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Case study-ayurvedic management of psoriasis (*ek kushtha*)

Shubhangi Sudhir Matte*¹, Rupali Pravin Dangore²

1. Assistant Professor, Panchakarma Department, SVAMCH Chandrapur, M. S., India

2. Assistant Professor, Rachana Sharir Department, VJDGAM, Patur, Akola, M. S., India

Mobile No 9970168584, Mail ID: dr.rupali.dangore@gmail.com

*Corresponding author: Mobile No. 9923737607; Mail ID: drshubhangim.sm@gmail.com

ABSTRACT-

Introduction-

In Ayurveda all types of skin disease are described under one umbrella term of *kushtha*. All type of *kushtha* have *Tridosha* involvement but it depends on predominance of particular *Dosha*. *Ek kushtha* is co related with Psoriasis due to extreme similarity. *Dosh* involving in *Ek kushtha* is *Vata*kaphaj *Dosha*. Psoriasis is characterised by dry skin and raised red areas on the skin covered with fine silvery scales. Erythematous, well defined dry scaly papules. The most commonly affected area of psoriasis are forehead, back of neck, trunk, back region and backside hand and legs.

Aim- To evaluate the clinical efficacy of ayurvedic treatment in Psoriasis (*Ek kushtha*).

Material- A 15years old female patient approached to O.P.D. for treatment. She presented with well demarcated raised red scaling silvery patches on back region.

Methodology- In *Shodhan chikitsa-Virechan karma*, *shirodhara* chikitsa given to patient and in *Shaman chikitsa*- Ayurvedic

formulations given with Local application *Visora* oil

Result- Ayurvedic line of management gives fantastic results, it is beneficial for the promotion and preservation of health by removing toxic waste, by correction of *Agni* which gives healthy peaceful life to patient.

Keywords- *Ek kushtha*, psoriasis, Ayurvedic management.

INTRODUCTION –

In Ayurveda all skin diseases have been described under the umbrella of *kushtha*.^[1] *Ekakushtha* is one of the *kushtha* described in Ayurvedic text.^[2] In *Charak Samhita Chikitsasthan Adhyaya 7*, *Ekakushtha* is described as *Vat-kaphaj* disease.^[3] *Ekakushtha* has signs and symptoms i.e. *Aswedan Mahavastu* and *Matsyashakalopamam*,^[4] which can be compared with symptoms of psoriasis. Hence it has been taken as *analogue* to *Psoriasis* in the present study. According to W.H.O. the worldwide presence of psoriasis is 2-3%. Psoriasis is deep pink to reddish, well demarcated, indurated plaque with silvery scaling present particularly over extensor

surface and scalp. [6] Psoriasis is common chronic immune mediated inflammatory, proliferative, noncontagious disease of the skin affecting people who are genetically predisposed with environment playing critical role in pathogenesis. [7] Psoriasis is multi factorial disease. Triggering factors are infection drug trauma. [8]

Acharya charaka had mentioned that all *Kushtha* are *Tridoshaj* in nature. [9] Hence *Shodhan chikitsa* which helps to remove vitiated Doshas from body and Shamana Yoga which help to bring *samyavastha* (balanced condition) of Doshas showed good result along with *Shirodhara* therapy in this case study.

CASE REPORT-

Basic information of the patient

- Age -16years
- Religion – Hindu
- Socioeconomic status – Middle class

She is student and has habit eaten spicy food junk food

Pradhan vedana (Chief complaint)

Erythematous rashes on back side since 8 months.

Itching in rashes, with scaling on scratching.

Vartaman Vyadhivritta (History of Present illness)-

The patient was asymptomatic before 8 months, after that developed complaint of scaly rashes on her back which gradually progress. There is severe itching in the rashes along with burning sensation, and scaling after scratching. On enquiry she said that lesions have no relation to seasonal variation and remained constant for whole 8 months. He took allopathic medication for about 4 months and then Ayurvedic medication for 4 months which provided symptomatic relief,

treatment continue for Raktaprasadhana karma .

Purva Vyadhivritta (History of past illness)

Patient has no significant past history of any chronic illness, burn, trauma.

Kulaja Vritta (Family history)

Same complaint has occurred in patient's sister since 2 months

Vaiyaktikavritta (personal history)

- Appetite was normal.
- Predominant rasa in Ahara was Madhura.
- Sleep was disturbed due to itching.
- Habit of incomplete evacuation of bowel

On Examination

- General condition was fair and afebrile.
- Vitals were normal.
- Cardiovascular System, respiratory system and per abdomen examinations had shown no deformity.
- Prakriti (constitution) was Vata-pitta

Sign and Symptoms	
Aswedan (Absence of sweating)	Present at the plaque region
Mahavastu (Big size lesion)	Present
Matsyashakalopam (Scaling)	Present
Auspitz sign	Present
Candle grease sign	Present

Diagnosis – On the basis of clinical history and examination the condition was diagnosed as plaque psoriasis.

Assessment criteria –

A) Subjective criteria –

a) Aswedanam (absence of sweating)

- Normal sweating:- 0
- Mild sweating:- 1
- Mild sweating on exercise:- 2
- No sweating after exercise :-3

b) Mahavastu (Big size lesion)

- No lesion on *mahavastu*:- 0
- Lesion on partial part of hand, leg, neck, scalp, trunk, back 1
- Lesion on most part of hand, leg, neck, scalp, trunk, back 2
- Lesion on whole part of hand, leg, neck, scalp, trunk, back 3

c) Matsyashakalopamam (scaling)

- No scaling 0
- Mild scaling from all lesion 1
- Moderate scaling from all lesion 2
- Severe scaling from all lesion 3

B) Objective criteria

a) Candle grease sign ⁹

When a psoriatic lesion is scratched with the point of a dissecting forceps, a candle grease like scale can be repeatedly produced. ^[10]

- Absent 0
- Improved 1
- Present 2

b) Auspitz sign ⁹

On complete removal of the scales, a red moist surface is seen

. on further scraping, punctate bleeding points are seen. ^[11]

- Absent 0
- Improved 1
- Present 2

Treatment Protocol-

Total duration – 4 months

- 1) *Deepana pachana with chitrakadi vati* 500 mg BD for 5 day.
- 2) *Virechana Karma – Abhyantara snehana - Mahatikta ghrita* for 5 days increasing order from 30 ml to 120 ml with cow milk

Day	Matra of ghrit	Anupana
1	30ml	Cow milk
2	60ml	Cow milk
3	80ml	Cow milk
4	100ml	Cow milk
5	120ml	Cow milk

After 5 days of *samyak snehpan lakshan* were seen. Then 2 days *sarvang snehan swedana* was given on 3rd day *Virechan* was given.

Virechan yog –

Trivrutta avleha 40gm with *koshna jal*. This *Virechan yog* was given to the patient at 9.00a.m.morning after *snehana* and *swedana karma*. After 1hr *Virechan* a *vega* was started. Total 7 vega in 12 hrs.

samsarjana krama (diet regiment) advised for 3 days.

Shirodhara – (Musta amalaki and jatamasi siddha kwath) *Shirodhara* was started after 5th day of *Virechan karma*. It was 20 min on *shir pradesha*

Samshamana drugs was started after 5th day of *Virechan a karma*.

Samshamana therapy – For Samshamana therapy following medicines were

- *Mahamanjishthadi kadha* 15 ml BD with *koshna jal*
- *Arogyavardhini Vati* 2tab BD with *koshna jal*

- *Gandhak rasayana* 2tab BD with *koshna jal*
- *Raktshudh vati* 2tab BD with *koshna jal*
- *Mridu Virechan a* with *Avipattikar churna* 5gm HS with *koshna jal*
- Local application : *Visora oil*

Sign and symptoms	Before treatment	After treatment
<i>Aswedanam</i> (absence of sweating)	1	0
<i>Mahavastu</i>	2	0
<i>Matsyashakalopamam</i> (scaling)	2	0
Candle grease sign	2	0
Auspitz sign	2	0



Before treatment



After treatment: 2nd follow up



After treatment: 1st follow up



After treatment: 3rd follow up

RESULT AND DISCUSSION-

In above case study patient got complete relief from symptoms of *Eka kushtha* (psoriasis). Ayurveda has *panchkarma*

chikitsa as its unique specially. In this case study *Virechan chikitsa* helps to remove vitiated Dosha from body. *Shirodhara* gave excellent result by relieving stress and gives

anxiolytic effect. Shamana chikitsa i.e. *Arogyavardhini vati*, *Gandhak Rasayan*, *Raktshudhi vati* and *Mahamanjishthadi kadha* has *Kushthaghna*, *raktprasadhana* as well as *Rasayana* effect on skin. AS psoriasis is psychosomatic disease, *shirodhara* may help to relieve the stress.

CONCLSION-

It is concluded that Ayurvedic line of management gives satisfactory answer as well equally beneficial for the promotion and preservation of health by removing toxic waste by balancing morbid humours and by correction of Agni (digestive fire) which gives the healthy peaceful life to patient.

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