

AYURVEDIC MANAGEMENT OF KAPHAJ KUSHTHA WITH SHAMAN CHIKITSA- A
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ABSTRACT

There are many patients with skin disorders who come to OPD of our hospital. Skin disorders vary greatly in symptoms and severity. In *Ayurved*, most of the skin diseases are described under *kushtha*. The seven and eleven (in total eighteen) varieties of *kushtha* are caused by seven-fold pathogenic substance of *kushtha*. *Kushthas* are never caused by the vitiation of only one *dosha*. All varieties of *kushtha* are caused by the simultaneous vitiation of all the three *doshas* however, some *doshas* may be predominant and others are not. Keeping this in view, and after ascertaining this from manifested signs and symptoms the physician should decide the line of treatment. Hence with proper diagnosis, according to *dosha* predominance *kushtha* can be curable by *dosha viparit chikitsa*. Here is a male patient of *kaphaj kushtha* of age 65 years having hypopigmented patches on thigh region treated without *shodhan chikitsa*. Patient got relief with oral medication and local application of medicated oil.

KEYWORDS: *Kaphaj kushtha, Shaman chikitsa, Dosha viparit chikitsa.*

INTRODUCTION

The prevalence of skin diseases in the general population varies from 7.86% to 11.6% in various studies.^[1]

The skin is not only the largest organ of the body, it also forms a living biological barrier and is the aspect of ourselves we present to the world. It is therefore not surprising that there is great interest in skin care with the associated vast cosmetic industry. The impairment of normal functions of skin can lead to acute and chronic illness with considerable disability and sometimes a need for hospital treatment.^[2]

Skin diseases are explained in *Ayurved* under the heading of *Kushtha*. *Nidan, poorvroopa, rupa, samprapti, chikitsa* are described under *kushtha adhyaya* in *Charak, Sushrut* and *Vagbhat samhitas*. They give much importance to skin disease.

For treatment of any disease the first principle is *shodhana* or elimination therapy for the curing of diseases in general, by removal of *doshas*. The second principle is *shamana* or alleviation therapy that is, it is the measures for counteracting factors responsible for disease. The third principle is avoidance of causative factors.^[3]

Some patients are contraindicated for *shodhana* therapy. Some patients not willing for *shodhana* therapy because of their busy schedule. Here the patient in our case study was not willing for *shodhana*, hence *shamana chikitsa* was done with avoidance of causative factors. The therapy which cannot eliminate *dosha* out of body, which do not vitiate balanced *doshas* is known as *shamana chikitsa*.^[4]

Avoidance of causative factors has vital role in whole therapy. After proper therapy, *rasayana* therapy has an important role. It is also known as *Apunarbhav chikitsa*. Here a single case study is done on a male patient of age 65 years having *kaphaj kushtha* without *shodhana chikitsa*. With proper diagnosis, patient got results with *shaman chikitsa*.

CASE REPORT

A male patient of age 65 years of OPD no. 119949 came to Government Ayurved Hospital, Nanded having -

Chief complaints: since 2 months

- *Shwetabh vaivarnya* (whitish discolouration) at medial upper portion of thigh,
- *Ishat Kandu* (mild itching) at site
- No *shotha* (swelling) or *daha* (burning sensation)

H/O Present illness

Patient has above mentioned complaints since 2 months but gradually increasing in size. So patient came to our hospital for Ayurvedic treatment.

K/C/O Diabetic mellitus since 20 years. On medication Tab. Glucoryl M2 forte (1____1/2) No H/O HTN/Endocrine disorders

Family history: Nil.

H/O Past illness: Left eye cataract operative in year 2015, Operated for Dacrocystitis before 2 years.

Medicinal history: Patient taking medicine for DM – tab. Glucoryl M2 forte. Not taken any medication for skin disease.

On Examination

Pulse – 92/ min
BP - 110/80 mm of Hg
Weight – 60 kg

Systemic Examination RS – AEBSE, bilateral clear

CVS – S1S2 normal
CNS – conscious, oriented

Local Examination

Colour – white
Appearance – whitish patch
Discharge – nil
Prakriti – Vatakapahaj
Dosha – kapha++, vata+, pitta+
Srotas – Rasa, Rakta
Agni – Mandya
Satva – Madhyam

Nidan panchak

Hetu: Ahar – upavasa once weekly
Biscuits daily
½ litre milk after meal
Peanuts
Non-veg per 15 days
Tea 2 times daily
Vihar – Sitting work
Divaswap, atichankraman
Khandit nidra
Manas – not any
Other – k/c/o DM
Poorvroopa: Alpa shwetabh twakvaivarnya
Alpa kandu

Rupa: Shwetabh twakvaivarnya

Alpa kandu

Agnimandya

Upashaya: After treatment

Samprapti: Hetusevana ----- Kaphapradhan tridosha prakopa ----- rasa,rakta,meda ,ambu dushti----- twakvaivarnya

Samprapti ghatak-

Dosha – Kapha pradhan tridosha

Vikalp samprapti – Drava, Guru, Snigdha, Vidahi
Dushya – Twak, Rakta, Mamsa, Ambu

Treatment Principle

Patient has white discoloration of skin at site with mild itching. According to signs and symptoms of vitiated doshas, this lesion was diagnosed as *kaphaj kushtha*.^[5]

Patient was not willing to do *shodhana chikitsa*. So he was started with *shamana chikitsa*. Gunas of *hetu sevana* was evaluated from patient, which were *guru, snigdha, drava* predominant. So *Gunaviparita chikitsa* i.e. *Rukshana chikitsa* was given to patient for 15 days at starting.^[6]

After proper *rukshana chikitsa*, *dosha viparit chikitsa* was done for vitiated *vata dosha*. hence cap. *Mahatiktak ghrita*, *Goghrita*, *Panchatikta ghrita* was given as treatment.^[7]

Raktaprasadak with *krimighna dravya* was continued in the form of *choorna*. *Sarivadyasava*, *Mahamanjishthadi kadha* were also given orally. They have *raktagamitva* property.

For local application *Karnja tail*, *Eladi tail*, *Nimba taila* are used.

Treatment schedule

Sanjeevani vati 2BD *Apaane* (before meal) for 15 days
Manjistha, *Bakuchi*, *Sariva*, *Sunthi*, *Musta choorna* -5gm BD *Apaane* (before meal) for 15 days
Hingwashtak choorna 5gm BD *Patham kaval bhukte* for 7 days
Nimba tail for local application for 15 days

1st follow up

Vidang, *Manjistha*, *Sariva*, *Musta choorna* 5gm BD *Apaane* (before meal) for 15 days
Cap. *Mahatiktak ghrit* 1BD *Apaane* (before meal) for 15 days
Sarivadyasava 15ml BD *Vyanodane* (after meal) for 15 days
Hareetaki choorna 5gm HS for 15 days
Eladi Tail for local application

2nd follow up

Sariva, *Manjistha*, *Yashtimadhu choorna* 5gm BD *Apaane* (before meal) for 2 months.
Goghrita 20ml *shaman matra Apaane* (before meal) for 2 months.
Eladi tail for local application.

3rd follow up

Mahamanjishthadi kwath 15ml BD *Vyanodane* (after meal) for 15 days
Panchtikta ghrita 10ml BD *Apaane* (before meal) for 15 days.
Eladi tail for local application

4th follow up

Khadirarishta 15ml BD *Vyanodane* (after meal) For 10 days *Karanja tail* for local application.

Assessment criteria

1. Decrease in size of patch
2. Change in colour of patch

**1st day****1st follow up****2nd follow up****3rd follow up****4th follow up**

| <i>Dravya</i> | <i>Guna</i> | <i>Rasa</i> | <i>Vipaka</i> | <i>Virya</i> | <i>Karma</i> |
|---------------------------------------|-------------------------------|-------------------------------|---------------|---------------|--|
| 1. <i>Manjishtha</i> ^[8] | <i>Ruksha, Guru</i> | <i>Madhur, Tikta, Kashaya</i> | <i>Katu</i> | <i>Ushna</i> | <i>Deepan, Pachana, Varnya gana (Charak)</i> |
| 2. <i>Sariva</i> ^[9] | <i>Guru, Snigdha</i> | <i>Madhur, Tikta, Kashaya</i> | <i>Madhur</i> | <i>Sheeta</i> | <i>Tridoshashamak, Deepan, Pachana, Raktashodhak, Kushthaghna, Anulomana</i> |
| 3. <i>Musta</i> ^[10] | <i>Laghu, Ruksha</i> | <i>Tikta, Katu, Kashay</i> | <i>Katu</i> | <i>Sheeta</i> | <i>Deepan, Pachana, Grahi, Krumighna</i> |
| 4. <i>Sunthi</i> ^[11] | <i>Laghu, Snigdha</i> | <i>Katu</i> | <i>Madhur</i> | <i>Ushna</i> | <i>Ruchya, Vataghni, Pachani, Kaphavatavibandhanut, Agnisandipan</i> |
| 5. <i>Bakuchi</i> ^[12] | <i>Laghu, Ruksha</i> | <i>Katu, Tikta</i> | <i>Katu</i> | <i>Ushna</i> | <i>Kushthakaphanilhar, Keshya, Twachya</i> |
| 6. <i>Yashtimadhu</i> ^[13] | <i>Guru, Snigdha</i> | <i>Madhur</i> | <i>Madhur</i> | <i>Sheeta</i> | <i>Chakshushya, Balavarnakrut, Pittanilastrajit</i> |
| 7. <i>Vidang</i> ^[14] | <i>Laghu, Ruksha, Tikshna</i> | <i>Katu, Kashay</i> | <i>Katu</i> | <i>Ushna</i> | <i>Charaka – Krumighna, Kushthaghna</i> |

RESULT AND DISCUSSION

Samprapti of any disease starts from *hetusevana* to the actual manifestation of disease.^[15]

According *Vikalpa samprapti* of *hetu*; they are predominantly *drava, guru, snigdha gunatmaka*.^[16] Patient is known case of DM hence has *medoshaithilya* with increased *kleda* in body.

According to *lakshana* of *kushtha* i.e. whitish discolouration of skin at left thigh region with mild *kandu* it is categorised in *Kaphaj kushtha*.

Treatment started with *Rukshana dravya choorna* and *Sanjeevani vati* which act as *deepan* and *pachana*, reduces *kaphavarodha* in *srotasa*. *Hingawashtak choorna* act as *agnideepana*. After *rukshana* treatment, whitish coloured patch is reduced to 50% in size and colour.

After *rukshana*, for vitiated *vata dosha*, *shamana* therapies such as medicated *ghrita* were given. *Cap. Mahatiktak Ghrita*, *Goghrita*, *Panchatikta Ghrita* are used. *Raktaprasadak*, *Raktagami*, *Krumighna dravya choorna* were continued which acts on *Rakta dhatu*. *Sarivadyasava*, *Mahamanjishthadi kwath* also acts on *Rakta dhatu*. At last as *rasayana* therapy patient was given with *Khadirarishta*. After around 4 months, the size and color of lesion reduced to 90% with remarkable changes.

CONCLUSION

If we are well acquainted with *hetu* and *guna*, along with *samprapti* of disease then with proper diagnosis, treatment can be started. Here without *shodhana chikitsa* patient got better result i.e., with proper knowledge in diagnosis, treatment can give miraculous effect, if it is started earlier with *Hetu viparit* and *Dosha viparit chikitsa*.

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