

ROLE OF SHODHANA IN SHEETAPITTA – A CASE STUDY

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Attribution 4.0 International license.**ABSTRACT**

Sheetapitta is a *Tridoshaja vyadhi* characterized by *Raga*, *Kandu*, *Daha* and *Mandalotpatti*. Based on its symptomatology it can be correlated to Urticaria which is a hypersensitivity disorder characterised by recurrent transient wheals and pruritis. It is commonly effecting all individuals of all age group thereby affecting the quality life of an individual due to recurrent episodes, disturbing sleep inducing psychological stress. *Ayurveda* advocates a holistic approach to the management of *Sheetapitta* through *Nidana Parivarjana*, *Shodhana*, and *Shamana Chikitsa* which helps in balancing *Tridoshas*. This study describes a female patient of age 43 years presented with reddish circular lesions all over the body specially over neck, thighs and upper limbs since past 2 months associated with itching especially during night time and

morning time. There was a significant improvement after *vamana* followed by *virechana Karma*.

KEYWORDS: *Sheetapitta*, *shodhana*, *vamana*, *virechana*, *Urticaria*.**INTRODUCTION**

Sheetapitta is described as a *Tridoshaja Vyadhi* involving the vitiation of *Rasa* and *Rakta Dhatu*, with its clinical manifestations occurring in the *Twak*. *Sheetapitta* is described in *Madhava Nidana* along with other clinically similar conditions, such as *Udarda*. These conditions are differentiated based on the predominant *Dosha* involved. *Vata Dosha* is predominant in *Sheetapitta*, whereas *Kapha Dosha* predominance is observed in *Udarda*.^[1]

Chakradatta has described *Abhyanga* with *Katu Taila*, *Ushna Seka*, and *Vamana* with *Patola-Nimba Kashaya*^[2] in the management of *Sheetapitta*. *Yogaratanakara* and *Bhavamishra* have described various therapeutic procedures, including *Abhyanga*, *Swedana*, *Vamana*, *Virechana*, *Sarpi Pana* with *Mahatiktaka Ghrita* followed by *Raktamokshana*, *Udvartana*, and *Lepa*, in the management of *Sheetapitta*.

Urticaria -‘nettle rashes,’ hives’ presents with short lived, itchy wheals that may be pink in the centre surrounded by red flare³. Urticaria triggered by various factors, including drugs such as penicillins, sulfonamides, aspirin, NSAIDs, phenytoin, insulin and ACE inhibitors; physical stimuli such as dermographism, pressure and cold; contact allergens; inhalant allergens such as pollens and fungi; certain foods and food additives. Emotional stress may also precipitate or aggravate urticaria, particularly cholinergic urticaria. Management primarily involves identification and avoidance of the precipitating factor along with symptomatic treatment. Topical preparations such as calamine or menthol-containing preparations may provide relief. Pharmacological management primarily includes second-generation, non-sedating or minimally sedating H1-antihistamines such as cetirizine or loratadine. Short courses of systemic corticosteroids may be considered in severe acute exacerbations, while refractory chronic cases may require medicines such as omalizumab or cyclosporine.

CASE REPORT

A female patient of age 44 years visited OPD of Department of panchakarma of KVG Ayurveda Medical College, Sullia, presented with complaints of itching all over the body especially over thighs, necks, hands and navel region followed by rashes since 7 years aggravated since 2 months.

HISTORY OF PRESENT ILLNESS: Patient was apparently normal before 7 years. Gradually she noticed itching all over the body, for which she took some medications but did not get any relief. Hence she Consulted an Ayurveda Physician and on physician’s advice underwent *Sadhyo vamana* and *Sadhyo virechana* for the same issue 7 years back. Symptoms were completely relieved. But since past 2months she noticed itching over the thigh, lowback, hands and neck followed by rashes and burning sensation. Symptoms were aggravated during morning and night and on exposure to the sun. Itching persisted for 30 minutes followed by reddish rashes and got subsided on its own. Symptoms tends to

aggravate more during evening time. Hence for further management she visited OPD of *Panchakarma* of KVGAMC Sullia.

PAST HISTORY: Patient had similar complaints and underwent *sadhyovamana* and *sadhyo virechana* 7 years back.

Family History: Nothing specific.

PERSONAL HISTORY

Food – Veg.

Vihara - Exposure to wind and sun

Sleep – Disturbed

Micturition – Normal.

GYNECOLOGICAL HISTORY

Regular menstrual cycle: 3-5 days /20-30days, normal bleeding.

Obstetric examination: G2 A0 P2 L2 D0

GENERAL EXAMINATION

Appearance –normal

Built –normal.

Palor –absent

Icterus –absent

Oedema –absent

Cyanosis –absent

VITAL DATA

Pulse -72bpm

BP – 120/80 mmHg

Respiratory rate – 18/minute.

SKIN EXAMINATION

Inspection: Morphology – wheals

Distribution – Around 10-20 erythematous wheals all over the body

Symmetry – Asymmetrical

Shape – Irregular

Colour – pinkish to red colour

Erythema – present

Pigmentation – Absent

Discharge – Absent.

PALPATION

Temperature – Normal

Texture –smooth

Tenderness – Absent

Scaling –Absent

Elevation – elevated at margins.

Koebner's phenomenon- Negative.

NIDANA PANCHAKA

NIDANA

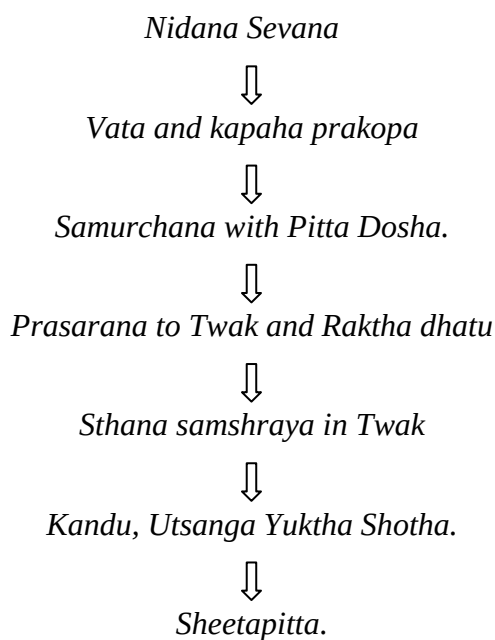
Aharaja Nidana – Ati katu, ruksha yukta sevana, Dadhi sevana

Viharaja Nidana – Divaswapna, Aatapa sevana

2. Poorva roopa – Kandu

3. Rupa – Kandu Raga, Utsanga yuktha shotha utpatti over neck, upper limbs, thighs.

4. Samprapthi :



SAMPRAPTHI GHATAKA

Dosha	Vata pradhana Tridoshaja
Dushya	Rasa, Raktha
Srotus	Rasavaha, Raktha vaha

<i>Srotodushti</i>	<i>Sanga, Vimargagamana</i>
<i>Agni</i>	<i>Vishamagni</i>
<i>Udbhava Sthana</i>	<i>Amashaya</i>
<i>Sanchara Sthana</i>	<i>Sarva Shareera</i>
<i>Adhishtana</i>	<i>Twak</i>
<i>Rogamarga</i>	<i>Bahya</i>
<i>Vyadhi swabhava</i>	<i>Ashukari</i>
<i>Sadhyasadhyata</i>	<i>Yapya</i>

TREATMENT: Details of *shodhana*

Table 1: Showing details of *vamana karma*.

<i>Deepana pachana</i> 15/12/2025	Medicine <i>Chitrakadi vati</i>	Dose 2-2-2 Before food
<i>Snehapana</i> From 16/12/2025 to 19/12/2025	<i>Mahatikthaka Gritha</i>	
	1 st day	30ml
	2 nd day	60ml
	3 rd day	90ml
	4 th day	130ml

PROCEDURES DURING *VISHRAMA KALA*

Procedure	Medicine	Duration
<i>Sarvanga Abhyanga</i> and <i>Bhashpa sweda</i> (20/12/2025 and 21/12/2025)	<i>Katu Taila</i>	20/12/2025 and 21/12/2025
<i>Vamana Karma</i>	<i>Snigdha Yavagu</i> 30gms <i>Madana phala</i> <i>pippali churna</i> -5g + <i>Yashtimadhu churna</i> - 4g+ <i>Vacha churna</i> -2g + <i>Saindhava</i> -2 g + <i>Madhu</i> – Quantity sufficient. <i>Lavanodaka</i> -1600ml <i>Yashtimadhu phanta</i> -1750ml No of vegas -4(<i>Avara shuddhi</i>)	21/12/2025
<i>Samsarjana krama</i>	<i>Peyadi samsarjana karma</i> for 3 days	21/5/2025 to 25/5/2025

Table 2: showing details of *virechana karma*.

<i>Snehapana</i> From 29/12/2025 to 1/1/2026	<i>Mahatikthaka Gritha</i>	
	1 st day	50ml
	2 nd day	100ml
	3 rd day	150ml with pinch of <i>saindhava</i> .
Procedures		
Procedures	Medicine	Duration
<i>Sarvanga Abhyanga</i> <i>Bashpa Sweda</i>	<i>Katu Taila</i>	From 2/1/2026 to 4/1/2026
<i>Virechana Karma</i>	<i>Trivrut lehya</i> (45gm)+ 100ml <i>Draksha kashaya</i>	5/1/2026

	No of vegas -10	
<i>Samsarjana krama</i>	<i>Peyadi samsarjana krama</i> for 5 days	From 5/1/2026 to 10/1/2026.

Assesement by UAS 7 SCORE

UAS7 is a urticaria activity score over 7 days is a standardize clinical tool to assess the severity of itching and activity of urticaria. It is particularly useful for monitoring disease activity over time and evaluating response to treatment. UAS7 is based on two major clinical manifestations of urticaria: wheals (hives) and pruritus (itching).

Each parameter is scored on a daily basis from 0 to 3 scale, maximum daily score of 6. These scores are recorded consecutive days and adding total to get scores ranging from 0-42.

Wheels	None	0
	Mild <20 wheals per 24 hrs	1
	Moderate - 20-50 wheals per 24hrs	2
	Intense > 50 wheals per 24hrs.	3

Pruiritis	None	0
	Mild - Present but not annoying	1
	Moderate - Troublesome but not interfere with normal daily activity or sleep	2
	Intense - Severe Itch, which is suffieciently interfere with normal daily acivity or sleep.	3

The final score is calculated by adding together the daily scores, which can range from 0 to 6, for 7 days. This results in a maximum total score of 42.

Significance

0- Urticaria free

1-6 Well controlled Urticaria

7-15 Mild disease Activity

16-25 Moderate disease Activity

28 -42 points –Severe disease Activity.

OBSERVATIONS AND RESULTS

Initial Presentation: The patient presented with erythematous wheals on the neck, thighs, and upper limbs. These lesions appeared predominantly in the morning and evening, spontaneously subsiding within 30 minutes.

During Snehapana

- **Days 1 & 2:** Wheals erupted immediately following the ingestion of *Ghrita*.
- **Day 3:** The patient had headache, followed by increased itching. New wheals emerged predominantly around the periorbital region eyes, which were absent on day one.
- **Day 4:** Itching and rashes were noticed during Noon time persisted for 10 minutes. *Samyak snigdha lakshanas* were achieved, that includes *Snigdha varchas*, *Adhastha Sneha darshana*, *Twak snigdhata*, and *Deepthagani*. Consequently, snehapana was discontinued, and *vishrama kala* was advised.
- **After Vamana Karma:** Generalized wheals significantly reduced for two days. Residual mild itching and wheals were localized strictly to the thigh region, showing the marked improvement compared to baseline.

During snehapana for virechana karma and after virechana karma: Itching and wheals recurred only on the thighs in a much milder form. Post-virechana, the patient remained completely symptom-free with no itching or wheals throughout the *Samsarjana krama*.

- **FOLLOW UP PERIOD:** The patient reported a significant reduction in both the frequency and intensity of the skin rashes and itching following the *Shodhana karma*, with mild episodes triggered exclusively by prolonged exposure to cold wind.

RESULTS

Parameters	Before treatment	After vamana karma	After Virechana Karma
<i>Kandu</i>	Grade 2	Grade 1	Grade 0
<i>Pidaka</i>	Grade 1	Grade 1(<10 lesions)	Grade 0
Frquence of occurrence	Grade 3 (> 3episodes)	Grade 1 (<1 episode /week)	Grade 0
Duration of lesions	Grade 2 (<1 hour)	Grade 2 (10Minutes)	Grade 2 (0-5 Minutes)

Urticaria Activity Score

Time line	Wheals Score	Pruiritis Score	UAS7 Score
Before Treatment	2 (Moderate - 20-50 wheals per 24hrs)	2(Moderate - Troublesome but not interfere with normal daily activity or sleep)	21 (Moderate disease activity)
After Vamana Karma	1(Mild <20 wheals per 24 hrs)	1 Mild - Present but not annoying	13
After Virechana Karma	1(Mild <20 wheals per 24 hrs)	0 (None)	5

Images Before and After treatment

a. Before *vamana Karma*b. After *Vamana Karma* during *Samsarjana krama*Before *Virechana Karma*Post *samsarjana krama* of *virechana Karma*

DISCUSSION

Poorvakarma: Procedures that are conducted prior to the shodhana are called poorvakarma.^[4] This consists of *Deepana*, *pachana*, *rukshana*, *snehana*, *swedana*. This facilitates the movements of *doshas* from *shaka* to *koshta* there by expelling the *doshas* from nearest route.

Deepana pachana - *Deepana pachana Aushadhi* can be given before administering the *Snehapana* so that it makes *koshta laghvakara* and helps in digestion of *sneha*. In this case study *Deepana-pachana* was done with *chitrakadi vati*. All drugs In this *vati* are *Teekshna*, *Ushna* in nature which increases *Agni* of the patient along with the *pachana* of the *Ama*.

Snehapana – Done with *Mahatikthaka Gritha*. This *gritha* contains all the drugs that are *tikta rasa pradhana*, helps in tackling *pitta dosha*. The *phalashruthi* of this *Gritha* tells that it cures all kinds of *kushta roga* and indicated in *kandu*^[5] also It is directly indicated in *sheetapitta chikitsa*. Hence *Mahatikthaka gritha* was selected for *snehapana* which helped in reducing the *lakshanas* of *Sheetapitta* and does *dosha utkleshana* that was necessary for proper *shodhana karma*.

Bahya Snehana and Swedana

Abhyanga was done with *Katu Taila* followed by *Bashpa sweda*. *Katu Taila* is indicated for *abhyanga* by *Yogaratanakara*^[6], and *Gada nigrha* in *sheetapitta*. It is having *Snigdha*, *ushna* and *teekshna* property and indicated in *kushta vikaras*^[7] helps in counteracting the *kapha* and *vata dosha*. *Snehana* and *swedana* brings *doshas* from *shaka* to *koshta* and does *srotoshodhana* thereby facilitating the expulsion of *Utklishta Doshas* during *Shodhana karma*.

Role of vamana in sheetapitta

Vamana karma is the ideal treatment for expelling *Apakwa kapha, pitta dosha* and is the line of treatment in *Sheetapitta* explained by different *Acharyas*. In this case *Vamana karma* was done with *Madana phala pippali churna*, *Yashti madhu churna*, *vacha churna*, *Saindhava* and *Madhu*. *Madanaphala pippali churna* is the best *vamaka dravya* and *Yashtimadhu churna*, *Vacha churna* and *Saindhava churna* as *vamanopaga dravya* helps in easy expulsion of *kapha dosha* by its *ushna*, *teekshna*, *vikasi*, *sukshma gunas*. It reaches *Hrudaya* from there through *dhamani* it reaches *stool* and *sookshma srotus* by its virtue and clears the *srotodha* thereby expels the adhered *kapha dosha* from the body. *Vamana* procedure itself

is ideal for *Sleshmahara* action, reduces *kandu*, *twak vaivarnyata* and also spreading of the rashes in this case study.

Role of virechana in sheethapitta

Sheethapitta is a *tridoshaja vyadhi* which is caused Mainly by *Vata* and *Kapha Dosha* is vitiated along with *Pitta dosha*. The *Prakupita Kapha* combined with the *Pitta Dosha* and due to *vata dosha*, cause *vimarga gamana* in *Twacha*. *Virechana* is the best treatment for all *Pitta vaikrutha vyadhis* and *Twak vikaras*. In this Case *Trivrit lehya* was used for *virechana* along with *Draksha Kashaya*. *Trivrit* is *sukha virechaka* and by its *Ushna* and *Teekshna* properties it clears the *Dosha sanghatana* in *Srotus* and expels the *Doshas* from *Adhobhaga* by its *Prabhava*. *Draksha kashaya* that was used as *Anupana* does *Sarana* of *Mala* and supports the process of *Virechana karma* without much complications. Hence *Virechana Karma* helped in reducing the *Daha*, *Raga* and *Mandalotpatti* in *Twacha* by correcting the *Dooshitha Raktha Dhatu* also which are in *Ashraya Ashrayi sambandha* with *Pitta dosha*.

CONCLUSION

Sheethapitta, characterized by symptoms like *Kandu*, *Raga*, *Pidaka*, which is caused by involvement with predominance of *Kapha* and *Vāta* along with *Pitta* and *Rasa* and *Rakta* as *Dushyas*. Since it is a *Tridoshaja vyadhi* *Shodhana* therapy played an important role in the management in this case study of *Sheetapitta* by eliminating the vitiated *Doṣhas* from their primary sites and thereby reducing the tendency for recurrent manifestations. Hence *shodhana* plays vital role in not only curing the disease but also preventing the reoccurrence of the diseases.

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