

An Ayurvedic Management of *Kitibha Kustha* with special reference to Psoriasis

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Abstract:

Background: Psoriasis is a chronic autoimmune condition marked by elevated patches of unusual skin that are red, pink, or purple in color. These patches are dry, itchy, and covered in scales. The severity of psoriasis ranges from minor, limited areas to affecting the entire body. In recent years, the prevalence of psoriasis has increased. Factors like excessive cosmetic use, unhealthy dietary patterns, unprotected exposure to pesticides, nutritional deficiencies, psychological stress, and sedentary behavior are common lifestyle alterations that might contribute to this condition. **Case:** A 49-year-old male patient suffering from 5 years visited the hospital for treatment. From an Ayurvedic perspective, we can compare the disease with *Kitibha kustha* (a type of skin lesion) because most of its symptoms mimic the signs and symptoms of Plaque psoriasis. **Conclusion:** Even though plaque psoriasis is very difficult to treat, a thorough assessment of pathogenesis, proper *Shodhana* (purification), *Shamana* (pacifying therapy), and *rasayana* (rejuvenation therapy) have proven to be effective along with a swinging decrease of PASI, and DLQI from 36.8, 12 to 3.2 and 2.

Keywords: Shamana chikitsa, Shodana chikitsa, Psoriasis, Kitibha kustha

1. Introduction:

Psoriasis is a chronic inflammatory skin disease affecting 100 million people globally. It is characterized by erythematous patches, silvery scales, itching, burnt skin appearance, and pustules or blisters. Treatment options include topical creams, phototherapy, and biologics [1]. Ayurveda literature suggests psoriasis can be correlated with *Vata-kapha* origins like *Ekakustha*, *Sidhma kustha*, or *Kitibha kustha*. *Kitibha Kustha* possesses *lakshanas* like psoriasis and repeated *Shodhana* is necessary for eliminating vitiated *doshas*. This case report shows a cure using the clinical approach described above.

Case History:

A 49-year-old male patient presented with whitish scaly patches with reddish discoloration present all over the body associated with dryness and itching for 5 years. Also, complaints of pain and swelling over the small joints.

Case Details:

A 49-year-old painter experienced whitish scaly patches with reddish discoloration for five years, accompanied by dryness and itching. He initially ignored the condition but noticed it spread to his scalp, face,

trunk, and upper and lower limbs. He took medications for two years, but the condition worsened in December 2019 and worsened. He sought a diagnosis of plaque psoriasis, leading to two years of complete remission. In 2021, he was diagnosed with diabetes mellitus and started taking medications. In May 2022, the symptoms reappeared, causing mental disturbance and sleep disturbances. He sought a permanent cure at a hospital, revealing that workplace chemicals and improper washing after work aggravated the condition. He has been a known case of diabetes mellitus for a year. No one in the family suffered from a condition of this nature, hence there is no relevant family history. When asked about his background, he admitted to having irregular eating and bowel habits, sleepless nights caused by itching, and a diminished appetite.

Systemic Examination:

Skin and integumentary system:

Lesion type: Scaly raised patches (*kinavat sparsham*)

Configuration: irregular

Texture: Rough and dry

Size: Large patches

Color: Reddish discoloration with white scales

Symmetry: symmetrically distributed to the ventral and dorsal aspect of the trunk, scalp, hands, and legs (*Sarva shareera*)

Nails: Affected

Mucosa: Unaffected

Auspitz sign: Positive

Candle Grease Sign: Positive

Mild tenderness on small joints during palpation, and restricted movement

Assessment Parameter:

Metrics like the Psoriasis Area Severity Index (PASI) [2] and the Dermatology Life Quality Index (DLQI) were evaluated before admission. The main results indicated a PASI score of 40.8 and a DLQI score 12. Based on the observable symptoms and clinical observations, the condition was identified as *Kitibha Kustha*, characterized by reddish-white patches that are hardened, itchy, and covered in scales. The lesions exhibited patterns of remission and relapse with time intervals like those associated with *Kitibha Kustha*. Photographic evidence is entitled in Figure 1.

2. Materials and Methods

The patient was treated with *Shodhana* (detoxification) therapy followed by administration of the *Shamana aushadhis* (palliative treatment).

2.1 Therapeutic Intervention:

The interventions were done after assessing the *dosha* involved. The involved dosha was *Vata* and, *Kapha*. It is assessed based on the presenting complaints like severe itching, pain, scaling, and dryness. The treatment was accomplished in *Deepana- pachana*, *Snehapana Shodhana*, *Bahya prayoga* and *Shamana Aushadhi*.

Table 1: Shodana chikitsa (Detoxification therapy)

Procedure	Medicine given	Dose	Duration	Pathya
<i>Deepana pachana</i>	<i>Chitrakadi vati</i>	2 tablets 2 times a day before food with warm water	For 3 days	Mudga
<i>Snehapana</i>	<i>Panchatikta Ghrita</i>	30ml, 80ml, 110ml, 150ml early morning in empty stomach	For 4 days	Sips of hot water Kanji on getting hunger
<i>Abhyanga</i>	<i>Nimba taila</i>	-	For 5 days	Khichdi
<i>Parishekaa</i>	<i>Panchavalkala kwatha</i>	Quantity sufficient	For 5 days	Kanji and Mudga
<i>Lepa</i>	<i>Nimba churna + aragwatha + manjishta + haridra</i>	Each 10 gm along with warm water lepa prepared	For 5 days	Sips of hot water & kanji intake
<i>Virechana</i>	<i>Manibadhra gudam [3]</i>	50g of manibadhra gudam with 50 ml of <i>Triphala kashaya</i>	<i>Samsarjana karma</i> for 3 days	
<i>Niruha vasti</i>	<i>Panchatikta Kashaya</i>	500ml with nimba Taila and haridra Kalka	For 4 days	
<i>Anuvasana vasti</i>	<i>Manjishtadhi Taila</i>	60ml	6 days	
<i>Utsadana</i>	<i>Haridra, vidanga, Triphala churna</i>	External application	14 days	
<i>Raktamokshana</i>	<i>Cupping</i>	60ml of blood withdrawn	1 day	

Table 2: Shamana aushadhi (Palliative medicines)

Shamana aushadi	Dose		Anupana	Time
<i>Panchatikta Ghrita</i>	10ml	Once a day	Hot water	Early morning on an empty stomach
<i>Arogyavardhini vati</i>	2 tablets	2 times a day	Warm water	After food
<i>Gandhaka Rasayana</i>	2 tablets	2 times a day	Hot water	After food
<i>Vajrakam kashayam</i>	15ml	2 times a day	Warm water	Before food
<i>Bilwadi Gulika</i>	1 tablet	3 times a day	Warm water	After food
<i>Haridra + vidanga + Guduchi + Triphala churna ksheerapaka</i>	5gm of mix churna with 20 ml warm milk	2 times a day	milk	After food



3. Observation and Result:

After a course of *shodhana* (detoxification) therapy with *shamana aushadhis* (palliative treatment), there was a reduction in lesions, reddish discoloration scaly white discharge, and itching.

4. Discussion

Kustha, a skin disease, is classified among the *ashtamahagada* or "8 great disorders" and is a *santarpanajanya vyadhi* (a disease stemming from nourishments). It involves an imbalance of *tridoshas* (*Vata*, *Pitta*, *Kapha*) and *sapta dhatu* (bodily tissues). Ayurveda classifies 18 skin diseases into *Maha kustha* (major skin diseases) and *Kshudra Kustha* (minor skin diseases), categorized by severity. *Shodana*, or purification therapy, is the primary approach for treating *Kustha*. The primary treatment method is repeated *shodhana*, which involves addressing excess *Vata* dosha through ghee consumption and purgation to eliminate excess *Kapha* [4,5]. A patient with reddish discolorations, scaly discharge, and whitish lesions on their head has a five-year history of *Kitibha kustha* psoriasis due to irregular bowel habits, low *avastha*, and excessive curd consumption. The patient received traditional Ayurvedic techniques, including cleansing and palliative care, to rectify *agni* and *deepana-pachana*. The treatment included *Arogyavardhini vati*, *Gandhaka rasayana*, *Vajrakam Kashayam*, *Bilwadi Gutika*, *Ksheerapaka*, *Haridra*, *vidanga*, *Guduchi*, *Triphala churna*, and *Nimba churna*.

Arogyavardhini vati is primarily used as a Herbo mineral formulation indicated for the treatment of *Kustha roga* (skin diseases) in Ayurvedic medicine. This formulation is characterized by its ability to stimulate the elimination of excess *pitta* and balance the *three doshas* (*Vata*, *Pitta*, *Kapha*) [6]. These qualities contribute to the restoration of dosha balance, enhancement of digestive fire (*agnivardhana*), cleansing of impurities (*malashodhana*), and normalization of *Vata* movement (*vatanulomana*). Additionally, it holds properties such as *Kushtaghna* (relieving skin diseases) and *Kandughna* (alleviating itching).

Vajrakam kashayam contains drugs with tikta rasa, and ushna virya drugs that help in kaphavatahara, and vatanulomana actions. They also possess anti-inflammatory, anti-oxidant, anti-fungal, and anti-bacterial properties which help heal skin lesions.

Gandhaka Rasayana possesses *Krimighna* and *rasayana* property which helps in healing the lesions of the skin and reduces itching.

Most of the drugs in **Bilwadi Gutika** are tikta, katu rasa pradhana which acts as kaphavatahara. These formulations can be used as an anti-inflammatory, analgesic, antioxidant, and anti-biotic and are also useful in conditions like allergies and skin diseases.[7]

Virechana is naturally srotoshodhaka, opening the Sukshma srotas, and improving circulation, resulting in perspiration. It has *Pitta shodhaka* and *Rasa Rakta prasadana* property. As *Kustha* involves *pitta dosha* and *rakta dhatu* involvement virechana will be very helpful to clear the morbid doshas.[8]

Manjishtadhi Taila has *Rakta shodhana* and *Vranashodhahara* properties. As *rakta* is one of the main *Dushya* in *Twak vikara* these positive effect on *Kandu*, *vivarnata*, and *pidika*.

Raktamokshana removes vitiated blood and neutralizes accumulated toxins relieving dermatitis, eczema, allergies, etc. [9]

5. Conclusion

In this diagnosed case of *Kitibha kustha*, the chosen treatment approach was in alignment with balancing *Vata* and *Kapha* doshas. Both internal and external purification methods and a wholesome diet proved effective in resolving the disease. The entirety of the treatment strategies was firmly grounded in Ayurvedic principles. All accompanying signs and symptoms subsided entirely, without any indications of recurrence. Upon initiating the consumption of *Manibadhra Guda*, the patient experienced purgation of approximately 10-11 bouts (*Vegas*). At the time of discharge, the patient had achieved a notable 80% improvement. The presence of whitish scales and itching diminished significantly. The disease had undergone complete remission during the initial follow-up visit with no relapse observed. Quantitative measures such as PASI and DLQI yielded values of 3.2 and 2, signifying a total absence of symptoms. These results demonstrate that the therapeutic purifying effect of the medication aided in expelling residual imbalances of doshas, thereby restoring the body to a healthy state.

Acknowledgement

None

Conflict Of Interest

None to declare

Funding Resources

None

Consent

Written informed consent for publication of their details was obtained from the patient.

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