

# WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 8.453

Volume 14, Issue 16, 1083-1090.

Case Study

ISSN 2277-7105

# MANAGEMENT OF VIPADIKA (PALMOPLANTAR PSORIASIS) WITH THE HELP OF PANCHAKARMA THERAPIES (VIRECHANA & TAKRADHARA): A CASE STUDY

<sup>1</sup>Dr. Vivek Kumar Deolia (Prof. & HOD)\*, <sup>2</sup>Dr. Jitendra Shrivastava, <sup>3</sup>Dr. Pushpendra Singh Sisodiya

<sup>1,2,3</sup>Dept. Panchakarma, Govt. Auto. Ayurved College & Hospital, Aamkho Gwalior.

Article Received on 02 July 2025,

Revised on 22 July 2025, Accepted on 11 August 2025, DOI: 10.20959/wjpr202516-37970



\*Corresponding Author Dr. Vivek Kumar Deolia (Prof. & HOD)

Dept. Panchakarma, Govt.
Auto. Ayurved College &
Hospital, Aamkho Gwalior.

#### **ABSTRACT**

Palmo-plantar psoriasis is a common chronic immune mediated, inflammatory, proliferative noncontagious disease of skin affecting people who are genetically predisposed with environment playing critical role in pathogenesis. There are many treatment modalities available but because of its chronic recurrent nature Palmo-plantar psoriasis is a challenge to treat. Here a case of PPP treated with Ayurvedic protocol is discussed. Palmo-plantar psoriasis is one such disease that can't be correlated exactly with any disease mentioned in Ayurveda but to a certain extent based on its symptoms, it can be correlated with Vipadika. We present a case of Palmo-plantar Psoriasis in which a patient has shown an excellent response by combining of snehapana, virechana, external application using ayyapakera tailam and takradhara, and Ayurvedic oral medication.

The case was treated with Ayurvedic medicines on the line of management of Vipadika kshudra kushta with administration of following interventions involving drugs such as Arogyavardhini vati 250mg, Gandhak rasayan 250 mg, Suta Shekara Rasa 250mg, khadirarishta 15 ml & mahamanjisthadi kwatham 15 ml orally twice a day and ayyapakera tailam taila, for local application takradhara & twice a day & follow up for 3 months. In this case study we got good results from Panchakarma therapy and Ayurvedic medicine. Hence, the treatment was effective in relieving the symptoms of Vipadika (palmoplantar psoriasis) and causing no remission.

**KEYWORDS:** Palmar-Plantar Psoriasis, Ayurveda, Panchakarma, Kushta, Sodhana.

#### INTRODUCTION

Healthy skin is a reflection of overall wellness. Skin, the largest organ of body is also considered as beauty symbol in society. Any disease related to skin disturbs the physical and mental health status of an individual. Palmo-plantar psoriasis is a common chronic immune mediated, inflammatory, proliferative non contagious disease of skin affecting people who are genetically predisposed with environment playing critical role in pathogenesis. There are many treatment modalities available but because of its chronic recurrent nature Palmo-plantar psoriasis is a challenge to treat. Modern medical science treats psoriasis with PUVA and corticosteroids and immune modulators. But the therapy gives serious side-effects like obesity, bone marrow depletion, kidney failure, liver failure etc. Hence it is need of time to search out safe and effective medicine for the complete cure of psoriasis and here comes the role of Ayurved.

Acharya Charaka had mentioned that all Kushthas are Tridoshaj in nature. Palmo-plantar psoriasis is one such disease that can't be correlated exactly with any disease mentioned in Ayurveda but to a certain extent based on its symptoms, it can be correlated with Vipadika. which is one of the types of Kshudra Kushtha (Minor skin diseases). It involves predominantly Vata and Kapha dosha and characterized by Pani-pada Sphutan (Fissure in palm and soles) and Teevra vedana (with severe pain).

There is no specific nidana and poorva rupa mentioned in classics for vipadika, but samanya kustha nidanas and poorvarupa are considered. As it is having predominance of kaphavataja dosha. Samanya Chikitsa (General line of Treatment) includes snehapana using the gritha prepared by the pancha tiktaka ghrita based on doshas involved, and also administration of virechana, as the first line of treatment. Shamana chikitsa involves Abhyantara chikitsa (internal administration). Bahya chikitsa (external Application).

We present a case of Palmo-plantar Psoriasis in which a patient has shown an excellent response by combining of snehapana, virechana, external application using ayyapakera tailam and takradhara, and Ayurvedic oral medication.

#### **CASE STUDY**

A 19-year-old male patient, visited to the Panchakarma OPD of govt Ayurvedic College & hospital, Gwalior, presented with C/O severe itching in both the palms and soles along with demarcated raised scaling, cracking of skin & Blackness specially in sole of left foot. The

Deolia et al.

patient reported to be suffering from palmo plantar psoriasis (PPP) for 2 years. He took treatment of various pathies but was getting temporary relief so he decided to switch over to Ayurvedic treatment. H/o vivandha (constipation) in the last 1 years. No H/o DM, HTN, Hypothyrodism. Family history was negative for similar conditions. Physical examination reveals non uniform erythematous scaly patches involving the both the palms and sole.

The case was treated with Ayurvedic medicines on the line of management of Vipadika kshudra kushta with administration of following interventions involving drugs such as Arogyavardhini vati 250mg, Gandhak rasayan 250mg, Suta Shekara Rasa 250mg, khadirarishta 15 ml & mahamanjisthadi kwatham 15 ml orally twice a day,and ayyapakera tailam taila, for local application takradhara & twice a day & follow up for 3 months.

The outcome was measured based on symptomatic relief in signs and symptoms. The patient had reported complete relief from the acute phase after 1 month of treatment and complete remission of cutaneous lesions was observed by the end of 3 months of treatment phase.

# **Personal history**

Appetite: Mild

Bowel: constipation, two days a once

Micturition: Regular

Sleep: Sound

Food: Mixed diet

#### General examination

Appearance: Normal

Built: Moderate

Nourishment: Moderate

Pallor: Absent

Icterus: Absent

Oedema: Absent

Cyanosis: Absent

#### Vital data

Pulse: 80 /Min

BP: 110/80 MmHg

ISO 9001:2015 Certified Journal

Respiratory Rate: 16/Min

• Weight: 72kg

#### **Skin examination**

- Site left soles
- Distribution Asymmetrical
- Dryness, itching and cracking of left sole is seen (Sphutana) which is painful.
- Surface is rough and dry,
- margin- irregular

# **Laboratory Examination**

- Hb P 13.7gm%
- ESR —27mm/hr
- Total WBC count 6500 ceIIs/mm

#### **Treatment Given**

So, Shodhana Chikitsa followed by Shamana chikitsa showed good result in this case. The line of treatment for this case is as follows

#### 1. Deepana-Pachana

- i. **Vaiswanarachurnam**–3 grams mixed with75 ml of lukewarm water twice daily half an hour before meal for 3 days.
- ii. **Chitrakadi vati** -2 tablets twice daily half an hour before meal for 3 days.

## 2. Snehapanam

- (a) **Panchathiktakam ghrutam** given in the morning at 7 am in increasing quantity for 5 days. Lukewarm dried ginger water was given as Anupanam.
- (b) **Diet recommended during sneha panam :** ushna jala & laghu ahara.

# 3. Abhyanga Swedana

Given **Abhyanga** wit Ayappakeram Thailam over the whole body. This was followed by **Sarvangswedam** with Nalpamaradi kwatham for 3 days.

ISO 9001:2015 Certified Journal

#### 4. Virechanam

- Virechana dravya- Avipathi choornam-30 grams & Thrivrut leham 15 grams mixed with hot water –given in empty stomach at 9 am. Advised to drink koshna jal (Luke warm water) frequently and lie on the left side with a proper covering of the body.
- Virechana vega (Loose Motion) started after 90 minutes.

Totally 12 vega loose Motions till 2 pm. Vitals such as BP, Pulse, HR were within normal range. Pulse Rate - 74/min, regular, respiratory rate 14/min, blood pressure 110/70 mm Hg

- Peyaadi Samsarjanakrama (Dietetic rules after Pan- chakarma ) was given for 7 days.
- 5. Samana Therapy Thakradhara & Shamana yoga

Sarvanga Takradhara with Musta & Aragwadadigana sidha thakram and internal administration of Shamana Yoga started 7 days after Virechana as follows:

Given Sarvanga Takradhara with the duration of 45 minutes in the morning after application of Ayyappakeral over body and soles - For 07 days.

# **6. Shamana yoga:** For 1 month

- Arogyavardhini gutika 250 mg at 8 am and 8 pm.
- Gandhak rasayan 250 mg at 8 am and 8 pm.
- Suta Shekara Rasa 250 mg at 8 am and 8 pm.
- Kaishore Guggulu 500 mg at 8 am and 8 pm.
- Mahamanjisthadi kashayam 15 ml mixed with 45 ml of lukewarm water.
- khadirarishta 15 ml mixed with 15 ml of lukewarm water.

#### **RESULTS AND DISCUSSION**

In the above case study, after completing a 45-day course of Ayurvedic treatment, patient experienced significant improvement in his condition. The severity of scaling and blackness reduced visibly, and the itching subsided. His sole regained normal texture, allowing him to resume his daily activities without discomfort. The patient got complete relief from symptoms of Vipadika (palmoplantar psoriasis).

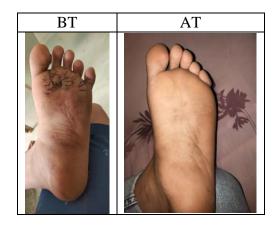
This is achieved by a proper routine and removal of harmful factors from the patient's living environment. The treatment for psoriasis goes through several stages such as dipana/ pachana (Enhancing digestion & metabolism), Snehana (oleation), swedana (sweating therapy),

ISO 9001:2015 Certified Journal

Shodhana (purificatory therapy). The treatment comprises dietary regulations, daily regimens, yoga that includes Asana, Pranayama and meditation.

This Panchakarma treatment has its unique efficacy in eliminating unwanted toxins and normalizing bioenergies both mentally and physically. In this case study, Virechana (Purgation) showed good results along with Shamana Yoga consumption and Sarvanga TakraDhara therapy. Virechana Chikitsa helps to remove vitiated Dosha from the body. Administration of Shamana Yogas that is the combination of Arogyavardhini vati 250mg, Gandhak rasayan 250 mg, Suta Shekara Rasa 250mg for 1 month. Kaishore Guggulu, Manjishthadi Kashaya and khadirarishta in a maintenance dose for the next few months. Regular follow-ups were scheduled to monitor his progress and adjust as needed.

As Psoriasis is a psychosomatic disease, Takradhara may help to relieve the stress. Many studies supporting our study result have shown that Takradhara has a significant role in relieving stress-induced disorder. Takradhara had Vata Pitta Shamaka property which not only reduces stress and tension but also enhances the circulation of the brain, improves memory, nourishes the skin of the palm and soles, calms the mind and body.



#### Assessment criteria

# Subjective criteria

Symptoms	Grade 0	Grade 1	Grade 2	Grade 3	
Pani Pada Sphutana	Absent	Mild	Moderate	Severe	
Kandu	Absent	Mild	Moderate	Severe	
Vedana	Absent	Mild	Moderate	Severe	
Burning Sensation	Absent	Mild	Moderate	Severe	

Pani-Pada Sphutana		Kandu		Vedana		Burning Sensation	
ВТ	AT	ВТ	AT	ВТ	АТ	ВТ	AT
3	1 0	3	0 1	3	0	3	o

### **CONCLUSION**

The efficacy of Ayurvedic therapies in managing challenging dermatological conditions like Vipadika (palmoplantar psoriasis). In this case study, we got good results from Panchakarma therapy and Ayurvedic medicine. The treatment given for Vipadika (palmoplantar psoriasis) was dipana/ pachana (Enhancing digestion & metabolism), Shodhana (virechana therapy), Shamana medicines and Takradhara therapy; which helped in Aampachan, removal of vitiated Dosha from the body and to bring Samya Avastha (balanced condition) of Doshas. By addressing the root causes through Virechana therapy, Following Pathya ahara and Vihara along with medications significant symptomatic relief and long-term improvement were achieved, help break the pathogenesis and alleviates the symptoms and also improves the immune strength. Hence, the treatment was effective in relieving the symptoms and causing no remission.

# **REFERENCES**

1. Poonam M. Takradhara the divine procedure for improving quality of the sleep. International Journal of Ayurveda and Pharma Research, 2015; 3(11): 50–54.

- 2. Rahangdale J, Madankar S, Kohale D. Systemic review on Shirodhara and mode of action of Takradhara in Psoriasis. Journal of Ayurveda and Integrated Medical Sciences, 2019; 4(06): 175–180. Available from: https://doi.org/10.21760/jaims.v4i06.782.
- 3. Shine A, S S, S S. A clinical study on the effect of Takradhara (Shirodhara) in subclinical hypothyroidism. Paripex Indian Journal Of Research, 2020; 9(3): 27–29. Available from: http://worldwidejournals.org/index.php/paripex/article/view/2218.
- 4. Kale SS, Takradhara VB. Treatment modalities as a Panchakarma. International Journal of Developmental Research, 2018; 8(7): 21847–21850.
- 5. Agnivesha, Charaka, Dridhabala. Charaka Samhita Vol. 1, Nidan Sthana, Kustha Nidan adhyaya, 5/3, Shastri K, editor. Varanasi: Chaukhambha Bharti Akadmi; 2009; 642.
- Agnivesha, Charaka, Dridhabala. Charaka Samhita Vol. 2, Chikitsa Sthana Vata kushta chikitsa adhyaya, 7/22, Shastri K, editor. Varanasi: Chaukhambha Bharti Akadm; 2011; 252.