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Management of kitibha kustha (Psoriasis)-a case study

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Abstract-

Today is HD (high definition) mobile era. Peoples are more conscious about their health and skin also though multimedia .Usually 10-15% present before general practitioners are pertaining to skin diseases. Due to altered life style, lack of physical exercise, unhygienic, mental stress, over eating, nutrition deficiency, radiation skin diseases are commonly observed. Psoriasis is chronic disorder which is commonly encountered in day today's clinical practices. It is one of the more discussing issues having social importance. Increased stress ,inorganic food materials and sedentary life style are main predisposing factor which is accounting for wide spared prevalence of this disease. All the skin diseases in Ayurveda have been discussed under the broad heading of Kushta, which are further divided into Mahakustha and Kshudra Kushta. This is a case study of

Kitibha Kushta (Psoriasis) treated with the Ayurvedic principles in particular Shodhana Chikitsa and shaman chikitsa.

KEYWORDS: Kitibha Kushta, Shamana Chikitsa, Shodhana chikitsa, , Psoriasis.

Introduction-

Psoriasis is chronic non infectious inflammatory skin disorder seen in daily practice. Lesion varies from few millimeter to several centimeter, stress and life style are main predisposing factors. Psoriasis is the most common dermatologic disease affecting up to 2.5% of world population. In India 0.8% population is suffering from psoriasis. Psychological stress is one of the major triggering factor in the exacerbation of the disease.

Kitibha kustha manifests due to aggravation of tridosha especially dominance of vata and kapha .Mithyaahara & vihar vitiate tridosha which further lead to the aggravation of Rasa, Rakta, mamsa, and lasika. predominance of vata can be elicited with symptoms like blackish discoloration, hardness, dryness, roughness to touch. kapha predominance can be appreciated with the presence of severe itching are cardinal symptoms.

Vitiation of tridosha followed by application of four entities twak, Rakta, Mamsa and lasika leads to kushtha. These seven are called as the seven morbid factors (sapta dhatu sangrha) of kustha . no kustha manifests itself due to aggravation of only one dosha.

Kitibha is type of kustha (kshudra kustha) characterized by skin which is blackish brown in colour (shayavata), rough in touch like a scar tissue touch (kharrwam), and hard to (parushatwam), dry rough (Rukshta) and hard black skin with itching creating sound on scratiching is seen in kitibha kustha. It is characterized discharging (stravi), round (vruttam), dense (ghanam), severe itching (ugara kandu) and black skin (krishnatav).

Ayurvedic management of this aliment with shodhana and shaman is described in samhaitas. We are taking shaman chikitsa andshodhan chikitsa for this case study

Case Report

A male Patient, aged 34 years, who was apparently healthy before 10 years developed with skin lesions over scalp ,upper and lower limbs associated with ictching and silvery scales since 10 years on and off. He consulted modern

physicians for it but didn't got relief. Patient was thoroughly examined locally as well as systematically. Patient gave a history that she has a habit of eating mixed diet like milk with salt. He was diagnosed as kitibha kustha according ayurvedic nidan.

Present complaints:

- Shyavam /snigdha krisha twak-its meaning blakish /dark discoloration (its because of vata dosha vitiated)
- Kharatwam –It conveys the sense of roughness to touch.
- Parushatwam –hardness to touch.
- Rukshtwam Dryness of the skin
- Ugra kandu- severe itching due to vitiation of kapha.

personal history:

Mala(Bowel):vAsmayakvv(Irregular)

Agni(Appetite): Manda (Decreased)

Nidra (Sleep): khandit (Disturbed due to itching)

Habits: Tobacco chewing (Mix diet)

family history: Not found any specific history or any medical history except allopathy. The patient was so much depressed due to skin lesions.

physical examination:

B.P-110/70mmHg,

Pulse-74/min

R.R-20/min

specific examination:

On examination lesions were blakish brown spread on to scalp and both lower limbs with silvery scales. lesions are dry, rough and hard to palpate.

Samanya pariksha-

- Nadi (pulse)-Sarpagati, tivra (As snake and acute)
- Sabda (voice)-kshin (weak)
- Sparsha (touch)- samshioshna
- Jivha (Tongue)-Sam, lipta, (coated)
- Drika (Eye)-Samanya (Normal)
- Aakriti (Stature)-Madhyam
- Mutra- (Urine) (Prakrit)-4-5/day
- Mala (Stool)-Asamadhankarak, aniyamit, rukshamalapravritti. (constipation)

Samprapti ghataka -

Dosha – Tridosha

Dushya – Twak, Rakta, Mamsa, Lasika

- Ama- Jatharagnijanyaama
- Agni Jataragnijanya
- Srotus Rasavaha, Raktavaha
- Srotodushti prakara Sanga
- Rogamarga Bahya
- Udhbava sthana –Amashaya
- Vyaktasthana Twacha
- Roga swabhava Chirakari
- Sadhyasadhyata Sadhya
- Samprapti -

Nidan sevana like Aharaja-Viharaja-Manasika (Spicy foods, Viruddha ahar, junk foods, exposure to cold air, consumption of alcohol, non-vegetarian diet) Tridosha + Twak, Rakta, Mamsa, Lasika Sthanasamshraya in Twacha Pidika with Kandu, Daha all over the body Kitibha kushta

Materials and Methods-Samanoushadhi, Pathya-Apathya Palan

Treatment: Internal Medicine-

Rasmanikya ras 30mg/dose+ gulvel satva 100Mg/dose+suvarnamakshik bhsma 30mg –Tds for 30 days with madhu

Manjistha + lodhra + Sariva kwath 20 ml tds for 30 days wuth luke warm water

Mahatikikta ghrut 10 gm bd for 30 days with luke warm water empty stomach

Panchkarma Schedule:Total 14days panchtikta ghrut basti

Puravkarma- snehana-Sarvangasnehana

I- Nishadi Tail

Swedana- Nadhiswedan- with dashmool kwath

The whole regime along with panchkarma and pathapthya given for 14 days patient started improving after one week more than 40%

Outcome of treatment

Symptoms	Before	After
	treatment	treatment
Shyawatwam	Very	Reduce
	much	
Kharatwam	Very	Roughness
	rough	reduced
Parushtwam	Very hard	No
		hardness
Rukshatwam	Very dry	Dryness
		reduced

Kandu Severe Reduced

Discussion-

The patient in the case is famer having continuous exposure of sunlight and hetu like virudhhahar frequently these all factors acted as trigger for the vitiation of tridhosha .which further affected Rasa, Rakta, mamnsa and lasika lead in development of kitibha kustha. because of carelessness of patient. chronicity and recurrence nature of disease it has become challenge to manage the case. Rasmanikya ras having manashila, hartala gandhak and naga bhasma its mainly used in vata-kapha pradhan kustha it is snigha ushna kalpa properties like dipan, krinminashak, and acts on kapha/raktadusti. Gulvel is acts as blood purifier with rasyana. along Suvarnamakshik bhasma is acts on ranjak pitta and clears dusti (impurification) in blood. Manjistha, lodhra, and sariava are blood purifier with kusthghna properties. Mahatiktikta ghrut is having kusthgna property and mainly in acute conditions. Panchtikta ghrut having all ingredients tikta rasa dominat along with ghurt it becomes more useful in kitibha kustha.

Present treatment schedule has given about 80% relief from the symptoms

Conclusion-

This case study is documented evidence for the successful management of kitibha kushta (psorasis) though shaman and shodhan chikitsa. This is the one among the relapasing type of skin diseases so patient is advised to follow pathyaapthya like ahara, vihra and vichara also.

REFERENCES -

- Vagbhata. Ashtanga Hridaya,
 Vol. 2. Srikanthamurthy KR,
 editor. 1st ed. Varanasi:
 Chaukhambha Orientalia; 1992.
 p.139.
- 2. Sunil Dogra, Savita Yadav. Psoriasis in India: Prevalence and pattern. Indian Journal of Dermatology, Venereology, and Leprology. 2010;76(6):595-601.
- 3. Retrieved from:
 http://www.ehealthmd.com/librar
 y/psoriasis/ps o_treatment
 [Accessed on:14/04/2010]
 Ayurpharm Int J Ayur Alli Sci.,
 Vol. 7, No. 7 (2018) Pages 101 –
 108 www.ayurpharm.com ISSN:
 2278-4772 Ayurpharm International Journal of Ayurveda
 and Allied Sciences 108
 - 4. Vagbhata. Ashtanga sangraha, Vol. 1. Srikanthamurthy KR, editor. 3rd ed. Varanasi: Chaukhambha Orientalia; 2000. p.402.
 - 5. Sushrutha. Sushrutha Samhita (Nibandha Sangraha commentary by Dalhana). Yadavji Trikamji Acharya, editor. Varanasi: Chaukambha Krishnadas Academy; 2002. p. 443, 824.
 - 6. Vidyasagar, Ala Narayana, Saketh Ram T. Non-Native Drugs (Namataha Anukta Dravya) in Ayurveda. CCRAS IMR Project; 2005-06. (Unpublished work)
 - 7. Kusuma G, Joshi VK. Nomenclature on Anukta Dravya.

- Ancient Science of Life, 2010;29(4):17-2
- 8. Barker JN: Genetic aspects of Psoriasis. Clin Exp Dermatol 2001; 26: 323–325.
- 9. Schlaak JF, Buslau M, Jochum W, et al: T cells involved in Psoriasis vulgaris belong to the Th1 subset. J Invest Dermatol 1994; 102: 145–149.
- 10. Feldman SR, Fleischer AB, Reboussin DM, et al: The economic impact of psoriasis increases with Psoriasis severity. J Am Acad Dermatol 1997; 37: 564–569.
- 11. Sharma RK, Dash B. English translation on CharakaSamhita of Agnivesha's. Reprint 2014. Chikitsasthana; Kushtachikitsa: Chapter 5, Verse 4: Varanasi (India): Chowkhamba Sanskrit series office, 2014;p.no 68.
- 12. Murthy KRS. Sushruta Samhita Reprint. Nidana Sthana; Kushta Nidana: Chapter 5, Verse 14 ½: Varanasi (India):Chowkhamba Krishnadas Academy, 2010;p.no 496
- 13. Sharma RK, Dash B. English translation on Charaka Samhita of Agnivesha's. Reprint 2014. Chikitsa Sthana; Kushta Chikitsa: Chapter 5, Verse 4: Varanasi (India): Chowkhamba Sanskrit series office, 2014; p.no 68.
- 14. Rasa Vaghbhata, Rasa Ratna Samucchaya, 7th Edn, 20th chapter, Shloka 87-93, Commentary by Ambika Datta Shastri, Choukhambha Sanskrit series, Varanasi; pp. 400.

- 15. Acharya Sharangdhara, Sharangadhara samhita annoted with Dipika Hindi Commentary, narrated by Dr Brmhanand Tripathi, Chaukhamba Surbharati Prakashan, Reprint 2008, 9/1, Page No 218
- 16. K.M.Nadkarni, (2007). Ed. Indian Materia Medica, Vol I, Bombay Popular Mumbai. p.691–694.
- 17. J.P. Tripathi, editor, Chakradatta with Bhavartha Sandipani Commentary of Chakrapanidatta. Varanasi: Chaukhambha Sanskrit Series; 2003. p.218.
- 18. Acharya Sharangdhara, Sharangadhara samhita Madhyamakhanda 2/137-142 an noted with Dipika Hindi Commentary, narrated by Dr **Brmhanand** Tripathi, Chaukhamba Surbharati J-R A S Prakashan, Reprint 2008,9/1,Page No. 269.
 - 19. Acharya Sharangadhara, Sharangadhara samhita Madhyamakhanda10/60-65annoted with Dipika Hindi by Dr Commentary, narrated **Brmhanand** Tripathi, Chaukhamba Surabharati Prakashan, Reprint 2008,9/1, Page No 249
 - 20. Sharma RK, Dash B. English translation on Charaka Samhita of Agnivesha's. Reprint 2014. Chikitsa Sthana; Kushtachikitsa: Chapter 7, Verse 12-14: Varanasi (India): Chowkhamba Sanskrit Series Office, 2014; p.324-29.

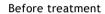




Before treatment

After treatment

After treatment







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