

AN AYURVEDIC PROTOCOL TO ESTABLISH THE MANAGEMENT OF SHWITRA
W.S.R. TO (VITILIGO) - A CASE STUDYDr. Niranjana Sharma^{1*}, Dr. Yogesh Wane², Dr. Prakash Joshi³ and Dr. Harsh Pastore⁴¹PG Scholar, Department of Rachana Sharir, Govt.(Auto) Dhanwantari Ayurved College Ujjain M.P. 456001.²Associate Professor, Department of Rachana Sharir, Govt.(Auto) Dhanwantari Ayurved College Ujjain M.P. 456001.^{3,4}Assistant Professor, Department of Rachana Sharir, Govt.(Auto) Dhanwantari Ayurved College Ujjain M.P. 456001.

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ABSTRACT

Shwitra may be associated with the skin condition "vitiligo." The skin is one of the important sense organs, according to *Ayurveda*. The skin is home to *vata* and *bhrajaka pitta*. Since the skin covers the whole body, *bhrajaka pitta* must be kept in good condition and must be cared for on a regular basis. Skin disorders may be caused by a *Vata* and *bhrajaka pitta* mismatch. *Shwitra* is a harmless but severe cosmetic disorder that affects the affected person's emotional, psychological, and social well-being. *Ayurveda* has its own idea of treatment for skin diseases that is very useful and seems to provide wonderful results. The skin is a defensive layer of the body that serves as a covering. Any injury of body can reveal over the skin. All skin disease comes below *Kushta Roga* and *Switra* is one of them. In modern medical science it comes underneath vitiligo. In this case study, we try to establish a protocol for the *Ayurvedic* treatment of *Switra*.

KEYWORDS: *Switra*, *Kushta Roga*, vitiligo, *Kilas*, *Ayurveda*.

INTRODUCTION

In *Ayurveda*, vitiligo is referred to as "*shwitra*."^[1] In *Ayurvedic* literature, the words *Shwitra* and *Kilasa* are used interchangeably. *Kilasa/Shwitra* is classified as a form of *Kushtharoga* in *Ayurveda*. *Kushta* is caused by vitiation of *Tridosh* and *Dhatu*s such as *Rasa*, *Rakta*, *Mansa*, and *Meda*.^[2] *Tridoshaja*, according to *Charaka*, is *Kilasa*, and *Shwitra* is one of its (vitiligo) forms.^[3] Modern science defines it as a disease caused by excessive melanin distribution or impaired melanocyte development under the skin's surface. Vitiligo is a disease in which the skin turns white due to the lack of melanocytes cells, which contain the pigment melanin, which is responsible for skin color.^[4] This may be hereditary, radiation side effects; but, in a large number of individuals, it is observed without any of the above-mentioned particular causes and is classified as idiopathic. The aim of vitiligo therapy is to protect melanocytes from autoimmune damage and to induce their migration from surrounding skin. Current treatments include oral and systemic corticosteroids, topical calcineurin inhibitors, and ultraviolet (UV) radiation, but these drugs have certain side effects and drawbacks as well, so we strongly need a medication or procedure that treats the disease with associated complications, stops recurrence, and has no side effects, on the other hand *Ayurveda* fulfils all of these requirements.

AIM

1. To study *Ayurvedic* management of *Shwitra* in case study.

OBJECTIVE

1. To study the various aspects of *Ayurvedic* management of *Shwitra*.
2. To study the various review of literature regarding *Shwitra*.

MATERIAL AND METHOD

This study was carried out in Charma Roga Nivaran units OPD in govt. Dhanwantari Ayurved College, Ujjain (M.P.)

CASE REPORT

A 35 year old male patient belonging to Ujjain comes at Charma Roga Nivaran units OPD in govt. Dhanwantari Ayurved College, Ujjain (M.P.) The patient was suffering from skin disease (*shwitra*) and complaining:

- Whitish discoloration (*Twak Shwetata*) on the knee and elbow joint.
- Dryness of skin (*Twak Rukshata*)
- Mild itching over there since 1 year.
- Constipation

NO H/O – HTN, DM, Asthma.

HISTORY OF PRESENT ILLNESS

A year before, the patient was perfectly fine. Gradually, he acquired certain discolorations, such as white spots on the knee and elbow joints, as well as complaints of constipation, acidity, and slight scratching in those areas. The patient had already been taken medications by a number of physicians, but there was little substantial relief. Then he comes to our Charma Roga Nivaran units OPD in govt. Dhanwantari Ayurved College, Ujjain (M.P.)

PERSONAL HISTORY- Dietary habits showed that there was a lot of *Lavana*, *Amla Dravya*, mixed dietary habits, a lot of curd, fatty and spicy rice, *Viruddha Ahara Vihara*, and unusual bowel habits.

PSYCHOLOGICAL HISTORY- *Switra's* patients feel isolated from society and become stressed physically. Any mentally causing causes of skin diseases include stress and depression. In addition, he complained of constipation and insomnia. Patch discoloration rose

steadily after 3 months.

ASHTAVIDHA PARIKSHA

NADI (pulse) - 78/min *MALA* (stool) - Malabaddhata
MUTRA (urine) – Normal *JIVHA* (tongue) - Saam.
SHABDA (speech)-Normal *SPARSH* (skin)- Khara, Anushna
DRUK (eyes) - Normal *AKRITI* - Madhyam.

GENERAL EXAMINATION

Pulse: 78/ min CVS: Normal
 BP: 124/80 mmHg CNS: Conscious, Oriented
 Temp: Normal RS: Normal
 RR: 22/min P/A: Normal
 Weight: 69kg Height: 167cm
 Cyanosis-absent Clubbing- absent

INVESTIGATIONS

Hb%: 14.3 g/dl ESR: 32mm
 HBsAg: Non Reactive RBS: 120mg/dl

TREATMENT**(A) Oral medication****Table No.1.**

Sr	Formulation	Dose/Kala	Duration	Anupana
1	<i>Arogyavardhini Vati</i>	2*BD After meal	10days	Water
2	<i>Bakuchi Ghana Vati</i>	2*BD After food	10 days	Water
3	<i>Manjishtha Churna</i> 1gm + <i>Nagkesar Churna</i> 1gm + <i>Lodhra Churna</i> 1gm + <i>Guduchi Churna</i> 1 gm	2*BD after meal	7 days	<i>Mahamanjishthadi Kwath</i>
4	Lucoskin drop	10drop*bd	15 days	With halfcup of water
5	<i>Swadista Virechana Churna</i>	3gm*hs	10 days	With luke warm water

(B) Local Application**Table No.2.**

Sr	Formulation	Dose / Kala	Duration	Lepa
1	<i>Bakuchi Churna</i>	Quantity as per need, OD (at morning)	10 days	Mixed with <i>Gomutra</i> followed by Sunlight
2	Pigmento Ointment	BD	10 days	Apply over area

OBSERVATION AND RESULTS

The patient was told to take the medication for 5 months before eventually discontinuing allopathic medications. He also avoids *Lavana*, *Amla rasa*, and *Tikshna Dravya*, curd, spicy food, *Pittaja Ahara Vihara*, *Adhyasan*, *Divasvapna*, *Ratrijagaran*, tension, and anxiety.

After two months, former symptoms such as constipation and itching have subsided, and white spots have turned black.



(Before treatment).



(After treatment).

DISCUSSION

Shwitra that is curable, according to *Ayurveda*, is the kind that has no red hairs and is small, pale, freshly developed, and raised upward in the centre.^[5] Fused patches of red hairs at the ends of body parts (lips, elbows, feet, and genital organs) affected by fire burn are incurable.^[6] According to *Charaka*, *Medodhatu* is affected in *Shwitra* (type of *Kilasa*) and is more difficult to treat. According to the plan, the patient has taken medicine and has been instructed to follow a diet that excludes *Nidana*. The white patch on the knee and elbow has turned black and looks normal, the itching has subsided, and the constipation has subsided. In the case of *Shwitra*, the line of treatment is the use of *Kusthaghna* *Dravya* as an external remedy as well as orally. ***Arogyavardhini Vati***- It is *Raktadushthihara* (blood purifier), *Kushthahara* (alleviates skin diseases), *Srotovishodhana* (cleansing body channels), and *Pitta*

Doshahara (alleviates *Pitta*)^[7] *Rasaratnasamucchaya* mentions *Arogyavardhini vati* for the care of *Kushta*.^[8] It has anti-pruritic and antioxidant properties. It aids digestion and metabolic activity.

Bakuchi Ghana Vati- Shuddha is an abbreviation for *Shuddha Bakuchi* provides nourishment to skin cells and aids in cell rejuvenation. It has anti-inflammatory and wound-healing effects. *Bakuchi* is referred to as *kusthaghni* in *Ayurvedic* texts.^[9]

Swadista Virechana Churna- It is employed in *virechana karma*. According to *Charaka*, a *Shwitra* patient should go through *Shodhan* before receiving shaman *chikitsa*. *Swadista virechana churna* has the following properties, including *virechana karma*, which is used as a mild purgative in skin diseases. It contains *Sanaya* for *virechana* and *Suddha Gandhak*, which helps

to relieve scratching and burning sensations in skin diseases.

Manjishtha- It is included in *Varnya Mahakashaya* by *Charaka* because it is useful for improving skin tone and complexion, as well as possessing the *Rakta Shodhaka* (blood purifier) property. *Nagkesara* and *Lodhra* are both indicated in *Kushtha* and has *Kapha-Pittahara* properties.

Lukoskin drop- It produces *Ammi majus (yavani)*, which promotes the synthesis of melanin when subjected to sunlight.

Pigmento Ointment- It is used to treat skin hypopigmentation. It has wound healing powers, anti-inflammatory effects, is used to cure skin infections, and has anti-microbial properties. It also contains *Bakuchi*, which has already been described as being very beneficial in *Shwitra*, and *Chakramarda*, which has antibacterial and antimicrobial activity. *Suddha Gandhak* is a local irritant that stimulates the melanocyte for melanin development.

CONCLUSION

Since the prevalence of vitiligo is growing, it is critical to recognize and exclude multifactorial agents involved with the condition using *Ayurvedic* principles. *Varnya*, *Khushthaghna*, and *Raktaprasadan gan* are available for *Shwitra* treatment in *Ayurved samhita*. *Tridoshaghna*, *Bhrajak Pitta Vardhak*, *Raktaprasadak dravya* are effective in the early stages of *Shwitra* treatment. The skin represents the perfection of a good person. Cosmetic disfigurement may result from any disability. In this case study, we attempted to develop a protocol for the *Ayurvedic* treatment of *Switra*, and we concluded that *Ayurveda* provides the safest and effective treatment.

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REFERENCES

1. Vruddha Jeevaka, Kashyap Samhita, Kushtha Chikita Adhyay. Varanasi, India: Chaukhamba Vishwabharati, 2002. P.n.-2.
2. Tripathi Bramhanand, edited by Charak Samhita revised by Charak and Supplemented by Dridhabala, Chaukhamba Surbharti Publication; vol.-2, Reprint, 2011. Ch. -7, P.n.-333.
3. Sharma P. Charaka Samhita of Agnivesha, Chikitsa Sthana, Ch.7, Ver. 174, 5th ed., Varanasi: Chaukhamba Oriental; 2000; 142.
4. Tripathi Bramhanand, edited by Charak Samhita revised by Charak and supplemented by Dridhabala, Chaukhamba Surbharti Publication; vol. - 2, Reprint, 2011. Ch. -7, P.n.331.
5. Sharma P. Charaka Samhita of Agnivesha, Chikitsa Sthana, Ch. -7, Ver.175–176, 5th ed., Varanasi: Chaukhamba Oriental, 2000; p. 142.
6. Sharma P. Sushruta Samhita of Sushruta, Nidana Sthana, Ch. -5, Ver.17, 7th ed., Varanasi: Chaukhamba Oriental; 2002; pp. 286–28.
7. Harishankar S. Rasratna Samucchay of Vagbhata, vol. II, Ch. -20, Ver. 91–97, Revised ed., Delhi: Bharatiya Kala Prakashan, 2014; P.n. -502–503.
8. Ambhikdutta Shastri, Rasaratnasamucchaya, 9th edition, Chaukhamba Sanskrit Publisher, Reprint, 1994. chapter- 20 peg. no. 400.
9. Chuneekar KC, Pandey GS. Bhavaprakash Nighantu, 1st edition, Choukhambha Bharti Academy; Reprint-1010, P.n.-191-121.