

**Ayurvedic Treatment of Vipadika
(Kshudra Kushtha) in Pediatric age
- A Case Study**

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ABSTRACT:

The skin is the largest organ of the body which first exposed with the environment agents like physical, chemical and biological agents. Many of the skin disorders in Ayurveda have been described under the heading of

Kushtha and Kshudrakushtha. Vipadika (Palmo -plantar psoriasis) is one of such diseases which has been included under the heading of Kshudra Kushtha. Main symptoms of Vipadika are cracks (sputana) either in palms or soles or in both with severe pain. The pain present in Vipadika is so intense that it severely afflicts the quality of life of the patients. In spite it being a minor condition it stultifies the routine work of patients. A case of 13yr old female patient who presented features of Vipadikalike scaling of skin, Erythmatous lesion, itching etc was treated by External application of panchvalkal Kwatha and gandhak malhara and internally by Twaka vikara anubhoot yoga, Manjishthadi kwatha, Kaishore guggulu. The treatment showed, showed marked improvement in scaling, itching and pain.

Key word: Vipadika, Palmo- plantar Psoriasis, Kshudra kushtha

Introduction:

Ayurveda is the science of life and aims of the Ayurveda are to maintain the health of healthy person and cure the disease. Skin disorder is intrinsic in origin and chronic in nature. Vipadika are described under the Kshudrakushtha.^[1] According to Charaka, Sushruta and Vagbhata, Kushtas are raktajavyadhi.^[2,-,4,] In modern science according to sign and symptom vipadika may be co-related with Plamo–plantar psoriasis Palmo- plantar Keratoderma, Palmo-plantar dermatophytoses. Palmo plantar psoriasis (PPP) accounts for 3-4% of all psoriasis cases, produces significant functional and social disability.^[5] It is the second most common type of psoriasis followed by chronic plaque type psoriasis. As per Ayurveda, Vipadika is Vatapradhana

Vyadhi and due to lack of hygiene, excessive walking etc. which vitiated vata dosha in the body especially in the foot resulting in the scaling of the skin of the soles and palms (Pani-padasputanam, Tivravedanam). Hypertrophy of the horny layer of the palms and soles, usually of a more or less horny and plate like character, is well defined in Ayurveda as Vipadika and Palmo plantar psoriasis is in the contemporary science.^[6] The hardening and thickening arise spontaneously without necessarily having any external factor, such as pressure, friction etc., and is further some symmetric and usually on palms and soles. Moreover, it is as a rule, congenital or hereditary condition while it is commonly limited to the palmar and plantar aspect, occasionally it extends somewhat beyond on the side and exceptionally slightly on the dorsal surface. The condition may further worsen due to absence of personal hygiene.

Case Report:

A 13 year old female patient, from Ahmednagar, developed cracks on heels and feet since 2 years. There was severe itching and pain which was continuous throughout the day. The lesions were bilaterally symmetrical and over the soles, instep and sides of feet were involved. Psoriasis was not present at other sites except soles. Distal sole and toes were involved. Web spaces were involved and sparing of skin over creases of palms is noted. No increased pigmentation found. The condition was progressive and creating anxiety to the patient. The patient did not note any family history of DM, HTN. All are said to be healthy in the family.

INTERNAL MEDICATIONS:

1. Twak vikar [Balchaturbhadra Anubhoot churna Yoga 1gm, Arogyavardhini rasa 125mg, Gandhak rasayana 125mg, Guduchi churna 500mg, Nimba twaka churna 500mg, Khadir churna 500mg, Vidanga churna 1gm] 1 gm two times/day with honey ^[7-9]
2. Manjishthadi Kwatha 10ml two times a day ^[10]
3. Kaishore Guggulu 250 gm three times in a day ^[11]

EXTERNAL APPLICATION:

The wound was cleaned by washing the area with Panchvalkal kwath and after that Gandhaka malahara was applied on the lesions locally. The above internal and external medication was continued for two months and results were assessed as mentioned in table-1-2

Table- 1: Effect of therapy on Objective Parameters:

| Parameter | Before treatment | After treatment |
|------------------|-------------------------|------------------------|
| Scaling of skin | Grade 4 | Grade 1 |
| Erythematosis | Grade 2 | Grade 0 |
| Induration | Grade 4 | Grade 0 |
| Pain on pressure | Grade 3 | Grade 0 |

Table- 2: Effect of therapy on Subjective Parameters:

| Parameter | Before treatment | After treatment |
|-----------|------------------|-----------------|
| Itching | Grade 4 | Grade 0 |
| Pain | Grade 3 | Grade 0 |

DISCUSSION:

Vipadika is vata kaphatmak Vyadhi. It is described under the kshudra kustha. According sign and symptom it can be co-related with palmo-plantar psoriasis. All skin disorders are more prone in pittaja and raktja dushti. Pitta can overheat the blood (Rakta dhatu) and predispose to toxic conditions which are expressed through the skin. So line of treatment should be to remove dushit pitta from the body and shuddhi of rakt dhatu. Drug used in Twaka vikar yoga have shodhan and shaman property. Balchaturbhadra churna has deepana pachana property, Arogya vardhani has pitta virechaka and pitta shamana property, Gandhak rasayana worked as an anti-inflammatory, anti-bacterial, and anti-viral and anti fungal, guduchi is an immune modulator drugs and increase the wound healing, Nimba twak and khadir have potency to rakta dhatu to rejuvenate that also work as a healer. Vidanga has anti-helminthic property that stops the wound as open source of worm infestation. Manjistha is considered as a rakta shodhak drugs. Kaishore guggulu as a guggulu works on micro circulation so it induces healing property faster. Panchavalkala kwatha and gandhak malahara used as a local application with the property as an anti-bacterial, antiinflammatory anti-fungal and anti-

viral.^[12] So all combination of drugs has property to heal the wound, protect from infection and reduces the severity of disease.

CONCLUSION:

This single case study can be concluded that the holistic approach of Ayurveda is effective in the management of Vipadika (plantar palmar psoriasis). There were no adverse effects found during the Ayurvedic medication.

REFERENCES:

1. Acharya YT. Charaka Samhita of Charaka, Chikitsasthana, 7/22. 2nd edition, Chowkhambha Sanskrit Series, Varanasi;2002; p-451.
2. Acharya YT. Charaka Samhita of Charaka, Chikitsasthana, 21/68, 69. 2nd edition, Chowkhambha Sanskrit Series, Varanasi;2002, p-563.
3. Acharya YT. Sushruta samhita of Sushruta, Nidanasthana, 13/4. 3rd ed. Chowkhambha Sanskrit Series, Varanasi; 2002, p-55.
4. Paradakara V. Ashtanga Hridaya of Vagbhata, sutra sthana, 26/53,55. 9th ed. Chowkhambha Sanskrit Series, Varanasi;2002, p-325.
5. Farber E M, Nall M L. Natural history of psoriasis in 5600 patients. Dermatologica 1974; 148: 1-18.
6. Shastri V. Sharangadhara Samhita MadhyamaKhanda, chapter 2/149 3rd ed.; Krishnadas Academy; Varanasi 2000, p-164.
7. <https://mavcure.com/arogyavardhini-vati-benefits-uses-and-side-effects/>
Accessed on dated 5/2/18.

8. <https://ayurvedinfo.com/2012/07/21/gandhaka-rasayana-benefits-dosageingredients-side-effects/> Accessed on dated 5/2/18.
9. <https://easyayurveda.com/2012/08/28/guduchi-giloy-ayurvedic-details-benefitsusage-dose-formulations/> Accessed on dated 6/2/18.
10. <https://ayurvedinfo.com/2012/02/15/maha-manjishtadi-kashayam-benefits-doseside-effects-> Accessed on dated 7/2/18.
11. <https://easyayurveda.com/2010/02/25/kashishore-guggulu-one-herbal-product-withmany-health-benefits/> Accessed on 7/2/18.
12. Meena RK, Dudhamal TS, Gupta SK, Mahanta V. Wound healing potential of Pañcavalkala formulations in a postfistulectomy wound. *Ancient Sci Life (ASL)* 2015;35 (2):118-21.