Pharmacounted Research

WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 8.453

Volume 13, Issue 14, 899-907.

Case Study

ISSN 2277-7105

AYURVEDIC MANAGEMENT OF SCALP PSORIASIS: A CASE STUDY

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Article Received on 22 May 2024,

Revised on 12 June 2024, Accepted on 02 July 2024

DOI: 10.20959/wjpr202414-33170



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ABSTRACT

Psoriasis is a chronic, non-communicable autoimmune disease characterized by patches of abnormal skin. These areas are red, pink, or purple, dry, itchy, and scaly. Psoriasis varies in severity from small localized patches to complete body coverage. It affect both physical and mental health of the patient as it interrupt daily lifestyle. Scalp psoriasis is one of the major occurring one. it show red, patchy, dry white scaly appearance over the head. This also affect loss of hair in individual. There is no specific treatment for psoriasis. As it has symptomatic relief from modern medicine for long term use, but it has its own side effect and there may be reappearance of that. *Ayurveda* has mentioned disease like symptoms of psoriasis known as *kitibhkushtha* type of *kshudrakushta*. A 60 year Male patient was taken under study. Patient was given *abhyantar* (internal) and *bhahya* (external) chikitsa. He got relief from the *ayurvedic* treatment and he is much satisfied

from treatment. PASI (Psoriasis area severity index) score was taken for assessment parameter of improvement.Before treatment the PASI score was 7.2. At the end of the treatment after 21 dasy PASI score was 0.1.

KEYWORDS: Psoriasis, Scalp, *Kitibhkushtha*, *Ayurvedic* Treatment.

INTRODUCTION

Psoriasis is a long lasting, non contagious autoimmune disease characterised by patches of abnormal skin.^[1] Psoriasis is estimated to affect 2–4% of the population of the western world. The rate of psoriasis varies according to age, region and ethnicity; a combination of environmental and genetic factors is thought to be responsible for these differences.^[2]

Psoriasis can occur at any age, although it is more frequent in adults.^[3] The five main types of psoriasis are plaque, guttate, inverse, pustular, and erythrodermic.^[3] Plaque psoriasis, also known as psoriasis vulgaris, makes up about 90% of cases.^[1] Plaque psoriasis typically appears as raised areas of inflamed skin covered with silvery-white, scaly skin. These areas are called plaques and are most commonly found on the elbows, knees, scalp, and back^[4] Of those affected by psoriasis, up to 80% will have involvement of the scalp.^[5] Scalp psoriasis is characterized by red, thickened plaques with silver-white scale, either contained within the hairline, or extending onto the forehead, ears, and posterior neck.^[6] Importantly, scalp psoriasis can be a cause of great physical and social distress, with up to 97% of affected individuals reporting that the condition interferes in their daily life.^[7]

For management of psoriasis topical agents are typically used for mild disease, phototherapy for moderate disease, and systemic agents for severe disease. There is no evidence to support the effectiveness of conventional topical and systemic drugs. Topical corticosteroid preparations are the most effective agents when used continuously, but has its own side effect used for longer duration. Phototherapy in the form of sunlight has long been used for psoriasis.^[8] We have to take precaution during phototherapy as over exposure can cause burning of skin. There are several types of psoriasis which can be related to certain disease described in Samhitas. Kitibhkushtha which having symptoms like scalp psoriasis has been described previously by Acharya in Samhitas i.e. Charak Samhita, Vagbhat Samhita, Sushrut Samhita, Madhav Nidan. Kitibhkushtha involving in type of kshudrakushtha dominating of Vata and Kaph dosh. [9] The causative factor of Kitibhkushtha is same as Kushtha. Dietary factors as Viruddha aahara, excessive consumption of Drava, Snigdha, Guru aahar, Vega dharana. [10] Acharya Charaka has mentioned the symptoms of Kitibhkushtha as "श्यावं किणखरस्पर्श परुषं किटिभं स्मतम।". [11] The etiology factor leads to vitiation of Tridosha especially Vata and Kapha. Tridosha and Twacha, Lasika, Rakta, Mansa are the seven major causative factor for kushtha. (12) PASI (Psoriasis area severity index) score was taken for assessment parameter of improvement. (13)

AIM AND OBJECTIVE

To evaluate the management of psoriasis.

Place of study

The case study was done in *Panchakarma* OPD, Government Ayurvedic College & Hospital

Dharashiv, (MAHARASHTRA)

CASE REPORT

Basic information of patient

- Age -60 years
- Sex male
- Religion- Hindu
- Occupation- He was working as labour.

Pradhan Vedana

- Shir pradwshi kandu (Itching over the head i.e scalp region)
- Shir pradeshi lalima (redness over head region)
- Shir pradeshi twak vaivarnyata (discolouration of scalp region)
- Shir pradeshi twak rukshata (dryness of csalp region)
- Manya pradeshi kandu and Lalima (itching and redness over back of neck region)
- Ans pradeshi twak vaivarnyata (discolouration of shoulder region) All above symptoms was present since 2 years.

Vartaman Vyadhivritta (History of present illness)

Male patient having age 60 years had came to *Panchkarma* OPD with OPD NO.8176. He was having above complaint since 2 years. He was treated with some modern medicine, but according to patient the symptoms was curring only when the treatment was going on. As treatment stop reocurance of symptoms was occurring. So for further management and treatment patient was treated in *panchakarma* opd in Government Ayurvedic College and Hospital Dharashiv(MAHARASHTRA).

Purva Vyadhivritta (History of past illness)

No any past history of illness present.

Kulaj Vritta (Family History)

No any illness present to family members

None of the family members having symptoms like patient.

Vaiyaktik Vritta (Personal history)

Patient was addicted to both alcohol and tobacco since 20 years. He was addicted to gutakha

chewing.

Patient was consuming both veg and non-veg.

ON EXAMINATION

General Condition – fair Temperature – afebrile Vitals – normal

CVS - NAD

RS - NAD

CNS- conscious and well oriented

Ashtvidha Pariksha

- 1. Nadi (pulse)- kaph Pradhan vat. Rate- 76/min
- 2. *Mutra* (urine)-prakrut
- 3. *Mala* (stool)- malbaddhata (constipation)
- 4. Jivha (tongue)- Sam i.e coated
- 5. *Shabda* (speech)- spashtha i.e clear speech
- 6. Sparsha (touch)- Ruksha and samshitoshna
- 7. *Drik* (eye)- prakrut
- 8. *Aakruti* (appearance)-madhyam

Other examination

Scalling and itching present on scalp region, back of the neck region and shoulder region.

Diagnosis

patient was previously diagnosed as psoariasis, but according to ayurveda after proper clinical history and examination patient was diagnosed as kitibhkushth.

Treatment

- 1) Deepana pachana with Ampachak vati 2 Tab BD before food (for three day)
- 2) Anulomak with Gandharwa haritaki vati 2Tab bed time (for three day)
- 3) Aragwadh falmajja kwath for snanarth over head twicw day
- 4) *Karanj Tail* for local application twice a day after *snan* (bath)

After Deepana pachana patient was treated with following medicine.

- 1) Arogyavardhini vati 2 tab bd before food
- 2) Gandhak rasayan -1 tab bd after food

- 3) Dushvishari agad -1 tab bd after food
- 4) *Mahamanjishthadi kwath* 20ml bd before food
- 5) *Aragwadh kapila vati* 1 tab bed time
- 6) Aragwadh falmajja kwath for snanarth over head twicw day
- 7) Karanj Tail for local application twicw a day after snan (bath)

Patients was call for follow up after 7, 14, 21, days.

After 21 days of treatment patients maximum symptoms has been recovered. Patient is happy and satisfied with treatment.

PASI SCORE^[13]

1) A representative area of psoriasis is selected for each body region. The intensity of redness, thickness, and scaling of the psoriasis. is assessed as none (0), mild (1), moderate (2), severe (3), orvery severe (4).

Intensity	Absent	Mild	Moderate	Severe	V. severe
Thickness	0	1	2	3	4
Redness	0	1	2	3	4
Scalling	0	1	2	3	4

- 2) The three intensity scores are added up for each of the four body regions to give subtotals A1, A2, A3, A4.
- 3) Each subtotal is multiplied by the body surface area represented by that region.
- A1 x 0.1 gives BI
- A2 x 0.2 gives B2
- A3 x 0.3 gives B3
- A4 x 0.4 gives B4
- 4) The percentage area affected by psoriasis is evaluated in the four regions of the body. In each region, the area is expressed as nil (0), 1-9% (score 1), 10-29% (score 2), 30-49% (score 3,) 50-69% (score 4), 70-89% (score 5) or 90-100% (score 6).
- Head and neck
- Upper limbs
- Trunk
- Lower limb

- 5) Each of the body area scores is multiplied by the area affected. B1 x (0 to 6) C1
- B2 x (0 to 6) C2
- B3 x (0 to 6) C3
- B4 x (0 to 6) C4
- 6) The PASI score is C1+C2+C3+C4.

PASI SCORE for patient before and after treatment for the patient was observed for 0 to 21 days PASI SCORE (Cn)=An x Bn x Area score.

Before Treatment

Region	Area (An)	Constant(Bn)	Area %	Total(Cn)
Head	3	0.1	6	6.6
Upper limb	0	0.2	0	0
Trunk	2	0.3	1	0.6
Lower limb	0	0.4	0	0

Pasi score before treatment= C1+C2+C3+C4=7.2



Image -1 Image-2
The above images from 1 to 2 are before treatment.

PASI score after Treatment (after follow up of 21 days)

Region	Area (An)	Constant (Bn)	Area %	Total (Cn)
Head	1	0.1	1	0.1
Upper limb	0	0.2	0	0
Trunk	0	0.3	0	0
Lower limb	0	0.4	0	0

Pasi score after treatment= C1+C2+C3+C4=0.1





Image - 3 Image – 4

The above image 3 and 4 are after treatment.

RESULT AND DISCUSSION

Psoriasis is a long-lasting, noncontagious autoimmune disease characterized by patches of abnormal skin. Modern medicine for cure of psoriasis has its own side effect after long term of use as symptoms like disease has been described by our *Acharya* in *Ayurveda*. It is correlated with *Kitibhkushtha* types of *Kshudrakushtha*. *Kitibhkushtha* having dominance of *vata-kapha* dosha. The vitiated *dosha* reaches to *shithila dushya* like *Twaka* etc.and result into *sthana sanshraya avastha* and the produses symptoms of *kitibhkushtha*. *Acharya Charaka* says that in *kushtha*, *shithilata* is present is present in whole *twak*. It having *Parush* (dryness), *Kinkhar sparsh* (rough scale), *Shyav Twak* (blakish skin).

In ayurveda management we use, Arogyavardhini vati as Arogya means good health and Vardhani means improvement. It means it improves good health. It is used for kushtha, jwar, shoth, medorog, kamala and other Yakrut-Vikar. Gandhak rasayan is classicle drug, is blood purifier, it has antioxidant, anti-infamatory property. Dooshvishari Agada is used as there may be some invironmental poisonous intity which affect the skin leading to infecton to that. Mahamanjishthadi kwath act as blood purifier (rakta shodhak). It helps cleanse the blood and remove toxins from the body. Aragwadh-kapila vati works as smooth bowel regulation and also mild laxative action without spasm. Aragwadh is mentioned as kushthaghn, so aragwadh

falmajja churn is used for *Snanarth*. *Karanj* tail is blood purifier and an effective remedy for pimples and other skin eruption. Above treatment was given for 20 to 21 days. and result are more satisfying to patient.

CONCLUSION

This case shows that scalp psoriasis can be cured with *Ayurvedic treatment*. No adverse effect are noted during the treatment. No new symptoms was found in patient. Patient was satisfied by ayrvedic treatment.

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