

**ROLE OF VAMANA KARMA IN EKA-KUSHTHA BY VACHADI YOGA W.S.R. TO
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ABSTRACT

All skin diseases are described within *Kushtha* & *Kshudra Rogas* as per ayurveda; *Eka-kushtha* is one of the *Kshudra Kushtha* which can be correlated by Psoriasis of modern medical science. As described by *Acharya Charaka* and *Acharya Sushruta*, *Eka-Kushtha* is *Vata* and *Kapha pradhana Vyadhi*. Symptoms involve; *Asvedanam* (Absence of perspiration), *Mahavastu* (Extensive localization) & *Matsyashakalata* (fish like scales). *Shodhana Karma* is considered as main treatment modality for *Kushtha*. *Acharya Charaka* has preached that *Vamana Karma* is the prime treatment for *Kaphapradhana Kushtha* therefore in present study *Vacha*, *Vasa*, *Patola*, *Nimba* and Bark of *Phalini* were used which possess *Tikta Rasa*, *Katu Vipaka*, *Laghu Ruksha Guna* and *Kaphavatashamaka*, *Kaphapittaghna* and *Tridosha-shamaka* properties, these all drugs are indicated in treatment of *Eka-Kushtha*.

KEYWORDS: *Kshudra Kushtha*, *Kaphavatashamaka*, *Kaphapittaghna*, *Eka-Kushtha*.**INTRODUCTION**

Skin is the largest organ of human body; it is an organ made up of multiple layers of epithelial tissues that guard underlying muscles and organs. Skin is considered as the barrier to fluid loss and mechanical injury. It performs important functions like protection against pathogens, insulations, temperature regulation, sensation and synthesis of Vitamin D and B. It covers the body and possesses largest surface area of 1.5 - 2 square meters. The weight of skin is 15% of the total body weight. The average square inch of skin acquires 650 sweat glands, 20 blood vessels, 60000 melanocytes and more than a thousand nerve endings. Changes in skin colour may be considered as indicative of homeostatic imbalance in the body. Many interrelated factors affect both the appearance and health of the skin, including nutrition, hygiene, circulation, age, immunity, genetic traits, psychological state and drugs. Various researchers suggests that people with skin disease experience higher levels of psychological & social distress, poor body image and lower self esteem. Other psychosocial effects associated with skin diseases are depression, relationship difficulties and reduction in quality of life.

In *Ayurveda*, skin diseases are included under the heading of *Kushtha* or *Kshudra Rogas*. Out of them

Kshudra Kushtha is the *Eka-kushtha* which can be correlated up to certain extent with Psoriasis. It is chronic, non-infectious & common skin disease of today's time. It is a very attention seeking problem approximately 2-3 % (125 million) population of the world suffering from the disease. It possess symptoms like; *Asvedanam*, *Mahavastu* & *Matsyashakalata*. "Asvaodnama\ mahavaastau yanmatyaSakxlaopamama\ | tadokxkuxYzM, camaa_KyaM bahlaM histacama_vata\ ||" (carkx icaikxtsaa sqaana 7/21)

***Eka-kushtha* may be characterized as follows**

1. Absence of perspiration (*Asvedanam*)
2. Extensive localization (*Mahavastu*)
3. It resembles the scales of fish (*Matsyashakalata*).

Eka-kushtha is curable disease but its relapsing nature causes more harassment for the patient. It is correlated to certain extent with Psoriasis.

"ekxkuxYzma\ [ita Xaud`kuxYzoYau mauKyatOata\ |]" (Baava pa`kxaSa maQya KaND 54/24)

Vamana is one among the *Panchakarma* by which *Prakupita Doshas* from all over the body are brought to *Koshtha* and are eliminated through oral route. However *Shodhana Karma* is the prime treatment in *Kushtha* but *Vamana Karma* is mainly suggested for *Kaphapradhana Kushtha* according to *Acharya Charaka*.

“vaataao\$roYau saipa_vamanaM SlaoYmaao\$aroYau kuxYzoYau | ipa\$ao\$aroYau maaXaao rWtasya ivarocanaM caaga`o ||” (carkx icaikxtsaa 7/39)

Present investigation employed *Vamana Karma* in *Eka-kushtha* which is expected to reduce the symptoms like *Asvedanam*, *Mahavastu* and *Matsyashakalata* since *Vamana* expels vitiated *doshas* other than *Kapha* will also be eliminated there by creating *kledanasha* and affliction of *Tvak*, *Rakta*, *Mamsa* and *Ambu*.

“vaataadyas~ayaao duYTastvaga\ r@taM maaMsamambau ca | dUYyainta sa kuxYzanaaM saptakxao d`vyasaMga`h: ||” (carkx icaikxtsaa 7/9)

Investigation involve use of *Vacha*, *Vasa*, *Patola*, *Nimba* and Bark of *Phalini* which reduces *Rukshata* due to the action of *Go-Ghrita* as *Abhayantara Snehpana* followed by *Abhyanga* with *Tila Taila*. *Vamana Karma* with *Vachadi Yoga* will expel the *Doshas* and may lead to reduction in *Asvedanam*, *Mahavastu* and *Matsyashakalata* which in turn will lead to reduction in size of lesion automatically.

“vacaa vaasaapaTaolaanaama\ inambasya fxilanaI tvaca: | kxYaayao maQaunaa paItaao vaaintakRxnmadnaainvata: ||” (BaOYajya rtaavalal 54/3) (kuxYzraoga icaikxtsaa pa`kxrNa)

MATERIALS AND METHODS

Aim & Objectives

- To assess the reduction in cardinal signs of *Eka-Kushtha* viz: *Asvedanam*, *Mahavastu* & *Matsyashakalata*.
- To assess the increase in criteria score before and after treatment of *Svedana* in *Asvedanam lakshana*.
- To assess the reduction in criteria score before and after treatment in *Mahavastu* and *Matsyashakalata*.
- Standardization of *Vachadi Yoga* with special reference to *Bhaishajyaratnavali*.

Administration of Drug

Table 1: Study parameters and protocol.

Parameter of study protocol	Selection range and methodology
No. of Patients	30
<i>Vamaka Dravya</i>	<i>Vachadi Yoga</i>
Procedure	<i>Vamana</i>
Dose	As per requirement
Time	6.30 am after consuming Rice Gruel 200 ml with <i>Go-ghrita</i> 10 gm.
Duration	Till <i>Samyaka Vamana Lakshana</i> appear
<i>Purvakarma</i>	<ul style="list-style-type: none"> • <i>Snehpana</i> with <i>Go-ghrita</i> • 3/5/7 days <i>Arohana krama</i>

Inclusion Criteria

- Patients who have scored more than 0 for *Asvedanam*, *Mahavastu* & *Matsyashakalata lakshana* in assessment criteria.
- Patients having signs and symptoms of *Eka-kushtha* according to *Charaka Samhita*.
- Age group from 20 to 60 yrs.
- Patient of either sex.
- *Vamanarha* patients.

Exclusion Criteria

- Patients who have scored 0 for *Asvedanam*, *Mahavastu* & *Matsyashakalata lakshana* in Assessment Criteria.
- Patients below age 20 years and above age 60 years were excluded.
- Patients contraindicated for *Vamana Karma*.
- Patients with complications like Cardiac Problems, Emphysema, Carcinoma, *Timira Roga*, *Urakshata*, *Kshatakshina*, *Gulma*, *Urdhavga Raktapitta*, *Udara Vyadhi*, *Krishna*, *Udavarta* etc.
- Pregnant woman and lactating mothers.

Plan of Study

The *Kashaya* was prepared by classical method of *Kvatha Kalpana* mentioned by *Acharya Shrirangadhara*.

Vachadi Yoga: The *Pancha Kashaya* decoction was prepared using *Vacha* (27gm), *Vasa* (40gm), *Patola* (40gm), *Nimba* (40gm) and Bark of *Phalini* (40gm). Raised 187gm of their coarsely powdered mix and decocted in 3 liter water till it was reduced to approximately 400ml. Add to it *Madhu* (100gm) and Powder of *Madana* (2gm). Consumption of this decoction along with *Madhu* causes *Vamana* which termed as *Pancha Kashaya*.

Methodology: Single group of 30 diagnosed cases of *Eka-kushtha* attended the OPD/IPD level. Patients were selected randomly and placed in to Group i.e. Trial Group or Experimental Group. Patients were selected according to *Lakshana* mentioned by *Acharya Charaka*. A particular case paper had been designed and follow ups were updated strictly. Consent had been taken from all the patients. Initial assessment was done on day 0 and final assessment was done after 30 days of *Vamana*.

	• Sarvanga Snehana & Sarvanga Svedana on 5 th or 6 th or 7 th Snehapana day, Vishrama day and Vamana Karma day.
Paschatakarma	Dhumapana - Vacha Churna
Samsarjana Krama	3/5/7 days according to Shuddhi (Manda, Peya, Vilepi, Yavagu)
Age Group	20-60 yrs
Follow up	8 th /15 th /30 th day (after Vamana)
Assessment days	A day before treatment and on the last day of Samsarjan Krama.
Pathyapathya	Ati-madhura, Ati-amla, Ati-lavana, Ati-snigdha, Viruddha Ahara Sevana etc.

Criteria of assessment of Eka-kushtha

“Asvaodnama\ mahavaastau yanmatyaSakxlaaopamama\
| tadokxkuxYzM, camaa_KyaM bahlaM histacama_vata\
||” (carkx icaikxtsaa sqaana 7/21)

Table 2: Assessment criteria for various symptoms.**Asvedanam.**

Scale	Score
None - Normal	0
Mild - Present in few lesion	1
Moderate - Present in all lesion	2
Severe – Asvedan in lesion and uninvolved skin	3

Matsyashakalata

Scale	Score
None - No scaling	0
Mild - Off scaling is mild	1
Moderate - Off scaling is moderate	2
Severe - Off scaling is high	3

Mahavastu: (right leg, left leg, trunk, back)

Scale	Score
0% - None	0
0 < - 6% affected region - Mild	1
6 < - 12% affected region - Moderate	2
12 < - 18% affected region - Severe	3

Mahavastu: (right hand, left hand, head)

Scale	Score
0% - None	0
0 < - 3% affected region - Mild	1
3 < - 6% affected region - Moderate	2
6 < - 9% affected region - Severe	3

Mahavastu: (Genital Organ)

Scale	Score
0% - None	0
0 < - 0.33% affected region - Mild	1
0.33 < - 0.66% affected region - Moderate	2
0.66 < - 1% affected region - Severe	3

Mahavastu: (Average assessment criteria of whole body)

Scale	Score
0% - None	0
0 < - 33.33% total affected region - Mild	1
33.33 < - 66.66% total affected region - Moderate	2
66.66 < - 100% total affected region - Severe	3

OBSERVATIONS AND RESULT

Comparison of Severity of *Asvedana Lakshana* before treatment and on 1st follow up, 2nd follow up and 3rd follow up.

Table 3. Comparison of Lakshana before and after treatment.

	Negative Rank	Positive Rank	Ties	p-value
Before treatment	-	-	-	-
1 st follow up	23	0	7	< 0.001
2 nd follow up	29	0	1	< 0.001
3 rd follow up	30	0	0	< 0.001

By using Wilcoxon Sign Rank Test p-value < 0.05 therefore there is significant difference between before treatment and 1st, 2nd and 3rd follow up for *Asvedana Lakshana*.

Grade	Number of Patients			
	Before treatment	1st follow up	2nd follow up	3rd follow up
0	0	0	0	17
1	0	20	29	13
2	27	10	1	0
3	3	0	0	0

Comparison of Severity of *Mahavastu Lakshana* before treatment and on 1st follow up, 2nd follow up, 3rd follow up.

	Negative Rank	Positive Rank	Ties	p-value
Before treatment				
1 st follow up	23	0	7	< 0.001
2 nd follow up	29	0	1	< 0.001
3 rd follow up	30	0	0	< 0.001

By using Wilcoxon Sign Rank Test p-value < 0.05 therefore there is significant difference between before treatment and 1st, 2nd and 3rd follow up for *Mahavastu Lakshana*.

Grade	Number of Patients			
	Before treatment	1st follow up	2nd follow up	3rd follow up
0	0	0	0	17
1	0	21	29	13
2	25	9	1	0
3	5	0	0	0

Comparison of Severity of *Matsyashakalata Lakshana* at before treatment and 1st follow up, 2nd follow up, 3rd follow up.

	Negative Rank	Positive Rank	Ties	p-value
Before treatment				
1 st follow up	23	0	7	< 0.001
2 nd follow up	29	0	1	< 0.001
3 rd follow up	30	0	0	< 0.001

By using Wilcoxon Sign Rank Test p-value < 0.05 therefore there is significant difference between before treatment and 1st, 2nd and 3rd follow up for *Matsyashakalata Lakshana*.

Grade	Number of Patients			
	Before treatment	1st follow up	2nd follow up	3rd follow up
0	0	0	0	17
1	0	22	28	13
2	26	8	2	0
3	4	0	0	0

DISCUSSION

After the *Deepana-Pachana*, *Abhyantara Snehapana*, *Bahya Snehana* & *Bahya Svedana* the *Vamana* procedure was followed. *Akanthapana* of *Vachadi Yoga Vamaka Kashaya* was administered to the patient. The minimum amount consumed was 3 liters and the maximum amount was 7 liters. The *Lakshana* observed during the process *Adhmana*, *Lalasarva*, *Romaharsha*, *Sveda Pradurbhava* was observed in almost all patients. *Tiktasyata* was observed in cases of *Pittanta Vamana*.

Samprapti Bhanga: The *Vachadi Yoga* used in *Vamana Karma* which get absorbed due to their *Virya* and reached to the Heart (*Hridaya*). Wherefrom, through *Dasha Dhamani* circulation and via *Sthula* and *Sukshma Srotas*, the *Virya* of the *Dravyas* reached at the site of the lesion which may be in the form of *Dosha Sanghata*. *Vacha*, *Patola* & *Madanaphala* offer *Vata niyamana* by their *Ushna Viirya*. *Vacha* & *Madanaphala* possessed *Pitta Utkleshna* by their *Katu Rasa*, *Ushna Virya* and *Priyangu*, *Madanaphala* by their *Madhura Rasa* and *Vasa* by its *Sheeta Virya* leads *Kapha Utkleshana*. That after *Vacha*, *Patola* & *Madanaphala* offered *Kapha chedana* by *Ushna Virya*. After that *Vishyandita Dosha* flowed towards *Amashaya*. Use of *Vachadi Yoga* and *Vamanopaga Dravya*, *Vata Niyamana* and *Pitta-Kapha Shodhana* achieved. The result of *Tvak (Rasa)*, *Rakta*, *Mamsa*, *Ambu Dushita Dosha rahita* was observed. Therefore *Tvak (Rasa)*, *Rakta*, *Mamsa*, *Ambu yukta Lakshana Upashaya* occurred and finally *Upashaya prapti* of *Eka-kushtha Vyadhi* was observed.

Study Rationale: *Kushtha* is a *Tri-doshaja vyadhi*. *Eka-kushtha* is mainly *Vata-Kapha pradhanya vyadhi*. But generally patient of *Eka-kushtha* comes in their chronic stage. In *Vata* predominant *Eka-kushtha*, *Ghrita Pana* can only do *Vata Shamana*. But *Vamana* is vital for *Vata Niyamana*, *Pitta Utkleshana* and *Kapha Shodhana*. *Shodhana* of *Tri-dosha* require *Vamana Karma* for *Eka-kushtha* patients, therefore *Vamana Karma* were used to all *Eka-kushtha* patients for getting better results.

Mode of Action of Vamana Karma: *Vamana* is not merely a gastric lavage, but it is a complete therapy of *Kapha Dosha* as well as disorders caused by *Kapha Dosha*. *Acharya Charaka* has clearly mentioned that the drugs used in *Vamana Karma* get absorbed due to their *Virya* and reach Heart (*Hridaya*). Wherefrom, through the circulation and then via *Sthula* and *Sukshma Srotas*, the *Virya* of the drug reaches at the site of the lesion which may be in the form of *Dosha Sanghata*. The drug first liquefies (*Vishyandayanti*) *Dosha Sanghata* then breaks (*Vicchandati*) it into smaller molecules which can flow through the *Anu Srotas* of the body and reach to *Amashaya*, wherefrom they are expelled out by the act of *Vamana*. Every step of *Vamana Karma* has its own importance. Initially *Purvakarma* performed when *Abhyantara Snehapana*, it goes up to the cellular level where the *Gatra Snigdghata*, *Gatra Mardavatva*, *Tvak Singdghata* like *Samyaka Snehana Lakshanas* is produced. *Ghrita* is considered as an anti-oxidant and source of Vitamin A become loosen at cellular level by *Snehana*. Many substances, which are deposited at cellular level, they become loosen by the *Snehana*. Using *Abhyanga* and *Svedana* loosen substance becomes mobilized and comes into the blood circulation. *Vamana* is always done with full stomach so the pyloric end of stomach is closed. The site of action of *Vamana* is *Amashaya* which is mentioned as a *Kaphasthana*. *Vamana dravya*, which possess *Ushna*, *Tikshna*, *Ashukari*, *Vyavayi*, *Vikasi* properties may acts by two ways, first produced

medically induced mild inflammation by its *Ushna & Tikshna Guna* at organ level i.e. stomach and stimulate the vomiting centre of brain with its *Ashukari, Vyayayi* and *Vikasi* properties. When inflammations occur, the permeability of blood vessels is increased and the *Dosha* which are already come into blood steam by the help of *Purvakarma* come to the stomach. This process is compared with the process of where *Dosha* comes, in *Koshtha* from the *Shakha*, finally vomiting thrown out vitiated *Dosha* from the body.

- **Antiki Pariksha:** *Pittanta Vamana* was found in 17 patients.
- **Vegiki Pariksha:** *Uttama Shuddhi* observed in 9 patients.
- **Maniki Pariksha:** Patients have taken *Vamakayoga* in range of minimum 3 litres and maximum 7 litres. The *Vamanaotsrushta Dravya* i.e. difference between input and output was 150 ml to 200 ml.
- **Laingiki Pariksha:** Certain *Samyak Yoga Lakshana* i.e. *Kantha Shuddhi & Gatra Laghavata* were noted in most of the patients.

Pashchata Karma

- 1) After finishing the *Karma*, again blood pressure, pulse, temperature & weight were recorded. Patients were asked for the presence of any other symptoms.
- 2) Then one was provided a glass of warm water for gargling & washing the hands & allowed to rest for 5 minutes.
- 3) *Dhumapana* was done with *Vacha Churna* through each nostril for 3 puffs.
- 4) Patient was instructed to avoid *Divasvapa*, not to sit in fan or air-conditioned environment, not to move outside in the flowing winds & sunlight and advised to take rest.
- 5) The individual was instructed not to have any food article till the evening & if needed may use lukewarm water to drink.

Sansarjana Krama

1. By analysing the procedure, conclusion regarding the grade of purification was deduced. It was judged whether the purification was *Uttama, Madhyama* or *Hina* and accordingly the sequence of *Samsarjana Krama* was planned.
2. For the respective three types (Grades) of the purification, the regimen of 7, 5 and 3 days were opted.

Study perspective towards disease

- *Eka-kushtha* as a *Kshudra Kushtha* has *Vata-Kapha* dominance & even involvement of *tridosha* can be evident from its signs & symptoms.
- Maximum number of patients had lesion in lower extremity, especially feet followed by in hands; the 2nd common site of affliction.
- Among the *Ahara Hetus* sour food like tomato, lemon are commonly seen, among the non-vegetarians chicken, mutton, fish also observed.

Dugdha, Lavana Ati-sevana and *Ati-snigdha Ahara* are also noticed.

- Among the *Viharaja Nidanas Divasvapna, Ratri Jagarana* and *Sheetoshna Viparyaya* was also found among the patients of present study.
- There was strong involvement of psychological factors in the causation of *Eka-kushtha* like *Cittodvega* and *Krodha* were observed.

Study perspective towards Karma:

- *Vamana Karma* expels huge amount of morbid *Dosha* hence it has shown highly significance in *Asvedanam, Mahavastu & Matsyashakalata lakshana*.
- *Vamana Karma* is the *Pradhana Karma* for *Kapha* thus drastic reduction in *lakshana* like *Asvedanam, Mahavastu & Matsyashakalata* was observed.
- Relapsing nature of *Eka-kushtha* is most common, which suggest that, long term intensive therapy is necessary for eradication of the disease.

CONCLUSION

The following conclusions can be drawn after completion of the study.

- *Eka-kushtha* as a *Kshudra Kushtha* has *Vata-Kapha* dominance & even involvement of *Tridosha* can be evident from its signs & symptoms.
- *Eka-kushtha* in modern view has similarity with Psoriasis.
- *Kushtha* is a *Bahu-dosha* condition even it implies to *Eka-kushtha* also; hence repeated *Shodhana* is essential.
- Reports of allergic contact dermatitis from shampoos are mainly case based. Shampoos can cause dermatitis of the scalp, face and neck.
- Maximum number of patients had lesion in lower extremity especially feet followed by in hands which are 2nd common site of affliction.
- Among the *Aharaja Hetus* sour food like tomato are commonly seen, among the non-vegetarians chicken, fish also observed. *Kulatha, Mulaka Ati Sevana* and *Ati Snigdha* (oil fried things) also noticed.
- Among the *Viharaja Nidanas Divasvapa, Ratri Jagarana* and *Sheetoshna Viparyaya* also found among the patients under investigation.
- There are strong involvement of psychological factors in the causation of *Eka-kushtha* like; *Cittodvega* and *Krodha*.
- Persons who have taken oily & spicy food in excess and those who have taken dinner very late are mostly affected with *Eka-kushtha*.
- Tea, Tobacco and Non-vegetarian foods are the main factors.
- Most of the patients were reported in chronic stage.
- Relapsing nature of *Eka-kushtha* is most common, which suggest that, long term intensive therapy is necessary for eradication of the disease.
- *Vamana Karma* with *Vacchdi Yoga* in *Eka-kushtha* was found to be highly significant in symptoms of

Asvedanam, Mahavastu and Matsyashakalata lakshana.

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