



Case Study

AYURVEDIC MANAGEMENT IN SHWITRA (VITILIGO) USING PUTIKADI LEPA AND DHATRIKHADIR KASHAYA

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ABSTRACT

Vitiligo is a primary autoimmune depigmentary disorder. Secondary post-inflammatory depigmentation is called leukoderma. In a vitiligo patch melanocyte are absent and hence no melanin production. Vitiligo may be associated with other autoimmune disorder. They may be localized, segmental or generalised sometimes the hair on vitiligo. In Ayurveda vitiligo is known as a *Shwitra*. Classified under *Kushtha* (skin disorders). Three *Doshas* imbalance -*Vata, Pitta, Kapha* body tissues like *Rakta, Mamsa, Meda* etc. The prevalence of vitiligo is estimated to be 0.14-2% in different countries and 2.64% in Kumaun region. In Ayurveda, Ayurvedic treatment mainly focuses on the medicine. It includes both *Shodhana* and *Shamana* therapies. Internal medicine such as *Dhatri khadir Kashaya* along with honey. External applications (*Lepa*) *Putikadi Lepa* with *Gomutra* sun exposure to stimulate pigmentation. A female patient aged 13 years suffering from white patches. Large macule on left temporal surface was treated Since 6 months. *Shodhana* and *Shamana chikitsa* period of 2 months follow-up at 30 days in between changes was noted by assessing through colour and size of patch and also improve the patient well-being.

INTRODUCTION

Vitiligo is a progressive, auto immune, chronic depigmented skin disease which is mainly caused by selective destruction of melanocytes in the Stratum basale layer of skin. There are three major types of Vitiligo: Segmental, non-segmental and mixed. In Ayurveda almost all the Skin disorders have been described under Chapter "*Kushtha Rogadhikara*. Various type of skin disorders described in modern can be covered up under eighteen types of *Kushtha Roga*, (seven types of *Mahakushth*, eleven types *Kshudra kushtha*). The word *Kushtha* means disfiguration of body which can be correlated for *Shwitra*.^[1] It is caused due to vitiation of *Tridosha* and *Rasa, Rakta, Mamsa* and, *Meda dhatu* resulting in white coloured patches over in the skin.^[2]

The description of *Shwitra* in Ayurveda Classic texts simulates to disease vitiligo mentioned in contemporary medicine. According to *Kashyapa Samhita Shwitra* is श्वेतभावाच्छिवत्रं "*(Kushtha Roga chikitsa adhayay)* means white colour of reflection.^[3] *Sushruta* explain the disease *Kilasa* instead of *Shwitra*. *Kilasa* and *Shwitra* are Synonymous. *Acharya Charaka* explains various cause of *Shwitra* like *Viruddha Aahar* and *Papakarma*.^[4] Childhood vitiligo has a great psycho-social affect on children and their parents. The treatment of the disease, medications and duration of treatment in modern science are also very complex and associated with multiple side effects. Ayurvedic concepts of disease treatment starts at nullifying *Dosha Dushya Samurchana*. The *Samsodhan Chikitsa* aims at eliminating the deep seated vitiated *Doshas*, and help in *Srotoshodhana*. This helps in better nutrition of *Dhatu*s and correction of diseases. *Samshamana* Therapy aims at pacifying the doshas. Many effective Ayurvedic formulations are described for leukoderma. Some among them are *Switrahara kashaya, Avalgujabeej Lepa, Switrari Rasa* etc. I have taken *Putikadi Lepa* and *Dhatrikhadir Kashaya* for my

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research topic. Both have been explained in (Bhaishajya ratnavali) and (*Chakradatta*).

Prevalence

The prevalence of vitiligo is estimated to be 0.14-2% in different countries and 2.64% in Kumaun region.

The peak incidence is in second or third decade. The precise cause of vitiligo is still unknown. [5]

Case Description

A female patient of 11 yrs Kaumarabritya Outpatient department, Patanjali Bhartiya Ayurvigyan Evam Anusandhan Sansthan, Haridwar on 20 Jan, 2025 with complaints of white patches, large macule on left temporal surface. No positive family history. There was no history of burn or injury.

History of Present illness

The patient was apparently normal until July 2025, the patient developed hypopigmented was first noticed by the patients father and whitish in appearance on left side on temporal, which initially small in size and later increased progressively. The patch later become more prominent. Patient was then taken for medical consultation, where initial Ayurvedic treatment was continued started for few months, but no significant improvement was observed. As the condition did not show satisfactory result. The patient came to our OPD for further management. The Patient currently under treatment at our Patanjali Ayurvedic Hospital since January 2026. Treated with *Shamana chikitsa*. Patanjali Ayurveda Hospital for further and better management.

Past History: No H/o HTN, DM

Family History: No family history

Personal History

Agni: Sama

Koshta: Mrudu

Aahara: Samisha

Appetite - Madhyama

Rasa pradhanata - Lavana

Nidra: 7. Hrs. Sound

Mala: 2 Times Day. Normal

Mootra: 5 Times /Day. Regular

General examination

General Condition - Conscious	Pallor - Absent
Pulse - 72 bpm	Icterus - Absent
P- 120/80 mmhg	Cyanosis - Absent
Respiratory rate -15/min	Clubbing - Absent
Temperature - 97.2F	Edema - Absent
Height - 149 cm	Lymphadenopathy - Absent
Weight - 40 kg	

General Examination

Systemic Examination

Respiratory system

Chest b/l clear

Cardiovascular system

S1-S2 Normal murmurs absent

Central nervous system

Patient is well oriented.

Integumentary System

O/E Of Skin

Site of lesion - Left temporal region

1. Colour of lesion (*Twaka vaivaranya*) - Aruna
2. Surface of the patches (*Sparsh*) - *Snigdha*
3. Number of Patches (*Sankhya*) - 1
4. Size: 1 -2 cm
5. Distribution of lesions - Face
6. *Kandu* (Itching) - No
7. Pattern - Symmetrical

Samprapti Ghatak of Shwitra [6]

Dosha: Tridosha

Dushya: Rasa, Rakta, Medha

Agni: Dhatavagni

Srotas: Rasavaha, Raktavaha

Sroto Dushti: Sanga

Rogamarga: Bhaya rogamarga

Adhishtana: Twaka

Vyadhi Svabhava: Chirkari

MATERIAL AND METHODS**Assessment Criteria****Subjective Criteria****Subjective Parameter ^[7]**

S.No	Symptoms	Criteria	Score	Before Treatment (B.T)	After Treatment (A.T)1	After Treatment (A.T)2	After Treatment (A.T)3	After Treatment (A.T)4
1	Grading for the colour of lesions	Normal colour of the skin	0					0
		Light reddish colour of patches (<i>Aruna varna</i>)	1			1		
		Reddish colour of the patches (<i>Tamra varna</i>)	2		2			
		Whitish colour of the patches (<i>Sweta varna</i>)	3	3				
		Some patches are reddish some whitish or other colour (mixed)	4					
2	Grading for the surface of the patches	Normal surface of the skin	1		1	1	1	1
		Roughness of affected skin lesion	2	2				
		Dryness requiring application of moistening	3					
		Dryness not responding to moistening	4					
3	Grading of the number of lesions	Number of patches varies between 1-4	1	1	1	1	1	1
		Number of patches varies between 5-8	2					
		Number of patches varies between 9-12	3					
		Number of patches more than 12	4					
4	Grading for the Itching (<i>Kandu</i>)	No itching at all	1	1	1	1	1	1
		Occasional Itching	2					
		Itching at site of patches when exposed to sunlight	3					
		Frequent itching but no disturbance in sleep & req medicines	4					

Objective Criteria^[8]

VASI Score (Vitiligo Area Scoring Index) Followed by British Association of Dermatologist.

VASI (Vitiligo Area Scoring Index)= {Hands Units} {Residual Depigmentataion} All body sites.

Patients Palm = 1 % of Total Body Surface Area

1 Finger Tip = 0.03%

1 Thumb = 0.1 %

RESULTS

Before treatment 20 January

Face- 0.1 × 1= 0.1

After treatment

0+0 = 0 healed now



Before Treatment

After treatment

Chikitsa vivran

Shamana chikitsa was given to patient for 2 months as follows:

SN Treatment	Dose and Anupana	Days
1. Dhatri khadir kashaya	Take empty stomach before meal twice a daily 50 ml 25 ml and 25ml bd with honey.	60 days
2. Putikadi lepa	Lepa is prepared after mixing it Gomutra and then to be applied on the lesions of application. Patients will be advised to apply it twice a day, morning and evening. Advised sun exposure for 15 minutes.	60 days

DISCUSSION

Shwitra (vitiligo) is described in Ayurveda as a disorder involving vitiation of *Tridosha* along with impairment of *Rasa, Rakta, Mamsa,* and *Meda dhatus*, leading to depigmentation of the skin. In the present case, the patient showed classical features such as *Twaka vaivarnya* (discoloration) and localized hypopigmented macule over the temporal region, which correlates with vitiligo in modern science. The treatment approach in this case was based on *Shamana Chikitsa*, aiming to pacify the vitiated *Doshas* and restore normal pigmentation. The selected formulations *Dhatri Khadir Kashaya* (internal medicine) and *Putikadi Lepa* (external application)- are mentioned in classical Ayurvedic texts like *Bhaishajya Ratnavali* and *Chakradatta* for the management of *Shwitra*.

Dhatri Khadir Kashaya possesses properties such as:

- *Rakta shodhana* (blood purification)
- *Kushthaghna* (anti-skin disease action)

- *Pitta shamaka* (pacifies *Pitta dosha*). It helps in improving metabolism at the dhatu level and enhances melanocyte stimulation indirectly.

Putikadi Lepa, applied locally with *Gomutra*, acts as:

- *Kushthaghna* (anti-dermatological disorder)
- *Twachya* (beneficial for skin)

The local application along with sun exposure (*Surya prakasha*) plays an important role in stimulating melanocyte activity and melanin synthesis, similar to phototherapy in modern medicine.

In this case, significant improvement was observed:

- Reduction in size of lesion.
- Gradual change in colour from whitish to normal skin tone.
- VASI score reduced from 0.1 to 0, indicating complete repigmentation.

No adverse effects were reported during the treatment period, which highlights the safety and effectiveness of Ayurvedic management. The results suggest that early intervention with appropriate Ayurvedic formulations can help in reversing the pathology of *Shwitra*. The combination of internal detoxification and external stimulation provides a holistic approach by correcting the underlying dosh imbalance and promoting skin regeneration.

CONCLUSION

This case study demonstrates that Ayurvedic management using *Dhatri Khadir Kashaya* and *Putikadi Lepa* is effective in the treatment of *Shwitra* (Vitiligo). The patient showed significant improvement, including reduction in lesion size and complete repigmentation, as evidenced by the VASI score reduction from 0.1 to 0.

The therapy was found to be safe, with no adverse effects observed during the treatment period. The combination of internal medication and external application provides a holistic approach by correcting dosh imbalance and promoting melanocyte stimulation.

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