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# EFFECT OF THE JALAUKAVACHARANA ANDAYURVEDIC FORMULATION IN THE MANAGEMENT OF EKA KUSTHA (PSORIASIS) - A CASE REPORT

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# ABSTRACT

All the Skin disease in Ayurveda have been discussed under the broad heading of "kustha". Psoriasis is one among the most common skin disorders encountered in clinical practice. *Eka Kustha* is a type of *Kshudra Kustha* occurring mainly due to imbalance of *Vata* and *Kapha Doshas*. It is a chronic disease that has substantial psychological and social impacton a patient life. A Case of psoriasis was managed with *Virechan (Shodhan) chikitsa* explainedin *samhitas*. **Case:** A 25 year old male patient having complaints of discoloration of nails of upper and lower extremity and itching since last 4 years. **Management:** *Deepan pachan* wasdone with *Dadimasthak churan*. Internal oleation with *Panchtikta ghrita* (increasing dose). External oleation was done with *Nimba Taila*. For *Virechan Trivrit avaleha* was given. Virechan dravya was *triphala churan* 10 gm *Aragvadha churan* 30 gm and *Erand taila* 40 ml.

KEYWORDS: Psoriasis, Ekakustha, Shodhana, Shamana, Jalaukavacharana.

# INTRODUCTION

In Ayurvedic texts there is wide description of skin disorders described under a single term *kustha*. The main cause for *Kustha* is vitiated *Tridoshas*, *Dushya*, *Sharira datus* like *Twak*, *Rakta*, *Mamsa*, *Lasika* vitiates and may lead to 7 types of *kustha* after this *Eka kustha* has been mentioned under the heading of *kshudra kustha*. As *Poorva rupa* is *Asweda*, discoloration of the skin, itching, horripilation(Romancha), roughness of skin feels like *Ati ushnata* in *sharira* are the *Purva roopa* explained in *Charaka samhita*. The *lakshana* of the *Eka kustha* are *Rukshata*, *Shosha*, *Toda*, *Sankocha*, *aayama*, *parushya kharata*, *romaharsha shyava*or *Aruna varnata*.

In India, the prevalence of 0.44-2 % are commonly effected individuals in their  $3^{rd}$  or  $4^{th}$  decade with males being affected twice than females.

Psoriasis significantly irritates the quality of life of patients and their families resulting in physical, emotional and social burden, many psychological reasons are also seen. Psoriasis is a immune mediated disease clinically characterized by erythematous, sharply demarcated papules and rounded plaques covered by silvery scales. The most common variety of psoriasis is called plaque type. Psoriasis do not spread from person to person but it does sometimes happen in members of the same family.<sup>[1]</sup>

# CASE REPORT

A 25 Year Male patient Visited Kayachikitsa OPD Of National Institute Of Ayurveda Hospital, On Date 11/11/2022 With following detail: Patient Name- XXXAge /Sex- 20/M DOA- 11/11/2022 Address: Aajad Colony, Sikar (Rajasthan)

#### **Chief Complaints**

- Discoloration of nails both upper and lower extremities since 3 years.
- Redness discoloration of skin.
- Burning sensation of skin.

# Associated Complaints

- ✤ On and off constipation since 15 days.
- ✤ Disturb sleep since last 1 month.
- ✤ Loss of appetite since 1 month

# **H/O Present Illness**

He is apparently normal before 3 year than he gradually developed symptoms like Discoloration of nails both upper and lower extremities with itching. He has taken treatment from local doctor but didn't get complete cure, than the symptoms got aggravating gradually, along with that he also suffered from disturb sleep since 1 month and on and off constipation since 15 days, or loss of appetite since 1 month. Sever itching since last 1 year, so condition got worsen so he visited to our hospital for further management.

## **Past History**

- ✤ No history of DM/HTN.
- ✤ No allergic history.

#### **Personal History**

- ✤ Diet- Vegetarian
- Appetite- Poor
- Bowel- Disturbed (on and off constipation)
- ✤ Sleep- Disturb because of itching

#### **On Examination**

- Vitals were normal (Pulse rate -76 beats/minute)
- Respiratory rate- 20 breaths/ minute
- Blood pressure- 120/80 mm of hg
- Cardiovascular system, respiratory system and per abdomen examination had shown no significant abnormality.
- Prakriti was *Vata kaphaja* (based on physical and mental characters)

# Ashtavidha Pariksha

- Nadi- Vata Kaphaja
- *Mutra* frequency-4-5 times a day, normal colour (pale yellow)
- *Mala* on and off constipation
- *Jihwa- lipta* (white Coated tongue)
- Shabda- Speech and hearing was normal
- Sparsha- Ruksha
- Drika- Normal
- Aakriti- Madyama

**Diagnosis -** Based on the clinical history and examination the condition was diagnosed as *Ekakustha*.<sup>[2]</sup> The line of treatment mentioned in Ayurvedic classics for *kustha roga* are *Nidana* parivarjana, prakriti vighatana, repeated Shodana, Snehana, Swedana, Raktamokshana, Shamana, lepana.

**Differential Diagnosis:** *Kitiba kustha*, Pityriasis rubra pilaris (characterized by orange to yellow scales while psoriasis have white scales.

#### Treatment protocol

Total duration of treatment - 2 month.Follow up in after 2 month.

# Jalaukavacharana Vidhi<sup>[3]</sup>

# 1. Preparation of Jalauka

*Jalauka* body was smeared with a paste of *Haridra*. Then *Jalauka* was kept in clean water for period of one *Muhurta* (48 min) so that the leeches became activated and was supposed to get rid of exhaustion.

## 2. Jalaukavacharana

The patient was asked to sit or lie down on the bed. The area of the body where *Raktamokshana* (blood-letting therapy) was planned was dried and allowed to bite by *Jalauka*. *Jalauka* bit on the skin and suck the blood by itself. For easily suck or bit the skin by *Jalauka*, a small prick was made. Its face appeared like the hoof of a horse and raised its neck signified that it had started sucking blood. As soon as *Jalauka* started sucking, it was covered by white gauze, leaving its facial region.

After 30 minutes suction of sufficient amount of blood, *Jalauka* left the host by its own. When some *Jalauka* didn't left and patient got itching and pain at the site, it was detached by sprinkling *Saindhava Lavana Churna* (rock salt) at its mouth region.

## 3. Pashchat Karma

As soon as the *Jalauka* detached from the host or patient body by itself or by force, a paste of *Tandula Kandana* (rice piece) was applied over its body and a mixture of *Taila* (oil) and rock salt or *Haridra* (turmeric) was smeared on its mouth. With the help of thumb and index finger of left hand, tail end of the *Jalauka* was caught, and is squeezed with the fingers of right hand towards its face in a reverse direction. This maneuver induced *Jalauka* to vomit the sucked blood. This was continued until the signs of *Samyaka Vamana* were achieved.

## Shodhana therapyPurvakarma

- *Deepana pachana*: with *Dadimasthak churan* 3 gm b.d (before meals).
- Snehapana: After Deepana, Pachana, Panchatikta ghritam was given for 6 days along with Saindava lavana. Ushna jala was advised to drink during snehapana along with light diet (Peya, Yusa). Dose of Ghritam was given based on the time taken for the digestion of ghrita administered on the previous day. After 6 days of snehapana samyaksnigdha lakshanas was observed.(oily stools, unctuousness of body).

## Table 1: Snehapana and dosage.

| Day                 | Quantity |  |
|---------------------|----------|--|
| 4 <sup>th</sup> day | 30 ml    |  |
| 5 <sup>th</sup> day | 60 ml    |  |
| 6 <sup>th</sup> day | 90 ml    |  |
| 7 <sup>th</sup> day | 120 ml   |  |
| 8 <sup>th</sup> day | 150 ml   |  |
| 9 <sup>th</sup> day | 180 ml   |  |

#### Abhyangam and swedanam

After *Snehapana*, On 10<sup>th</sup> day local *abhyanga* near lesions with 777 oil and *Atapa swedam* was done for 2 days. After 2 days of *abhyanga and Atapa swedam*, *Virechana* was Done.

#### Pradhana karmaVirechana

After Abhyanga and Swedana, On 12<sup>th</sup> day, Virechana was done with 130 gm of Trivrit lehyam. After 1 hour of

*Trivrit lehyam* administration, kwath dravya (which included *Triphala churana* 10 gm *Aragwadh* 30 gm and *Trivrit* 5 gm) and *Ernda tail* 40 ml was given internally. Total 15 *vegas* were attained.

#### Paschat karma

Samsarjana karma was followed for 5 days. During this period Peya, Yusa wasgiven to the patient.

#### Before and After follow up



*Jaloka Avacharana*: After *Samsarjana karma* of 5 days, *Jaloka* given one day every week.

#### Samshamana therapy

- ✤ Panchatikta ghrit guggulu 2 b.d with water
- ✤ Asthiposhak vati 2 b.d with water
- ✤ Gandhak Rasayan 2 b.d with water
- Syrup khadiraristha 20 ml b.d with water

# **Before Treatment**

**After Treatment** 

| Pathya                | Apathya                                 |  |
|-----------------------|---|--|
| Sadrutta palana       | • Junk food                             |  |
| • Vyayama, Yoga       | • Consuming sour, salty, meat & alcohol |  |
| • Satvika ahara       | • Ati maituna                           |  |
| Meditation            | • Excessive sleep                       |  |
| • Healthy food habits | Avoid stress                            |  |

#### **OBSERVATION**

| S. No. | Symptoms      | Before treatment | After treatment |
|--------|---------------|------------------|-----------------|
| 1.     | Dryness       | Present          | Reduce          |
| 2.     | Itching       | Present          | Reduced         |
| 3.     | Redness       | Present          | Reduced         |
| 4.     | Disturb sleep | Present          | Sound sleep     |
| 5.     | Constipation  | Present          | Relieve         |

# DISCUSSION

#### Jalaukavacharana

Blood-letting therapy is the most effective for correct this morbidity.<sup>[12]</sup> Leech therapy is considered as the ideal method of expel out the vitiated blood safely, quickly and effectively in *Naree* and *Sukumara* etc.<sup>[12]</sup> Application of Leeches is most delicate method of Blood-letting and it should be done according to the strength of the patient.<sup>[13]</sup> According to that purpose we have selected Leeches as *Jalaukavacharana* for Blood-letting along with other internal medicines.

#### Shodhana therapy

Here a case of *Eka Kushta* has been discussed, which can be correlated to Plaque psoriasis. Psoriasis is a chronic

inflammatory disorder, characterized by erythematous plaques, with silvery white scales, that preferentially localize on the extensor surfaces.

*Eka Kushta* is a type of *Kshudra kushta* and have *vata-kapha* dominance and even involvement of *pitta*. No complications were observed during and after the procedure. After *Virechana* moderate progress was observed in itching, burning sensation.

#### Samsarjana karma

After *Virechana*, digestive fire becomes week due to excessive elimination of *doshas* and strength of the patient will be decreased. So, *Samsarjana Karma* helps to restore the digestive fire.

### Shamana therapy

Shamana therapy was given after completion of Shodana therapy. Internal medicines administered after Panchkarma includes Panchatikta ghrit guggulu, Asthiposhak vati, Gandhak Rasayan, Syrup khadiraristha.

*Panchatikta ghrit guggulu* possesses so many medical properties- Antioxidant, Antipruritic, Depurative, Antiinflamatory and Analgesic. This Ayurvedic medicine has potent use in managing the skin problems like in psoriasis, eczema it reduces the inflamation and provides cooling effects. It is good for non -healing wounds and also it is very good blood purifier that helps to eliminate toxins from the body.

Gandhak in Ayurveda has Kushthaghna property.

It's *Garavishahar and Rasayana* properties help to cure and correct the cause of skin disease. According to modern science, sulfur process an anti-inflammatory and anti- oxidant property which plays an important role in the treatment of autoimmune disease such as psoriasis.

Asthiposhak vati enhances Asthidhatvagni & corrects asthidhatvagni mala vikruti, hence useful in cracked nails.

A phenolic compound bakuchiol in *khadirarishta* extracted from *Bakuchi* (seeds) and *haritaki* exhibited antifungal activity against many dermatophytes, yeasts and pathogenic fungi.

*Haritaki* reduces pus collection in skin ailments and serves as *Rasayana*. *Daruharidra* and *Bibhitaka* present in *khadirarishta* also process wound healing properties. They have anti-inflammatory and antioxidant activities which promote the health of the skin.

*Shamana* therapy is beneficial in decreasing the symptoms of *Eka kushta*. It takes longer time and also chances of relapse is more. *Shodana* therapy helps to remove the *doshas* from its root, prevents the relapse of disease, decrease the symptoms in less duration of time.

# CONCLUSION

From this case report we may conclude that combined Ayurvedic treatment and diet regimen can be potent and effective in treatment of *Ekakustha* (Psoriasis). No adverse effect and aggravation of the symptoms was found in the patient during and after the treatment. The complete study with a larger sample size can be done to chek the significant result on the disease as well as the *Karma. Eka Kustha* is a chronic and relapsing in nature, *Acharya* mentioned *Puna Puna shodhana* (Repeated Purification) for treating *Kushta*, hereafter *Virechana Karma* other *Shodhana* therapy like *Vamana Karma*, *Raktamokshana* can be followed for better result.

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