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Case Study

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## AYURVEDIC MANAGEMENT OF CHARMADALA (ECZEMA) – A CASE STUDY

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#### **ABSTRACT**

Eczema is chronic, inflammatory, relapsing, pruritic skin disease. There are several patterns of eczema but the clinical features are similar, irrespective of the cause. There are 18 types of *kushtha* are described in Ayurveda, which are divided into *mahakushtha* and *kshudrakushtha*. *Charmadala* is grouped into *kshudra kushtha* and its characteristics are very similar to the eczema. The present case study is of 46 years old male patient who visited *kayachikitsa* OPD at Government Akhandanand Ayurveda Hospital with the complains of *ubhaya hasta evum pada pradeshe kandu evum twakadalana* (Itching and scaling in both hands and legs) and *kandu paschyat lalima*, *shothotpatti evum puyastrava* (Redness, swelling and purulent from after itching) since last 5 years. He was treated with treatment principle of *charmadala* and he got significant relief within 45 days of treatment.

**KEYWORDS:** Charmadala, Virechana, Kandu, Twakadalana, Kushtha.

#### INTRODUCTION

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Charmadala is one type of Kshudra kushtha with pitta-kapha dominancy. It is characterized by raktavarna (Reddish discoloration), kandu (Itching), sphota (Blisters), twakadalana (Scaling), ruk (Pain), sparsh-asahatva (Hyperalgesia). Ayurveda describes every skin diseases involves tridosha and so treatment of skin disease also should be done according to doshika dominancy. There are wide of range of causative factors for skin diseases are given

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in Ayurveda and to avoid them is the primary line of treatment for it. In contrast to conventional medicine where glucocorticoids and immune-suppressants are only choice, Ayurveda has wide variety of *shodhana* and *shamana* treatment choice as per *dosha-dushya* involvement. In this case study, patient was treated with treatment principles of *charmadala* and showed significant relief in signs and symptoms.

#### **CASE REPORT**

A 46 years of male hindu patient visited OPD of kayachikitsa at government akhandanand ayurveda hospital on 20/08/2022 with the complains of *ubhaya hasta evum pada pradeshe kandu evum twakadalana* (Itching and scaling in both hands and legs) and *kandu paschyat lalima, shothotpatti evum puyastrava* (Redness, swelling and purulent from after itching) since last 5 years.

He was relatively healthy before 20 years. Then he developed itching in his left hand fingers associated with small blister formation – which was neglected by him and got recovered by itself within a week. Then he noticed that it is occurring repeatedly in both hands. So he consulted family physician and got relief by some ointments. He used that ointment by himself on re-occurrence for next 15 years. But condition got worsen in year 2019 – when this itching and scaling spread to his both lower limbs and itching & blister and pus formation became severe & painful. He consulted dermatologist, where he was prescribed antihistamines and corticosteroids. He was said that there is no other treatment for this condition and he has to these medications lifelong. So he continued with these medications but after sometimes this treatment also became of no effect and patient's condition got worsen day by day. So, he came at Kayachikitsa OPD no-4 for Ayurveda treatment.

Personal history revealed that patient is vegetarian and used to take black gram, pickle, curd and excessive spicy diet frequently and he is irregular in taking his meals. He takes 6-8 hours of irregular sleep with day sleep and night awaking due to his shifting duty. He had regular urinal and bowel history.

He had no relevant family history or past history. No history of HTN or DM.

He was taking tab. omnacortil 10mg, tab. betnesol 0.5mg, tab. avil 25mg by himself on the occurrence since last 5 years.

Patients all vitals were normal. BP: 130/80mmHg, Pulse: 76bpm, Respiratory rate: 18/min, Body weight: 56kg

Systemic examination did not showed any abnormalities.

On local skin examination of patient's limbs, it revealed that blisters and discharge present on B/L upper limbs (especially palmer region & fingers) and lower limbs.

Colour – Reddish to pinkish in lower limbs, Brown to yellowish in upper limb

Temperature - Raised

Pain – on touch and on movement

Pus discharge – present on B/L palmer and right planter surface

Line of treatment for *charmadala* was planned as per mentioned in Ayurveda classics viz. tikta ghritapana, virechana, parisheka, raktamokshana. (3)

	Medicine	Dosage	Time of administration	Anupana
1)	Sudarshana Ghanavati	2 tab.	1 x 3 times	Ushnodaka
1)	Sanshamani vati	4 tab.	After meal	Озиношики
	Sansnamani vaii	4 (a).	Aftermear	
2)	Pathyadi Kwath	40 ml	1 x 2 times	-
	Guduchyadi Kwath		Before meal	
	+			
	Kalamegha churna	5 g.		
	Punarnava churna	5 g.		
3)	Kaishora guggulu	4 tab	1 x 3 times	Ushnodak
4)	Hardan da a middal Nimai	A a man	1 2	
4)	Hastapada parishek / Nimajjan	As per	1 x 2 times	
	Panchavalkala kwatha	requirment		
	<sub>+</sub> Tankana – 5 g.			
5)	Jalaukavacharana		3times/week	
6)	Virechanakarma – 1 <sup>st</sup> time			
٠,	(i) Snehapana – Panchatikta ghrita			
	(09/09/22 to 14/09/22)			
	Day 1 – 40 ml			
	Day 2 – 80 ml			
	Day 3 – 120 ml			
	Day 4 – 160 ml			
	Day 5 – 200 ml			
	Day 6 – 240 ml			
	(ii) Abhyanga – Swedana			
	(15/09/22 &16/09/22)			
	(iii) Virechana (17/09/22) -13 vega			
	Aragwadha phala majja 50g.			
	+ Haritaki- 20 g.			
	+ Katuki 10 g.			
	+ Abhayaadi modaka 3 tab.			
	(iv) Sansarjana karma – for 5 days			

 <u>,                                      </u>		
<i>Virechanakarma</i> – 2 <sup>nd</sup> time		
(i) Snehapana – Panchatikta ghrita		
(26/09/22 to 01/10/22)		
Day 1 – 40 ml		
Day 2 – 80 ml		
Day 3 – 120 ml		
Day 4 – 160 ml		
Day 5 – 200 ml		
Day 6 – 240 ml		
(ii) Abhyanga – Swedana		
(02/10/22 & 03/10/22)		
(iii) <i>Virechana</i> (4/10/22) – 25 vega		
Aragwadha phala majja 50g.		
+ Haritaki- 20 g.		
+ Katuki 10 g.		
+ Abhayaadi modaka 3 tab		
(iv) Sansarjana karma – for 7 days		
•		

Table 2: Observations.						
Symptoms	BT (20/8/22)	After 1 <sup>st</sup> snehapana (15/09/22)	After 1 <sup>st</sup> virechana (18/09/22)	After 2 <sup>nd</sup> snehapana (5/10/22)	After 2 <sup>nd</sup> virechana (8/10/22)	On discharge (12/10/22)
Kandu (Itching)	+++++	++++	+++	++	+	-
Sphot (Blisters)	++++	+++	+	-	-	-
Ruk (Pain)	+++	++	+	-	-	-
Twakdalana (Scaling)	+++	++	+	-	-	-
Strava (Discharge)	++++	++++	-	-	-	-
Lalima (Redness)	++++	+++	++	+	-	-

#### **Before treatment**



After 1<sup>st</sup> Virechana karma







#### **DISCUSSION**

Any manifestation on the skin can affect life quality of the patient in terms of deterioration of physical as well as mental health. Eczema usually has remission and exacerbation but identifying and avoiding etiological factors along with maintaining good health is helpful in avoiding it – which can be achieved by Ayurveda management.

In this case, Excessive intake of *vidahi ahara* like *achara-papad* and spicy diet, *guru and abhishyandi aahara* like *dadhi, dugdha, masha*, along with *nidra-viparyaya* (*divasvapana, ratrijagarana*) – are found as causative factors – which caused *pitta-kapha pradhana tridosha prakopa evum rasa, rakta, lasika dushti* and *sthanasanshraya* in twak.

Samprapti ghataka		
Dosha	Pitta- Kapha pradhana tridosha	
Dushya	Twak, Rakta, Mamsa, Lasika	
Srotas	Rasavaha, Raktavaha, Mamsavaha	
Sroto-dushti prakara	Atipravritti	
Agni	Dhatvagnimandhya	
Aama	Sama	
Rogamarga	Bahya	
Vyadhiswabhava	Chirakari	

The given treatment makes *samprapti-vighatana* as per Ayurveda classics by its *tiktarasa*, *agni-deepana*, *rasayana*, *rakta-prasadana* and *shodhana* properties. It acts on impaired *rasa*, *rakta* and *mamsa dhatu*.

Sudarshana ghanavati and Sanshamani vati both have tikta rasa, pitta-kapha nashaka and aama-pachana properties. It also soaks kleda and strava of charmadala due to its ruksha guna. Pathyadi kwath, Guduchyadi kwath, Kalamegha, Punarnava have tikta rasa, ruksha anulomaka property and also causes agni-deepana and aamapachana. Kaishora guggulu was given as a rasayana, rakta prasadaka, vyadhi pratyanika chikitsa. As a part of external measures Panchavalkala kwath was given for washing affected part as it have astringent, antiseptic, antimicrobial and wound healing property. As a part of shodhana karma,

*virechana* was given after *panchatikta ghritapana* for six days, which causes purification of the body by eliminating excess of *pitta* from the body. Second time *virechana* was given as part *apunarudbhava chikitsa*. *Jalauka-avacharana* was done on alternate day to draw out impure blood and to eliminate swelling at affected part.

#### **CONCLUSSION**

From above discussion it can be concluded that Ayurvedic treatment by identifying and avoiding etiological factors with proper *shodhana* and *shamana* can give complete relief in signs and symptoms of *charmadala*. Since this is a single case study, further more trials needed to be conducted on larger sample size to establish this as fact.

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