

Effect of an ayurvedic medication orally and *shatdhauta ghrta* locally in the management of *vipadika kushtha* (palmoplantar psoriasis) – a single case study.

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ABSTRACT

Introduction

Cosmetic diseases are the disease which affects emotional, psychological and social wellbeing of affected person. All the skin diseases in Ayurveda have been discussed under the broad heading of “*Kushtha*”. *Vipadika* (palmo-plantar psoriasis) is *kshudra kushtha* of *vata-kapha* origin characterized by *Panipad-sphutan* (cracks), *kandu* (itching), *teevra vedana* (severe pain) in *pani* (palm) and *pad* (sole). The treatment which given in Ayurveda is *shaman* and *shodhana*. Based on the symptoms *Vipadika* can be correlated with palmoplantar psoriasis which is variant of psoriasis.

Aim: to assess the impact of various conventional Ayurveda interventions in the management of *Vipadika kushtha* (palmoplantar psoriasis).

Materials and Methods: The study involved the holistic treatment of 58-year-old male farmer, having complaints of:- Fissure and scaling at Bilateral soles and palm, Itching at Bilateral palm and soles, Mild pain at site, Blackish discoloration on Bilateral palm and soles (more at palm), Sometimes minor bleeding occurs from fissure, Burning Sensation also present since 4 years. Giving him an ayurvedic treatment both *abhyantar* as well as *bahya chikitsa*.

Observation: before treatment patient having lots of complaints and after treatment all complaints are markedly reduced.

Result: The interventions derived from Ayurveda demonstrated benefits in reducing *Vipadika kushth* (palmoplantar psoriasis) symptoms in the treated patient, as evidenced by improvements noted on the sign and symptoms.

Discussion: Ayurveda provides diverse *Chikitsa* modes for managing *Vipadika Kushtha*. Recognizing the chronic nature of

Vipadika, the study underscores the importance of long-term interventions that facilitate the patient's better integration into society and contribute to an improved quality of life.

Keywords *Vipadika*, palmoplantar psoriasis, *kushtha*, *chikitsa*.

INTRODUCTION-

Ayurveda is the science of life, and its goals are to treat illness and preserve health in the well-being of the individual. *Kushtha* is the general term used in Ayurveda to denote diseases of skin, and In Ayurveda all skin diseases are described under single heading i.e. *Kushtha*. Skin is the protective organ of the body and reflects the health of the individual. Cosmetic diseases are the disease which affects emotional, psychological and social wellbeing of affected person. According to Ayurveda *Vata*, *Pitta* and *Kapha* are responsible for health and disease depending on their equilibrium and imbalance state of the body respectively. *Acharya Charaka* had mentioned that all *Kushthas* are *Tridoshaj* in nature.¹ There are 18 types of *Kushtha* described in Ayurved *Samhitas*². They are classified as seven *mahakushtha* and eleven *Khsudra Kushtha*. *Vipadika* is one of the eleven *Kshudra Kushtha*. Different *Acharyas* have given the different presentations of signs and symptoms of *Vipadika*. Mainly *Vata-Kaphaja Dosha* involvement in *Vipadika* and it is characterized by *Panipada Sphutana* (fissure / cracks in palms and soles) and *Teevra Vedana* (severe pain).³ *Acharya Vagbhat (Ashtang Hridaya)* also

opines the same as stated by *Acharya Charaka* i.e. *Panipad Sputana* (Cracks over palms and soles), *Teevra Vedana* (Intense pain), along with *Manda Kandū* (Mild itching) and *Sarag Pidika* (Red-coloured macules /occurrence of red patches over palm and sole.)⁴ According to *Acharya Sushruta*, *Kandū* (Itching), *Daha* (Burning sensation), *Ruja* (Pain) present especially on *pada* (sole) are the symptoms of *Vipadika*.⁵ Different treatment methods described by various *Acharya* like *shodhana*, *shaman*, *lepa*, *taila* application etc. *Vipadika* can be correlated with Palmo plantar psoriasis.⁶

Palmoplantar psoriasis (PPP) is a common chronic immune-mediated, inflammatory, proliferative, non-communicable disease of skin influencing people who are genetically predisposed with habitat having a crucial role in pathogenesis.⁷ The prevalence of Psoriasis imprecisely ranges between 2 and 3% worldwide.⁸ In India, the prevalence of psoriasis also varies from 0.44 to 2.88%.⁸ As per modern science, hypertrophy of the epidermal layer of the palms and soles, usually of a more or less horny and plate like character, is well defined as Palmoplantar psoriasis.

In this study a 58 years male patient who is diagnosed as *Vipadika* and treated with ayurvedic treatment.

AIM AND OBJECTIVES –

- i) To illustrate the clinical features of *Vipadika*.
- ii) to study the effectiveness of ayurvedic management in the

case of *Vipadika* (palmoplantar psoriasis).

MATERIAL AND METHOD

STUDY DESIGN: Single case Study.

Case report – A 58 years male patient came to our OPD of laxamnrao kalaspurkar ayurved hospital with complaints of blackish discoloration of skin over palm and soles, burning sensation, itching over palm and soles and sometimes bleeding through fissures of palm and soles since 4 years.

General information

- Name – abc
- Address - xyz
- Opd no. – 508983
- Cr no.- 30188
- Sex- male
- Age – 58 years
- Occupation - farmer
- *Desh – Sadharan*

Chief complaints

- Fissure and scaling at Bilateral soles and palm, Itching at Bilateral palm and soles, Mild pain at site, Black discoloration on Bilateral palm and soles (more at palm), Sometimes minor bleeding occurs from fissure, Burning Sensation also present.

H/O Present Illness

- A 58 years male patient was alright before 4 years. After that he is suffering from Fissure and scaling at Bilateral soles and palm, Itching at

Bilateral palm and soles, Mild pain at site, Black discoloration on Bilateral palm and soles (more at palm), Sometimes minor bleeding occurs from fissure, Burning Sensation these symptoms. Gradually symptoms gone worst. He has taken treatment of modern medicine and homeopathy (treatment details not found) and was getting temporary relief, due to recurrence of the symptoms, he approaches here for further treatment. On examination, multiple deep fissures with dry scales were present on both palms and soles with local tenderness, blackish discoloration also found. According to the clinical features, the patient was diagnosed as a case of *Vipadika*. Clinical features indicated predominance of *Vata* and *Kapha Dosha*.

- H/O Past illness - No h/o DM, HTN or any major illness.
- Family History - Not significant.
- Personal History – addiction (*Vyasan*) – tobacco chewing 1 packet for 4 days.
- Diet - Mixed diet.
- *Nidra* (sleep) - Disturb sleep sometimes due to pain and itching.
- Ashtavidha Pariksha
 1. *Nadi* – 80/min, regular, *Vatpradhana Pitta*
 2. *Mala* - now Samyak, but he had unsatisfactory motion 6-7 years ago.

Now from 2 years *malapravrutti* is *Samyak*.

3. *Mutra* – 5 to 6 times per day, *samyak*
4. *Jivha* – *nirama*
5. *Shabd* – *spashta*
6. *Sparsh* – afebrile (Local – *ruksha*, *kharsparsha*)
7. *Drika* – no pallor, no icterus
8. *Aakruti* – *madhyama*

• Dashavidha Pariksha

1. *Prakruti* – *Kaphapradhana Vata*
2. *Vikruti* – *Dosha* – *Vatapradhan Kaphaja*

Dushya – *Tvacha*, *Rakta*,

Lasika, *Mansa*

3. *Sara* – *Madhyama*
4. *Samhanan* – *Madhyama*
5. *Praman* – *Madhyama*
6. *Satva* – *Madhyama*
7. *Satmya* – No allergies to any drug or food, *Shadaras Satmya*
8. *Aharshakti* – *Madhyama*
9. *Vyayamshakti* – *Madhyama*
10. *Vaya* – 58 Years *Taruna* (*Madhyama*)

- Vital Parameters
- Temperature – 97.3° F
- Pulse – 80 Per minute
- B.P. – 130 / 80 mmHg
- RR – 18 Per minute
- Systemic Examination

- RS – AEBE, Clear
- CVS – S1S2 Audible normal, no any abnormal sound
- CNS – Conscious, oriented
- P/A – Soft, no tenderness, no any organomegaly

Local Examination

Skin Examination

Inspection

- Nature of skin - *Panipada Sphutana* (Dry)
- Colour - Blackish
- Distribution - Bilateral palms and soles
- Bleed on scaling - Absent
- Edges - Irregular
- Configuration - Lesions over palms and soles of both the limbs (more over bilateral palm)

Palpation

- Texture - Dry, rough, flaky
- Temperature - Not raised
- Mobility - Immobile
- Auspitz sign - positive

Differential Diagnosis

According to modern sciences

- a. Palmo-Plantar Psoriasis
- b. Dermatitis
- c. Palmo-Plantar keratoderma (tylosis)
- d. Tinea pedis

table no. 1 showing differential diagnosis according to modern science. ⁹

Palmoplantar psoriasis	Dermatitis	Tylosis (Palmoplantarkeratoderm)	Tinea Pedis
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Itching - Moderately itchy. Scratching results in bleeding	Very itchy. Scratching results in oozing	Itching present	Present
Morphology - well defined indurated plaques	Not so well defined and not indurated.	Punctate, striate or mutilating. Sometimes, the keratoderma spills onto dorsum of hands and feet	Chronic hyperkeratotic Chronic intertriginous Acute ulcerative Vesiculobullous
Surmounted with silvery plaques	Scale - crust	Thickening and mutilation	
Auspitz sign - positive	Negative, Patch test is done	Negative	Negative
Nail changes - Typical	Variable	Not present	Not present Present in onychomycosis

According to Ayurveda

- a. *Vipadika*,
- b. *Padadari*

table no. 2 showing differential diagnosis according to ayurveda.

<i>VIPADIKA</i>	<i>PADADARI</i>
Dominance <i>Doshas</i> are <i>Vata</i> and <i>kapha</i>	<i>Vata Dosh</i>
Seen in both hands and foot	Seen only in foot
<i>Saruja</i> (painful) <i>Srava</i> (discharge), <i>Kandu</i> (itching)	<i>Saruja</i> (painful)

On the basis of sign and symptoms final diagnosis is *Vipadika* (palmo planter psoriasis).

Nidan Panchak

table no. 3 showing *nidan panchak* of *Vipadika*.

<i>Hetu</i>	<i>Poorvaroop</i>	<i>Roop</i>	<i>Samprapti</i>	<i>Upashay</i>
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<i>Katu Ruksha Ahara Vataja Ahara Mitya vihar</i>	Nothing specific	<ul style="list-style-type: none"> • Cracking of foot (<i>Panipada Sphutana</i>) • Oozing of blood due to cracks on feet. • Difficult to walk due to pain. 	<ul style="list-style-type: none"> • <i>Nidana Sevana</i> • <i>Vata Kapha Prakopa</i> • <i>Rasa Rakta Dhatu Dushta</i> • <i>Sthana Samshraya</i> in <i>Panipada</i> • <i>Rukshata</i> of <i>Panipada</i>, <i>Sphutana</i> of <i>Panipada</i>. <i>Teevra Vedana</i>, • <i>Vipadika</i> 	Cracking and pain subsides on application of <i>Shatadhauta Ghrita</i>
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Assessment Criteria^{10, 11}

table no. 4 showing assessment criteria (subjective and objective)^{10, 11}

Sl. no	Clinical Features	Grade 0	Grade 1	Grade 2	Grade 3
1	<i>Panipada Sphutana</i> (Fissuring & Cracking of heels)	Absent	Mild (presence of cracked lines on heels / cracks on heels or palms only covered partially)	Moderate (open cracks / cracks on heels or palm and planter aspects of toes or fingers)	Severe (wide open bleeding fissures / cracks on complete foot or palm)
2	<i>Vedana</i> (Pain)	Absent	Mild or occasional pain (able to walk/ pain after pressing)	Moderate pain (Tolerable and able to walk / pain on touch)	Severe pain (unable to walk / pain without touching)
3	<i>Daha</i> (burning sensation)	absent	Burning during itching	Continuous burning	

4	<i>Rukshata</i> and <i>Kharata</i> (Dryness and Roughness)	Absent	Mild dryness	Moderate dryness and rough on touch	Severe dry and rough flakes
5	<i>Kandu</i> (itching)	Absent	Mild or occasional itching (1- 2 times in a day)	Moderate or frequent itching	Severe itching (itching disturb the sleep)
6	<i>Shyava varna</i> (Blackish discoloration)	absent	mild	Moderate	Severe

- **Treatment Abhyantar And Bahya Chikitsa**

Table no. 5 intervention (*Abhyantar* as well as *Bahya Chikitsa*)

Date and duration	Sr no.	Drug	Route	Dose	anupan
26 nov 21 to 10 dec 2021	1	<i>Aarogyavardhini vati</i>	Oral	500mg bd (<i>vyanodan</i>)	<i>Koshnajala</i>
	2	Tab <i>gandhak rasayana</i>	Oral	250mg bd (<i>vyanodan</i>)	<i>Koshnajala</i>
	3	<i>khadirarishtam</i>	Oral	20 ml bd (<i>vyanodan</i>)	With equal quantity of water
	4	<i>Shatadhauta Ghrita</i>	Local application	10ml (as per requirement) twice a day	
10 dec 21 to 21 dec 21	Continue above treatment 1 to 4				
	5	<i>Panchatiktaka Ghrita</i>	oral	10 ml every morning empty stomach (<i>pratakala abhukta</i>)	<i>koshnajala</i>
Continue abobe treatment 1 to 5					

21 dec 21 to 30 dec 21	6	<i>Kaishor Guggul</i>	oral	500 mg bd	<i>koshnaja</i>
	7	<i>Triphala kwath dhawanarth</i>	Local application for washing	As per requirement	
30 dec 21 to 14 jan 22	Continue same above treatment				

OBSERVATION AND RESULT

In this study Patient's sign and symptoms is markedly reduced by the ayurvedic drug intervention.

- Multiple fissure – decreased by 100%
- Scales – decreased by 100%
- Erythema – decreased by 100%
- bleeding from fissure – decreased by 100 %
- Blackish discoloration – decreased by 90%
- Dryness – decreased by 90%
- Itching – decreased by 100 %
- Burning sensation – decreased by 100%
- No local tenderness
-

Assessment of each follow up

Table no. 6 showing assessment follow up during study

features	Before treatment	1 st f/u	2 nd f/u	3 rd f/u	4 th f/u	After treatment
<i>Panipad Sphutana</i>	3	2	2	1	1	0
<i>Vedana</i>	3	2	2	1	1	0
<i>Daha</i>	2	2	1	0	0	0
<i>Kandu</i>	3	2	1	1	0	0
<i>Rukshata</i>	3	2	2	1	1	1
<i>Shyav varna</i>	3	2	2	2	1	1

Before treatment

After treatment



Figure 1 before treatment



Figure 2 after treatment



Figure 3 before treatment



Figure 4 after treatment





Figure 8 palm third follow up



Figure 9 palm fourth follow up



Figure 10 palm after treatment



Figure 11 sole before treatment



Figure 12 sole first follow up



Figure 13 sole second follow up



Figure 14 sole fourth follow up



Figure 15 sole fourth follow up

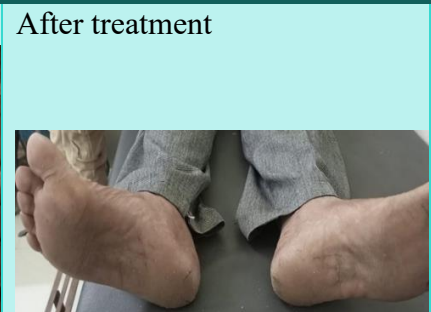


Figure 16 sole after treatment

DISCUSSION

Ayurveda has described several forms of *Kushtha*. Among them is *Vipadika*, which

resembles palmoplantar psoriasis and involves all the *Tridosha* in the pathogenesis, with vitiated *Vata* and *Kapha* predominating. As a cosmetic purpose, many skin diseases have their unique importance, but in this case along with the cosmetic involvement patient had difficulty in daily activity due to severe pain in both the soles. He was unable to walk properly and had insomnia due to pain and nocturnal itching. he had taken medicine from allopathy and homeopathy but still didn't get the result so, he came to OPD for Ayurvedic treatment. This case of *Vipadika*, patient was treated with *Arogyavardhini Vati*, *Gandhak Rasayan*, *Khadirarishtam*, *Kaishor Guggul*, *Panchtikta Ghrita* orally and *Triphala Kwath Dhawan* and *Shatadhaut Ghrita* for local application.

The primary role of *Aarogyavardhini vati* in *Samprapti bhanga* is due to its ability to maintain the *Vata*, *Pitta*, and *Kapha doshas* within their proper ranges. The contents present in *Arogyavardhani vati* are *Shuddha Paarada*, *Shuddha Gandhaka*, *Shuddha Louha bhasma*, *Shuddha Abhraka bhasma*, *Shuddha Tamra bhasma*, *Triphala*, *Shilajata*, *Guggulu (Comiphora mukul)*, *Chitraka (plumbago zeylanica)*, *Kutaki (picrorhiza kurroa)*, *Nimba (Azadirachta indica)* etc.^{12,13} *Shuddha Gandhaka* has *Kledaghna* (removal of toxins) *Aamapachana*, *Kushthaghna*, *Kandhughna* (anti-itching) and *Rasayan* properties. So, Sulphur plays an important role in chronic inflammatory conditions like Psoriasis. It has *Kutaki* as a main ingredient that has antipruritic and antioxidant properties and

works as *Dhatuposhaka* (~nourishes body tissues), hence resolving the morbidity at *Dhatu* level. It is *Hridya* (~beneficial for the heart), *Deepana*, *Pachana*, and *Tridoshashamaka* and is indicated in the treatment of *Kushtha*.¹⁴

Gandhak Rasayan: It contains *Shuddha gandhak* (Pure sulphur), *Chaturjat*, *Triphala*, *Suntha (Zinziber officinalis)* *Maka (Eclipta alba)* and *Gulwel (Tinospora cordifolia)* It acts as *Kushthaghna* (fights with skin ailments), *Vishaghna* (Antitoxin), *Rasayan* (Antioxidant), *Jantughna*, (Antimicrobial) and *Yogvahi* (Increases the action of drug)¹⁵. *Gandhak Rasayan* is *Pitta shamak* in nature, which acts as anti-inflammatory.¹⁶

Khadirarishta is useful in *Sarvakushtha* (all types of skin ailments) including Psoriasis.¹⁷ *khadirarishta* made by *Khadira*, *Devdaru*, *Bakuchi*, *Daruharidra*, *Haritaki*, *Bibhitaki*, *Amalaki*, *Dhataki* etc. The main content of *Khadirarishta* is *Khadira (Acacia catechu wild)* which has anti-inflammatory, immuno-modulatory and anti-oxidant properties that play major role in chronic inflammatory conditions such as Psoriasis.¹⁸ *Daruharidra (Berberis aristata)* shows anti-psoriatic and anti-inflammatory actions. *Bakuchi (Psoralea corylifolia Linn)* has anti-inflammatory, immune-modulatory, anti-oxidant, anti-leprotic, anti-psoriatic and anti-bacterial effects. It acts by regulating multiple pathways in order to correct pathophysiology of chronic skin ailments.¹⁹ *Dhataki Pushpa (Woodfordia fruticosa)* contains various phytochemicals that shows anti-psoriatic potential.²⁰

Shatadhauta ghrta is indicated in *Visarpa*, *Kushtha* and *Kandu*. it was applied morning and evening after cleansing the wounds.²¹

Ingredients of *Panchatikta ghrta* have the dominancy of *Tiktarasa*, which acts as *Deepana* (~digestion and metabolism-enhancing), *Pachana* (~digestive), and *Kaphaghna*. Furthermore, it has the property

of *Lekhana* (~scrapping), *Vishaghna*, destroys *Kleda* (~moistness), *Kandughna* (~alleviate pruritus), and *Kushthaghna* (~alleviate integumentary disorders), which help mitigate the disease. As per the pharmacological activity, all the ingredients possess antifungal, antibacterial, anti-inflammatory, and wound-healing activities.²²

Due to the *Yogvahi* (synergistic) property of *Guggulu* in the *Kaishore guggulu*, it potentiates the actions of other herbs present in the formulation. *Kaishore guggul* has mentioned in the *Kushtha*,²³ *Vrana* and also in *Vatarakta chikitsa*. Main contents of *Kaishore guggulu* are *Guduchi* (*tinospora cordifolia*), *Trikatu*, *Triphala*, *Vidanga* (*Emblia ribes*), *Chitraka* (*plumbago zeylanica*), *Nishotha* (*Operculina Turpethum*), *Dantimool* (*Baliospermum montanum*) along with *guggulu* (*Commiphora mukul*).²⁴ *Guduchi* is the drug of choice for vitiated *Vata-kapha Dosha* and *Rakta*, *Vidanga*, *Chitraka*, *Trikatu*, *danti*, *Pippali* is a potent medicine for *Vata* and *Kapha Dosha*. It shows *Kaantikara* (improves skin's natural radiance) effect through its blood purification property. In present case, it helps in relieving pain,

inflammation due to its antibacterial and anti-inflammatory properties.²⁵

Triphala Kwath has *Krimighna* and *Vranaropan* properties and thus is used as antiseptic for cleaning the affected area.^{26,27}

In this patient After first medication the symptoms like cracking of both palm and soles, itching, bleeding from cracked region reduced. The patient was advised for follow up for proper medication and is advised for avoiding fried food items, junk food, curd, non-vegetarian diet, sea foods, and milk products etc.

CONCLUSION

Present study has proven that internal administration of *arogyavardhini vati*, *Gandhak rasayan*, *khadiraristham*, *kaishor guggul*, *panchtikta ghrta* and *triphala kwath Dhawan* and *Shatadhaut ghrta* for local application can be effectively used to treat the *Vipadika*.

Conclusion from this study is concluded that *Vipadika* can be successfully treated with appropriate Ayurvedic medication. As Ayurvedic treatment helps to relieve symptoms of disease and also an attempt to provide safe and effective treatment to the patient. The Ayurvedic treatment has showed promising results in this disease. There is a need of largescale clinical trials to access its long-term effectiveness. There were no treatment-related adverse effects reported.

Consent of patient

Patient's consent and ethical approval has been collected and preserved.

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