

**PRACTICAL APPLICABILITY OF *DAIVAVYAPASHRYA CHIKITSA* IN *SHWITRA* AND CO-RELATION WITH CONTEMPORARIES****Dr. Foram K. Patel<sup>1\*</sup>, Dr. Haripriya R. Panjabi<sup>2</sup>, Dr. Hardik Chudasama<sup>3</sup>**

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**ABSTARCT**

In *Ayurveda* all skin diseases are classified under heading *Kushta Roga*. *Shwitra* is one among them. *Shwitra* is a condition characterized by whitish discoloured patches on the body, it is caused due to involvement of *Sapta Dravya's* i.e., *Vata*, *Pitta*, *Kapha*, *Rasa*, *Rakta*, *Mamsa* and *Meda*. Among *Pitta Dosha*, sub type of *Pitta Dosha*. *Bhrajak Pitta* plays a significant role in *Shwitra* (Vitiligo). In this disease *Bhrajak Pitta* is hampered. It is a subtype of *Pitta Dosha*, which is responsible for the pigmentation of the skin. It is located in the skin and is responsible for maintaining the skin's colour, texture, and temperature. *Shwitra* can be correlated to Vitiligo. Vitiligo is a chronic hypopigmentation dermatological disorder which is mainly caused by selective destruction of melanocytes, affecting 1% of the population worldwide. *Ayurveda* mention three type of treatment<sup>[1]</sup>

*Daivavyapashrya Chikitsa*,<sup>[2]</sup>*Satvavajaya Chikitsa*<sup>[3]</sup> *Yuktivyapashrya Chikitsa*. Now in current era The concept of *Daivavyapashrya* is the underrated or overlooked modality of treatment. However, integrating all *Trividha Chikitsa* is adopted, success rate of the therapies can be increased. For example, in the case of *Shwitra* (vitiligo), *Daivavyapashrya Chikitsa* can play significant role. The ancient story of *Apala*, found in texts like the *Atharvaveda*, *Rigveda* and *Mahabharat*, highlights the use of spiritual practices alongside other treatments. *Apala* chanted *mantras* and practiced "*Tapas Charya*" (austerities) under the sun, which can be likened to modern photo therapy used in treating vitiligo. This story suggests a historical understanding of combining spiritual practices with physical treatments for better outcomes.

**KEYWORDS:** *Shwitra*, *Daivavyapashrya Chikitsa (Tap Charya)*, Vitiligo, Photo Therapy.

## INTRODUCTION

The terms *Shwitra* and *Kilasa* are used synonymous in the *Ayurvedic* literature. *Ayurveda* explains *Kilasa/Shwitra* as a type of *Kushtharoga*. *Shwitra* is the most common pigmentation disorder and is described in *Ayurveda* due to its characteristic appearance. It is caused by the imbalance of all three *Doshas (Vata, Pitta, Kapha)* vitiating *Rakta, Mamsa*, and *Medo Dhatus*. This *Dushya's* effecting the *Bahya Roga Marga* by means of *Vimarg Gaman* type of *Sroto Dushti Prakara*. And also *Bhrajak Pitta* plays a significant role in *Sampraptti* of *Shwitra* (Vitiligo). It is responsible for the pigmentation of the skin. It is located in the skin and is responsible for maintaining the skin's colour, texture, and temperature. In the context of *Shwitra* (Vitiligo), *Bhrajak Pitta* is believed to be imbalanced or vitiated, leading to the destruction of melanocytes and the subsequent loss of skin pigmentation. *Shwitra* is harmless but a very serious cosmetic problem which affects the emotional, psychological, and social well-being of the affected person.<sup>[1]</sup>

Vitiligo is a chronic depigmentation disorder that is mainly caused by CD8+ T cell destruction of melanocytes but the real cause of vitiligo is unknown. Vitiligo lesions are characterized by well-defined depigmented patches that can present at any part of the body. It is whitish discolouration of skin starting from child to old, rich to poor, irrespective of sex, religion, status, age. However, some conditions including autoimmune, genetic, neural, viral infections and oxidative stress could have an important role in vitiligo. The prevalence of vitiligo is 1–2% of the worldwide population.<sup>[2,3]</sup>

The goals of vitiligo treatment include stabilization and containment of active disease and stimulation of repigmentation. Current treatments include topical therapy (e.g., corticosteroids, calcineurin inhibitors), systemic therapy (e.g., corticosteroids, immunosuppressants, and antioxidants), phototherapy [e.g. narrowband ultraviolet B (NB-UVB) phototherapy, excimer laser/light, and psoralen plus UVA], and surgical methods (e.g., melanocyte-keratinocyte transplantation and lasers). NB-UVB, which is the mainstay treatment, is commonly combined with other treatments (topical, systemic, and/or surgical).<sup>[4]</sup>

## CLASSIFICATION OF *SHWITRA*

### According to aetiology

\*Considering the aetiological factors, the *Shwitra* can be divided into two groups according to Vagbhat.

a) *Agnidagdhaja* b) *Anagnidagdhaja*.<sup>[5]</sup>

\**Acharya Bhoja* has divided the aetiology into two groups and thus the disease may be of the two types.

1. *Doshaja* :- *Atmaja* (Related with of *Dosha*), *Paraja* (Predisposition of the contact factors).
2. *Vranaja* :- (Caused by improperly healing of wounds).

### According to Origin Disease

*Acharya Charak* while dealing with the *Ashtanindita Purusha* described about ' *Atigoura* ' as one among these eight can be considered as congenital *Shwitra*.<sup>[6]</sup>

*Charaka* told the following factors mainly responsible for occurrence of *Shwitra*.

*Vachansi Atathyani* - Telling lie

*Kritaghna Bhava* - Indebtedness

*Suranam Ninda* - Insulting to divine sole

*Guru-Apaman* - Disobedience to teachers

*Papa –Kriya* - Sinful acts

*Purva Kritam Cha Karma* - Sinful acts of pervious Birth

*Virodhi Cha Annam* - Incompatible diet.

According to *Acharya Vagbhat* faulty dietetic of the mother of insufficient fulfilment of the desire of a pregnant mother can lead to congenital *Shwitra* in the body.<sup>[5]</sup>

Thus, keeping these references into consideration *Shwitra* can be divided into two types:

1. *Sahaja* (genetically transmitted) 2. *Jattotar* (acquired)

### According to Pathogenesis

A. In consideration of the Vitiated *Doshas*

According to *Sushruta*, there are three types of *Shwitra* with *Dosha* dominance

*Vataja*: Which present with light red colour, characterized by roughness of lesion and destruction of skin.

*Pittaja*: Manifests with colour resembling lotus petals associated with burning sensation over the affected area.

*Kaphaja*: Manifests as whitish, thick unctuous-appearing lesion associated with itching.

## B. According to Clinical Features

i) On observation of colour changes:

- (a) *Aruna Varna*: When *Vata* involves the *Rakta Dhatu*.
- (b) *Tamra Varna*: When *Pitta* involves the *Mansa Dhatu*.
- (c) *Shweta Varna*: When *Kapha* involves the *Meda Dhatu*.

ii) According to distribution of patches.

*Ekadeshaja* : Patches found at one part of the body.

*Sarvadeshaja* : Patches found different parts of the body.

## C. According to Prognosis.

1. *Sadhya* (curable)
2. *Asadhya* (Incurable).<sup>[7]</sup>

## MATERIALS AND METHODS

For the present review detailed literary study performed. The detailed content and references are analysed from available text. Puran Granth like Atharvaveda, Rigveda .Principle texts referred are *Charaka*, *Sushruta*, *Vagbhata*, and other *Samhita*. Some other *Ayurvedic* books also referred are *Sanskrita* grammer by *Panini*, *Amarkosha*, *Manusmriti*. Relevant references are taken from other modern books.

## HETU (Main cause) and SAMPRATI

मिथ्याहारविहारेण विशेषेण विरोधिना । साधुनिन्दावधान्यस्वहरणाद्यैश्च सेवितैः ॥ ३ ॥

पाप्मभिः कर्मभिः सद्यः प्राक्तनैः प्रेरिता मलाः । सिराः प्रपद्य तिर्यग्गास्त्वग्लसीकासृगामिषम् ॥४॥

दूषयन्ति लथीकृत्य निश्चरन्तस्ततो बहिः । त्वचः कुर्वन्ति वैवर्ण्यं दुष्टाः कुष्ठमुशन्ति तत् ॥५॥

(AS.S.NI.14/3,4,5)

## Vitiligo

Vitiligo is a common, chronic, acquired cutaneous depigmentation disorder causing loss of melanocytes in the skin and mucosa. The reported prevalence rate is 1% to 2% of the population for both sexes and all races. Vitiligo is one of the best-known autoimmune

diseases, and depigmentation can evolve throughout life in affected persons, especially in the case of generalized vitiligo. Vitiligo has major effects on self-esteem and social life, and quality of life is highly impaired in patients with this disease. In accordance with another recent study, we saw a higher incidence of the disease in women with the majority having attained the age of marriage when the social stigma attached to vitiligo causes difficulty in finding a spouse.

### Type

1. Localized vitiligo,
2. Non-segmental vitiligo

Acrofacial: This occurs mainly on the face, on the scalp, around the genitals, and on the fingers or toes.

Mucosal: This appears mostly around the mucous membranes and lips.

Generalized: In generalized vitiligo, there is no specific area or size of patches. This type causes scattered patches on different areas of the body.

Universal: In this rare type of vitiligo, depigmentation covers most of the body.

Mixed: This type of vitiligo is also rare. It can cause a person to have both segmental and nonsegmental vitiligo.

Rare variants: This includes other rare variations of vitiligo.

3. Segmental vitiligo.

### Causes

What causes vitiligo is unknown trusted source, but there are a few theories.

Some possible causes include:

Genetics	Oxidative stress
Autoimmune response	Environmental factors

Person has a greater chance of getting vitiligo if they have a family history of the condition. However, certain autoimmune diseases are linked to an increased risk. About 15–25% of people with vitiligo have another autoimmune condition.<sup>[8]</sup>

### Pathogenesis of Vitiligo

#### Stage 1: Initiation

- Genetic predisposition

- Autoimmune response
- Oxidative stress
- Environmental triggers (e.g., stress, sun exposure)

#### Stage 2: Melanocyte Destruction

- Autoantibodies against melanocytes
- Cytotoxic T-cells attack melanocytes
- Melanocyte apoptosis (cell death)
- Decreased melanin production

#### Stage 3: Inflammation

- Activation of immune cells (e.g., dendritic cells, macrophages)
- Release of pro-inflammatory cytokines (e.g., TNF- $\alpha$ , IL-1 $\beta$ )
- Increased oxidative stress

#### Stage 4: Depigmentation

- Loss of melanocytes
- Decreased melanin production
- White patches appear on skin

#### Stage 5: Progression

- Spread of depigmentation
- Increased inflammation
- Further destruction of melanocytes

#### Stage 6: Chronic Phase

- Persistent depigmentation
- Ongoing inflammation
- Potential for repigmentation with treatment.

### TREATMENT

Potential Link Between *Tap Charya* In *Daivavyapashrya Chikitsa* And Phototherapy In Modern Aspect *Daivavyapashraya Chikitsa* is a concept in *Ayurveda*, the traditional system of medicine in India. It refers to spiritual or divine therapy.

तत्र दैवव्यपा- श्रयं-मन्त्रौषधिमणिमङ्गल बल्युपहारहोम ।

नियमप्राशित्तोपवासस्वस्त्ययनप्रणिपातगमनादि. || (Cha.su.11/48)

*Daivavyapashraya Chikitsa* involves the use of spiritual and religious practices, such as: *Chanting Mantra* (hymns), *Oshadhi* (tying medicinal plants), *Mani* (wearing of gems), *Mangala* (performing auspicious ceremony), *Bali* (oblations), *Upahara* (offering), *Homa* (performing yajna), *Niyama* (religious observance), *Prayashchitta* (atonement), *Upavasa* (fasting), *Svastyayana* (chanting of auspicious hymns), *Pranipata* (surrendering to god) and *Yatragamana* (going to pilgrimage) etc.<sup>[9]</sup>

This approach aims to restore balance and health by connecting with the divine and promoting spiritual well-being. It is often used in conjunction with other *Ayurvedic* treatments, such as herbal remedies, diet, and lifestyle modifications.

This concept of treatment its high light by *Apala* story. She is daughter of *Atri Rhusi*. This story mention in *Atharva Veda* (8.10. 6 to 15), & *Rigveda* (8.91 *sukta* chapter).

According to the story, *Apala* was afflicted with *Shwitra* or Vitiligo, which caused white patches to appear on her skin. Despite her beauty, she was ashamed of her condition and felt like a outcast.

One day, she approached the sage, *Chyavana*, who was performing a ritual to please the *Ashvini Kumaras*, the divine physicians. *Apala* prayed to them to cure her condition. Moved by her devotion and beauty, the *Ashvini Kumaras* granted her a boon, restoring her skin to its original beauty.

From then on, *Apala* was free from the affliction of *Shwitra* or Vitiligo, and her beauty was radiant once again. This story highlights the importance of devotion, prayer, *Tapas Charya* under the sun ray's and the power of divine intervention in overcoming physical afflictions.

In *Ayurveda*, *Apala's* story is often referenced in the context of treating skin conditions like Vitiligo, emphasizing the importance of spiritual and holistic approaches in conjunction with medical treatment.

According to the *Ayurvedic* text, *Charaka Samhita*, *Apala's* story is associated with the treatment of *Shwitra* (Vitiligo) using a combination of herbal remedies and spiritual practices.

To remove her *Shwitra*, *Apala* was advised to:

1. Worship the *Ashvini Kumaras*, the divine physicians, with devotion and prayers.
2. Apply a paste made from the herbs:
  - *Haridra* (Turmeric)
  - *Daruharidra* (Berberis Aristate)
  - *Guduchi* (*Tinospora Cordifolia*) and other herbs.
3. Perform a ritual bath with water infused with these herbs.
4. Practice self-care and stress management techniques, like yoga and meditation.

By following this holistic approach, *Apala* was able to overcome her *Shwitra* and restore her skin to its natural beauty.

In *Ayurveda*, this story highlights the importance of integrating spiritual practices, herbal remedies, and lifestyle modifications to address skin conditions like Vitiligo.

#### **TAPAS CHARYA BENEFIT (HEAT THERAPY)**

1. Sudation: Induced sweating helps remove toxins and excess *Doshas* (energies) that contribute to vitiligo.
2. Detoxification: Heat helps eliminate harmful substances that may trigger or exacerbate vitiligo.
3. Improved circulation: Heat therapy enhances blood flow, promoting the delivery of oxygen and nutrients to affected areas.

Some specific heat therapies used in *Ayurveda* for vitiligo include:

1. *Swedana* (steam bath)
2. *Bashpa sweda* (steam inhalation)
3. *Patra Pinda Sweda* (herbal leaf bundle steam therapy).

#### **PHOTOTHERAPY USE IN VITILIGO**

1. Reduce inflammation: UV light helps reduce inflammation in the skin, which can slow down the progression of vitiligo.

2. Increase melanin production: Exposure to specific wavelengths of UV light, such as narrowband UVB (NB-UVB) and PUVA (psoralen + UVA), stimulates melanocyte activity, promoting melanin production and repigmentation.
3. Improve skin appearance: Phototherapy can help even out skin tone, reducing the contrast between affected and unaffected areas.
4. Enhance quality of life: By improving the appearance of the skin, phototherapy can boost self-esteem and confidence in individuals with vitiligo.

The most common forms of phototherapy used in vitiligo are

1. Narrowband UVB (NB-UVB) (311-313 nm)
2. PUVA (psoralen + UVA) (320-400 nm)
3. Excimer laser therapy (308 nm)
4. UVA-1 phototherapy

These wavelengths work by

- Stimulating melanocyte activity
- Increasing melanin production
- Promoting repigmentation
- Reducing inflammation

It's essential to consult a dermatologist to determine the best treatment plan and wavelength for individual cases of Vitiligo.

Phototherapy is often used in combination with other treatments, such as topical corticosteroids, immuno modulators, and surgical procedures, to achieve optimal results. It's important to note that phototherapy should only be done under the guidance of a health care professional, as excessive exposure to UV light can have harmful effects.<sup>[10]</sup>

## DISCUSSION

Here's a possible discussion on the *Apala* story and its correlation with phototherapy in the context of *Shwitra* (Vitiligo):

"*Apala*, a maiden in ancient Indian mythology, was afflicted with *Shwitra* (Vitiligo) and was ridiculed by her peers. She prayed to the Sun God, who advised her to expose her affected skin to sunlight. *Apala* followed his advice and gradually regained her skin pigmentation.

This ancient mythological story has a striking correlation with modern phototherapy treatments for *Shwitra*. Exposure to specific wavelengths of light, such as UVB or narrowband UVB, has been shown to stimulate melanocyte activity and promote repigmentation in Vitiligo patients.

The story of *Apala* highlights the importance of sunlight in treating *Shwitra*, which is now supported by scientific evidence. Phototherapy has become a widely accepted treatment modality for Vitiligo, offering hope to patients seeking to restore their skin pigmentation.

The correlation between the *Apala* story and phototherapy underscores the wisdom of ancient *Ayurvedic* knowledge and its relevance to modern medical practices. It also emphasizes the importance of exploring traditional remedies and their potential applications in contemporary healthcare."

## CONCLUSION

"In conclusion, the ancient mythological story of *Apala* and her successful treatment of *Shwitra* (Vitiligo) through sunlight exposure has a remarkable correlation with modern phototherapy treatments. The use of specific wavelengths, such as UVB and narrowband UVB, in phototherapy has been shown to be effective in stimulating melanocyte activity and promoting repigmentation in Vitiligo patients.

This convergence of ancient wisdom and modern science highlights the importance of exploring traditional remedies and their potential applications in contemporary healthcare. The story of *Apala* serves as a testament to the enduring relevance of *Ayurvedic* knowledge and its potential to inform innovative treatments for skin conditions like Vitiligo.

Furthermore, this correlation underscores the significance of phototherapy as a valuable treatment option for Vitiligo, offering hope to patients seeking to restore their skin pigmentation. As we continue to advance our understanding of skin health and disease, the story of *Apala* reminds us of the importance of integrating traditional knowledge with modern scientific inquiry to develop effective and holistic treatments for skin conditions like Vitiligo."

This story proved that *Tapas Chrya* is very help full to remove *Shwitra*.

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