

## ROLE OF AYURVEDA IN THE MANAGEMENT OF *EKKUSHTHA* (PALMAR PSORIASIS)- A REVIEW

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### ABSTRACT

Psoriasis is a disease with reddish plaques and silvery scales. It is one of the most intriguing and perplexing disorders of skin. It is a papulosquamous skin disease and is a chronic, non-contagious, multi-systemic, inflammatory in nature. The worldwide prevalence of psoriasis is 2-3 %. In India, its prevalence is 0.4%-2.8%. *Eka-Kushtha* resembles as a Psoriasis because of its distribution pattern and characteristic features like *aswedanam* (anhydrous), the lesions are dry and rough. Medicine Patient was treated with Ayurvedic oral drugs for 2 month after the administration of *Virechana Karma* (therapeutic purgation) and got satisfactory results with no side effects. *Virechan*

*Karma* (therapeutic purgation) was done with *Karvellaka Swarasa* (juice of *Momordica charantia* Linn. fruit), *Draksha Kwath* (decoction of dry *Vitis vinifera* Linn. Fruit) and *Triphala powder* along with oral medication as *Sanshamani Vati*, four tablets (250 mg each tablet) twice a day with lukewarm water and *Nimba Jala Prakshalana* (decoction of *Azadirachta indica* leaf) for local wash. The effect of the therapy was assessed by the signs and symptoms before and after the treatment. The treatment modalities showed relief in patient's sign and symptoms over 6 weeks of follow-up. This study shows that Patient of Ekkushtha (Palmar Psoriasis) has been successfully treated by Ayurvedic treatment modalities.

**KEYWORDS:** Ayurveda, *Ekkushtha*, Palmar Psoriasis, *Virechan Karma*.

## INTRODUCTION

Psoriasis is a chronic, recurring autoimmune disease that triggers the rise of scaly, red lesions on the skin, affecting approximately 2-3% of the global population.<sup>[1]</sup> One clinical subtype of Psoriasis localized on the palms and soles is classified as Palmoplantar Psoriasis (PPP). PPP affects approximately 14% of patients diagnosed with Psoriasis. The presence of sharply demarcated and symmetrically distributed erythematous plaques, silvery nature of scales, the involvement of the thenar and hypothenar eminences and knuckles of hands and insteps of feet, with associated regular and coarse nail pits in the absence of nail-fold lesions, can be taken as features in favor of psoriasis.<sup>[2]</sup> Resulting lesions from PPP lead to functional impairments in daily activities that cause social and psychological distress. Compared to other forms of psoriasis, the disease's occurrence on the palms and soles causes a significantly greater decrease in patient's quality of life.

No standard treatment for Psoriasis exists so far. Only 27.4% showed improvement with topical agents, rest all required systemic treatment. There exist the first line and second-line treatment. First-line treatment includes potent to supra potent corticosteroids and acitretin. Second-line treatment includes light therapy, PUVA, and NB-UVB or monochromatic excimer laser. Methotrexate and Cyclosporine are considered as systemic agents. But these treatments have no promising effects in the management of Psoriasis and the recurrence rate is also higher.<sup>[3]</sup>

According to World Health Organization, 80% of the world's population is using some type of natural or herbal treatment for their healthcare need.<sup>[4]</sup> Natural or herbal treatment is inexpensive and claimed to be safe with no or minimal side effects compared to allopathic medicines. Because of such strength the health care system and pharmaceutical companies now depend on medicines derived from the plants.

In Ayurveda Psoriasis resembles *Ekkushtha* where there is an absence of sweating. *Matsyashakalopamam* (fish-like scaly skin) that is well defined, erythematous macule, papule and plaque covered with silvery scales are coinciding with a description of Psoriasis than any other type of *Kushtha* having *Vata Dosha* (regulatory functional factors of the body) responsible for movement and cognition) *Kaphaj* nature.<sup>[5]</sup> *Sanshodhana Chikitsa* (bio cleansing therapy) is the first and foremost treatment modality in every *Kushtha* (the group of

skin diseases).<sup>[6]</sup> It may be in any form like *Vaman* (therapeutic emesis), *Virechan* (therapeutic purgation), *Nasya* (medication through nasal routes) and *Rakta moksha* (bloodletting). After *Sanshodhan Chikitsa* (detoxification therapy), *Sanshaman Chikitsa* (alleviating therapy) is done with *Tikta* (bitter taste) and *Kashaya* (astringent taste) drugs.<sup>[7]</sup> *Nimba Twak Kashaya* (decoction of *Azadirachta indica* leaf) is advised for internal, application as well as local wash.<sup>[8]</sup>

### Diagnostic assessment

The diagnosis of Ekkushtha was made on the basis of the appearance of the disease condition. The assessment was done on the basis of skin examination. According to Ayurveda Differential Diagnosis was made between Ekkushtha and Vipadika.<sup>[9]</sup> Vipadika type of Kushtha is associated with cracks in palm and sole as well as excruciating pain, In this scaly plaque on bilateral palms which is the cardinal symptoms of Ekkushtha.

### Therapeutic Intervention

After *Deepana* (~appetizers) and *Pachana* (~digestives) followed by *Snehapana* (~internal administration of Sneha-) *Virechana Karma* was planned. Patient was given *Shunthi Churna* (powder of dried rhizome of *Zingiber officinale* Roscoe) and *Haritaki Churna* (powder of dried *Terminalia chebula* Retz fruit) for *Deepana* (enhancing metabolic fire) and *Paachna* (enhancing digestion) drugs in the dose of 3 gm each for 5 days and after that *Sneha Paana* (therapeutic oleation) was advised with *Panchatikta Ghrita*<sup>[10]</sup> for five days starting with 30 ml. and increased by 30 ml. on each consecutive day. After 5 days of *Abhyantar Ghrit Paan* (therapeutic oleation), the patient was advised for *Bahya Snehan* (external oleation) with *Jatyadi Taila* and *Bahya Swedan* (sudation therapy) with *Manjisthadi Kwatha* for three days.<sup>[11]</sup> After this *Virechan Karma* (therapeutic purgation) was done with *Karvellaka Swarasa* (juice of *Momordica charantia* Linn. fruit) 20 ml., *Draksha Kwatha* (decoction of dry *Vitis vinifera* Linn. Fruit) 40 ml and *Triphala Churna* 10 gm. *Madhyam Shuddhi* (moderate cleansing) was attended. After five days of *Sansarjana Karma*<sup>[12]</sup> (post-therapy dietetic regimen for revival), *Shaman* drugs (drugs which subsides diseases) were prescribed in form of *Sanshamani Vati*<sup>[13]</sup> 4 tablets(500 mg each) twice a day *Nimba Jala Prakshalana* (decoction of *Azadirachta indica* leaf) twice a day and *Jatyadi Taila* for local application at night with proper dietary advice for two months. After two months oral medicines were stopped and only local wash with *Nimba Jala Prakshalana* (decoction of *Azadirachta indica* leaf) was continued with dietary restrictions for 2 months.

## DISCUSSION

In Ayurveda classics, it has been mentioned that diseases treated with *Samshodhana Chikitsa*<sup>[14]</sup> (bio- purification therapy) have the least tendency to re-occur. *Virechana Karma* (therapeutic purgation) is indicated not only for *Pittaja* disease but also for *Rakta* and *Kaphaj* disease.<sup>[15]</sup> In this procedure first *Deepana* (enhancing metabolic state) *Pachana* (enhancing digestion) *Karma* was done with *Shunthi Churna* (powder of dried rhizome of *Zingiber officinale* Roscoe) and *Haritaki Churna* (powder of dried *Terminalia chebula* Retz fruit). Both these drugs are excellent *Deepana* drugs and thus helps in *Aam Pachana*. After this *Snehapana* (therapeutic oleation) was done *Panchatikta Ghrita*. *Ghrita* can penetrate the cell membrane. So, drugs incorporated with *Ghrita* (ghee) will easily assimilate in the human body. This will help in rejuvenation of cells and smoothening of vitiated *Dosha* (regulatory functional factors of the body). *Ghrita* is best among *Vata-Pitta Prasaman* drugs.<sup>[16]</sup> So, it helps in the alleviation of dryness, burning sensation and scaling of disease. after internal *Snehapana* external *Snehan* (oleation) with *Jayadi Tail* and *Swedan* (therapeutic fomentation) with *Manjisthadi Kwath* will melt the *Dosha* (removal of toxin and nitrogenous wastes) from the periphery to guts. Which is thrown out of the body with the help of *Virechak Kashaya*.

*Sanshamani Vati* possesses *Guduchi* (stem of *Tinospora cordifolia* Wall. ex Seringe.). Immunomodulator protein (ImP) present in the stem of *Guduchi* (*Tinospora cordifolia* Wall. ex Seringe.) leads to lymphocytes proliferation and activation of macrophages. It possesses immunomodulatory effects due to the stimulation of the non-specific immune mechanism.<sup>[17]</sup> The fraction with immunomodulatory action is due to a polysaccharide-rich in glucose, fructose, and arabinose as monomer unit proliferation and macrophage activation.<sup>[18]</sup> G1-4A derived from this plant acts as a non-microbial TLR4 (toll-like receptor 4) agonist. This receptor is present in macrophages and B lymphocytes in stimulation with G1-4A, leading to macrophage activation and B cell proliferation. Cell survival is also increased due to a rise in the expression of the anti-apoptotic gene.<sup>[19]</sup>

The medicinal uses of *Neem* tree has been described since ancient to treat various ailments. Since earlier *neem* twigs have traditionally been used as teeth cleaner, leaf juice of *neem* used in skin disorders also in use as a tonic.<sup>[20]</sup> The *Neem* leaves are known to possess 0.13% essential oil that provides smell to the leaves.<sup>[21]</sup> In a randomized controlled trial of 50 patients, *Neem* extract was examined for its efficacy against Psoriasis.<sup>[22]</sup>

## CONCLUSION

We can be concluded that bio-purification of the body along with Ayurveda modalities provided better clinical management for such case of Palmar Psoriasis. This is the uniqueness of Ayurveda management. It helps to prevent recurrence of disease as well the secondary data for the Ayurveda research scholars for future work.

**Table No. 1: Details of Virechana Karma.**

Procedure	Drug and dosage	Duration
<i>Deepana and Pachana</i>	<i>Shunthi Churna</i> ( powder of dried rhizome of <i>Zingiber officinale</i> Roscoe) and <i>Haritaki Churna</i> (powder of dried <i>Terminalia chebula</i> Retz fruit) 2gm /thrice a day with warm water after meal	5 day
<i>Snehapana</i> ( Internal oleation)	starting with 30 ml. and increased by as per <i>Koshtha</i> and <i>Agni</i> for 5 consecutive days (in increasing dose)	5 days
<i>Sarvang Abhyanga</i> (therapeutic massage) with <i>Jatyadi Taila</i> and <i>Sarvang Vashpa Swedan</i> (sudation therapy)	Lukewarm oil is poured all over the body and a gentle message was given for 20 minutes per day. Sudation therapy was given with the steam of <i>Manjishthadi Kwatha</i> for 10 minutes or as long as the patient feel comfortable	3day
<i>Virechana Karma</i> (Therapeutic Purgation)	<i>Karvellaka Swarasa</i> (juice of <i>Momordica charantia</i> Linn. fruit ) 20 ml., <i>Draksha Kwatha</i> ( decoction of dry <i>Vitis vinifera</i> Linn. Fruit ) 40 ml and <i>Triphala Churna</i> 10 gm.	-
<i>Sansarjana Krama</i> (specific dietary regimen)	Regulatory diet regimen as per <i>Shuddhi</i>	5 day

**Table no. 2: Medicaments used in treatment.**

S. No.	Name of drug	Dose	Anupan (co-administers with medicine)	Duration
1.	<i>Sanshamani Vati</i>	4 tab (each contain 500mg) 2 gm daily in two divided doses	Lukewarm water	60 days
2.	<i>Nimba Jala Prakshalana</i> (decoction of <i>Azadirachta indica</i> leaf)	quantity sufficient, the local wash has done twice a day.	-	120 days
3.	<i>Jatyadi Taila</i>	As per need	Local application	180 days

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