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## AYURVEDIC MANAGEMENT OF VIPADIKA (PALMOPLANTAR PSORIASIS) - A CASE STUDY

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### ABSTRACT

The skin, body's biggest organ, is crucial to both physical and emotional wellness. *Kushtha* and *Kshudra Kushtha* are the terms used to describe skin disorders. One such disease that falls under the *Kshudra Kushtha* is *Vipadika*. Due to the clinical similarities between *Vipadika* and Palmoplantar psoriasis, they can be compared. The indications and symptoms of *Vipadika* have been presented in various ways by different *Acharyas*. *Panipadspatana*(Cracks over palms and soles), *Tivra Vedana*(severe Pain), *Manda Kandu*(Mild Itching), and *Sarag Pidika*( Red-colored Macule) are considered to be the symptoms of *Vipadika* by *Ashtang Hridaya*. Due to cosmetic concerns, this skin condition inhibits daily activities and depresses patients. It is an auto immune illness with a long latency period. It is estimated to account for 3–4% of all instances of psoriasis. The condition can be treated using a wide range of therapeutic options thanks to current research. They may have a variety of adverse effects, and recurrence after they have subsided is also rather common, which has opened up a lot of opportunities for alternative medical systems to treat *Vipadika*. She had a history of taking continuous medications from both contemporary medicine and homoeopathy for a period of one year. She was admitted to Parul Ayurveda Hospital following a clinical evaluation, where she received treatment with *Virechan*, oral drugs, and external treatments. She had provided medication for oral and external use for 15 days after discharge. The pain and fissures were completely relieved.

**Keywords: *Vipadika*, *Kshudrakushtha*, Palmo-planter Psoriasis, *Virechan***

## INTRODUCTION

Skin-related illnesses have an impact on people's physical, psychological, and social well-being. The palms and soles are primarily affected by the chronic skin condition known as palmo-plantar psoriasis. Palmoplantar psoriasis, which causes functional and social disability, ranges from 0.44 to 2.8% of the 3-4% instances of total psoriasis [1]. Only a few research from India have researched the disease's clinical spectrum in psoriasis patients [2, 3].

One of the varieties of *Kushudrakushtha* (a dermatological condition) is *Vipadika*. According to *Acharya Charak*, it is classified as *Kshudrakushtha* with involvement of *Vata Kaphadosha* [4] and is marked by *Pani-Padasphutan* (fissure in the palms and soles) and *Tivravedana* (severe pain) [5]. *Ashtanga Hridaya Kara* expanded on the symptoms of *Vipadika* by adding *Manda Kandū and Saraga Pidaka* (studded with red coloured breakouts) [6]. *Padadari* (cracks over sole) and *Vipadika* are the same, according to *Sushruta*. *Tridosha* (the fundamental constitution) is present in *Vipadika*, although *Vata* is mostly vitiated [7].

The same as what *Acharya Charaka* said, *Acharya Vagbhata* added the detail of red patches covering the palms and sole. *Vipadika* is similar to Pulmo Plantar

Psoriasis, a chronic autoimmune condition that causes red, itchy, scaly areas on the palms and soles as well as many painful fissures and bleeding.

Additionally, it is treatable by *Shamans* and *Shodhana*, both of whom can prevent the recurrence of disease [8]. In the study, a case of Palmo-Plantar Psoriasis is discussed. *Shodhan Chikitsa* and *Shaman Karma* were used in the Ayurvedic therapy. The patient's written informed consent was acquired in order to publish the current case report.

On May 25, 2022, a 62-year-old woman presented to the Panchkarma OPD of the Parul Ayurved Hospital in Vadodara, Gujarat, complaining of cracks on both the palms and soles of her feet, along with slight discomfort, itching, and severe burning sensations since 3 years. She also reported bleeding from the foot fissures since 3 months. Because of these complaints, she struggled to complete her everyday activities. She took allopathic medical care. Antihistamines, and corticosteroids, however they were unable to provide full relief. She then came for more ayurvedic therapy. She has no history of serious illnesses like diabetes mellitus, hypertension, or any other condition. The patient was diagnosed as a *Vipadika* case based on the clinical symptoms. **Table 1** depicts personal history.

Table 1: Personal history

Name	Xyz
Age	62 years
Sex	Female
Weight	64kg
Marital status	Married
Occupation	Housewife
Addiction	Chewing of areca nut

**Clinical findings**

The patient's overall condition was fair, and

Tables 2 and 3 displayed general signs and the *Ashtavidha Parikshan*, respectively.

Table 2: General examination

PR	76/MIN
BP	142/80 mm of hg
RR	19/min
Temp.	97.8F

**Ashtavidha parikshana**

Nadi - VataPitt  
 Mutra - Samyaka (5-6times per day)  
 Mala - satisfactory (once a day)  
 Jihva - Sama  
 Shabda - Spashta Sparsha -  
 Anushnashee Druk -  
 Prakrut  
 Akriti - Madhyam

**Dashvidha parikshana**

Prakriti - Vatapitta  
 Vikriti - Dosha - Vata, pitta  
 Dushya - Twaka, Rasa,  
 Rakta, Mansa  
 Satva - Madhyama  
 Sara - Rasasara  
 Samhanana - Madhyama  
 Pramana - Madhyama  
 Satmya - Katu, Amla,  
 Lavana  
 Aharashakti Abhyavarana shakti -  
 Madhyama

Jarana shakti - Madhyama

Vyayamshakti - Pravara

Vaya - Vrudha

**Local examination** : Appearance -  
 Rough, Dry, Hard, Scaling

Colour - Blackish lesionsTemp - Normal

**Special test** : Candle grease  
 test - +veAuspitz  
 sign - +ve

**Size** : Right foot  
 (Laterally) -  
 8\*3cmsLeft foot -  
 1\*2cms

Right palm (Medially) - 1\*2cms Left foot  
 (Medially) - 1\*0.05cms

**Primary lesion** : Atrophy,  
 Hyperpigmentation

**Secondary lesion** : Scales - loss  
 excess

Normal and Abnormal horney layer

**Nidana Panchaka-**

Nidana - Excessive intake of

areca nut, excess *Katu* intake, exposure to pesticides.

excessively burning sensations

*Purvrupa* - itching, Dryness of Palms and Soles

*Upashya* - Cracking and pain subsides on application of alovera gel

*Rupa* - cracks on both the palms and soles of her feet, itching, blackish discoloration and

*Anupashaya* - Itching increases when exposed to cold climate and night time, sweating, exposure to pesticides.

### *Nidana Vatakapra Prakopa*

↓  
*Twaka, Rasa, Rakta, Mansa* move through *Tiryakagata Srotas*

↓  
*Sanga and Vimargaman of Doshas Vyakta in Twaka of Panipada*

↓  
*Vipadika*

### *Samprapti Ghataka*

*Dosha - Vatakapra Prakop*

*Dushya - Twaka, Rasa, Rakta, Mansa Srotas -*

*Rasavaha, Raktavaha, Swedavaha Srotodushti -*

*Sanga, Vimargamana Adhishtana -*

*Amapakwashaya Vyaktasthana - Twaka*

*Rpgamarga - Bahya*

**Table 3: Clinical features: Before & after treatment**

Sr. No.	Clinical features	Before treatment	After treatment
1.	Scaling of skin	+++	No scales
2.	Fissure	+++	No Fissure
3.	Pain	+	No pain
4.	Burning Sensation	+++	No Burning Sensation

### **Before Treatment**

**Figure no.1**



**Figure no.2**



**Figure no.3**



## After snehpana

Figure no.1



Figure no.2



## After snehpana

Figure no.1



Figure no.2



Figure no.3



## Treatment given

Table 4: Deepana Pachana

Sr. No	Medicine	Dose	Duration	Result
1	<i>Shunti Jala</i>	30ml-3 times/day	For the first 3 days	<i>Nirama Lakshanas</i> observed.

Table 5: Snehapana

Procedure	Medicine	Dosage & Route	Duration	Result
<i>Snehapana</i>	<i>Sukumara Ghrita</i>	Lukewarm water in themorning on empty stomach.	For next days (4th to 10th day)	<i>Samyak nigdhaLakshanas</i> observed
	1st day	30 ml		
	2nd day	60 ml		
	3rd day	90 ml		
	4th day	130 ml		
	5th day	160 ml		
	6th day	190 ml		
	7th day	250 ml		
<i>Sarvanga abhyanga Bashpa sweda</i>	<i>Marichyaditaila</i>		8th 9th day	<i>Samyak Snigdha and svinna Lakshanas</i> observed

Table 6: Panchakarma procedure

Procedure	Medicine	Days	Result
<i>Virechana</i>	<i>Eranda Taila- 100ml with Triphala Kashaya 30 ml Manibhadra Guda- 40 gms</i>	10th day	<i>Virechana samyakyoga Lakshanas</i> observed <i>Vegas- 16</i>

### Paschat Karma

The patient was instructed to relax in a room after completing *Virechana Karma*, avoiding direct exposure to air and sound, and refraining from falling asleep. The vitals

were looked at. In conclusion, the patient was instructed to do *Samsarjan karma* for seven days. The patient may use *Peya*, *Vilepi*, and *Yavagu* as part of their nutrition plan in addition to changing their behavior.

Table 7: Follow up medication

Medicine	Dose	Duration
<i>Mahatikta Ghrita</i>	5 ml. twice a day at 6.00 am and 6.00 pm with luke warm Water	15 days
<i>Laghu Sootashekara Vati</i>	1tid B/F with luke warm Water	15 days
<i>Guggulu Tikta kashaya</i>	3tsf tid B/F with luke warm Water	15 days
<i>Mahatiktaka lepa</i>	External application	15 days

### DISCUSSION

*Vipadika* is one of *Kshudra Kushta's* incarnations. It is comparable to Planto-palmar psoriasis, which accounts for 3-4% of all instances of psoriasis, based on clinical symptoms. In the current case study [9], the patient's care was administered in accordance with the treatment approaches described by *Acharya Charaka* for *Kushta Roga*. The theory describes how to administer the right *Shodhana* depending on the dominant *Dosha*. here, the *Virechana karma* was planned as *Pitta Dosha* was aggravated and *Daha* was more. *Virechana Karma* was made in accordance with the patient's *Koshta*, or the nature of their *Agni*, or *Madhyama Koshta*, the predominating *Dosha*, and the state of their disease. *Deepana* and *Pachana* were first given and then *Sneha Pana* with *Sukumara Ghrita* [10] for seven days.

This *Ghrita*, which is composed of the *Tikta Rasa Pradana* and *Sheeta Veerya Dravyas*, exhibits both *Sopaghna* (anti-

inflammatory) and *Mutrala*-like properties.

This helps the body detoxify hazardous chemicals. It is *Vata Pitta Shamaka Ghrita*. After *Sneha Pana*, *Abhyanga* and *Nadi Sweda* were practised for 2 day, and then *Virechan* as *Shodana* treatment was carried out. It assisted in *Alpa Kapha* and *Utklishta pitta Dosha* removal from the body. In this case study, *Shodana Chikista* provided the patient with great relief from *Vipadika* symptoms.

The benefits of *Mahatikta Ghrita* [11, 12] in the treatment of all *Kushtha* are clearly stated. Additionally, it diminished the *Vata Dosha*, the primary reason of pain and cracks [13]. *Ashtanga Hridaya* indicates that *Mridu Sweda* can be administered in *kushta* [14]. *Laghu Sutashekhara Rasa* is a herbal-mineral composition made according to the *Rasatarangini Parishista's* guidelines. It contains the herbs *Shuddha Gairika* ( $\text{Fe}_2\text{O}_3$ ), *Shunthi* (*Zingiber officinale* Roxb.), and *Nagawalli Swarasa* (fresh juice of *Piper betel* Linn.) [15, 16]. Due to the

presence of *Katu*, *Tikta*, *Kashay*, *Madhur rasa*, *Ushna veerya*, and *Katu Vipak*, *Guggul* (Commiphora mukul) has good properties for acting on *Vikrut Kleda* (abnormal bodily wastes), *Meda* (fat), and *Mamsa Dhatu* [17].

All of the ingredients of *Guggul Ghrita Kashaya* have *Tikta Rasa*, *Laghu*, and *Ruksh Guna*, which gives it its anti-itching effects. It also has *Kleda* and *Vikrut Meda Upashoshan* and *Vranashodhak* [18]. It mostly affects *Kleda*, *Meda*, *Lasika*, *Rakta* (blood), *Pitta*, *Swed*, and *Shleshma* [19]. The chemical constituents of *Nimb* (*Azadirachta indica*) contains *Nimbidin*, which has strong anti-inflammatory and anti-ulcer effects that depend on the dosage [20]. *Guduchi* (*Tinospora cordifolia*), which contains *Berberin* and *Tinosporin*, serves primarily as an immune-potentiator and an antioxidant, which helps cell layers during disease pathology [21]. *Vasa*, also known as *Adhatoda vasica*, is an anti-histaminic, antioxidant, and anti-inflammatory substance [22]. *Patol* (*Trichosanthes dioica*) have antioxidant properties [23].

## CONCLUSION

*Vipadika's* primary cause is *Vata*. *Vata's Rooksha Guna* produces extreme dryness, which eventually causes cracks to form. *Sukumar Ghrita* is administered during *Shodhana*, resulting in softened skin and diminished cracks on the patient.

The line of management used served to

preserve the equilibrium of all the *Doshas* as *Kushta* is *Tridoshaja Vyadhi*. It quickly provided the patient with good symptomatic relief. From the above case study, it can be concluded that Planto-planter psoriasis could well be successfully treated using an Ayurvedic approach.

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