

**AN AYURVEDIC APPROACH IN THE MANAGEMENT OF
ALOPECIA AREATA: A CASE STUDY****Saniya K. K.^{1*} and Susheel Shetty²**¹P.G. Scholar, ²Professor and HOD

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Kayachikitsa, Alva's
Ayurveda Medical College
and Hospital, Vidyagiri,
DK-574227, Karnataka,
India.**ABSTRACT**

Alopecia areata is a autoimmune condition where there is nonscarring type of hair loss on the scalp and/or body. It has a lifetime incidence of approximately 2% worldwide with no sex predominance. In Ayurveda classics it can be correlated with Indralupta. Indralupta is explained under Kshudraroga by different Acharya whereas Acharya Vagbatta has explained it under Shiroroga. In contemporary science the treatment for Alopecia areata is corticosteroids which is having side effects on a long term use. Ayurveda deals with different treatment modalities which include both Shamana and Shodana. Raktamokshana is one among the Panchashodana procedure explained in chikitsa of Indralupta.

KEYWORDS: Alopecia areata, Indralupta, Kshudraroga,

Raktamokshana, Prachanam.

INTRODUCTION

Hair is considered as the barometer of both health and beauty. Hair loss often causes tremendous emotional and psychosocial distress in affected patients and their families and can also affect the quality of life. Alopecia areata is a complex autoimmune condition that causes non scarring hair loss.^[1] Typically there is a sudden onset of well circumscribed, totally bald, smooth patch usually affecting the scalp.^[2] During the active stage of hair loss, pathognomoni 'exclamation mark' hairs are seen at the border.^[3] In non scarring alopecia, the hair shafts are gone but the hair follicles are preserved explaining the reversible nature of non scarring alopecia.^[4] The estimated prevalence is approximately 1 in 1000 people.^[5] with a

lifetime risk of approximately 2%.^[6] In modern science, main treatment for Alopecia areata is the use of corticosteroids which have harmful effects on a long term use. Alopecia areata can be correlated with Indralupta which is explained in Ayurveda literatures. Acharya Vagbatta^[7] has explained Indralupta under shira kapalagata rogas whereas in Susruta Samhita,^[8] Madava nidana,^[9] Yogaratnakara^[10] and Basavarajeeya,^[11] Indralupta is illustrated under Kshudraroga. It is a condition where the pitta present in the romakupa along with vata will make the hair to fall off. Then the kapha dosa along with shonitha will block the romakupa making it difficult for the hair growth. It is also called by the names Rujya,^[12] Khalithya^[13] and Chacha^[12] by different Acharyas. In Basavarajeeyam,^[14] it is mentioned that if keshanasha occurs due to krimi then it is Indralupta. The treatment modalities explained are shodana, shamana and nidanaparivarjana. Raktamokshana which is one among the panchashodana explained by Acharya Susruta is mentioned as chikitsa of Indralupta. The vitiated blood is removed and it improves the circulation of the affected area promoting the hair growth. The shamana aushadis which are tridosahara and raktashodaka also helps in the samprativigatana of Indralupta.

Case report

Chief complaints

A 28 year of female complaints of patchy hair loss since 6 months associated with itchy scalp and severe hair fall.

History of present illness

Patient was asymptomatic before 6 months. Then gradually she had noticeable hair fall and itchy scalp which was worsening as the days passed. Later on while combing hair, her friend noticed one rupee coin shaped patch on the left and right parietal area. There was no family history and any history of autoimmune disorder. She did not notice any aggravating and relieving factors. She approached our hospital for further management.

Personal history

Bowel: 2 times a day

Appetite: Normal, 3 meals a day

Sleep: 7 hours of sound sleep

Micturation: 3-4 times a day, 1 time at night

Addiction: Nil

Allergy: Nil

Ashta sthana pareeksha

Nadi: Prakruta

Mutra: Anavila

Mala: Abaddha

Jihwa: Anupalipta

Shabda: Spashta

Sparsha: Anushnasheeta

Drik: Prakruta

Akriti: Madhyama

General examination

Built: Moderate

RS: NVBS

CVS: S1, S2 heard, no added sounds

CNS: NAD

P/A: Soft

Local examination

Site: Right and Left side of the parietal region

Inspection: Patchy hair loss, no redness and no scaling found

Size: Right side (2.5*2cm) Left side (2.5*3cm)

Surface palpation: Scalp skin is soft at the site of patch

Investigation

Routine hematological investigations were carried out to rule out other pathology. All the parameters were within the normal range.

Nidana

Katu ahara atisevava

Frequent intake of fish and chicken

Improper timing for food

Virudhahara (Intake of curd with fried fish or chicken)

Atichinta

Poorvarupa

Keshachyutana and Kandu

Rupa

Two patchy hair loss at parietal region (Right and left side)

Itching present at the site of patch

Samprapti gataka

Dosha: Vata Kapha

Dushya: Rasa, Rakta, Asthi

Agni: Jatharagni. Dhathwagni

Ama: Jatharagnijanya ama, dhathwagnijanya ama

Srotus: Rasavaha, Raktavaha, Asthivaha

Srotodushti: Sanga

Udbhava sthana: Amashaya

Adhithana: Shira

Vyaktasthana: Shira

Treatment protocol**Internal medication**

Chitrakadi vati 1-1-1 (For 3 days)

Mahamanjishtadi Kashaya 15ml twice a day before food with lukewarm water (For 1 month)

Arogyavardini vati 1-0-1(For 1 month)

Amalaki choornam 5gm-0-5gm

External application

Triphala Kashaya for head wash thrice a week.

Raktamokshana

Prachana Karma at the site of patch (8 sittings with a gap of 7 days)

Then Indraluptalepa was applied at the site.

DISCUSSION

Alopecia areata is a rising concern in today's scenario which can cause a lot of anxiety and sadness. In the Ayurvedic literatures, it is correlated with Indralupta. The pitta in the romakupa associated with vata will cause the hair fall. Then the Kapha along with Rakta will

cause srotavarodha which makes it impossible for the hair growth. In Charaka Samhita vimana sthana, excessive use of lavana, kshara and viruddhahara are considered as keshopagathakara and it will lead to Khalithya and Palithya.^[15] Even mental stress is one of the main causative factor of hair loss. Thus tridoshashamaka, raktashodana and nidana parivarjana treatment will be beneficial in the case of Alopecia areata.

Here Amapachana with Chitrakadi vati^[16] is given as first line of treatment. Most of its ingredients are Katu rasa and Ushna virya. It will help in the srotoshodana due to its deepana and pachana properties. Maha manjishtadi kashaya mainly act as raktaprasadaka and tridoshashamaka. It detoxifies the blood and eliminate the accumulated toxins in the body. Arogyavardini rasa is tridoshahara and helps in removal of obstruction of the srotus. It is also having rasayana and antioxidant properties which may be useful to correct the underlying pathology. Amalaki churna is one of the best rasayana. Amla mainly acts on pitta and kapha and it is keshya.^[17] In Susruta sutrasthana it is mentioned that amla is tridoshashamaka i.e; it pacifies vata by its amlatva, pitta by its madhuryatva and sheetatva and kapha by its kashayatva and rookshatva.^[18] Amalaki churna also have antioxidant and antimicrobial properties. Triphala kashaya is used for head wash thrice a week. Basavarajeeya has mentioned the nidana of Indralupta as krimi and triphala kashaya are beneficial for it. It is tridoshagna and has antioxidant, antimicrobial and anti inflammatory property.

When there is bahudosha condition, samshodana is said to be hitam. As Rakta is vitiated in Indralupta, Raktamokshana is the ideal treatment to be followed as per the Ayurveda classics. Acharya vagbatta, in Indralupta chikitsa context have mentioned Prachanna karma.^[19] Prachanna karma is the treatment modality which comes under Raktamokshana shodana karma that deals with Rakta dushti and does dushta raktavasechana. It removes the vitiated Rakta and Kapha which obstructs the hair roots. Prachanna karma improves the perifollicular vascularisation and strengthens the hair follicles thus promoting the hair growth. After the procedure Indraluptalepa^[20] is applied over the site. Indralupta lepa is a ayurvedic medicine which is indicated for external application in Indralupta. Prachanna karma which is done as a pretherapy to lepa will increase the efficacy of lepa.

CONCLUSION

Tridoshashamaka and Raktashodana treatment helps in the sampraptivigatana of Indralupta. The sanga in the srotomarga is cleared which will increase the blood circulation towards the hair follicles and promote the hair growth. The patient suffering from Alopecia areata was

successfully treated with Nidanaparivarjana, Shamana and Raktamokshana. This treatment protocol should be clinically evaluated on large number of patients to confirm their efficacy.



Figure 1: Before treatment.



Figure 2: After treatment.

REFERENCES

1. Evan Darwin, Penelope A Hirt, Raymond Fertig, Brett Doliner, Gina Delcanto and Jaoquin J Jimenez; Alopecia areata: Review of Epidemiology, Clinical Features, pathogenesis and New Treatment options; International Journal of Trichology, 2018; 10(2): 51-60.
2. Aspi F Golwalla, Sharukh A Golwalla; Golwalla's Medicine for students; Jaypee brothers medical pulisher, 2017; 15(25): 912.

3. Sir Stanley Davidson; Davidson's Principles & Practice of Medicine; Churchill Livingstone Elsevier; Chapter; Skin Disease; Page no, 27(25): 1278.
4. Kasper, Braunwald, Fauci, Hauser, Longo, Jameson; Harrison's Principles of Internal Medicine; McGraw-Hill Medical Publishing Division, 26(1) II: 298
5. Strazzulla L C, Wang EHC, Avila L, Alopecia areata: Disease Characteristics, Clinical evaluation and new perspectives on pathogenesis. J Am Acad Dermatol, 2018; 78: 1.
6. Safavi K H, Muller S A, Suman V J, et al. Incidence of Alopecia areata in Olmsted county, Minnesota, 1975 through 1989. Mayo Clin Proc, 1995; 70: 628.
7. Vagbatta; Ashtanga Hridaya; Chaukhamba Surbharati Prakashan; Varanasi; Uttara sthana; Chapter; Shiro roga vijñaniya; Sloka No, 859; 24-26.
8. Vaidya Jadavji Trikanji acharya; Susruta Samhita; Chaukhamba Surbharati Prakashan; Varanasi; Reprint Nidana Sthana; Chapter; Kshudraroga Nidana; Sloka no, 2008; 622: 33-34.
9. Srivijayarakhita and Srikanthadatta; Madhava Nidana; Part 2; Chaukhambha Prakashan; Reprint Uttarardhagata; Chapter; Kshudraroga nidana; Sloka no, 2009; 29(55): 250.
10. Vaidya Srilakshmipathishastri; Yogaratnakara; Vidyothini Hindi Teeka sahitha; Chowkhambha Sanskrit Samsthan; Varanasi; Uttarardha; Kshudraroga Nidana; Sloka no, 25(268): 28-29.
11. Prof. Dr. M.S. Krishnamurthy; Bhasavarajeeyam; Chaukhambha Orientalia; Kshudraroganidanalakshanachikitsadayah; Sloka no, 2014; 204: 605.
12. Vagbatta; Ashtanga Hridaya; Uttara sthana; Chowkhamba Krishnadas Academy, Varanasi; Chapter; Shiro roga vijñaniya; Sloka No, 2012; 23: 24-26.
13. Vaidya Jadavji Trikanji acharya; Susruta Samhita; Chaukhamba Surbharati Prakashan; Varanasi; Reprint Nidana Sthana; Kshudraroga Nidana; Sloka no, 2008; 622: 33-34.
14. Prof. Dr. M.S. Krishnamurthy; Bhasavarajeeyam; Chaukhambha Orientalia; Kshudraroganidanalakshanachikitsadayah; Sloka no, 2014; 204; 605.
15. Vaidya Jadavji Trikanji Acharya; Charaka Samhita; Chaukhamba Prakashan; Varanasi; Reprint Vimana sthana; Rasavimanam; Sloka, 2007; 234: 17-19.
16. Vaidya Jadavji Trikanji Acharya; Charaka Samhita; Chaukhamba Prakashan; Varanasi; Reprint Chikitsa sthana; Grahavidosha Chikitsa; Sloka, 2007; 520: 96-97.
17. Vagbatta; Ashtanga Hridaya; Chaukhamba Surbharati Prakashan; Varanasi; Sutra sthana; Chapter; Annaswaroopavijnaniya adhyaya; Sloka No, 159(6): 228.

18. Vaidya Jadavji Trikanji acharya; Susruta Samhita; Chaukhamba Surbharati Prakashan; Varanasi; Reprint Sutra Sthana; Chapter; Annapanavidhi adhyaya; Sloka no, 2008; 227: 143-144.
19. Vagbatta; Ashtanga Hridaya; Uttara sthana; Chowkhamba Krishnadas Academy, Varanasi. Shiro roga Pratishedha; Sloka No, 2012; 229: 28-31.
20. N.P Kunhiraman Vaidyar; Indralupta lepa; Enpees Chombala; Kerala; D.M.L.No. 73/25D/93; 2021 April.