

INTERVENTION OF AYURVEDA IN THE MANAGEMENT OF VIPADIKA (PALMO-PLANTAR PSORIASIS)

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ABSTRACT

Introduction: All skin diseases has put into single platform i. e, *kustha* in Ayurveda. *Vipadika* is one among the *kshudra kusthas*. The main symptoms described is *sphutana*(cracking) & *teebra Vedana* (severe pain). It can be co-related with Palmo-plantar Psoriasis which typically affects palms & soles. It involves *vata* & *kapha dosha* with vitiation of *rakta dhatu*. **Aim and Objective:** To evaluate the efficacy of Ayurvedic Intervention in the management of *Vipadika*. **Methodology:** A 48 years Male patient reported with the chief complaints o cracking & fissuring in proximal, distal & middle phalanges of both hands since 6 months. Itching & ocassional bleeding also observed. Ayurvedic medications (*Rasa manikya*, *Mahamanjistadi kwatha*, *Kaishora guggulu*, *shatadhauta ghruta*) was administered. **Result:** After the intake of *shamana aushadhis* cracking & pain was reduced completely. **Discussion:** The *shamana ausadhis* given are helpful in remittance of *vata* & *kapha doshas* & acts as *srotosodhak*. The local application of psoralin-B reduced the *rukshata* of the disease. **Conclusion:** By administering Ayurvedic intervention, the patient was able to get rid from *Vipadika*. This case report here, showed the effectiveness of Ayurvedic intervention in the management of *Vipadika*.

KEYWORDS: *Vipadika*, Palmo-Plantar Psoriasis, *Shaman*, *Kustha*.

INTRODUCTION

Skin is the mirror of our body & known as largest organ. In Ayurveda, the word “*twak*” or “*charma*” is used for skin. *Twacha* is derived from “*twak-sambarane*” which means covering of body. In Ayurveda, almost all skin diseases are explained under *kustha* & classified as 7 *mahakusthas* & 11 *kshudra-kusthas*.^[1] *Vipadika* is described under *kshudra kustha*.

The *nidana* of *kusthas* are *atisevana* of *amla*, *lavana*, *kshara*, *guru*, *Matsya*, *dadhi*, *nispava*, *mithya ahara-vihara*, *virudha ahara*, *adhyasana*, *visamasana*, *ajirnasana*, *divaswapna*, *chinta*, *bhaya*, *krodha*^[2] etc.

Acharya Charak has emphasized the simultaneous vitiation of *tridoshas* & also *saithilyata* in the dhatus such as *twak*, *rakta*, *mamsa* & *lasika*.

The vitiated *tridoshas* gains momentum to vitiate sithila dhatus & hence the disease manifests.^[3]

Vipadika

It is included in *kshudra kustha* with *vata* & *kaphaja* dosha involvement & is characterized by *pani-pada sphutana*(fissures in palms& soles) & *teevra Vedana*(severe pain).^[4]

Palmo-Plantar Psoriasis

It is a chronic, recurring condition that affects the palms of hands & soles of feet. It varies in severity, and may limit a person's ability to complete their daily activities. The fleshy areas of hands, feet develop yellowish pustules about size of pencil eraser approx 5cm. On physical examination, thick hyperkeratosis plaques, sterile pustles are a mixture of morphologies seen. Hyper-keratosis plaques are most common sub-type. Symmetrical distributed lesions are common, as well as erythema, fissuring & scaling.^[5]

CASE REPORT

Chief complaint

A 48 years Male visited to OPD(Kayachikitsa) of G. A. M Puri, Odisha presented & pain since 6 months. It was observed on the distal, proximal part of phalanges of both hands.

History of Past Illness

The patient was alright before 1 year. Since, 1 year he developed itching & pain in DIPs & MIPs of both hands. Patient took treatment from contemporary & other allied medicine since

8 months but recurrence was seen more often. Since 1 months he has taken ayurvedic medicine for better relief.

PERSONAL HISTORY

Appetite-moderate

Bowel-Clear

Micturition-Normal

Sleep-Disturbed

Diet-Mixed

Occupation-police officer

Addiction-tea(2-3 cups/day)

VITAL DATA

Pulse-80/min

BP-124/90mm Hg

RR-18/min

Weight-76kgs

GENERAL EXAMINATION-	SKIN EXAMINATION-
Appearance-Normal	SITE-Middle, distal, proximal part of fingers of both hands.
Built-Moderate	DISTRIBUTION-Symmetrical
Pallor-Absent	ASSOCIATED COMPLAINTS-Dryness,
Icterus-Absent	Itchy, cracking, Occasional bleeding
Cyanosis-Absent	SURFACE-Rough & dry
Oedema-Absent	MARGIN-Irregular
Lymphadenopathy-Absent	

NIDANA PANCHAKA

NIDANA	PURVARUPA	RUPA	SAMPRAPTI	UPASHAYA
Katu ruksha ahara	No specific	Cracking of MIPs & DIPs	Nidana sevan	Sphutana subsides after taking shamana aushadhis
Vata vardhak ahara-vihara		Oozing of blood	V-K increase	
ratrijagarana		Difficulty in holding objects	Rasa-rakta dushti	
			Sthanasamsraya in anguli pradesha	
			Rukshata, sphutana develops	

TREATMENT GIVEN

MEDICINES	DOSE	DURATION	ANUPANA	TIME
Rasa manikya	125 mg BID	1 month	Usna jala	After food
Mahamanjistadi kwatha	15 ml BID	1month	Usna jala	Empty stomach
Kaisora Guggulu	500mg BID	1 month	Normal water	After food

Satadhauta ghrita	Local application twice a day	1 month		
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RESULTS

After intake of medications, cracking & bleeding was reduced. The patient was advised to follow of nidana parivarjana & pathya palana.

He was advised to avoid fried foods, junk foods, non-veg, spicy, milk products, day time sleep, excess anger etc.

Table 1: Assesment criteria of sphutana.

SL. NO	CLINICAL FEATURES	SCORE
1	Insignificant dryness at the foot/palms	0
2	Roughness is present when touching	1
3	Excessive roughness presents & leads to itching	2
4	Excessive roughness presents & leads to slight cracks	3
5	Roughness leading to cracks & fissures	4

Table 2: Assesment criteria for Vedana.

SL. NO	CLINICAL FEATURES	SCORE
1	No pain	0
2	Mild pain of easily bearable nature, comes occasionally	1
3	Moderate pain, but no difficulty	2
4	Appears frequently & requires some measures for relief	3
5	Pain requires medication & may remain throughout the day	4

Table 3: Observation table.

SL. NO	CLINICAL FEATURES	BEFORE TREATMENT	AFTER FIRST FOLLOW UP	AFTER SECOND FOLLOW UP
1	Scaling	+++	++	
2	fissures	++	+	
3	itching	+++	+	
4	pain	+++	++	

**BEFORE TREATMENT****AFTER TREATMENT**

DISCUSSION

RASA MANIKYA-It is prepared by heating Sudha hartala powder which is sandwiched between abhraka patra. Impurity of blood is one of the reason of skin ailments & *rasamanikya* acts as *raktasodhak* thus relieves from skin diseases. The ingredients acts as *kusthahara*. It corrects aggravated kapha dosha thus helps to maintain skin texture.^[6]

MAHAMANJISTHADI KWATHA- It is used as additional intervention & contains 40 drugs lika manjistha, guduchi, haridra, patolamula, asana, aragvadhya etc. All these drugs have

property like vaarnya, K-P shamak, sothahara, kusthagna, vraanaropana etc. Whereas vacha acts as srotosodhan. It also acts as mrudu virechaka. It acts as anti-oxidant & anti-microbial activity.^[7]

KAISHOR GUGGULU- It is specifically indicated in *vatarakta*, *vrana*, *kustha*. It has antiallergic, anti-bacterial & blood purifying properties.^[8]

SATADHAUTA GHRITA-It is indicated in *visarpa*, *kustha*, *kandu*.⁸ It is 100th time washed clarified butter-fat. It has plenty of Vitamin A, D, E, K, fatty acids etc which is beneficial for maintaining lusture of good skin.^[9]

CONCLUSION

Vipadika is *vata-kaphaja kshudra kustha*. The *ruksha guna of vata* causes pain & severe dryness which leads to the formation of cracks. *Kandu* is caused due to *kapha dosha*. *Daha* due to *pitta dosha*. The *dharana* of *mamsa* & *twak* leads to *raktasrava* & *sphutana* as it lies above the *mamsadhara kala*.

Nidana parivarjana plays an important role in the treatment by restricting dosha vitiation. This present case shows that *vipadika* can be managed through Ayurvedic treatment by assessing dosha involvement. *Shaman aushadhis* are effective in treating *vipadika*.

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