

## EFFECT OF PANCHKARMA IN DISCOID LUPUS ERYTHMATOSUS: A CASE STUDY

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## ABSTRACT

Discoid lupus erythmatosus is a autoimmune disease.<sup>[1]</sup> It is considered as milder or initial form systemic lupus erythmatosus. In this disease patient mainly manifest skin ailments without involving other systems of body. It may further progress to systemic disease or may resolve. This disease effects mostly exposed areas of body and scalp so this along with other symptoms are matter of concern as it destroys ones look. Autoimmune diseases are biggest health concerns these days because of unavailability of treatment without side effects. *Ayurveda* is a science which treats disease with minimal or no side effects. Treatment in *Ayurveda* is divided in two parts that is *samshodhana* and *samshamana*. *Shamshodhana* considered best among all other modalities. In *ayurveda* discoid lupus erythmatosus can be compared with *kushtha* which is a *tridoshaja* disorder. *Panchkarma* therapy performs *samshodhana* in various forms according to dosha of disease. This therapy not only cure the disease but prevents further progression of diseases. In this case patient presented with discoid rashes on face, ear and scalp. She was taking modern medicine but was not relieved. She was given *vamana*, *virechana* and *rakta mokshana*. She improved significantly and was satisfied with treatment. On the basis of this case study we can conclude that *panchkarma* therapy can help people with DLE and can be a good alternative of management to other autoimmune diseases.

**KEYWORDS:** *samshodhana, Vamana, Raktamokshana.*

## INTRODUCTION

Discoid Lupus Erythmatosus is milder or localised form of SLE. It mainly effects sun exposed areas and mucosa.

- It is a disease with a complex set of immunologic abnormality that appear to involve multiple mechanism of dysregulation and that may be linked to more than 20 different genetic determinants.
- It is a autoimmune disorder triggered by many environmental factors in genetically predisposed persons and involves destruction of connective tissue.<sup>[2]</sup>
- Lupus erythmatosus is a prototypic autoimmune disease characterised by the production of antibodies to components of cell nucleus.
- LE shows a strong familial aggregation.
- High frequency in first degree relative of the patient.
- Specific organ autoimmunity may be coexist with LE.
- Most of the cases genetic factors are not present suggesting environ mental and other factors responsible for pathology.
- LE is predominantly a female disease

- Estrogenous sex hormones has a role in predisposition of disease.
- Abnormal estrogen metabolism has been demonstrated in patient of LE.
- Estrogen facilitate humoral immune system leading to increased B cell proliferation.

Ultra violet radiations induces neoantigen expression which triggers dysregulation in immune system. Inducing heat shock proteins in keratenocyt. They act as target cell for T cell mediated cytotoxicity. Relasing immune mediators which induce inflammation leading to, Occlusive vasculopathy, Vasculitis, Immune complex desposition.

## AYURVEDIC VIEW

- Lupus erythmatosus is not as such discribed in *ayurveda*.
- Evaluation of disease is done on the basis of dosha involvement. Sign and symptoms of LE can be evaluated on dosha as follows:
- *Vata*: scarring, scales, atrophy, stiffness of joints.

- *Pitta*: eye ailments, malar rash, aphthous ulcers, inflammation, alopecia, greying and thinning of hair, deep pigmentation.
- *Kapha*: sandhi involvement, hridaya, oja.
- *Rakta*: reynauds phenomenon.

DLE is mostly considered initial or mild form of SLE. So in Ayurvedic view it can be called as *Shakhashrita Dosh*.<sup>[3]</sup>

- Then disease progresses to more severe stage involving *madhya rog marg marma, asthi, sandhi and finally* involvement of different organs called as *Abhyantra marg*.

Patients suffering from DLE usually take steroids as there is no effective treatment for these disease. *Ayurveda* is a science which have its own way of understanding and treating the diseases. Panchakarma being one of the best therapy in *ayurveda* as treats basic cause of disease and leads to complete cure or disease from root. Although this disease exactly not explained in *Ayurvedic* literature but on the basis of *dosha* involvement in symptoms *panchkarma* is mostly performed which shows good result in many diseases. In the present case patient with DLE given *Panchkarma* therapy and results were very effective.

### CASE STUDY

A female patient age 52 years residing in rural area of jogindernagar dist. Mandi (H.P.) visited Panchkarma OPD vide OPD NO. 261297 In R.G.G.P.G. Ayurvedic college and hospital Paprola. she complains that she was quite asymptomatic seven years back then she developed rashes and itching over the face, ear and scalp. Gradually

she started losing scalp hair and greying of hair simultaneously. Rashes were discoid in shape initially red and full of cheese material and then there was scarring of rashes. initially they were present on face then started appearing on ear, scalp and neck. She explained that after sometime she developed burning in hand and foot along with mouth ulcers on and off.

There was no past history of DM 2, Thyroid disease, trauma, HTN.

On examination it was found that Rashes were discoid, centrally hypopigmented and hyperpigmented at periphery.

There was scarring centrally.

On scalp there was alopecia and thinning of hair. Scalp was also hypopigmented.

Moth ulcers were small and 6 in number.

Vitals at the time of examination

1. B.P. 136 / 80 mm of Hg.
2. P.R. 74 / min.
3. R.R. 16 /min.

Diagnosis diagnosis was based mainly on clinical features.

1. Discoid plaque
2. central scarring and peripheral hyperpigmentation.
3. carpet track sign on removing the scales.

Patient was pre diagnosed as DLE by RPGMC Tanda, H.P.

**D/D** Psoriasis  
SL

	<b>Psoriasis</b>	<b>DLE</b>
Morphology	No atrophy	Discoid, annular, central atrophy
Scales	Loose, silvery, positive auspitz sign.	Adherent, positive carpet track sign.
Follicular plugging	absent	Conspicuous
Distribution	On pressure points and extensor surfaces	Face, scalp, ear.
oral	rare	25 % patients.

### MATERIAL AND METHOD

After taking consent of patient she was counselled regarding procedures and following were performed.

1. Vaman
2. Virechana
3. Raktamokshana

#### Procedure

Shamshodhana was performed in classical method.

#### 1. VAMANA Karma

##### A. Poorva Karma

1. Pachana Trikatu churna 3 gm BD.
2. Snehapana Panchtikta Ghrita for seven days. (Initial dose 50 ml to max. Dose 350 ml).
3. Sarwang abhyanga sarshap tail.
4. Sarwang swedana.

#### B. Pradhana karma

Sarwang abhyanga with Sarshap taila.

Sarwang swedana.

#### Vamana

#### Dravya

- Nimb kashaya 200 ml  
Madanphla 5 gm  
Vacha 250 mg  
Sarshapa kalka 2 gm  
Pippali 3 gm

#### Observations during procedure

- a. Pravritti Simultaneous.
- b. Vega 9.
- c. Antiki shuddhi Pittant

#### C. Pashchat karma

Dhoompan  
Samsarjana karma 7 days

**2. Virechan karma****1. Poorva karma**

Snehapan Panchtikta ghrita for 3 days.  
Sarvang abhyanga sarshapa taila.  
Sarvang awedana.

**2. Pradhan karma**

Sarvang abhyanga.  
Sarvang swedana.

**Virechana aushdha pana**

Virechana aushadha	Trivrita churna 5 gm Triphla kwatha 100 ml
Vega	22
Antiki	Kaphant
Yoga	Samyaka
Shudhhi	Pravara

Symptoms	BT	AT
Rashes	number of rashes increasing day by day pigmentation atrophy	No new rashes formed Older ones become light Scales decreased No further atrophy
Itching	Present	Absent
Hair fall	Present	Decreased
Burning in hands and feet	Present	Absent
Mouth ulcers	Present	Absent

**PROBABLE MODE OF ACTION**

If we focus on sign an symptoms of disease it shows involment of various doshas thus vamaana, virechana and rakta mokshana may be supposed to act differently.

One of the important point is that DLE mostly involves skin and hair so can be correlated as Shakahagat dosha. In vamaana and virechana dosha are firstly brought from shakaha to koshttha then expelled out.<sup>[4]</sup>

Meanwhile raktamokshana is itself best procedure for Shakha gata dosha.<sup>[5]</sup>

Symptoms showing vata predominance like scarring, scaling, atrophy and stiffness of joints is cured by snehapana which is done before every procedure. Snehapana causes softening and removes the scales. In this case panchtikta ghrita was given to the patient which by its tikts property act on piitta and by sneha guna pacifies vata.

Itching, malar rash, greying of hair are due to pitta dosha. It is combinely pacified by tikta ghrita, vamaana as a procedure removes appakwa pitta which leads to cure of pittaj symptoms.

Involvement of sandhis, autoimmunity related to oja are from vitiation of kapha dosha so vamaana as a procedure removes vitiated kapha leading to better absorption of nutrients.

**3. Pashchat karma**

Samsarjana 12 annakala (7 days)

**3.Raktamokshana**

1.Snehapan 3 days (150 ml, 200ml, 250ml).  
2.Sarvang swedana.  
3.Siravyadha 120 ml (arms).

**RESULT**

Patient showed very good results from very first day of treatment.

She explained that after snehapana itching was reduced. Rashes become soft and scales started disappearing. After vamaana and virechana no new rash appear. Burning and mouth ulcers improved after raktamokshana.

Rakta is responsible for renauds phenomenon, burning and malar rash which are best cured by raktamokshana.

**DISCISSION**

DLE is disease caused by derranged immune system. In that case rasyana are the best immunity boosters but rasayana without proper cleaning of body should not be given explained by Acharya charaka. Thus panchkarma by cleaning the body performs first steps towards boosting immunity.

On the other perspective of disease its sign and symptoms when evaluated on the basis of Dosha it shows involment of tridosha along with rakta.

Procedure performed in this case are vamaana acting on kapaha and pitta.<sup>[6]</sup> Ghrita pana pacifying pitta and vata. Ultimately raktamokshana acting directly on shakhagata dosha and rakta.

**CONCLUSION**

Thus from detailed mode of action of panchakarma procedures and result of the case, it can be concluded that panchkarma can do miracle in this kind of situations. It acts almost on every aspect of disease.

DLE if not treated in early stage it leads to progressed stage called SLE which is worst situation.

In other situations where we usually see immune system derangement this treatment can be applied to improve quality of life of patients. In cases where there are probability of occurring these disease biopurification procedures can help in prevention of disease as well.

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