



## Case Study

### A SUCCESSFUL CLINICAL CASE STUDY ON MANAGEMENT OF VISARPA

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*pitta* and *Rakta*  
*dusti*.

#### ABSTRACT

"*Visarpa*" is one of the most common skin disorder which explained in Ayurveda. It is one of the most common disease suffering in present era. The *Visarpa* which is an active transmitting viral disease causing painful skin rash with acute onset blisters in localised areas. *Visarpa* is predominantly involved *Pitta dosha* due to *Pitta drava* and *Sara guna* more which spreads easily all over the body. Viral syndrome caused by organism named as "varicella zoster". Incidence of herpes zooster ranges from 3.9 to 11.8 per 1000 person per year. Reoccurrence are most common in patients who is immuno-suppressed. The treatment planned *Raktamokshan* specially *jaloukavacharana* which gives very effective results in *Visarpa vyadhi*. Result of the treatment observed on the basis of improvement in sign and symptoms of *Visarpa* were found completely healed within 1 week of treatment the detailed case is presented in the following content.

#### INTRODUCTION

"*Twacha*" word derived from "*Tvac*" which means "to cover something" which protects the body from defence system in different ways, according to Ayurvedic literature *Twak roga* produced by imbalance of *Tridosha-dhatu* and *Rakta dusti*. *Twacha* is rich in hair follicles and sweat glands, skin disease appeared as result of any changes in these components. In Ayurveda *rakta dusti* as one of the major factor cause for *Twacha roga*, *Rakta mokshana* is ultimate treatment for *Rakta dusti*, *Visarpa* vary from age, locality, season. if any negative impacts over person life style it gives financial, social, and psychological stress over humans society. Higher incidence of *Visarpa* observed in younger age group (18-40yr). Incidence of herpes zooster ranges from 3.9 to 11.8 per 1000 person per year. Reoccurrence are most common in patients who is immunosuppressed.<sup>[1]</sup> it is very painful condition immediately attracts the eyes of the consultant with its symptoms, which is characterised by its severity spread, painful, spread of

skin rashes, burning sensation, and blisters, in Ayurvedic classics mention that *Visarpa* spread like a snake and its considered as *Pitta pradhan vyadhi*. *Visarpa* is predominantly involved *Pitta dosha* due to *Pitta drava* and *Sara guna* more which spreads easily all over the body.<sup>[2]</sup> Viral syndrome caused by organism named as "varicella zoster".<sup>[3]</sup>

#### Case Report

Name: XYZ

Age: 75 yrs

Gender: Male

Residence: Ilkal

#### History of present illness

A male patient 75yrs old, presently living in Ilkal district, Bagalkot, Karnataka state, c/o: *Sukshma pidaka* associated with occasional *Kandu* (itching sensation), absence of *Daha* (burning sensation) since previous night over *Udar Pradesh*, he visited our OPD for further management.

**Past H/o:** No any such history found.

**Past surgical history:** No any relevant surgical history.

**Family history:** No any family members having same complaint.

#### Personal history

**Ahara:** Pure vegetarian, daily night a glass of milk before going to bed.

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**On Examination:** Vital signs.

1. Pulse: 75/min
2. BP: 130/80 mmHg

**Local examination**

The *Pidaka* occurred in clusters and of red coloured.

Area: Over the abdomen and back

Colour: Reddish

Odour: No any specific odour

Secretion: Absent

Pain: Absent

Tendency to bleed: No

Loss of sensation: No

**Systemic examination**

1. R.S: B/L Symmetrical, clear
2. CVS: S1, S2 heard, no any added sounds
3. CNS: Conscious well oriented, superficial reflexes, intact
4. GIT: Bowel movement- Regular, tongue- Coated
5. P/A: Non tender, soft

**Astavidha pariksha**

1. *Naadi*: 75/min
2. *Mala*: *Prakrut* 2times/day
3. *Mutra*: *Prakrut* 5-6 times/day
4. *Jihva*: *Sama*
5. *Sparsha*: *Ushna* and *Ruksha*
6. *Shabda*: *Prakruta*
7. *Akruti*: *Madhyama*
8. *Druk* : *Samyak*

**Samprapti ghataka**

1. *Dosha*: *Vata-kapha*
2. *Dushya*: *Rasa, Rakta, Mamsa*

3. *Agni*: *Agnimandya*

4. *Srotas*: *Rasavaha, Raktavaha, Mamsavaha*

5. *Sroto dusti*: *Sanga ,vimargagamana*

6. *Ama*: *Sama*

7. *Vyaktastana*: *Udara Pradesh*

**Treatment**

Observing all condition of patient, considering the acute condition of *Visarpa*, patient was advised for immediate *Raktamokshana*, about treatment in details explained to patient and after taking consent from the patient advised procedure was conducted.

**A.Shodhana Chikitsa**

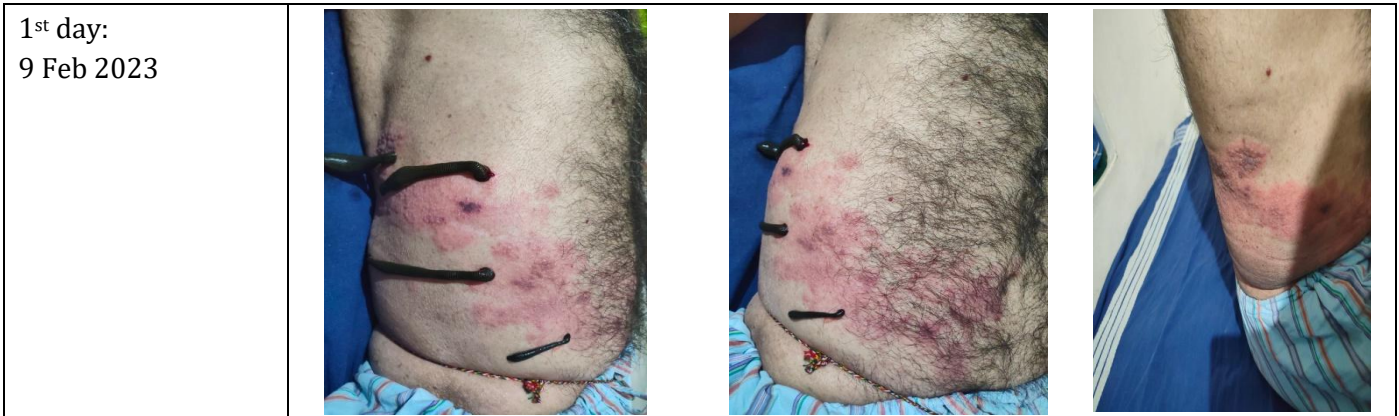
*Raktamokshana* done on 9<sup>th</sup> feb 2023, *Jaloukavacharana*, more than 50ml blood was let down.

**B.Shamana Chikitsa:** (9-2-23 to 19-2-23)

1. Tab: Reviral 1TID A/F with hot water
2. Tab: *Nimbadi Guggulu* 2 BD, AF with hot water
3. *Manibhadra Guda* 1tsf with hot water OD Empty stomach
4. *Parisheka* with *Kwatha* of *Triphala* and *Nimba churna*
5. *Shodaka* Syrup 5tsf BD Empty stomach
6. Oint: *Prunilol* External application.

**Observation and Result**

On 1<sup>st</sup> day of admission, *Raktamokshana* (*Jaloukavacharan*) was performed more than 50ml of vitiated blood was letting down. Immediately colour changes observed after the procedure but patient doesn't have any c/o *Kandu, Daha, Toda* on further analysis of *Dosha*, it was observed that *Shyava varna rakta* seen. On administration of *Shaman aoushadi* mild reduction of *Pidaka* over *Udar pradesha* was observed *Shamana aoushadi* was continued for 10 days.





2<sup>nd</sup> day:  
10<sup>th</sup> Feb 2023



3<sup>rd</sup> day:  
11 Feb 2023

4<sup>th</sup> day:  
12 Feb 2023



*Parisheka done with Kwath of Triphala and Nimba churna*

5<sup>th</sup> day:  
13 Feb 2023



6<sup>th</sup> day:  
14 Feb 2023





## DISCUSSION

*Twacha roga* are *Chirakari* and so recurrent occurs easily, it has been stated that *Punaha punaha shodana* in *Bahudoshaja janya twaka roga*.

*Visarpa* is a *Bahudoshaja vyadhi*, as long with three *Doshas rakta* is also involved as main supporting factor of vitiation, so *Raktamokshan* is advised as it purifies the vitiated *Raktadosha*.

*Raktamokshana* is therapeutic bloodletting process included under *Panchakarma* by *Acharya sushrut* it gives relief from acute condition very quickly.

1. Tab: Reviral which contains *Bhumyاملaki*, *Guduchi*, *Katuki*, *Kirattikta*
2. Tab: *Nimbadi guggulu* which contains *Nimba*, *Guggulu*, *Haritaki*, *Vibhiktaki*, *Amalki*, *Vasa*, *Patola*,
3. *Manibadra guda* which contains *Sukha virechaneeya dravya* *Trivrit*, *Haritaki*, *Vidanga*, *Amla*, *Guda*.
4. *Parisheka* with *Kwath* of *Triphala* and *Nimba churna*, *Sheeta veerya*, *Tikta*, *Kashaya rasa* predominantly
5. *Shodaka syrup* which contains *Mahamanjistadi kashaya*, *Panchanimba choorna* (*Twak*, *Moola*, *Patra*, *Beeja*, *Puspa*) it helps for *Rakta shodana*
6. *Oint*: *prunilol* which contents *Nimba*, *Haridra*, *Guduchi*, *Patola*, *Ropana karma*

This clinical case study is successful presentation of management of an acute condition like *Visarpa* through *Raktamokshana*<sup>[4]</sup> (*Jaloukavacharana*). Which gives relief in the symptoms of *Visarpa* like *toda*, *Daha*, *Pidaka*, appearance of *Pidaka* and *Daha* implies *Pittaja vyadhi* with vitiation of *Rakta dosha* as it is the *Ashraya* of *Pitta*, so due to removal of vitiated *Rakta dosha*, these symptoms were subsided by *Jaloukavacharana*. Use of *Kashaya-tikta rasa pradhana shaman aoushadhi* has relieved *Kandu*, *Daha*, *Toda*, In some cases *Visarpa* has chance of reoccurrence, so repeated *Shodhana chikitsa*<sup>[5]</sup> is needed after observing the *Agni*, *Bala*, *Ama* of the *Atur*. *Rasa*, *Rakta*, *Twak*, are mainly involved in this condition which leads production of *Vistruta*, *Anunnata Shopa* that *Sarpana prakruti* associated with *Daha* and *Vedan*. *Raktamokshana* is helpful in stopping the pathology of disease and its spread.

## CONCLUSION

The *Visarpa* which is an active transmitting viral disease causing painful skin rash with acute onset blisters in localised areas. The symptoms of *Toda*, *Daha*, *Pidaka* is symptom of *Visarpa*, appearance of *Pidaka* and *Daha* implies *Pittaja vyadhi* with vitiation of *Rakta dosha* as it is the *Ashraya* of *Pitta*, so the Present clinical case study is successful management of

*Visarpa* through *Jaloukavacharana* and with unique formulations.

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