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Case Study

THE ROLE OF *SHAMANA CHIKITSA* IN THE MANAGEMENT OF *SHEETAPITTA* (CHRONIC URTICARIA)

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ABSTRACT

Sheetapitta is a common dermatological disorder described in Ayurvedic literature. Due to continuous contact with cold breeze, *Kapha* and *Vata* gets vitiates in the body and with association of *Pitta* spreads inside and outside of the body affecting *Rasa* and *Raktha dhatus* resulting in erythematous wheals, itching, swelling and discomfort which is described as *Sheetapitta*. It closely resembles urticaria in contemporary medicine. Chronic urticaria significantly impairs quality of life due to persistent itching, recurrent skin lesions and associated angioedema. This is a case study of 23-year-old female patient diagnosed with *Sheetapitta*. The patient presented with recurrent reddish rashes all over the body, severe itching and bilateral upper eyelids swelling of one-year duration. The patient was managed with *Shamana chikitsa* for a duration 6 of months with T. Nirocil, *Brihat Haridra Khanda*, *Rohitakarishta*, T. Jaundex and T. *Laghu Sutashekhara Rasa*. Clinical assessment was done by using the Urticaria Activity Score (UAS), which showed progressive improvement from a score of 6 at before treatment to 0 after treatment. The occurrence of urticarial episodes, severity of itching and duration of symptoms reduced substantially. This case study highlights the effectiveness of *Shamana Chikitsa* in the management of urticaria and supports the classical principles of *Sheetapitta Chikitsa*.

INTRODUCTION

Skin disorders constitute a significant proportion of outpatient visits and often pose therapeutic challenges due to their recurrent nature. Chronic urticaria is one such disorder which is characterized by recurrent wheals, pruritus and with or without angioedema persisting for more than six weeks[1]. In Ayurveda, a condition closely resembling urticaria is described as *Sheetapitta. Madhavakara* has described *Sheetapitta* as an independent disease entity resulting from the vitiation of *Vata* and *Kapha doshas* in association with *Pitta*.

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Exposure to cold breeze, incompatible dietary habits, impaired digestion and accumulation of *Doshas* contribute to its pathogenesis. Classical symptoms of *Sheetapitta* include elevated reddish eruptions, severe itching, severe pricking pain, burning sensation, swelling and occasional systemic manifestations such as fever and vomiting[2]. The disease involves primarily *Rasa* and *Rakta dhatus* and manifests in the skin due to above *Dosha* imbalance and impaired metabolic activity. From a modern perspective, urticaria results from mast-cell degranulation and histamine release, leading to increased vascular permeability and wheal formation[3]. Although antihistamines provide symptomatic relief, recurrence is common and long-term management remains challenging. Ayurveda offers a holistic approach aimed at correcting the underlying *Dosha* imbalance and improving systemic health. This case study evaluates the role of *Shamana Chikitsa* in a patient suffering from *Sheetapitta* (chronic urticaria).

MATERIALS AND METHODS

Place of Study: Outpatient Department of Kayachikitsa, DR.B.R.K.R.Government Ayurvedic College & Hospital, Erragadda, Hyderabad, Telangana, India.

Study Type: Single case study

Case Presentation

A 23-year-old female patient presented to the *Kayachikitsa* outpatient department with complaints of recurrent reddish rashes all over the body associated with severe itching and swelling of both upper eyelids. The symptoms had persisted for approximately one year and had become increasingly severe over the preceding month. She had previously received conventional treatment, which provided only temporary relief. Patient had no history of surgeries, diabetes mellitus, hypertension, thyroid disorders, tuberculosis or bronchial asthma.

General examination revealed stable vital parameters. The Urticaria Activity Score (UAS) at presentation was 6, indicating severe disease activity.

Ashta Sthana Pareeksha

1. *Nadi: Pitta kapha*
2. *Mala: Prakrutha*
3. *Mutra: Prakrutha*
4. *Jihwa: Niramayuktha*
5. *Shabdha: Prakrutha*
6. *Sparsha: Anushnasheetha*
7. *Drik: Prakrutha*
8. *Akriti: Prakrutha*

Dasha Vidha Pareeksha

1. *Prakriti: Pitta Kaphaja*
2. *Vikriti: Dosha - Tridosha*
   Dushya – Rasa, Raktha
3. *Sara: Asthi*
4. *Samhanana: Madhyama*
5. *Pramana: Madhyama*
6. *Satmyam: Avara*
7. *Satwa: Madhyama*
8. *Ahara shakti: Madhyama*
9. *Vyayama shakti: Avara*
10. *Vayah: Yuva*

Investigations

- Hb – 10.4 gm%
- CRP – 0.93 mg/L
- ESR – 30mm/hr
- Esinophils – 4%
- CT Scan Orbits (21/5/2024): Mild preseptal soft tissue swelling seen involving left supraorbital region and upper eyelid.
- MRI Orbits (8/10/2024): Bilateral lacrimal gland appears bulky & edematous and suggestive of bilateral sialadenitis.
- USG of Abdomen & Pelvis (7/11/2024): Mild spleenomegaly.

Based on classical Ayurvedic signs and symptoms, the condition was diagnosed as *Sheetapitta*. Correlation with modern medicine established a diagnosis of chronic urticaria associated with angioedema.

Treatment Given

The patient was treated with the following Ayurvedic medications:

1. T. Nirocil -1 tablet BID
2. Syp. *Rohitakarishta* - 4tsp BID with equal water
3. *Brihat Haridra kanda* -1tsp BID with lukewarm water
4. T. Jaundex - 1 tablet BID
5. T. *Laghu suta sekhar ras* -1 tablet BID

OBSERVATION AND RESULTS

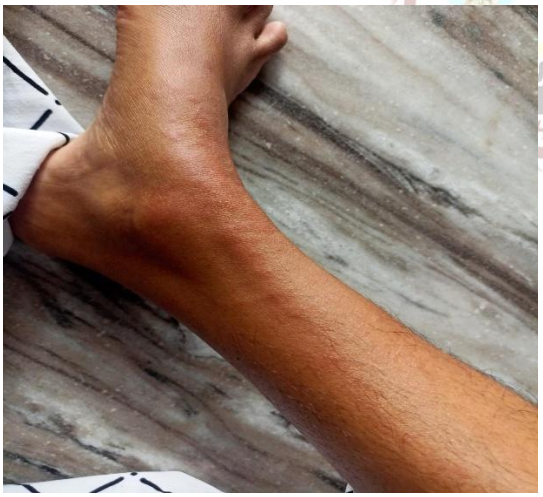
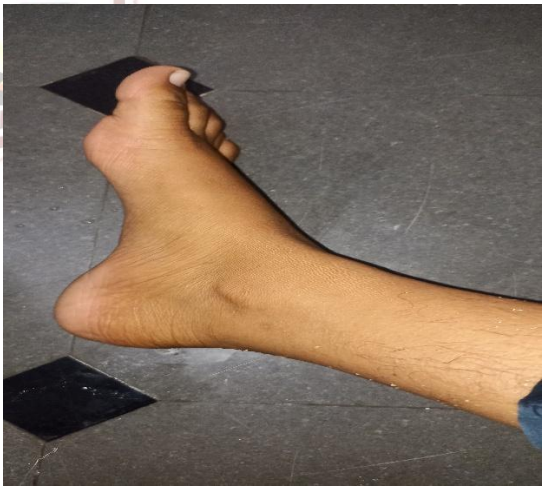
	Medications	**Rashes All Over the Body**	**Swelling of B/L Upper Eye Lids**	**Itching**	**UAS Score**
I consultation (12/12/2024)	T.Nirocil, *Brihat Haridra khand, Rohitakarishta*	>70 wheals & 8-10 episodes per month	Present for whole day	Present	6
I follow up (12/1/2025)	T. Nirocil, *Brihat Haridra khand,* T. Jaundex, T. *Laghu suta sekhar ras*	30-50 wheals & 5-6 episodes per month	Present for 12 -15 hrs	Present	5
II follow up (19/2/2025)	Above medications	<20 wheals& 2 episodes per month	Present for 6 hrs	Decreased	3
III follow up (20/3/2025)	Above medications	<10 wheals & once in a month.	Present for 3-4 hrs.	Mild	2

IV follow up (3/5/2025)	T. Nirocil, *Brihat Haridra khand*	Absent	Occasionally present for 2-3hrs	Absent	0

Pathya Ahara and lifestyle modifications were advised according to Ayurvedic principles. Clinical improvement was assessed through symptom evaluation and Urticaria Activity Score. At baseline, the patient experienced 8-10 episodes per month with more than 70 wheals, persistent upper eyelids swelling, severe itching and UAS score of 6. After one month of treatment, episodes reduced to 5-6 per month with 30 -50 wheal formation and UAS decreased to 5. At the second follow-up, episodes further reduced to two per month with less than 20 wheals and UAS score of 3. By the third follow-up, only one mild episode occurred within the month with minimal itching and UAS score of 2. At the final follow-up, rashes and itching were absent and the UAS score came to 0. The patient showed marked clinical improvement without any adverse effects.

Before Treatment **After Treatment**



DISCUSSION

Sheetapitta is a *Tridoshaja* disorder with predominance of *Vata* and *Pitta* affecting *Rasa* and *Rakta dhatus*. *Mandagni* and *Ama* formation play crucial roles in disease manifestation. The recurrent nature of urticaria indicates persistent *Dosha* imbalance and hypersensitivity responses.

T. Nirocil contains extract derived from whole plant of *Bhumyamalaki*[4] which helps in *Pitta Shamana, Daha nashana, Shotha hara, Rakta prasadana, Yakrut uttejana* and it also possess *Kandughna* and *Kushtaghna* properties.

Brihat Haridra Khanda[5], a classical formulation widely indicated in allergic disorders, possesses *Kapha-Pitta hara,* anti-inflammatory and antipruritic properties. *Haridra* and associated ingredients contribute to *Rakta Prasadana* and *Kandu hara* actions.

Rohitakarishta[6] supports correction of metabolic dysfunction and improves liver and spleen functions, thereby aiding in the elimination of accumulated toxins and *Doshas*. T. Jaundex helps to regulate hepatobiliary functions and improve systemic

metabolism. *Laghu Sutashekhara Rasa*[7] contributes to *Pitta shamana* and correction of underlying *Agni* disturbances.

The observed reduction in symptom frequency, itching severity, wheal count and UAS score indicates successful management of the disease through *Shamana Chikitsa*. The treatment appears to have acted at both symptomatic and etiological levels by correcting *Dosha* imbalance and improving metabolic functions.

CONCLUSION

This case study demonstrates that Ayurvedic management can provide significant clinical improvement in patients suffering from *Sheetapitta* (chronic urticaria). The combination of T. Nirocil, *Brihat Haridra Khanda, Rohitakarishta,* T. Jaundex and T. *Laghu Sutashekhara Rasa* effectively reduced disease severity, frequency of attacks, itching and associated upper eyelids swelling. The marked reduction in Urticaria Activity Score suggests that Ayurveda offers a safe and effective therapeutic approach for *Sheetapitta* (chronic urticaria). Further clinical studies with larger sample sizes are recommended to validate these findings.

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