

HOLISTIC MANAGEMENT OF PALMO-PLANTAR PSORIASIS (VIPADIKA) THROUGH AYURVEDIC INTERVENTIONS – A CASE REPORT

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ABSTRACT

Introduction: Palmo-plantar Psoriasis is a chronic autoimmune disease. It is specifically characterized by keratosis, fissure marks, scaling with a feeling of pain. It is primarily correlated with Vipadika, one among different kshudra kusthas mentioned in Ayurvedic classics. **Case Presentation:** The female patient, about 7 years old, had shown symptoms like reddish dry with patchy discolouration, desquamation with fissured skin and a feeling of mild pain with itching in both the palms for the last 6 months. **Intervention:** The treatment plan mainly incorporated Ayurvedic Shodhana (Purificatory measures) followed by Shamana (Pacificatory approach) therapy. She was given Mahatiktaka Ghritam (10 gm ODAC on an empty stomach with lukewarm water) for 14 days and Trivrit Avaleham (5 gm ODHS with lukewarm water) for 14 days as Shodhana therapy with Gandhakadya Malahara Lepam (local application) for 42

days. Navayas Lauha tablet (500 mg BDAC triturated with honey) for 28 days, Gandhaka Rasayana tablet (125 mg BDAC triturated with honey) for 28 days and Syp. Khadirarishtam (10 ml BDPC with lukewarm water) for 28 days, administered as Shamana after Shodhana

therapy. **Outcome** – Significant clinical resolution was achieved in the study. Reddish skin turned back to normal with positive remission of patchy lesions within 7 weeks. Scales, Fissure lines and Pain subsided within the first month of the whole procedure. **Conclusion** – The Ayurvedic management proved that the protocol was safe, effective alternative measure for the easy treatment of the disease.

KEYWORDS: Vipadika, Palmo-plantar Psoriasis, Shodhana, Shamana, Pathyapathya.

INTRODUCTION

The diseases related to skin are considered under one term called 'Kustha'. According to Acharya Sushruta, Vipadika is one of the kshudra kusthas,^[1] characterized by Panipaada Sphutana (Fissured or Cracked palm and sole), Tivravedana (Feeling of Pain), Manda Kandu (Mild Itching) and Saraagapeedika (Reddish Patches).^[2] The common nidana (causative factor) includes Mithya ahara-vihara, Viruddha ahara, Guru-snigdha ahara, Diwaswapna, Ratrijagarana, Vegavidharana etc. The doshas involved in the causation of the disease are Vata, Pitta and Kapha along with dushyas like Tvak, Rakta, Mamsa, Lasika.^[3] The manifested condition correlates the disease with Palmo-plantar Psoriasis in modern aspect. It is due to the complex factors like genetic, immunological and environmental. This condition causes serious functional disability with mental depression. The disease also hampers the quality of life in persons. The prevalence of that type of psoriatic lesions in India is significantly higher. About 0.44% - 2.8% of patients are affected of the total dermatological patients.^[4] In modern science, the disease is primarily treated with steroidal medicaments and some immunomodulators but the holistic approach like Ayurveda has proven very effective through well-designed treatment protocol based on classical principles. There is a big role of pathyapathya (diet and lifestyle modification) along with the medicines applied.

CASE REPORT

Patient Information and Clinical History

July 19th 2024, (6 months before hospital visitation)

Onset of the symptoms like mild erythema with dryness and itching.

December 20th 2024, (day of visitation)

- **Event:** Patient came to the Out Patient Department of Institute of Post Graduate Ayurvedic Education and Research, Kolkata with OPD ticket reg. no. AYUR/RG2400036351.

- **Patient Profile:** The female patient, about 7 years old, presented with reddish dry with patchy discoloration, desquamation with fissured skin and feeling of mild pain with itching in both the palms.
- **Physical Examination:** Facies – Dull, Physical and Mental status – Stressed, Height – 109.6 cm, Weight – 23 kg.
- **Medical or Family History:** No such.

BASELINE FINDINGS

Personal Information

Appetite – Normal, Bowel – Normal, Bladder – Normal, Sleep – Irregular.

General Examination

Icterus – Absent, Pallor – Present (mild), Oedema – Absent, Cyanosis – Absent, Clubbing – Absent, Pulse rate – 96 bpm, Respiratory rate – 25/min, Blood Pressure – 102/74 mm of Hg, Weight – 23 kg, height – 109.6 cm.

Systemic Examination

Respiratory System – Air entry bilaterally equal.

Cardiovascular System – S1 and S2 Normal.

Central Nervous System – Active, Conscious and Co-operative.

Local Examination

Site – Palm and Sole

Distribution of the lesions – Symmetrical

Margin of the lesions – Irregular

Dryness – Present

Fissured or Cracked skin – Present

Pain – Mild

Itching – Mild

Discolouration – Reddish

Ashtavidha Pareeksha (Eight Fold Examination)

Nadi – Swabhabika (96/min.)

Mala – Baddhamala Pravritti

Mutra – Swabhabika

Jihva – Suska

Shabda – Swabhabika

Sparsha – Ruksha, Usma

Drik – Swabhabika

Akriti – Swabhabika

Samprapti Ghataka

Doshas – Vata associated with Pitta and Kapha

Dushyas – Tvak, Rakta, Mamsa and Meda

Adhisthana – Tvaka

Shrotas – Rasabaha, Raktabaha and Mamsabaha Shrotas

Agni – Mandagni

Udbhabasthana – Amashaya

Rogamarga – Bahya

Vyadhi Swabhava – Chirokari

Sadhyasadhyatva – Kricchrasadhya

Laboratory Investigations (21. 12. 2024)

Hb% - 10.6 gm/dL

WBC – $9.1 \times 10^3 / \mu\text{L}$

ESR – 17 mm/hr

FBS – 82 mg/dL

IgE – 296 IU/mL

THERAPEUTIC INTERVENTION

Table No. 1: Therapeutic Intervention.

Sl. No.	Medicaments	Dosage	Duration
1.	Mahatiktaka Ghritam ^[5]	10 gm ODAC on an empty stomach with lukewarm water	First 14 Days
2.	Trivrit Avaleham ^[6]	5 gm ODHS with lukewarm water	First 14 Days
3.	Tab. Navayas Lauha ^[7]	500 mg BDAC triturated with honey	Next 28 Days
4.	Tab. Gandhaka Rasayana ^[8]	125 mg BDAC triturated with honey	Next 28 Days
5.	Syp. Khadirarishtam ^[9]	10 ml BDPC with lukewarm water	Next 28 Days

6.	Gandhakadya Malahara Lepam ^[10]	Local Application	42 Days
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ASSESSMENT CRITERIA

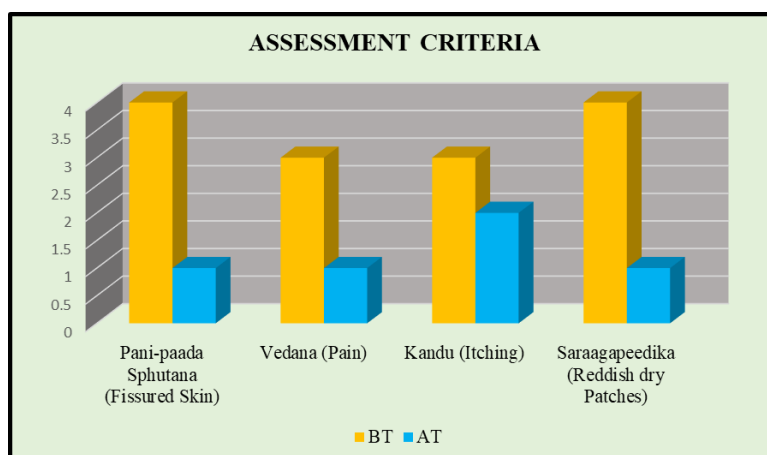
Table No. 2: Assessment Criteria.

Symptoms	Grade 1	Grade 2	Grade 3	Grade 4
Pani-paada Sphutana (Fissured Skin)	No Such	Mild	Moderate	Severe
Vedana (Pain)	No Such	Mild	Moderate	Severe
Kandu (Itching)	No Such	Mild	Moderate	Severe
Saraagapeedika (Reddish dry Patches)	No Such	Mild	Moderate	Severe

OBSERVATION AND RESULT

Table No. 3: Observation and Result.

Pani-paada Sphutana (Fissured Skin)		Vedana (Pain)		Kandu (Itching)		Saraagapeedika (Reddish dry Patches)	
BT	AT	BT	AT	BT	AT	BT	AT
4	1	3	1	3	2	4	1



Graph No. 1: Assessment Criteria.



BEFORE TREATMENT



AFTER TREATMENT

Fig. No. 1: Pictures of Before and After Treatment.

DISCUSSION

The clinical resolution of Palmo-plantar Psoriasis (Vipadika) through Ayurvedic therapies was very significant. The overall approach towards the breakdown of multifactorial pathogenesis was carried out successfully. The main involved doshas like Vata and Kapha, responsible for dried cracks with pain and reddish desquamated patches with itching respectively. The sequential application of Shodhana therapy along with the Shamana ausadhi systematically improved the condition. Both the therapies were modified and administered carefully considering the age of the patient. In Shodhana, Mahatiktakam Ghritapan followed by use of Trivrit Avaleham throughout the first two weeks showed remarkable results. This combination of drugs used to expel out bodily toxins. Mahatiktakam Ghrita contains Aragwadha, Saptaparni; both cleanses the blood and thereafter rejuvenate the skin. Mustak does deepan-pachan, Nimba has shown Antiallergic, Anti-inflammatory and Antimicrobial activity. Trivrit Avaleham has Virechaka property, does purgation effectively. It contains Trivrit, which expels out the accumulated toxins, leads to pacification of tridoshas. After proper purification, the Shamana ausadhi was given. Navayas Lauha has shown actions like Agnideepaka, Raktadhatuvardhaka, Krimighna and Rasayana. It contains Triphala, Trimada, Trikatu; which possesses Shothahara, Krimighna property. Gandhak Rasayana is having actions like Raktashodhaka, Twak roganashaka, Tridoshshamaka, Krimighna and Rasayana. The ingredients are Gandhaka (Sulphur), Tvak, Ela, Patra, Nagakesara, Triphala, Guduchi, Bhringaraja, Guduchi, Shunthi; whereas Gandhaka is Kushthaghna, Tvak is Krimighna, Patra, Shunthi and Nagakesara are having deepan-pachan property, Triphala is Vranaropaka, Rasayana; Guduchi and Bhringaraja are good immunomodulators. Khadirarishtam acts as Raktashodhaka, Shothahara, Krimihara, Deepaka etc. Gandhakadya Malahara Lepam possesses Kusthahara, Pitta-kaphahara, Vranaropana, Kandughna, Shothahara properties. Through the whole treatment modality, pani-paada Sphutana, Vedana, Kandu and Raagapeedika subsided effectively. This study is also important as a holistic, alternative, safe and easily applicable mode of management to overcome the search for the option against the western corticosteroid-based treatment in Palmo-plantar Psoriasis (Vipadika).

CONCLUSION

Both the therapeutic modes played good role in managing Palmo-plantar Psoriasis (Vipadika). Not only the symptomatic relief but also the overall positive effect was observed in the patient. Ayurvedic medicines along with some Pathyapathya helped to break the pathogenesis and improve the quality of life of the child. It can be assessed that many

diseases may become cured if this type of holistic protocol applied appropriately. There should be more studies to validate the Ayurvedic formulas through modern parameters.

INFORMED CONSENT

It was obtained from the patient.

CONFLICTS OF INTEREST

There are no conflicts of interest.

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