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Ayurvedic Management of *Shvitra Kushta* (Vitiligo) – A single case study

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ABSTRACT:

Vitiligo is a common autoimmune disorder that causes pigmentation over body. It is of great socio-medical importance. Due to melanocytes deficiency, white spots appeared on body. It can be correlated with *Shvitra or shweta kushta* in *Ayurveda*. Due to side effects and limitation of the modern contemporary practice, there is need to find some harmless and effective medicines from Alternative medical sciences. Vitiligo have major impact on quality of life of patients, many of Vitiligo patients feel stigmatized and depressed by their condition. *Ayurveda* has great potential to treat such autoimmune skin diseases. In *Ayurveda* treatment of *shvitra kushta* is *sharir shodhana* i.e. *panchkarma* and *shaman chikitsa*. Here a case of 14 yr old female patient of vitiligo treated with Ayurvedic management which include procedures like *vamana*, *virechana* etc and oral medication like *arogyavardhini vati*, *vidangarishta* etc and local application.

KEYWORDS: *Shvittrakushta*, *Shodhana*, *Ayurveda*, vitiligo

INTRODUCTION:

Skin is the largest organ¹ of the body interacting with environmental stimuli and being a protective coat to body interface with these causative factors result in spontaneous remissions and relapses. In *Ayurveda* skin is one of the *panchdyanendriya*. Any skin disease causes physical, psychological and economical handicapping of the patient, as it is visible. *Shvitra kushta* though not described as one of the types *kshudra kushta* in *Ayurved* literatures. Incompatible food (*Viruddha-annapana*), excessive intake of liquid (*drava*), oily (*snigdha*) and heavy to digest (*guru padartha*), all type of *vega dharan*, exercise after heavy meals, excessive exposure to heat or sunlight etc².

Now-a-days we see increasing number of skin diseases due to changing dietary habits, stressful lifestyle, addiction and sleeping pattern. According to *Ayurveda* consistent and long term intake of *virrudha aahar-vihara* leads to formation of *Garavisha*. *Garavisha* can be defined as nothing but the collection of the toxin which is produced due to *virrudha aahara-vihara*

over a long duration of time³. This *Garavisha*, one of the causative factor for multiple skin diseases like *shvitra kushta*.

Shvitra is just not a disease of today's era, the word *Shvitra* has its root in the Sanskrit '*Shweta*', which white patch. According to *Kashyapa Samhita*, *Shvitra* is, '*Shweta Bhava Michanti Shvitram*⁴, it means reflection of white colour. *Susruta* called the disease as *Kilasa Shvitra*⁵. '*Twagatm Eva Aparisravi*', means there is only involvement of skin and is exudative. *Acharya Charaka* has mentioned various causes out of which *Virudha aaharsevana* important one. Vitiligo is a autoimmune dermatological disorder manifest by melanocytes deficiency characterized by white patches of the skin⁷, and the hairs from the affected skin may also become white. Vitiligo is hypopigmentation of the skin. It is also called hypo melanosis condition of the skin. This results in the hypo function or destruction of melanocyte. Melanocyte cell of the skin contains the Melanin which is very important for pigmentation of the skin. Melanin synthesis into the melanocyte cell is essential for normal color of the skin. According to modern medicine the cause of the Vitiligo is unknown till date. It may onset during any age but usually in second decade of life. It is Multifactorial disease, hence Genetic susceptibility is important factor in this case. Risk factors include positive family history, inflammatory diseases or autoimmune diseases. Worldwide incidence of Vitiligo is observed in 1% of world population⁶. Confirmation of diagnosis is possible by tissue or skin biopsy.

Treatment for Vitiligo in conventional medicine includes topical steroids, systemic steroids, systemic PUVA, topical PUVA, surgically grafting also done in some conditions. PUVA therapy have side effects like hyperpigmentation, squamous cell carcinoma in white skin individuals, photo toxicity, solar elastosis, and cataract. UVB phototherapy is a safer and better alternative to PUVA therapy but is relatively expensive. Considering the limitations of contemporary medicine system, *Ayurveda* has much convincing approach for vitiligo, hence an attempt is made to manage vitiligo through traditional medicine.

CASE REPORT:-

Patient name – ABC

Age- 14 years

Sex – Female

Occupation- Student

Chief complaints -

A 14 year old female having complaint of hypo pigmented patches around both eyes, nape of neck, and both hands since last one year, came to our kayachikitsa OPD for Ayurvedic treatment. The patches were non itchy and hypo pigmented.

History-

History revealed that patient is non hypertensive, no diabetic and did not have any symptoms of endocrinal disorders.

Family history: Nil

Personal History:

- *Aahar: Akal Bhojan, Vishamashan, Virudha aahar, tea 2-3 times /day, Ushna, ruksha, atisnigdha padhartha sevan. Vihara- ratri jagran, diwaswapna intermittently.*

Medicinal history – patient was taken allopathic treatment past 8 months but doesn't get relief, so patient came to our hospital for *Ayurvedic* treatment.

Past history - Patient had hypopigmentation since 1 year for that she had taken allopathic treatment but got no relief. And the size of the patch gradually increasing, so she came to our hospital for *Ayurvedic* management.

On examination:

Pulse: 82/min

BP: 110/80 mm of Hg

Systemic examination:

CVS: S1S2 Normal

CNS: Conscious, Oriented

RS: AEEBS, B/L Clear

Local examination:

Color: White

Appearance: Hypo pigmented, whitish Patch

Discharge: Nil

Prakruti: Vata Pitta

Dosha: Vata (++), Kapha (++), Pitta (++)

Dushya: Rasa, Rakta

Strotas: Rasavaha, Raktavaha

Agni: Jathargnimandya,

Rasadhatwgnimandya

Satwa: Madyam

Diagnosis: *Shvitra* (Vitiligo)

Shvitra is of 3 varieties.

1. *Daruna*

2. *Charuna*

3. *Kilasa*

All of them are generally caused by the simultaneous vitiation of all the three *Doshas*.

If located in *Rakta* (blood) it is red in color.

If located in *Mansa* (muscle tissue) it is Coppery in color.

If located in *Medas* (fat) it is white in color.

The subsequent ones are more serious than the previous ones.

Dosha- *Tridosha*

Dushya- *Tvak, Rakta, Mansa, Ambu*

These taken together, constitute the seven fold pathogenic substance of *Kushta*. (*Kushtha dravya sangraha*).

Treatment Principle:

As *Nidan* and *Samprapti* of *Shvitra Roga* is similar to *Kushta*. So the treatment principal of *Kushta Chikitsa* shall be applied in *Shvitra Chikitsa*. Depending upon the nature and intensity of vitiated *Dosha's* significant therapy should be selected. In addition, *Shamana* drugs are administered after proper course of *Shodhana*, as it provides additional relief and thus helps in eradicating the diseases completely. Vitiligo is a disease of Auto immune pathology so both systemic and local treatments are essential. Patients with more vitiated *Doshas* (*Bahudosha*) *Shodhan* will be given for several times with a lot of care (*Abyantar Parimarjan*). With some stimulatory drugs function of *Brajaka Pitta* should be reestablished (*Bahya Parimarjan*).

Treatment Schedule:

Deepana and *pachana* is done for 5 days with

<i>Dravya</i>	<i>Matra</i>	<i>Anupana</i>
<i>Arogyavardhini wati</i>	2 BD	<i>Koshna jal</i>
<i>Krumikuthar rasa</i>	2 BD	<i>Koshna jal</i>
<i>Vidangarishta</i>	10 ml BD	<i>Koshna jal</i>
<i>Mangishta kwatha</i>	10 ml BD	<i>Koshna jal</i>
<i>Triphala churna</i>	2 gm HS	<i>Koshna jal</i>

After *Pachana chikitsa*, *Shodhana* treatment was carried out;

<i>Shodhana karma</i>	<i>Snehapana dravya</i>	<i>Kalp used</i>	<i>Vega</i>
<i>Vamana</i>	<i>Tikta ghrita x 4 days</i>	<i>Saindhav lavana, madanphala + vacha + saindhav + madhu</i>	<i>3-4 vega</i>
<i>Virechana</i>	<i>Tikta ghrita x 4 days</i>	<i>Trivrutta avleha</i>	<i>4-5 vega</i>
<i>Krumighna basti</i>		<i>Krumighna dravya mentioned in classic text</i>	
<i>Raktmokshana</i>	<i>Titkta ghrita x 3 days</i>	<i>Jalaukavacharana</i>	<i>40-60 ml blood</i>

Snehapana was given in ascending order As 30 ml on 1st day, 60 ml on 2nd day, 90 ml on 3rd day and 120 ml on 4th day for *Vamana* and *Virechana*. And for *Raktanokshana snehapana* was done in *shaman matra* i.e. 30 ml on each day.

This was done in course of 1 month, later *shamana* treatment was given for next 15 days.

Shaman chikitsa:

- 1) *Arogyavardhini wati* 2 BD
- 2) *Sarivadyasav* 10 ml BD
- 3) *Mahamangishtadi kwath* 10 ml BD
- 4) *Drakshgandha* 10 ml BD
- 5) *Rasmanikya rasa* 125mg + *Bawchi churna* 500 mg + *Sariva churna* 1gm BD with *Goghrita*

Local application – *Bawchi tail* 2-3 times and *Shvitranashak Malhara* at bed time.

Shvitranashak Malahara content-

<i>Bawchi</i>	1 part
<i>Gomutra</i>	5 part
<i>Wax</i>	1, 5 part
<i>Til taila</i>	5 part

On follow-up, Patient had significant relief form above treatment modality, Patches were becoming normal, Hypopigmentation reduced to an extent.

Observations:

Before Treatment



After Treatment



After *Deepan*, *Pachan*, *Shodhan*, *Shaman Chikitsa* and local application of *Bakuchi taila* and *Shvitranashak malahara*. *Shodhana* includes *Vamana*, *virechana*, *Krumighna basti* and *Raktamokshan*. Patient noticed marked decrease in above all the symptoms like hypo pigmented patches around both eyes, nape of neck, and both hands.

It is observed that, the *Deepan*, *Pachan*, *Shodhan*, *Shaman Chikitsa* and local application of *Bawachi taila* and *Shvitranashak malahara* is effective in the *Shvitra*.

Discussion:

Shvitra is a *pitta pradhana tridoshaja Vyadhi*. Progression of this disease is rapid, so the management should be taken in proper time to arrest the pathogenesis. Firstly we gave *Deepana* and *Pachana* along with below medicines;

*Arogyavardhini wati*⁸, *Krumikuthar rasa*⁹ and *Vidangarishta*¹⁰ causes *Apatarpan*, which helps in opening the blockage of *strotasa*, and also plays an important role with *Kushthgna* properties.

*Mangishta kwatha*¹¹ acts as a *Raktaprasadan Draya*.

Triphala churna plays important role as a *deepana* and *pachana* drugs.

After the *deepana* and *pachana*, *Shodhana chikitsa* is takes place which includes *Vamana*, *Virechana*, *Krumighna Basti* and *Raktmokshan*. As *shodhana* is mentioned in classical texts as a major treatment regarding *twacha roga* (*Kushtha*).

Then *shaman chikitsa* is given after the *shodhana*, which includes *Arogyavardhini wati*, *Sarivadyasav*, *Mahamangishtadi kwath* both act as *Raktashuddhikar* and *varnprasadan*, *Drakshgandha* and *Rasmanikya rasa* 125 mg + *Bawchi churna* 500 mg + *Sariva churna* 1 gm with *Goghrita* which is effective in treatment of *Shvitra*.

For local application *Bawachi taila* and *Shvitranashak Malahara* is used. In this the *Bawachi* (*Bakuchi*) is the main ingredient. It is a renowned herb with many therapeutic properties. In Ayurvedic system of medicine, *Bakuchi* seeds are used for the treatment of Vitiligo. It contains Psoralen which on exposure to the sun results in re-pigmentation of patches by melanin synthesis. Psoralen is an active component which is used topically as well as systemically in the treatment of vitiligo.

Conclusion:

From the above discussion, we have concluded that Ayurvedic line of management i.e. *Deepan*, *Pachan*, *Shodhan*, *Shaman Chikitsa* and local application of *Bawachi taila* and *Shvitranashak malahara* is successful in the management of *Shvitra*. As far As the disease chronicity is concerned, for more effective results the treatment duration should be lengthened.

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