

A CRITICAL ANALYSIS OF REPEATED SHODHANA IN THE MANAGEMENT OF SHEETAPITTA, AN UNEXPLORED SAMHITA PROTOCOL

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ABSTRACT

Introduction: Skin diseases has become prevalent globally. Continuous efforts by every branch of medicine to approach in dermatology remain with lacunae. Various skin disorders are explained in various contexts of *Samhita*, *Sheetapitta* is one of them. This manifests *Varati Dashtavat Pidaka*, *Kandu*, *Toda* and *Daha* can be correlated with Urticaria. In present case, *Sheetapitta* is managed by exploring different protocol. **Aims and Objectives:** Adopting Repeated *Shodhana* in *Sheetapitta*, as explained in *Kushta chikitsa*. **Materials and Methods:** A 38 years female patient complaining elevated reddish irregular lesions and severe itching all over the body and burning sensation for 3 years. Sour belching, burning sensation and heaviness in body for 18 months. Symptoms were more aggravated in morning and at night. Treated with repeated *Shodhana*. **Results:** Repeated *Shodhana* including *Vamana*,

Virechana and *Nityavirechana* shown significant improvement in *Sheetapitta* symptoms and quality of life. **Discussion:** Repeated *Shodhana* unexplored in *Sheetapitta* was adopted due to chronicity, involvement of *Tridosha* and *Dhatu* has given substantiate results with reduction of majority of symptoms.

KEYWORDS: *Sheetapitta*, Urticaria, *Vamana*, *Virechana*, *Nityavirechana*.

INTRODUCTION

Dermatological conditions grouped into *Kushtha* in *Brihatrayee. Madhava Nidana*, *Yogaratanakara* and *Bhava Prakasha* explained symptoms^[1,2,3,4] like *Varati Dashta Samsthana Shotha* along with *Kandu*, *Toda*, *Chardi*, *Jwara* and *Vidaha*. Madhava explained its causes like exposure to *Sheeta Maruta* which causes *Dushti* to *Vata* and *Kapha* along with *Pitta* leads to *Sheetapitta*. Madhavakara explained premonitory symptoms like *Pipasa*(thirst), *Aruchi* (anorexia), *Gouravata* (heaviness) of the body, *Angasadha* (tiredness) and *Kandu* in *Akshi*. *Sheetapitta* can be compared to urticaria which is caused by localised dermal oedema secondary to temporary increase in capillary permeability, the symptoms last for less than 24hrs. If it's more than 6 weeks it is considered as chronic urticaria. Antihistamines and glucocorticoids are advised in modern system of medicine. Chakradatta advised treatment for *Sheetapitta* that includes *Vamana*, *Virechana*, *Udvartana*, *Raktamokshana* and *Kshara Prayoga*. *Yogaratanakara* also advised *Lepana*. In present case study, uniquely *Kushtha* line of treatment, repeated *Shodhana*⁵ has been adopted. Here is a case which elaborates this concept.

CASE REPORT

H/O PRESENT ILLNESS

Patient was apparently healthy 3 years back, Then gradually developed Maculopapular lesions below bilateral knee, gradually spread all over the body associated with severe itching and burning sensation. She consumed Tab. Citrizine as per advice of Allopathic physician. During course of treatment there were no lesions, but on stoppage of medicine lesions reoccurred, hence she is on regular intake of Citrizine. Since one and half year patient also developed itching and redness of eyes, sour belching, Burning sensation in chest and Heaviness in body occasionally. Hence, she consulted our hospital for the betterment.

PAST HISTORY

Left sided headache since 4 years.

MEDICAL HISTORY

CitriZen for 3 years.

PERSONAL HISTORY

Food habit: Mixed diet

Sleep: Disturbed due to itching

Bowel: Clear

Micturition: 4-5 times/day

OCCUPATIONAL HISTORY

Working as Receptionist

ASHTASTHANA PAREEKSHA	
<i>Nadi</i>	<i>Pitta Vata</i>
<i>Mala pravrutti</i>	<i>Prakrita</i>
<i>Mutra pravrutti</i>	<i>Prakrita</i>
<i>Jihva</i>	<i>Liptata</i>
<i>Shabda</i>	<i>Prakrita</i>
<i>Sparsha</i>	<i>Anushna Sheeta, Kandu</i>
<i>Drik</i>	<i>Raga</i>
<i>Akriti</i>	<i>Madhyama</i>

DASHAVIDHA PAREEKSHA	
<i>Prakriti</i>	<i>Pitta Vata</i>
<i>Vikruti</i>	<i>Tridosha</i>
<i>Sara</i>	<i>Madhyama</i>
<i>Samhanana</i>	<i>Madhyama</i>
<i>Pramana</i>	<i>Madhyama</i>
<i>Satwa</i>	<i>Madhyama</i>
<i>Satmya</i>	<i>Shadrasa</i>
<i>Aharashakti</i>	<i>Avara</i>
<i>Vyayamashakti</i>	<i>Madhyama</i>
<i>Vaya</i>	<i>Madhyama</i>

GENERAL EXAMINATION

Pallor, Icterus, Cyanosis Clubbing, Lymphadenopathy, Oedema -Absent

VITAL EXAMINATION	
Pulse Rate	78bpm
Respiratory Rate	18cpm
Heart Rate	78bpm
Blood Pressure	130/90 mm of Hg

SYSTEMIC EXAMINATION	
RS	NVBS heard
CVS	S, S2 heard
CNS	Conscious and Oriented
GIT	P/A-Soft, non-tender and no organomegaly

INTEGUMENTARY EXAMINATION	
Site	All over the body
Colour	Erythematous
Shape	Irregular
Size	3cm-12cm

Texture	Smooth
Itching	Present
Burning	Present

NIDANA PANCHAKA	
Nidana	Virudha Ahara, Ati amla sevana, Sheetamaruta Sparsha
Purvaroop	Gourava
Roopa	Varatidastavat Pidaka, Raga, Kandu, Daha,
Anupashaya	Intake of Dadhi, Madhura Ahara
Upashaya	Nothing specific

Samprapti

Nidana Sevana + Agnimandya



Ama formation



Rasa + Rakta dushti



Sthana samshraya in Twak



Sheetapitta

SAMPRAPTI GHATAKA	
Dosha	Tridosha
Dushya	Twak, Rasa, Rakta
Srotas	Raktavaha Srotas
Srotodushti	Sanga, Vimargagamana
Agni	Jatharagni, Rasagni
Udbhava Sthana	Amashaya
Sanchara Sthana	Rasayani
Adhishtana	Twak, Rasa, Rakta
Vyaktasthana	Twak
Rogamarga	Bahya Rogamarga
Sadhyasadhyata	Krichra Sadhya

Assessment Criteria^[6]

Urticaria activity Score		
Score	Wheals/24Hrs	Pruritus
0	Absent	Absent
1	Mild<20	Mild, not troublesome
2	Moderate20-50	Moderate-Troublesome, doesn't interfere with daily routine or sleep
3	Severe>50	Severe, interfere with daily routine or sleep

Symptoms	Mild	Moderate	Severe
<i>Kotha</i> (Raised oedematous wheals of pink red colour)	1	2	3
<i>Kandu</i> (Itching)	1	2	3
<i>Toda</i> (Pricking sensation)	1	2	3
<i>Daha</i> (Burning sensation)	1	2	3

DIAGNOSIS: Sheetapitta**TREATMENT PROTOCOL**

Vamana	
<i>Amapachana</i> (7 Days)	<i>Arogyavardhini Vati</i> <i>Lashusootashekara Rasa</i>
<i>Snehapana</i> (5 Days)	<i>Mahatiktaka Ghrita</i>
<i>Sarvanga Abhyanga</i> <i>Bashpa Sweda</i> (3Days)	<i>Moorchita Tila Taila</i> <i>Dashamoola Kashaya</i>
<i>Vamana</i> (1 Day)	<i>Madhanaphaladi Yoga</i> (<i>Madanaphala</i> -5gms, <i>Vacha</i> - 1Pinch, <i>Pippalli</i> - 1gm, <i>Saindhava lavana</i> - 2gms and <i>Madhu</i> - Q.S
Virechana	
<i>Amapachana</i> (5 Days)	<i>Arogyavardhini Vati</i> <i>Lashusootashekara Rasa</i>
<i>Snehapana</i> (4 Days)	<i>Mahatiktaka Ghrita</i>
<i>Sarvanga Abhyanga</i> <i>Bashpa Sweda</i> (3 Days)	<i>Moorchita Tila Taila</i> <i>Dashamoola Kashaya</i>
<i>Virechana</i> (1 Day)	<i>Trivrit Leha</i> (60gms)
Nitya Virechana	
<i>NityaVirechana</i> (45 Days)	<i>Eranda taila bharjitha Triphala</i> , <i>Katuki</i> , <i>Araghwada</i> (10gms)

RESULTS

Urticaria activity score	Before Treatment	After Vamana	After Virechana	After Nityavirechana
Wheals/24Hrs	2	1	1	0
Pruritis	3	2	1	0

Symptoms	Before Treatment	After Vamana	After Virechana	After Nityavirechana
<i>Kotha</i> (Raised oedematous wheals of pink red colour)	3	2	1	0
<i>Kandu</i> (itching)	3	2	1	0
<i>Toda</i> (pricking sensation)	3	2	1	0
<i>Daha</i> (burning sensation)	3	2	1	0

DISCUSSION

Sheetapitta is caused due to exposure of *Sheeta Maruta* present in this case. It can be compared to Urticaria in allopathic system, where it's been treated symptomatically by giving antihistamines to block the binding of histamines to H1 receptor. *Kushtha* Chikitsa (repeated *shodhana*) was adopted due to chronicity of 3 years failing to reduction of symptoms with

Shamaoushadhi. Sheetapitta is *Tridosha Janya Vyadhi* with involvement of *Rasa Rakta Dhātu* and patient had more *Kapha Lakshana* like *Teevra Kandu* all over body including eyes, heaviness of body and majority of lesions appeared in morning and night (*Kapha Kaala*) hence adopted *Vamana* initially.

Amapachana with *Laghusootashekhara Rasa* containing *Swarnagairika*, *Shunthi*, *Bhavana* with *Nagavalli Swarasa*. *Swarnagairika* possess *Kashaya*, *Madhura Rasa*, *Sheeta Virya* and *Kapha Pitta shamaka* properties. *Shunthi* possess *Katu Rasa*, *Ushna Virya* and *Madhura Vipaka*. *Nagavalli Swarasa* possess *Tikta*, *Katu Rasa*, *Ushna Virya* and *Katu Vipaka*. It does *Tikta Pachana*.

Snehapana with *Mahatiktaka Ghrita*. It is explained under *Kushtha Adhikara*, Ingredients mainly contains *Tikta* and *Katu Pradhana Dravya*, which are *Kapha Pittahara*, *Kushthagha*, *Kandughna* and *Krimighna* in nature.

Vamana with *Madhanaphaldi Yoga* is done, *Utklista Dosha* is expelled out through *Urdhwa marga*. After *Vamana*, itching in eyes, heaviness of the body was completely reduced, lesions appeared only in night. This indicates some of the *Kapha dosha* is expelled from the body.

Then planned for *Virechana*, *Pitta Lakshana* like sour belching, burning sensation in chest were reduced and lesions were seen occasionally in night after *Virechana*.

Though patient was on daily exposure to *Sheeta Maruta*, but lesions were not formed in a day due to increased *bala*^[7,8] of patient and elimination of *Dushya* by repeated *Shodhana*.

Patient is advised with *Nitya Virechana* for 45 days to eliminate remanent dosha and to decrease lesions which are occurring occasionally. There was complete absence of lesion after *Nityavirechana*.

This might be due to increased *Bala* and *Vyadhikshamatva* of patient, which is one of the outcomes of *Shodhana* and elimination of vitiated Dosha.

CONCLUSION

This case represents unique concept of repeated *Shodhana* adapted in *Sheetapitta* due to its chronicity. Other unexplored concepts if properly adopted with practical understanding than contextual understanding. Whether it is a treatment protocol or basic physiological

anatomical concepts, as Charaka mentioned there may be more diseases which may be upcoming, it should be understood after analysing *Dosha* and *Dushya*.

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