



## Case Study

### ROLE OF JALAUKAVACHARANA IN MANAGEMENT OF VICHARCHIKA W.S.R. TO ECZEMA

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#### ABSTRACT

*Kustha Roga* is one among the skin disorder mentioned in science of *Ayurveda*. *Kustha* are broadly classified into the *Mahakushta* and *Khsudrakustha*. *Mahakushta* is of seven type and *Kshudrakustha* is eleven types. *Vicharchika* is one among the *Kshudrakustha* and a type of *Rakta Pradoshaja Vikara*, where all three *Dosha* involved and *Kapha* is the most predominant among the three. Modern research states that eczema is the clinical manifestation of *Vicharchika*. Eczema is one type of dermatitis that occurs when the dermis becomes inflamed. Another name for it is atopic dermatitis, and symptoms include dry, itchy skin with ill-defined erythema and scaling. There are not enough treatment options offered by contemporary mainstream medicine. In this case study, a 66-year-old man sought consultations at the Kriya Sharir, National Institute of Ayurveda in Jaipur's OPD Department. Complained of blackish lesions over bilateral sides of left ankle associated with redness, liquid discharge and intense itching since seventeen years. The patient received allopathic treatment and consultations from allopathic hospitals, but contemporary medicine did not provide any alleviation for the patient. The patient was treated with internal medication along with five sessions of *Raktamokshana* using *Jalaukavacharana* (leech therapy). The patient had remarkable progress and the lesions were relieved.

#### INTRODUCTION

Acharyas have defined *Kushtha* in *Ayurveda* as *Kushnati Vapuh Iti*. According to the text, *Kushtha* is the *Vyadhi* that progressively obliterates skin and other healthy bodily tissues<sup>[1]</sup>. The symptoms of *Vaivarnya*, *Kandu*, *Raga*, *Srava*, *Pidaka*, *Mandal Utpatti*, *Shoola*, *Raukshya*, *Vrana*, and other types of *Kushtha* are common.

In clinical practice, *Vicharchika*, a kind of *Kshudra Kushtha*, is most frequently diagnosed. Its disturbingly high occurrence raises serious concerns for public health. This *Vyadhi*, *Raktapradoshaja*, involves *Tridosha* and is dominated by *Pitta*<sup>[3]</sup> and *Kapha*<sup>[2]</sup>.

*Vicharchika* is characterized by *Pidaka*, *Shyava Varna*, *Kandu*, and *Srava*<sup>[4]</sup>. *Alpa Shotha*, *Ati Kandu*, *Shyava* or *Krishna Vaivarnya*, and occasionally *Alpa Pichhil Jala* or *Raktasrava*, are found in varying-sized *Mandalas* or *Padmas*.

Contemporary science has established a correlation between *Vicharchika* and eczema. There are two categories of patients that have it: 1) Dry and 2) Wet. The most typical symptoms include red, thick, inflammatory rashes, itching, and lichenification. These symptoms can be stressful and have an impact on a person's appearance. Since recurrence of symptoms is the most prevalent complaint among *Vicharchika* patients, a permanent cure is required, and this can be accomplished with the aid of *Ayurveda*.

#### Case Report

A 66-year-old man sought consultation at the Kriya Sharir, National Institute of Ayurveda in Jaipur's OPD Department with complaints throughout the past seventeen years regarding the patient's left ankle region's blackish discolouration. Repeated skin lesion on left ankle area accompanied by liquid discharge,

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redness, and intense itching. The patient had experienced these symptoms for the previous seventeen years. The patient also sought therapy from allopathic hospitals and physicians, but modern

medicine did not significantly improve his condition, and in fact, it worsened as his symptoms spread to neighbouring body parts.

#### **Dashvidh Pariksha**

<i>Prakriti</i>	<i>Vata Pitta</i>
<i>Vikriti</i>	<i>Vikriti Visham Samvet</i>
<i>Pramana</i>	<i>Madhyma</i>
<i>Sattav</i>	<i>Madhya</i>
<i>Satmaya</i>	<i>Sarvaras</i>
<i>Sara</i>	<i>Raktsara</i>
<i>Sehnan</i>	<i>Madhyam</i>
<i>Aahar Shakti</i>	<i>Madhyam</i>
<i>Vyayam Shkti</i>	<i>Madhyam</i>
<i>Vaya</i>	<i>Vruddhavastha</i>

#### **Ashtavidh Pariksha**

<i>Nadi</i>	84 per min
<i>Mutra</i>	<i>Samyaka</i>
<i>Mala</i>	<i>Samyaka</i>
<i>Jihvya</i>	<i>Malavrita</i>
<i>Shabd</i>	<i>Tikshana</i>
<i>Sparsh</i>	<i>Samsheetoshna</i>
<i>Druk</i>	<i>Sama</i>
<i>Akriti</i>	<i>Sama</i>

#### **All Routine Investigations**

All basic routine blood and urine check-up was performed.

- As *Raktamokshan* as *Panchakarma Chikitsa* was planned, the patient was investigated for blood sugar level- fasting and post-prandial blood sugar.
- Haemogram to examine basic blood parameters and BT, CT.
- Also, patients were tested for HBsAg, VDRL etc.

Test	Result
Hb%	14.1g/dL
RBCs	4.65 milli/cmm
WBCs	8.19/cmm
Platelets	256
ESR	20 mm/hr
BSL	Glucose random-97.8 mg/dl HBA1C-6.8
BT	2mins 15 sec
CT	5mins 35 sec
LFT	Bilirubin Total-0.289mg/Dl Bilirubin direct- 0.144mg/dL Bilirubin indirect- 0.14mg/dL SGOT(AST)- 14.9U/L

	SGPT(ALT)- 15.0U/L Total protein- 7.82g/dL Albumin- 4.60g/dL Globulin- 3.22g/dL A/G Ratio- 1.43 Alkaline phosphatase- 74 U/L
RFT	Urea- 29.0mg/dL S. Creatinine - 1.03mg/dL
Lipid Profile	Triglycerides- 192.4mg/dL Total cholesterol- 238.9mg/dL HDL cholesterol- 37.9mg/dL LDL cholesterol- 166.6mg/dL VLDL cholesterol- 38.48mg/dL Total cholesterol: HDL cholesterol ratio- 6.30
RA Factor (Qualitative)	Negative
CRP (Qualitative)	Negative

**Nidan Panchak****Hetu****Aahar**

- *Katu, Amla Rasa Sevan, Atyambupaan, Ateeta kalashan, Vishamashan, Abhishyandi (Sandhanjanya, Matsya, Odana) Viruddha Ahar Sevan.*

**Vihar**

- *Yanayan, Sheeta Vata Sevan, Aatapsevan, Chhardi Vega Udiran.*

**Manas**

- *Atichintan, Krodh*

**Vyasan**

- *Tea: 2-3 times/day*

**Poorvarupa**

- *Sarvaang Kandu*
- *Ati Swedan*
- *Ubhay Hasta-Pada Pradeshi Mandal Utpatti, Vranvat Utpatti, Raukshya.*

**Roopa**

- *Ubhay Hasta-Pada Pradeshi Mandal Utpatti, Vranvat Utpatti*
- *Raukshya, Kharata, Kandu, Shoola*
- *Twak Dushti Sthani Alpa Raktasrav, Kandu Paschat Picchil Jalasrava.*

**Samprapti**

*Rasa Raktavaha Srotodushti*



*Dosha -Shakha Gati*



*Twak Sthani – Sthanasamskraya*



*Ubhaya Hasta Pada Pradeshi- Raukshya, Kandu, Vranava Utpatti*



*Alpa Raktasrav, Kandupashat Picchil Jalsrav and Shoola*



*Vicharchika*

**Differential Diagnosis**

A differential diagnosis was made for *Kitibha Kustha*, *Eka Kustha*, and *Sidhma Kustha*. In *Eka Kustha*, lesions will be *Mahavasthu* (large), and the scaling and affected part of the skin will be like the skin of a fish. Characteristic features seen in *Sidhma Kustha* are *Shweta Varna*, *Tamra Varna* (coppery whitish lesions), *Tanu* (thin), and *Dugdhika Pushpa* (looks like a flower

of *Euphorbia hirta*). It is evident in the above-displayed picture that there is no scaling, and looking like the skin of a fish, so *Eka Kustha* is ruled out. *Sidhma Kustha* was also ruled out because the lesion was not coppery whitish and did not look like a flower of *Euphorbia hirta*. In *Kitibh kustha* 5, lesions will be *Shyavata* (blackish brown), *Ruksha* (dryness), *Kinkhara Sparsha*

(rough in touch and looks like a scar), and *Parushata* (hard in touch). These are the classical symptoms seen in that patient, and they were the presenting complaints, too. So, *Kitibha Kustha* was diagnosed

### Diagnosis

By observing the symptoms of patient, he was diagnosed with eczema. *Vicharchika* was considered as Ayurvedic diagnosis.

### Treatment

Patient was diagnosed with *Vicharchika* in the last seventeen years. The treatment was planned as *Jalaukavacharana* along with Ayurvedic internal medicines.

1. *Panchanimb churna*- 2 gm  
*Rasmanikya*- 125mg

*Kamdudha Rasa*- 125mg

*Manjistha Churna*- 500mg with lukewarm water

2. *Guggulu tikta ghritha*

3. *Triphala Churna*- 3gm HS with lukewarm water

4. *Panchvalkal Kashaya* for wash

5. *Jivantayadi Yamak* for local application

### Panchakarma Upakrama

*Panchakarma Upakrama* as *Raktamokshana* in the form of *Jalaukavacharana* was performed in this patient.

*Jalaukavacharana* at left ankle region was done every 7 days for 1.5 month (5 sittings) and observations, assessment was recorded.

### Before Treatment



### During the Treatment





**After Treatment****Assessment of the Patient****Scoring of signs and symptoms of Vicharchika**

Score	<i>Kandu</i>	<i>Vaivarnya</i>	<i>Daha</i>
0	No itching	Normal colour	No burning
1	Occasional itching	Abnormal but near to normal colour	Occasional burning
2	Mild itching	Reddish discoloration	Mild burning
3	Mild to moderate itching	Slight black reddish discoloration	Mild to moderate burning
4	Severe itching	Deep black reddish discoloration	Severe burning

Score	<i>Vedana</i>	<i>Pidaka</i>	<i>Rukshata</i>
0	No pain	No eruption of skin	No line on scrubbing with nail
1	Occasional pain	Starting of eruption	Faint line on scrubbing with nail
2	Mild pain on touch	Moderately developed eruption	Marked line on scrubbing with nail
3	Mild to moderate pain	Spread over extremities	Excessive dryness leading to itching
4	Severe pain	Severely spread on overall body	Excessive dryness leading to cracks and bleeding

**2) Area Score****3) Severity score****4) EASI score****Assessment of the Patient****Before treatment**

Signs and Symptoms	Score
<i>Kandu</i>	3
<i>Vaivarnya</i>	3
<i>Daha</i>	2
<i>Vedana</i>	3
<i>Pidika</i>	2
<i>Raukshya</i>	2

**After Treatment**

Signs and Symptoms	Score
<i>Kandu</i>	1
<i>Vaivarnya</i>	1
<i>Daha</i>	0
<i>Vedana</i>	0
<i>Pidika</i>	0
<i>Raukshya</i>	0

**Before treatment****1) Area score**

Lower limb-2

**2) Severity score**

Region	Redness	Thickness	Scratching	Lichenification
Lower Limb	1	2	1	1

**Easi Score**

Lower Limb =  $1+2+1+0=4 \times 0.4 = 3.2$

**After Treatment****1) Area score**

Lower limb: 1

**2) Severity score**

Region	Redness	Thickness	Scratching	Lichenification
Lower Limb	0	1	1	0

**3) Easi Score**

Lower Limb =  $0+1+1+0=2 \times 0.4 = 0.5$

**DISCUSSION**

In the pathogenesis of *Kushta* and specifically *Vicharchika*, all three *Doshas-Vata*, *Pitta*, and *Kapha*-along with *Rasa*, *Rakta*, *Mamsa*, and *Lasika Dhatus*, are vitiated<sup>[5]</sup>. *Vicharchika*, categorized under *Kshudra Kushtha*, is primarily *Kapha*-dominant but exhibits features of *Tridosha Dushti*, with *Kandu* (itching) due to *Kapha*, *Srava* (discharge) caused by *Pitta*, and *Raukshya* (dryness) and *Shyava Varna* (blackish discoloration) attributed to *Vata*.

According to *Dalhana Acharya*, the most commonly affected regions in *Vicharchika* are the *Hasta* (hands) and *Pada* (feet), as mentioned in his commentary on the *Sushruta Samhita*<sup>[6]</sup>. In line with the *Chikitsa Sutra* of *Kushta*, therapeutic intervention should be based on *Dosha* predominance, and for localized and milder conditions (*Alpa Kushtha*), *Raktamokshana*, especially *Jalaukavacharana* (leech therapy), is indicated<sup>[7]</sup>.

The current case visually demonstrates the clinical efficacy of *Jalaukavacharana*, as seen in the documented healing process. This procedure effectively targeted local *Rakta Dushti*, reducing inflammation, itching, and oozing, thereby facilitating lesion resolution. Complemented by internal Ayurvedic formulations, the combined approach led to a significant reduction in both symptom severity and lesion size. The area score decreased from 2 to 1, and the EASI (Eczema Area and Severity Index) score dropped from 3.2 to 0.5, marking substantial clinical improvement.

The administered internal medicines played a multifaceted therapeutic role- *Pachana*, *Deepana*, *Tridosha Shamana*, *Kleda Nashana*, *Kandu-Kushtha Nashana*, and *Rasa-Rakta Prasadana*. *Panchanimba Churna*<sup>[8]</sup>, enriched with *Nimba*, *Bakuchi*, *Haridra*, *Aragwadha*, and *Chakramarda*, exhibits *Twak*

*Doshahara* and *Rakta Prasadaka* properties, enhancing tissue detoxification and immune modulation.

*Ras Manikya*<sup>[9]</sup>, known for its *Rasayana* effect, synergistically improves healing and prevents recurrence. *Kamdudha Rasa*<sup>[10]</sup>, with its *Pitta-Shamaka* and *Rakta-Shodhaka* actions, reduces burning and systemic inflammation. *Manjistha Churna*<sup>[11]</sup> supports anti-inflammatory, antimicrobial, and blood-purifying actions, thereby accelerating wound healing.

*Panchatikta Ghrita Guggulu*<sup>[12]</sup>, combines *Tikta Rasa*, *Laghu*, and *Ruksha Guna* to cleanse *Kleda*, *Meda*, *Lasika*, *Rakta*, and *Sweda*, promoting tissue regeneration. The pharmacological effects of *Nimbin*, *Nimbidin*, *Berberine*, and *Tinosporin* from ingredients like *Nimba* and *Guduchi*, and the antioxidant properties of *Vasa*, *Patol*, and *Nidigdhika*, all contribute to enhanced cellular repair.

*Guggulu*, with its *Ushna Virya* and *Katu Vipak*, acts on *Meda* and *Ama*, facilitating metabolic correction. The lipophilic nature of *Ghrita* aids in intracellular drug delivery, targeting the skin's deeper layers and restoring epithelial structure.

*Triphala Churna*<sup>[13]</sup>, by supporting gut detoxification and reducing skin *Kleda*, further helped alleviate lesion symptoms. *Panchvalkal Kwath*<sup>[14]</sup>, a classical *Vrana Shodhaka* and *Ropaka*, improved local tissue condition by reducing oozing, smell, and itching while facilitating slough removal and re-epithelialization.

Lastly, *Jivantyadi Yamaka*<sup>[15]</sup>, containing *Neem*, *Karela*, *Triphala*, and *Guduchi*, played a vital role in relieving pruritus and purifying the blood, accelerating healing without any adverse effects. The approach was found to be safe, cost-effective, and clinically viable,

indicating promising results for the holistic management of *Vicharchika*.

## CONCLUSION

This case study demonstrates that *Jalaukavacharana* and internal Ayurvedic medications can treat *Vicharchika* and stop its recurrence.

*Nidan Paravarjan, Pathya Ahar Vihar Sevan, Raktamokshana*, and medications work wonders for treating *Vicharchika*.

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