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MANAGEMENT OF PARISARPA THROUGH AYURVEDIC MEDICINE – A CASE REPORT

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ABSTRACT:

Ayurveda has earth-shattering in evidence of worldwide on good worth of its holistic approach of life and its less side effects. Skin is one of the 'Adhisthana of Gyanendriyas' as described in Ayurvedic texts. Skin diseases are most common form of infection occurring in people of all ages. SharirRrachana&Kriya of Twacha are the mainaspects for twachadushti and twacharoga. Parisarpa is one of the major skin diseases which is explained in specify apart from "Kushta" 'Vyadhi in all the Ayurvedic classics. The present article deals with a case report of 46 years female patient attended Kayachikitsa Skin OPD of AIIA with complaints of Reddish plaques over bilateral upper limbs, face, trunk(left half), bilateral foot, Intense itching over lesions since 13-14 years, Hyperpigmentation of lesion after few days and associated Burning sensation all over body, specially over lesions, BlackishMaculo-popular lesions in initial days (13-14 years), patient was taking allopathic medicine but could not got relief, so she was admitted and treated with ayurvedic treatment.

Conclusion; This case report shows that the classical treatment with Snehapana, Abhyanaga, Niragnisweda, and Virehana along with Shaman Oral medications is very effective in Parisarpa. The complaints of the patient were assessment with BSA, DLQI. After the treatment, she got a marked improvement in his conditions.

Key words: Adhisthana, Gyanendriyas, Twacha, dushti, Kushta, Shodhan, Shaman

INTRODUCTION

The skin covers the external surface of the body and is the largest organ of body¹ and measuring approximately 18% of body weight. Healthy skin providessafety to the body in various ways from heat, microbes, abrasion and chemicals² and energy storage, vitamin D formation, excretion of important metabolic products. In Ayurveda, Twacha word is used for skin. Twacha is derived from "tvac" dhatu, which means the "cover". ³According to modern science, skin contains sweat glands, hair follicles blood vessel, smooth muscle which are responsible for proper functioning of skin. It is one of the five Gyanendriyas which responsible for SparshaGyan(touch)sensation. ⁴Due to various causes e.g. un healthy food, stress, lifestyle modification and environmental pollution skin problems are increasing day by day and it also affects the quality of life of an individual. As per Ayurvedic literature imbalance of tridosha and dhatus is innocent for skin disease. Doshas are three fundamental energies in our body. Large community prevalence studies have demonstrated that between 20-30% of the

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population have various skin problems requiring attention. In Ayurvedic Classics various skin disease have been described under the heading of Kushtha. "Kushnativapuhetikushtham" means any disease which deform the skin is known as KushthaRoga.Kushtha is one of the most chronic disorders as described in Ayurveda. Most of the Ayurvedic texts categorise the KushthaRoga into two groups, Mahakushtha and 11 Kshudrakushtha. Acharya Charaka, the author of foremost Ayurvedic classic on internal medicine, the Charaka Samhita clearly mentioned, Tvacha is considered as 'ChetahSamvayi' that there is a strong relationship exists between Tvacha (skin) and Mann (psyche/mind). Therefore, more than a cosmetic nuisance the skin disorders lead to different psychological ailments which impair the quality of life in the patients. The etio-pathogenesis involves the SaptaDravya (seven factors), Vata, Pitta, Kapha, Tvacha, Rakta Mansa and Ambu/Lasika, which are responsible for manifestation of a wide range of skin (dermatological) disorders.

Case Presentation

A 46 year female patient house wife residing in rural area (UHID no. 367548) come to kayachikitsa skin OPD of AIIA, New delhi hospital on 02/05/2019 with complaints of Reddish plaques over bilateral upper limbs, face, trunk(left half), bilateral foot, Intense itching over lesions since 13-14 years, Hyperpigmentation of lesion after few days and associated Burning sensation all over body, specially over lesions, Blackish Maculo-popular lesions in initial days (13-14 years), patient was taking allopathic medicine but could not got relief, so she got admitted on the same day in the AIIA hospital.

Case History:

PPH during 2^{nd} child birth 15 yrs back 6 months of healthy period \downarrow

Initial blackish skin lesion started over left upper limb& gradually spread to b/l, trunk and face over a period of 10 years.

Took allopathy medications

Lesions with itching and burning sensation, bleeding spots on itching.

Hyperpigmentation of skin

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Table No: 1Examination of Patient

ASHTA STHANA	DASHAVIDHA PARIKSHA:	SKIN EXAMINATION:		
PARIKSHA:				
➤ Nadi: 70/min	Prakriti: Vata- Pittaja	Color- hyper pigmented over older		
➤ Mutra: 4-5/24 hrs	Vkriti: VP pradhana	lesions		
Mala: srishta, clear,	Sara: awara	Moisture- dry		
once a day	Samhanana: madhyama	Temperature- warm		
Jihwa: Clear	Pramana: 58 kg	Texture- rough		
Shabda: manda	Satwa: awara	Mobility- NR		
Sparsha:	Satmya: madhyama	Turgor- decreased		
ushnasparsha	Aahrashakti:Samagni,	Anatomical location- mainly over		
Drik: normal	Madhyamakoshta	sun-exposed areas.		
Akriti: madhyama	Vyayama: madhyama	Patterns and shapes- spread over		
	Vaya: madhyama	large area, circular, clustered.		
		Type-maculo-popular,		
		erythematous plauqes.		
		Color of lesion- reddish black.		
		Hair		
		o quantity- thin		
		 diatribution-normal 		
		 Texture-coarse 		
		Nails - NAD		

Table .2CLASSIFICATION OF KUSHTHA

Reference	Disease Name	Type	Name of Type
Charaka Samhita		7	Kapala
			Audoombara
			Mandala
			Rikshayajihva
			Poondarika
			Sidhma
			Kakanka ⁹
Susurta Samhita		7	Kapala
	Maha-kushtha		Udoombara
			Aruna
			RikshayajihvaPundarika
			Dadru
			Kakanaka ¹⁰
Ashatanghridya&sangrh			Kapala
			Audoombara
			Mandala Rikshayajihva

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			Poondarika
			Dadru
			Kakanaka ¹¹
Charaka Samhita		11	Ek-kushtha
Charaka Samma		11	Charmakhya
			Kitibha
			Vipadika
			Alasaka
			Dadru
			Charmadala
			Pama
	77 1 1 1 1 1		Visphota
	Kshudra-kushtha		Shataru
			Vicharchika ¹²
Susurta Samhita		11	Ek-kushtha
			Sthularushka
			Kitibha
			Mahakushtha
			Visarpa
			Parisarpa
			Charmadala
			Pama
			Sidhma
			Raksa
			Vicharchika ¹³
Ashatanghridya&sangrh		11	Ek-kushtha
			Charmakhya
			Kitibha
			Vipadika
			Alasaka
			Sidhma
			Charmadala
			Pama
			Visphota
			Shataru
			Vicharchika ¹⁴
			v icharchika

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Samprapti of Kushtha: 15,16,17

NidanaSevana

TridoshaPrakopa

Twak, Rakta, Mamsa andlasika(Ambu)Shaithilyata

Further Vitiation of Doshas occurs

Doshas gets accumulated at the place of DhatuShaithilyata

Dosha and DushyaSamurchhana

Kushtha

SAMPRAPTI GHATAKA-

dosha- vyana, samanavata, bhraja, ranjaka, sadhaka pitta. dushya- rasa, rakta, sweda srotas — rasa, rakta srotodusti — vimargagamana ama -dhatwagnijanyaama

RESULTS;

Table -3 Assessment Scale(5-D Pruritus Scale)¹⁸

BEFORE TREATMENT			AFTER TREATMENT				
1.	BSA - 6/16 = 37%			1.	BSA – 4/16		
2.	DERMA	TOLOGY		2.	DERMA	ГOLOGY	
	LIFE	QUALITY			LIFE	QUALITY	
	INDEX	(DLQI) ¹⁹ –			INDEX	(DLQI) -	
	18/30				10/30		

			5-D I	Pruritus	Scale			
			J-D (Turritus	. ocan			
1.	Duration: D	uring the la	st 2 weeks, h	ow many	hours a	day ha	ve you bee	in itching?
	Le	ss than 6hrs/	day 6-12 hrs/d	ay 12-18 h	irs/day]	18-23	hrs/day	All day
2.	Degree: Ple	ase rate the	e intensity of	your itchin	g over th	ne pas	t 2 weeks	
		Not present	Mild	Mode	rate	Ser	vere	Unbearable
3.	Direction: C previous mo		st 2 weeks ha	s your itch	ning gott	en bet	ter or worse	compared to the
		Completely resolved	Much better, still presen	but Little b t but still	it better, present	Unch	anged	Getting worse
4.	Disability: i weeks	Rate the im	pact of your i	tching on		A 100		
	Sleep			Delays falling asleep and occasionally wakes me up at night		Delays falling asleep and frequently wakes me up at night		
		N/A	Never affects this activity	Rarely affects this activity	Occasio affec this act	ts	Frequently affects this activity	affects
	Leisure/Socia	at 🖂	p.					p.
	Housework/ Errands							-
	Work/School		口		3			
5.		2 weeks.	If a body part				one that is	rts of your body closest
	Head/Scalp Face Chest Abdomen Back Buttocks Thighs Lower legs Tops of Fee		Forear Upper Points		t w/ Clot			

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Before Treatment



After Treatment

Follow up

DIFFERENTIAL DIAGNOSIS:

- arunakushta
- > parisarpa
- ✓ DIAGNOSIS : PARISARPA

TREATMENT

- 1. Snehapana with panchatiktaghrita for 5 days
- 2. Abhyanaga with nalpamaraditailandniragnisweda with guru prvarana and ushnajalasnana was done on vishrama kala
- 3. Virehana with trivritvaleha, katukich and drakshaphanata was given
- 4. Samsarjanakrma for 5day

Table -4Oral Medications:

Drug	Dose	Frequency	Route And Special Instruction
1. Giloy churn-2gm	30 ml	TID	Oral,Empty Stomach
+ patola churn- 2gm			
+ vaasa churn-2gm			
+ usheera churn-2gm			
+Kapurkachri-500-kwatha			
2. Mahatiktakaghrita	2tsp	OD	Oral,Empty Stomach
3.Chandanasava	30 ml	BID	Oral,After Meal
4. Chandrakala rasa	1 Tablet	BID	Oral,After Meal
KaranjBeej-Powder+ Nariyal Oil	For L/A	L/A	Twice a day

DISCUSSION:

arunavarnaangaand

Ayurveda is the science and art of healing that deals with all aspects of an individual. In Ayurveda, psychological factors have been given equal importance as physical & physiological factors in the etiopathogenesis of various skin(dermatological)disorders. The Kushtha is generally described as TridoshajaVyadhi but type of the Kushtha depends upon predominance of particular Dosha. KushthaRoga is also considered PapakarmajaVyadhi and a KulajaVikara (a hereditary disorder) in Ayurvedic system of medicine. 20,21 Acharya Charak mentioned that Kushtha may be seven, eighteen or innumerable (Aparisankhyeya) types²². But almost all authors including Charaka divided Kushtha into two categories, Mahakushtha and KshudraKushtha. The present article deals with As per the view point of susuratKshudraKushthaare classified into eleven types .Parisarpa is a subtype of KshudraKushtha . KshudraKushthaPurvarupa- rakta-

Lakshna –

शनैः शरीरे पिडकाः स्रवन्त्यः सर्पन्ति यास्तं परिसर्पमाहुः $\|(s\ u.\ Ni.\ 5/12\)^{23}$

ParisarpahKshudra-kushtha - Exuding pustules gradually extend over the surface of the body. It is

characterized by clinical features such as aashu- daha (burning sensation), vedana (pain)jwara (fever). Natures of pidika (vesicles) are so specific that it is described as agnidagdhavat (with intense burning sensation).²⁴In kushtha disease, first of all predominant dosha should be treated. After that, other doshas can be treated. Skin disease is treated with medicated ghritpana with predominance of tikta (pungent) and kashaya (astringent) drugs in taste.²⁵ Ayurveda give special importance on three fold therapeutic management of the disease viz. purification), Samshodhana(~bio-Samshamana(~pacification) and Nidanaparivarjana (avoiding causative factors) for all types of disease including skin diseases.

The condition of the patient when assessed was dominant with *pitta-vatadoshas*. And the *nidana* of the disease was found to be related to *shonitadushti*. Therefore the *chikitsa sutra* of *raktapitta* was adopted according to the guidelines given in *vidhishonitiya adhyaya*²⁶. *Kwatha*prepared out of vasa, *patola*, *guduchi* was administered twice a day as the drugs are *rakta-pitta shamaka*. *Dipanapachana* was done for 3 days with *mustachurna* and *shadangapaniya*²⁷ which are *pitta hara* and dipana. Snehapana was carried out with *panchatikta ghritha*²⁸as the formulation does

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haranaofkushta caused by all 3 doshas. Followed by dravya²⁹– virechana with sukhavirechya trivritavaleha considering the koshtaandbala of the patient. After the procedure of virechana and 5 days of samsarjana according to madhyamashuddhi, patient was started on oral medications. Again thekwatha preparation was continued along with chanadanasava³⁰ in the dose 15ml bd after food as both of the formulations are madhuratiktapradhanapittahara. Shamanaushadhi contained chandrakala rasa 1 tab bd after food which isshita in nature and dahahara³¹ which is hastapadadahahara was also administered along with godantibhasma. At last mahatiktaka ghrita³²was given shamanrtha as it is indictaed in raktapitta, parisarpaandkushta.

CONCLUSION

In above discussion and result we can say that this Ayuvedic treatment is very effective in parisarpa skin disease and it will be done in large population with more objective criterias. Kushtha is one of the oldest known diseases to mankind. Ayurveda described a wide range of skin disorders including its classification, etiopathogenesis, clinical presentation, prevention and management. In the present era, stress and altered immunity are the major factors responsible for the manifestation of a wide range of skin disorders. This case study not only gives us confidence and better understanding for treating such cases in ayurvedic hospital but also leads in the direction of further clinical trails to establish cost effective and safe Ayuvedic treatment. This case report shows that the patient had been treated withSnehapana (panchatiktaghrita)for 5 days, Abhyanaga(nalpamaraditaila) and Virehana (trivritavleha, katuki churn and drakshaphanata) along with Oral medicines was given.In 1 months treatment was continuosly the patient physically and mentally feels in good health. Finally patient is satisfied with ayurvedicmedicine. There were no adverse effects found in combined Ayurvedic medicines.

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