on left temporal region and occipital region respectively. There was mild dryness over patches with extremely sparse, few white and black hairs along with blackish spots. Scaling was observed on the rest area of scalp indicative of dandruff.

General examination revealed medium built without any significant pathological presentation, except slight pallor (Table 1). Local examination showed no scarring or cicatrization, nor any other skin lesion over scalp, no tumor in localized area and abnormalities of hair in adjacent area. Length of hair of adjacent scalp was uniform and was not broken off. The patient had taken the Allopathy treatment for two years and did not found control over the disease. The patient was referred to the *Ayurvedic* hospital by some patient having similar disease and had got significant relief with *Ayurvedic* management. The patient was clinically diagnosed as case of *Indralupta* (Alopecia areata) and advised for *Panchakarma* therapy for *Shodhana Karma*. As the patient was found difficult to spare the time for hospitalization for *Panchakarma* process, was put on *Shamana* therapy. The patient was prescribed medicines as per table no 3. *Manjishthadi Kwatha* 20 ml twice a day, empty

stomach in morning and before dinner was prescribed. Combination of *Arogyavardhini Rasa*,<sup>[5]</sup> *Saptamrut Lauha*.<sup>[6]</sup>

### Examination

A well-defined area of nonscarring alopecia in an oval pattern was present at the right parietal region of the scalp.

### History of past illness

There was no history of similar illness in the family, no history of drug intake, and no history suggestive of any systemic illness.

### History of past illness

History of Jaundice in Jan. 2016. No H/o DM/HTN/Koch's/Asthma/Fever/surgical intervention was present in the patient. In family history her Sister had Leucoderma X 5-10 years. Personal history.

### Personal history

Patient is vegetarian with normal appetite 3 meals a day, Leading an active life style, with no addiction, getting 9-10 hours of sound sleep. It was also told that patient was fully immunized during childhood. No relevant history of allergies Was found.

### General examination

Disease of specific examination

**Table 1: General examination of the patient.**

	<i>Dashavidha pariksha</i>	<i>Asthtavidha pariksha</i>
General examination		
Pulse- 70 /min	<i>Sharir prakruti - Vata pittaaja</i>	<i>Nadi – 70 / min</i>
Blood pressure- 130 / 80 mmhg	<i>Manas prakruti- Rajas</i>	<i>Mala – Sama</i>
Height - 132 cm	<i>Vikruti – Tridoshaja</i>	<i>Mutra – Samyaka</i>
Weight- 56 kg	<i>Sara – Mamsa</i>	<i>Jihva- Sama</i>
Respiratory rate- 18 / min	<i>Samhanana- madhyam</i>	<i>Shabda - Spashta</i>
Temperature- Normal	<i>Satva – Avara</i>	<i>Sparsha- Khara- kathina</i>
Tongue- Pallor	<i>Satmya- - Avara</i>	<i>Druk- Pallor</i>
<b>Disease specific examination</b>	<i>Ahara shakti – Avara</i>	<i>Akruti- Madhyam</i>
Site of involvement	<i>Jarana shakti- Madhyam</i>	

Pattern – Asymmetrical patch	<i>Vyavaya shakti- Avara</i>	
Skin colour- slight reddish	<i>Vaya- Madhyam</i>	
Discharge- Absent	<i>Desha- Sadharana</i>	
	<i>Kala - Adana</i>	

**Treatment:****Table 2: Treatment.**

Medicines	Dose with anupana	Pharmacological Action	Therapeutic indications
<i>Arogyavardhini Rasa</i> (125 mg)	Twice a day before meal with honey	Antioxidant, Antihyperlipidemic Hepatoprotective <sup>[7]</sup>	<i>Jirna jwara</i> (chronic fever) <i>Medodosh</i> a (Disease of Adipose tissue), <i>Kushtha</i> (Skin disorders)
<i>Saptamrita loha</i>	Twice a day before meal with honey	Antioxidant, Antihyperlipidemic, Hepatoprotective <sup>[8]</sup>	<i>Jirna jwara</i> (chronic fever) <i>Medodosh</i> a (Disease of Adipose tissue), <i>Kushtha</i> (Skin disorders)
<i>Dhatri Loha</i>	Twice a day after meal	Antioxidant, Antihyperlipidemic, Hepatoprotective	Effective treatment for gastric and intestinal problems
<i>Manjishthadi kwatha</i> (20ml)	Twice a day (early morning empty stomach, at night after meal)	<i>Raktashodhaka</i> (Blood purifier)	<i>Vatarakta</i> (Gout, <i>Pama</i> (Eczema), <i>Kapalika</i> , <i>Kushtha</i> , <i>Rakta Mandal</i> (Skin Disorders)
<i>Amapachaka vati</i>	2 tab. Twice a day after meal	Digestion, Appetiser	<i>Deepana</i> , <i>Pachana</i>
<i>Shodhana with Eranda Taila</i>	Oral Once		<i>Shodhana</i>
<i>Dhatur patra taila +Gunjadi taila</i>	On the affected site...local application	After shodhana for 30 days	<i>Snehana</i> and <i>Ropana</i>

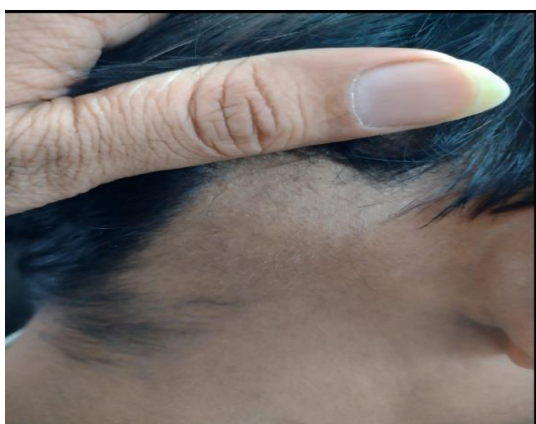
**Before treatment:**

**There was patchy hair loss, no hair root's,** Slight dandruff was present.

**Follow Up:** The patient reviewed 15 days after the treatment small whitish grey hairs grew on the lesion. Length and density increased; hair fall decreased no further complications were observed.

**During treatment:** There was no any blister formation, etching or any adverse reaction at site or all over body.

**After treatment:** After 30 days length and density increased. Black hairs easily observed over the affected site.



**Image 1. (a) Before Starting the treatment**



**2. (b) after treatment**

**DISCUSSION**

The present case study demonstrated a case of *Indralupta* in a male adult of 28 years with clinical signs and symptoms for last 2 weeks. According to *Acharya Sushruta*, *Pitta* and *Vata* localize at the roots of hair follicles and induce hair loss. *Kapha* and *Rakta* then block the channel of these hair follicles, which prevents the renewal of hair over that area. This condition is known as *indralupta*. *Tridosha* disruption and *Rakta* are hence the primary internal causes of *Indralupta*. Additionally, it has been stated that consuming too much *lavana* (salt) results in *khalitya* (morbid baldness).<sup>[9]</sup> This demonstrates that someone who practices excessive *Lavana*, *Kshara*, or *Viruddha Ahara* regularly is more likely to develop *Indralupta*. In the present case, the patient had a history of excessive intake of packet food like chips, wafers, junk food. These foods are generally highly salty, spicy and alkaline too. These might have caused vitiation of *Pitta Dosha* and caused the problem of patchy hair loss, therefore consuming these food items on a regular basis results in *Agnimandya*.<sup>[10]</sup> Low digestive fire is a significant element that interferes with the body's natural metabolism. Thus, in the present case, the patient's reduced metabolism and limited digestive capacity may have

altered the body's levels of micro nutrients and macronutrients, which may have hampered hair growth and resulted in hair loss. At first we gave *Shoshana* with *eranda sneha* to make clear the *strotasa*. *Eranda* is only *sneha* which is not having ability to digest. It removes *dushit dosha* and clears *strotasas*. It might have increased the blood supply over the affected area. As per classical references of treatment in *Indralupta*, local *Abhaynga* in the form of application of (*Dhatturpatra* + *Gunjadi*) oil processed with drugs having *Pitta* and *Rakta* pacifying qualities reduced *Dosha* vitiation at site And stimulated hair growth by creating enough *Snigdhatata*. We utilized *saptamrut loha* because it addresses nutritional deficiencies and regulates *pitta*, which is Important for hair regrowth. *Rasayana choorna* supports tridosha balance And the body's detoxification process. *Shirorogahara*, *Kledanashaka*, and *Kriminashak* are *vata*-related disorders treated with *triphala*, *vidanga*, and *sahachara choorna*. Thus, by balancing the *doshas*, all of the aforementioned therapy methods would have helped the damaged site's hair to regrow.

## CONCLUSIONS

From the case report, we can conclude that *shodhana* followed by *abhynga* with internal medication helps in the Management of *Indralupta*.

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