



## Case Study

### ROLE OF SAMSHODHANA IN PSORIASIS - A CASE REPORT

Nidhee Thakur<sup>1\*</sup>, Anil Bhardwaj<sup>2</sup>

\*<sup>1</sup>PG Scholar, <sup>2</sup>HOD, Dept. of Panchkarma, Rajiv Gandhi Govt. Post Graduate Ayurvedic College and Hospital Paprola, Dist. Kangra, Himachal Pradesh, India.

#### Article info

##### Article History:

Received: 29-09-2022

Revised: 19-10-2022

Accepted: 05-11-2022

##### KEYWORDS:

Shodhana,  
Shamana,  
Psoriasis,  
Ekakushtha.

#### ABSTRACT

In Ayurveda, all dermatological conditions are grouped under broad term *Kushtha* which again have two divisions *Mahakushtha* and *Kshudrakushtha* on the basis of their symptoms, severity and involvement of deeper *Dhatu*. According to Ayurveda all the skin diseases are taken under generalized term *Kushtha*. Psoriasis can be correlated with *Ekakushtha* due to very much similarity in their symptoms. Psoriasis is a long lasting, relapsing autoimmune disease having unknown etiology which consist of well defined, slightly elevated erythematous papules or plaques with dry silvery scales over the skin. Psoralen and Ultraviolet therapy (PUVA) and corticosteroids are the only option in modern medical sciences. But prolonged use of these medications have crucial complicacies and the recurrence rate is also very high. Here, Ayurveda treatment is embarked on to provide safe and efficacious treatment for psoriasis in long run without any side effects. As *Shodhana* therapy is requisite in the management of all skin diseases. *Vamana* and *Virechana Karma* were selected as a treatment modality because it is the only procedure which acts upon all three *Doshas* and *Raktadi Dushyas* which are vitiated in *Kushtha*. *Shamana* treatment was also given afterwards *Virechana Karma* to alleviate the left over *Doshas* and to continue the normal state of *Dhatu*. A 32 year old male patient having psoriasis (*Ekakusta*) since 4 years came to our institute for Ayurvedic management. There was a significant relief in scaling, discoloration of skin, itching and elevated patches in the skin lesions which showed that detoxification of the body i.e., *Shodhana Karma* balances the aggravates *Doshas* in the body.

#### INTRODUCTION

Psoriasis is a long lasting, relapsing auto immune disease having unknown aetiology which consist of well defined, slightly elevated erythematous papules or plaques with dry silvery scales over the skin. Psychological stress is the considerable factor responsible for the worsening of the disease. It affects almost 2% of world wide population. This happens for the reason that overactive immune system accelerate the skin cell growth. Commonly skin cells completely grow and fall off in a month. In psoriasis, all this happens within three or four days.

Contrary to shedding, the skin cells build up on the surface of the skin. Plaques and scales of psoriasis can be manifested on any part of the body, but the usual sites are elbows, knees, scalp and lower back. Drugs used in psoriasis like PUVA and corticosteroids only gave a temporary relief and usually remissions and exacerbations occur and also have very serious side effects like hepatotoxicity, skin cancer, nephrotoxicity, bone depletion etc.

Almost all the skin diseases are described under *Kushtha-Rogaadhikara* in our texts. Apart from 18 types of *Kushtha*, Psoriasis can be correlated with *Ekakushtha* which is a sub type of *Kshudra kushtha*<sup>[1]</sup> because of resemblance in their symptoms. *Ekakushtha* is *Vata kapha* dominant *Tridoshaj* disease.<sup>[2]</sup> *Kushtha* is produced invariably by vitiation of seven factors i.e., *Vata, Pitta, Kapha, Twaka, Rakta, Mamsa, Ambu (Saptko Draya Sanmgraha)*.<sup>[3]</sup> The lesions of *Ekakushtha* are *Chakrakara* (circular) and *Abhrakapatrasama* i.e., silvery scales like mica according to *Bhava Prakasha*.<sup>[4]</sup>

#### Access this article online

Quick Response Code



<https://doi.org/10.47070/ayushdhara.v9iSuppl2.1078>

Published by Mahadev Publications (Regd.)  
publication licensed under a Creative Commons  
Attribution-NonCommercial-ShareAlike 4.0  
International (CC BY-NC-SA 4.0)

These two important features indicate *Ekakushtha* resemblance with psoriasis. Also, clinical features of *Ekakushtha* mentioned in *Charaka* and *Sushruta Samhita* are very much similar with psoriasis (*Ekakushtha*) which are as follows.<sup>[5,6]</sup>

**(Aswedanam):** Psoriatic lesions are dry and rough (*Mahavastu*) which covers the entire body, (*Matsyashakalopama*) skin resembles scales of fish, (*Krishnavaranta*) blackish discoloration, (*Arunavaranta*) pink discoloration etc. *Mithya Aahara - Vihara* and *Virudha Aahara* are the main causative factor for *Kushtha* and psychological stress also aggravate the disease. As *Shodhana* therapy is essential for the management of all the skin diseases. As we all know *Kushtha* is a disease of *Bahudoshaavastha* and in our *Samhitas Samshodhana* is mentioned for treating *Kushtha*<sup>[7]</sup>, because *Samshodhana* have main role in the elimination of aggravated *Doshas* and after *Samshodhana*, *Shamana* treatment was also given to alleviate remaining *Doshas* and to continue the normal state of *Dhatu*s.

### Case Report

A 32yr old male patient came to the OPD with the complaint of dry and scaly patches over his leg, lower abdomen and back since 4 years.

**Presenting Complaints:** Patient was quite asymptomatic 4 years back. Then gradually patient developed scaly patches over the leg followed by back and then abdomen. Patient also complaint of severe

### Laboratory Investigations

**Table 1: Investigations of the Patient Before and after Treatment**

Investigations	BT	AT
Hb	13 gm%	15gm%
ESR	40 mm fall after 1 hour	20 mm fall after 1 hour
FBS	82 mg/dl	74 mg/dl
LFT	WNL	WNL
RFT	WNL	WNL
<b>Lipid Profile</b>		
Cholesterol	220mg/dl	180mg/dl
LDL	113 mg /dl	90 mg /dl
HDL	39mg/dl	46mg/dl
TG	180mg/dl	148mg/dl
VLDL	20mg/dl	24mg/dl

**Treatment plan of the patient:** *Vamana karma* and *Virechana Karma* of the patient were planned followed by *Shamana Chikitsa*.

itching and sometimes bleeding from these scales. Patient took medications from various hospitals but got temporary relief and the lesion get reoccurred after ceasing the allopathic medicine. Hence, patient came to our institute for Ayurvedic management.

**Personal History:** He had short temper, aggressive and over thinking nature and he is sometimes depressed due to family issues.

Patient Vitals were normal. Appetite & bowel were normal but his sleep was disturbed. Patient had a sedentary life style and patient eat fast food and junk food in daily basis. Patient had a dependency on drinking and smoking since 12 years.

**On Dermal Examination:** Multiple erythematous discoid plaques with mild loose adherent silvery scales present over shins, back and abdomen.

Auspitz Sign and Candle grease sign is negative.

PASI (Psoriasis Area Severity Index) score was recorded on regular intervals to access the improvement of the affected area. Before treatment and after treatment PASI Score (Psoriasis Area Severity Index) as shown in table number 5.

**History of Past Illness:** Patient had history of jaundice 10 years back, no history of any major illness like diabetes, hypertension or any other metabolic disorders.

**Family History:** No history of any skin disease in the family.

**Table 2: Protocol of Vamana karma**

Procedure and drugs used	Days	Dosage
<i>Pachana with Chitrakadi Vati</i>	For 3 days	250 mg BD with lukewarm water
<i>Snehpana with Panchatikta Ghrita</i>	For 7 days	Starting with 50ml and gradually increasing upto 350 ml till appearance of <i>Samyaka Snigdha Lakshana</i>
<i>Sarvanga Abhyanga with Marichyadi taila followed by Sarvanga Swedana</i>	For 3 days	
<i>Vamana karma with mixture of Madhuyashti phant, Madanphala Pippalichurna, Madhu and Saindhava lavana</i>	For 1 day	As per <i>Kostha</i> of patient

8 Vega were observed with this Vamana yoga. Samsarjana Karma was advised for 7 days. After Vamana Karma, Virechana karma was done.

**Table 3: Protocol of Virechana karma**

Procedure and drugs used	Days	Dosage
<i>Snehpana with Panchatikta Ghrita</i>	For 3 days	Starting with 150ml and gradually increasing upto 350ml for 3 days
<i>Sarvanga Abhyanga with Marichyadi taila followed by Sarvanga Swedana</i>	For 5 days	
<i>Virechana karma with Triphala kwath 150ml and 15gm Trivrita + 5gm Sanaya patra + 15gm Haritaki + 5gm Saindhava Lavana</i>	For 1 day	As per <i>Kostha</i> of patient

28 Vegas were observed with this Virechana Yoga, Samsarjana Karma was advised for 7 days.

**Table 4: Oral Medications given to the Patient (For 6 months)**

Medication	Dose	Route	Anupana
<b>Rasa Manikya+ Shudha Gandhaka</b>	125mg twice a day after meal	Oral	Madhu
<b>Mahamanjisthaadi Kwatha</b>	20ml twice a day after meals	Oral	Water
<b>Hinglaamrita Malhama</b>		Local application	

## RESULT

There was a significant relief in scaling, discoloration of skin, elevated patches of the skin lesion which showed that detoxification of the body reduces the inflammation in the body by bringing back the normalcy of *Doshas* in the body.

Dermatological examination was done after *Samshodhana Karma* and PASI (Psoriasis Area Severity Index) score was taken for assessment parameter of improvement. There were significant decreases in PASI score after *Shodhana Karma* (purification therapies).

**Table 5: PASI Score Before and After Treatment**

Plaque Characteristics	BT	AT
Head	0	0
Thorax	5.4	0
U.L.	0	0
L.L.	8.4	0.3



Before Treatment

After Treatment

## DISCUSSION

*Acharya Charaka* specifically focuses attention on repeated *Shodhana* in *Bahudoshavastha* of *Kushtha*. While *Acharya Sushruta* recommended *Vamana* on every 15th day, *Virechana* once in a month, *Nasya* on every 3<sup>rd</sup> day and *Raktamokshana* once in a 6<sup>th</sup> month.<sup>[8]</sup> *Acharya Charaka* has highlighted the role of *Panchkarma* therapy by stating that the disease treated by *Shodhana* will never reoccur, whereas the treatment with *Shamana* therapy may reoccur in due course of time.<sup>[9]</sup> Moreover if *Shamana* drugs are given after proper *Shodhana*, then it dispenses additional relief and thus helps in eradicating the disease completely. *Vamana Karma* is the best measure for *Kapha Dushti*, whereas *Virechana Karma* is indicated not only for *Pitta Dosh* but also in *Kapha* and *Vata Dosh*. As we all know *Kushtha* is a disease of *Bahudoshavastha* and in our *Samhita*, *Samshodhana* is

mentioned for treating *Kushtha*. Because *Samshodhana* have main role in the elimination of aggravated *Doshas* and after *Samshodhana Shamana* treatment was also given to alleviate remaining *Doshas* and to continue the normal state of *Dhatu*s.

**Deepana Pachana:** It is mandatory to give *Deepana-Pachana* drug before administration of *Aabhyantara Snehpana* because of their inherent properties of *Amapachana* and increasing the quantum of *Agni*. *Amapachana* helps to reduce the *Pichilita* of morbid matter so that they can be easily dislodged. *Chitrakadi Vati* was used for 3 days for *Deepana Pachana*.

### **Snehpana**

*Panchatikta Ghrita* was used for *Snehpana*. *Panchatikta Ghrita* contains *Nimba*, *Patola*, *Vyaghri*, *Guduchi*, *Vasa*, *Triphala*. The drugs possess *Ushna*,

*Teekshna, Vyavayi and Vikasi* properties, *Katu and Tikta Rasa* and *Katu Vipaka*. It was observed that the action of drugs was mainly due to properties of these drugs which have *Deepana, Pachana, Amapachaka, Strotoshodhaka, Raktaprasadana, Raktashodhaka, Kandughna, Kushthaghna* and *Varnya* mechanisms of actions. During *Snehapana* due to the effect of *Sneha, Vatanigraha* and liquification of *Doshas* take place. It also pacified the symptoms like itching, discoloration and dryness due to aggravated *Vata* and *Kapha Doshas*. *Snehana* and *Swedana* remove the *Srotorodha* and also the *Doshas* move towards *Koshtha* which are eliminated by *Vamana* and *Virechana Karma*.

#### **Role of Vamana and Virechana Karma**

**Vamana Karma** - *Vamana Karma* is the best line of treatment for vitiated *Kapha Dosh*. As per Ayurvedic texts, *Kapha* is one of the main vitiated *Dosha* in *Ekakushtha*. So *Vamana* is the best treatment for excreting vitiated *Kapha* from body in *Ekakushtha*. According to *Dosha Pradhana Lakshana* of *Kushtha* as *Matsyashakalopamam* (scaling, elevation and plaque formation) and *Kandu* (itching) is due to *Kapha Dosh*. It is noted that itching and scaling can be reduced by *Vamana Karma*. Considering the importance of *Vamana* in relieving the psoriatic symptoms, *Aacharya Sushruta* has suggested to perform it in every 15 days. "Pakshat Pakshat" in fortnight based on *Kleda* formed due to *Kapha*, its accumulation is faster because of *Snigdha, Pichchila, Sandra Guna*, hence, it has to be removed frequently. In *Ekakushtha* there is predominance of *Vata* and *Kapha*, hence *Vamana Karma* provides encouraging results.

**Virechana Karma**- In *Kushtha Rakta* is vitiated and so *Pitta* is also involved as it has *Ashraya Ashrayi Bhava*. *Virechana Karma* is the main line of treatment for *Pitta* and *Rakta* vitiated diseases. *Kushtha* is a *Raktapradoshaj Vikara* and *Ekakushtha* is *Vata-Kapha* predominant type of *Kushtha*.

*Vamana* and *Virechana* acts on microcellular level, eliminates the toxins (vitiating *Dosha*) from body and helps in maintaining normal functioning of body. *Shodhana Karma* is the medicated purification procedure that eliminates the *Dushita Dosh* *Dushya* and prevent recurrence of the disease. It strengthens the immune mechanism and helps in preventing relapse.

#### **Effect of Samshodhana on clinical features of Ekakushtha**

**Itching (Kandu)** is the cardinal symptom of *Kapha Dosh*. *Vamana* is indicated as the main treatment for *Kapha Dosh* and also by *Virechana Kapha Dosh* is eliminated as in its *Samyaka Lakshana Kaphantham* *Virechana* is mentioned.

**Anhydrous (Swedavarodha)** is due to occlusion of *Roma Kupas* by vitiated *Doshas*. This *Avarodha* appears to have been released due to *Snehana* and *Swedana* and even by the *Vamana* and *Virechana karma* and thus restoring exudation. *Sroto Shudhi* is attained by *Shodhana* and this leads to proper formulation of *Uttarotara Dhatus* and also the *Malas* are smoothly removed and hence the anhydrous was subsided.

**Erythema (Arunaavabhasata), Scaling (Matsya Shakalopamam or Abrhakapatra Vat) Dryness (Rukshata)** are due to *Vata Vriddhi, Shodhananga Snehapana* bring down the *Vata Dosh* and cause *Kapha Utklesha*. As an outcome these symptoms got reduced gradually during *Snehapana* and further decreased after *Abhyanga* and *Swedana*. The effect continues to exist after *Vamana* and *Virechana karma*.

**Sleep disturbance** was present because of itching, as itching got reduced patient attained good sleep. Epidermal thickening and Elevation are due to the *Srotosanga* caused by *Maladhikyata* which is evident as *Maha Vastu* and *Unnati* of skin respectively. During *Snehapana* due to the effect of *Sneha, Vatanigraha* and liquefaction of *Doshas* take place. By *Snehana* and *Swedana* the *Srotosanga* is relieved and the *Doshas* move towards *Koshtha* which are eliminated by *Vamana* and *Virechana karma*. Hence the patient got relief in sleep.

**Role of Samshamana drugs in Psoriasis:** *Ras Manikya* and *Gandhak Rasayana* are the drugs that help in mitigation of *Vata* and *Kapha Dosh* and having *Kushthaghna* and *Kandughna* properties. Vitiating blood is one of the rationale for skin ailments and action of *Rasmanikya* is *Raktashodhana*, so it cleanses the blood and thus provide relief from skin problems, Also presence of purified sulphur helps to detoxify the blood. The major ingredients of *Ras Manikya* are *Tamara Bhasma, Hartala* and *Abhrak Bhasma*. *Tamara Bhasma* helps in red blood cells formation and thus restores complexion and colour of skin. The presence of *Tamara Bhasma* brings down the chances of disease that occurs because of the vitiated blood. *Hartala* offers beneficial effects in itching which is one of the main complaints in psoriatic patients. *Abhrak Bhasma* another component of *Ras Manikya* boosts immunity thus prevent skin infection, it also imparts strength thus maintain physical compatibility and skin integrity. *Gandhak* is known for its *Kushthaghna, Kledaghna, Ampachana, Raktaprasadana* and *Rasayana* properties. These properties help to cure and correct the causes of skin diseases. In accordance with modern science, sulphur have an anti-oxidant and anti-inflammatory property which enact an important role in the management of autoimmune diseases such as psoriasis.

**Mahamanjistaadi Kwatha:** As in *Ekakushtha* there is a *Dushti* of *Rakta*. *Mahamanjista Kwatha* has the property of blood purification so help in relieving the symptoms.

#### CONCLUSION

In Ayurveda, pacification of vitiated *Doshas* and cellular bio-purification of *Ama* like internal toxic metabolite and accumulated metabolic waste products are the main stay in its management. Cellular biopurification is the unique approach of Ayurvedic *Panchkarma* therapy. In this concern out of five-fold *Panchkarma* therapy, *Vamana* (therapeutic emesis) and *Virechana* (therapeutic purgation) procedure are important one for removal of toxic metabolite and accumulated metabolic waste products. On account of these procedures the body channels cleanses and becomes healthy and feasible. This clinical observation is carried out to evaluate the effect of sequential administration of *Vamana* and *Virechana Karma* followed by administration of Ayurvedic drugs in a selected patient of Psoriasis.

#### REFERENCES

1. Ambikadatta shastri. Sushruta Samhita Vol I, Chikitsa sthana 7/13 Chaukhamba Sanskrit sansthana Varanasi; 2014: 250

2. Brahmanand tripathi, Charak samhita Vol II, Chikitsa sthana 7/29 Chaukhamba surbharati prakashan Varanasi; 2014: 253
3. Brahmanand tripathi, Charak Samhita Vol II, Chikitsa sthana 7/9 Chaukhamba surbharati prakashan Varanasi; 2014: 248
4. Bhav Prakasha, Chaukhamba Surbharati Prakashan Varanasi, Madyama Khanda, Chi. 54/24.
5. Brahmanand tripathi, Charak samhita Vol II, Chikitsa sthana 7/21 Chaukhamba surbharati prakashan Varanasi; 2014: 252
6. Ambikadatta shastri Sushruta samhita Vol I, Nidana sthana 5/10 Chaukhamba Sanskrit sansthana Varanasi; 2014: 321
7. Brahmanand tripathi, Charak Samhita Vol II, Chikitsa sthana 7/41 Chaukhamba surbharati prakashan Varanasi; 2014: 255
8. Ambikadatta shastri, Sushruta Samhita Vol I, Chikitsa sthana 5/10 Chaukhamba Sanskrit sansthana Varanasi; 2016:67
9. Brahmanand tripathi, Charak Samhita, Vol II, Chikitsa sthana 16/20, Chaukhamba surbharati prakashan Varanasi; 2014: 321

#### Cite this article as:

Nidhee Thakur, Anil Bhardwaj. Role of Samshodhana in Psoriasis - A Case Report. AYUSHDHARA, 2022;9(Suppl 2):13-18.

<https://doi.org/10.47070/ayushdhara.v9iSuppl2.1078>

**Source of support: Nil, Conflict of interest: None Declared**

#### \*Address for correspondence

**Dr. Nidhee Thakur**

P.G. Scholar,  
Dept. of Panchkarma  
Rajiv Gandhi Govt. Post  
Graduate Ayurvedic College  
and Hospital Paprola, Kangra,  
Himachal Pradesh.

Email:

[nidhee1995thakur@gmail.com](mailto:nidhee1995thakur@gmail.com)

Disclaimer: AYUSHDHARA is solely owned by Mahadev Publications - A non-profit publications, dedicated to publish quality research, while every effort has been taken to verify the accuracy of the content published in our Journal. AYUSHDHARA cannot accept any responsibility or liability for the articles content which are published. The views expressed in articles by our contributing authors are not necessarily those of AYUSHDHARA editor or editorial board members.