

MANAGEMENT OF *SHVITRA* (VITILIGO) BY AN *AYURVEDIC* REGIME -A CASE STUDY

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ABSTRACT

In *Ayurveda* skin diseases come under *Kushtha*, *Charak Samhita* explained *Shvitra* deeply in *Kushtha chikitsa*. In *Sushrut Samhita* it is called *Kilas* instead of *Shvitra* and mostly used assynonyms. The word *Shvitra* means white patch without *Kandu* and inflammation, it can present anywhere on body, but *shvitra* which is present on *Oshtha*, *Guda Pradesh* are considered as *Asadhya*. It is not life-threatening disease but has morbid social and Psychological implications causing cases of severe mental disturbance and depression. Patients suffering from this disorder carry a social stigma and are usually considered to be an outcast. In *Ayurvedic* management of vitiligo first *shodhana* by *virechana* is important then treatment is

followed by internal medicine (*Khadirarist*, *bakuchi* and *guduchi satva*) and External application (*hartala bakuchi gomutra lepa*). The current case study shown a reduction in the size of hypopigmented patches as well as the improvement psychological profile of the patient.

KEYWORDS: Vitiligo, *Shvitra*, Hypopigmentation patch, *bakuchi*, melanocytes, *hartala*.

INTRODUCTION

Vitiligo is a progressive, autoimmune, chronic depigmented skin disorder with complex causes. It can begin at any age but in 50% of cases it starts before the age of 20 years. There are three major types of vitiligo – Segmental, non-segmental and last mixed vitiligo. Vitiligo

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is multifactorial origin disorder, Includes main three factors – Immunological, genetic, enviromantal.^[1]

Childhood vitiligo is differing from adults. So according to *Kashyp Samhita shivtra* is “*Shevetabhavamicchantiswitrnam*” means white color of reflection. Based on signs and symptoms shivtra correlated with vitiligo.^[2]

Susruta explains the disease *kilaas* instead of *shivtra*. The *kilaas* and *shivtra* are synonyms of each other.^[3] Acharya Charka explains various causes of vitiligo like *virudha Aahar*, *papkarma* etc. Due to this vitiation of *tridosha* specially *kaphadosha* and dhatus like *ras*, *rakt*, *mas*, *meda dhatus*.^[4]

Treatment protocol in childhood vitiligo is very important because of psychosocial and long-lasting effects on self-esteem of the affected child. Various treatments available in *samhita* such as *shodankarma*, *Raktamokshan*, *lepa*, *suryasnan* etc.

Acharya Charaka explains important of *shodhan chikista* stating that disease treated by *shodhan* will never reoccur, whereas treatment with *shamana* therapy may reoccur in due to the course of time.

AIMS AND OBJECTIVE

To evaluate the role of Ayurvedic regime in the management of *shvitra* (vitiligo).

MATERIAL AND METHODS

Study design – present study is a single case study conducted in the department of *kaumarbharitya* of GAC Osmanabad.

CASE REPORT

A 9 yrs female patient of a white patch Above right knee joint from last 1 yr.

This patient was visited *kaumarbharitya* OPD of GAC Osmanabad, Maharashtra with the above complaints.

History of present illness - Patient was healthy before 1 year. Gradually she develops white patches over the skin of right leg above the right knee joint. And which got aggravated day by day with mild itching.

Personal history -Aahara - fried food, fish, ice cream, mix dietary habits.

Behavioral pattern - normal, sedentary lifestyle. Bowel habits – regular.

Micturition- Normal

Family history – There is no family history of vitiligo.

Medicinal history – the patient had received Modern treatment in a private hospital for 1 year without any improvement.

General examination –	Built Gc Temp ulseBP RR HeightWeigh	- Moderate - Fair - afebrile - 82/min 100/70mmhg - 22/min -127 cm -25 Kg
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Table no. 1: Physical Examination.

Nadi	Durbal, kapahapradhan
Mala	Sama mala
Mutra	Samyakapavruti
Jivha	Sama
Shabda	Spashta
Sparsha	Samshitoshna
Druk	Samyak
Aakruti	Madhyam

Systemic examination

- 1) RS-AEBE Clear
- 2) CVS-S1S2 normal
- 3) CNS-Conscious and oriented

Local examination

- 1) site of lesion- knee joint.
- 2) distribution (vyapti)- Asymmetrical
- 3) itching (kandu)- Present
- 4) discharge (sra) - Absent
- 5) Character of lesion- milky white in color, size 4-2cm.

Diagnosis- Based on clinical features.

Treatment plan

- 1) First-line treatment - Dipana Pachan
- 2) Second-line treatment - Shodhan by virechanakarma
- 3) Third-line treatment
 - a) **Internal Medicine** - *Khadirarist* + *Bakuchichurna* + *Guduchisatva* And *Tab. Arogyavardhini Vati*.
 - b) **External Application** - *Bakuchi* + *Hartal* + *Gomutra*.

Table no. 2.

Day	Deepan- Pachana	Aahara
1 st	Hingvashtsk churna and trikatu churna	Varan Bhat, Bhaji Poli
2 nd	Hingvashtsk churna and trikatu churna	Varan Bhat, Bhaji Poli
3 rd	Hingvashtsk churna and trikatu churna	Varan Bhat, Bhaji Poli

Table no. 3.

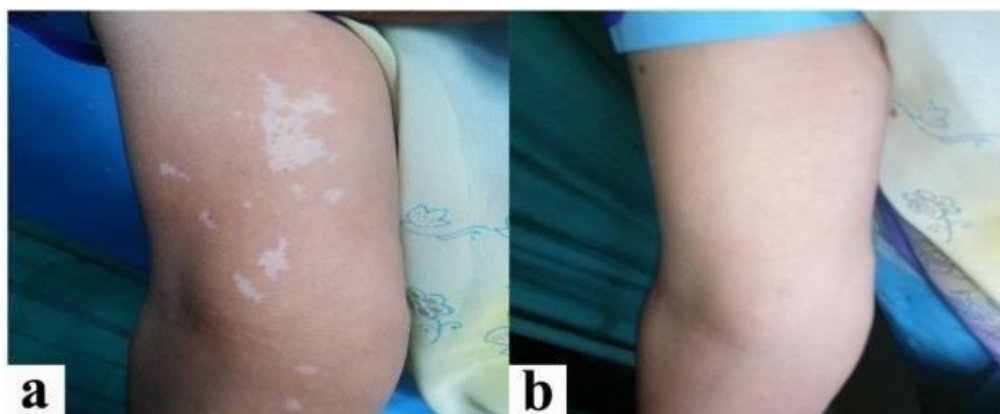
Day	Ghrutapana	Matra	Aahara
1 st	Panchatikta ghrita	25 ml	Khichadi
2 nd	Panchatikta ghrita	50 ml	Khichadi
3 rd	Panchatikta ghrita	75 ml	Khichadi
4 th	Panchatikta ghrita	100 ml	Khichadi
5 th	Panchatikta ghrita	125 ml	Khichadi
6 th	Snehan Swedan	-	Khichadi
7 th	Snehan Swedan	-	Khichadi
8 th	<i>Virechan karma - Abhayadi modaka and Aragvadh kapila vati 2 tab each with manukafanta 1 litre</i>	-	-

Table no. – 4.

Abhyantaraaushadhi	Matra	Kalavdhi
<i>Khadirarist bakuchi churna + guduchi churna</i>	7 ml 30 gm + 10 gm + = 60 doses	BD For 1month
<i>Tab. Arogya Vardhini Vati</i>	125 mg	BD For 1 Month

External application	Kalavdhi
<i>Bakuchi 4 Part + Hartala 1 Part + Gomutra As per required</i>	1month BD local application

Picture – 1



a) Before treatment

b) After treatment

RESULT AND DISCUSSION

In Ayurveda all skin disorders are described under the common umbrella term *kushta*. *Shivtra* differs from other skin disorder by the normal functioning of all but the skin tissue (*Twaka*), resulting discoloration of the skin (*Twaka vaivarnya*)^[5], without discharge (*Aparisravi*).

In Ayurveda we know for the regeneration of melanocytes many Ayurvedic drugs are used out of which Bakuchi is one of them; it may be due to its *katu tikta rasa*, *katu vipaka*, *ushna virya*, *ruksha guna*.

It has strong antioxidant properties. Increasing blood circulation locally helps inadequate formation of *Bhrajak pitta* of skin. *Bakuchi* contents increase the rate of synthesis and amount of melanin, hence encouraging the skin to recover from vitiligious state.

Purified *Hartala* an arsenic compound is used in the form of *lepa* (ointment). This is selected based on reference in *Rasa Ratna samucchya*. Purified *Hartala* is bestowed with immune modulation properties. In *shivtra* deranged immune system destroys the pigments synthesizing melanocytes. *Hartala* breaks this pathology and prevention of self-destruction of melanocytes.

CONCLUSION

Beauty and attraction of the individual depends upon health and color of skin. Ayurvedic management gives a blissful life by improving the immune system of the individual, though single case study may not be given a sign of any treatment it gives us an idea for the line of treatment to adopt in such case or skin disorders.

Though *Shivtra* or *kilas* are *Tridoshaj*, *krichya sadhya*, an autoimmune pigmented skin disease so *shodhana* followed by *shamana* therapy is very useful.

A clinical trial *shodhana* and shaman therapy along with lepa of *Hartala* and *Bakuchi* used as a topical agent in vitiligo showed that the formulation is a safe remedy with significant pigment regenerating capacity.

This is a preliminary study and research is needed to prove the immune-modulating effect of *Hartala* and *Bakuchi*.

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