

## Ayurvedic Management of Kitibha Kushta (Psoriasis) - A Case Study

Vivekaradhya M<sup>1\*</sup>, Prakash Paltye<sup>2</sup>, Madhu Ranjan<sup>1</sup>

<sup>1</sup> MD (Ayu) Scholar, <sup>2</sup> Associate Professor,  
Department of Panchakarma, Ashwini Ayurvedic Medical College, Hospital and Research  
Centre, Ring road, Maraluru, Tumakuru, Karnataka, India Pin: 572-105

### Abstract:

All the skin diseases in *Ayurveda* have been discussed under the broad heading of “*Kustha*”. Psoriasis is a proliferative autoimmune skin disease which is affecting 2% of worldwide population. In India, overall incidence of Psoriasis among total patients attending skin OPD is 0.28 to 0.44%. This disease characterised by scaling, thickened-rough skin lesions, itching, in severe cases covers entire body. Modern medical science treats psoriasis with Psoralen and Ultraviolet therapy (PUVA). But the disease has high recurrence rate and the modern medications have serious side effects like liver failure, renal failure, and bone marrow depletion etc. Here, *Ayurveda* treatment is under taken to provide safe and effective remedy for psoriasis. Present case report of 56 year old male patient having severe psoriasis (*Kitibha Kusta*) showed encouraging result after *Virechana Karma* and *Shamana Chikitsa*.

**Keywords:** Kitibha, Psoriasis, Virechana Karma, Shamana Aushadhi

---

Received: 14.07.2019

Revised: 20.08.2019

Accepted: 20.09.2019

---



**\*CORRESPONDING AUTHOR:**

**Dr. Vivekaradhya M**

MD (Ayu) Scholar

Department of Panchakarma, Ashwini Ayurvedic

Medical College, Hospital and Research Centre,

Maraluru, Tumakuru, Karnataka, India **Email:**

[vivekaradhya32@gmail.com](mailto:vivekaradhya32@gmail.com)

**Introduction:**

*Ayurveda* has given some codes and conducts of life which everyone should follow to be healthy physically and mentally, but nowadays life style is changed. Now we are in 21st century, people have changed their life style as per so called western life style. These all factors play important role in *Raktadushti* and *Dosha Vrudhhi*, Which leads to skin diseases especially *Kustha*. Among all skin diseases, 'Psoriasis' is a very distressing disease both for the patients and physicians because of its pathogenic mechanism. All the skin diseases in *Ayurveda* have been discussed under the broad heading of "*Kustha*". Which are further divided into *Mahakustha* and *Ksudra Kustha*. *Kitibha kustha* is considered as one of the *Kshudra Kustha*<sup>[1]</sup>.

Ayurvedic classics have considered each type of *Kustha* to be a *Tridosaja* manifestation. Their Doshik identity can be established on the basis of dominance of *Dosha* in the *Samprapti*. Thus *Kitibhakustha* is *Vata-Kaphaja*<sup>[2]</sup> phenomenon. This disease characterised by brownish coloured scaling, thickened-rough skin lesions, in severe cases covers entire body. As per *Ayurveda*, these symptoms are closely similar to symptoms of *Kitibhakushtha*, as its symptoms are *Shyavam*, *Kinakaraspasha* and *Parusha*<sup>[3]</sup> closely resembles with symptoms of Psoriasis.

Psoriasis is a chronic skin disease characterized by dry red patches covered with scales; occurs especially on the scalp, ears, genitalia and the skin over bony prominences. Modern medical science

treats psoriasis with PUVA and corticosteroids<sup>[4]</sup>. But the disease recurrence and gives serious side effect like liver, kidney failure bone in marrow depletion. Here, *Ayurveda* plays an important role; present study is under taken to provide safe and effective remedy for psoriasis.

*Shodhana*, *Shamana* and *Nidana Parivarajana* are main line of treatment for any disease. So in this present study, for the purpose of *Shodhana Chikitsa Virechana Karma*<sup>[5]</sup> was selected. *Snehapana* was done with *Panchatiktaka Guggulu Ghrita*<sup>[6]</sup>. As it contain *Bhallataka* which is mentioned under *Kusthaghna Mahakashaya*. Followed by *Gandhaka Rasayana* 1 tablet twice a day, *Swayambu Guggulu* 1tablet twice a day, *Arogyavardhini Rasa* 2 tablets at night along with *Sukoshnajala* as *Anupana* and *Khadiraristha* 20ml twice a day with 20ml of warm water, along external application of *Yastimadhu Taila* once in the morning 30mins before bath and *Atrisor* ointment after bath and once in the evening have been selected as *Shamanoushadis*. *Nidana Parivarajana* and *Pathyapathya* have been advised to the patient.

**Case History:**

A 56 year old male patient came to OPD with chief complaints of – Whitish-Brown inflamed skin lesions over the chest and back region- 1 year. Severe itching over chest and back area- since 1 year. Whitish scaly patches over scalp associated with itching, mainly over frontal and occipital region of scalp- since 5 month. (Fig-1)

**Past history of Illness:** No history of Diabetes, Hypertension or any metabolic disorders.

**History of present history:** The patient was apparently normal 1 year before, with gradual onset of above complaints, for which he started taking allopathic medicines from General Practitioners and Dermatologist and he got symptomatic relief for some days. His symptoms worsened as he stopped taking medication. So he came to *Panchakarma* OPD of Ashwini Ayurvedic Hospital for taking Ayurveda treatment.

**Personal History:**

**Prakriti:** Vata-Kaphaja

**Ahara:** Mixed

**Vyavasaya:** Tailor

**Vyasana:** Tea-coffee 4 times a day

**Nidra:** Sound

**Vihara:** *Diwaswapna* for 1 hr after taking meals. *Ratri Jagarana*

**Mala:** Once/day

**Mutra:** 4-5 times/ day

**Examination (Asta-Sthana Pareeksha):**

**Nadi:** 74 bpm

**Mala:** once/day, *Saama*

**Mutra:** 4-5 times/day

**Jihwa:** Lipta

**Shabda:** Prakruta

**Sparsha:** Anushna-Sheeta

**Drik:** Prakruta

**Akriti:** Sthula

**Methodology/Treatment given:**

**Deepana - Pachana:**

Agnitundi Vati 500 mg three times a day with warm water after meals for 3 days  
ChitrakadiVati 500 mg three times a day with warm water before meals for 3 days.

**Shodhana Chikitsa:**

Patient was given *Snehapana* with *Panchatikta Guggulu Ghrita*, morning at 6 AM for 4 days with increasing quantity along with *Sukoshna Jala* as *Anupana* i.e. 1- 4<sup>th</sup> day 50ml, 100ml 150 ml and 200 ml respectively.

**Poorvakarma:** After *Samyaka Snehapana Lakshanas*<sup>[7]</sup> like *Mala Snigdhatta*, *Twaka Snigdhatta*, *Snehadwasha* was seen on 4<sup>th</sup>day. *Sarvanga Abhyanga* with *Manjisthadi Taila* and *Yashtimadhu Taila* followed by *Nimba-Karanja Patra Pariseka* for 4 days during *Vishramakala*. Night before *Virechana Karma* patient was advised to take *Laghu-Snigdha-Ushna Ahara*. Written consent was taken from patient before beginning the treatment.

**Pradhana Karma:** All the instructions regarding *Virechana Karma* were explained to the patient. After examining the blood pressure, pulse, respiratory rate, and abdominal examination, patient was found fit for procedure. At 7 AM patient was given *Sarvanga Abhyanga* and *Pariseka Sweda*. Then patient was given *Nimbamritadi Eranda Taila* 100 ml Along with 200ml of *Ksheera* as *Virechanayoga* at 8 AM. Patient was advised not to do *Vegadharana* and stay in room where there is no direct entry of air, and not to touch cold water. Patient was instructed to take sip of *Ushan Jala* frequently and wait for *Vega*. Patient was advised not to strain during defecation. 1<sup>st</sup> *Vega* was observed after 1 hour of intake of *Ausadha*. Total 18 *Vegas* were observed.

**Paschyat karma:** Patient was asked to take rest in IPD, given instruction for not to sleep in daytime. Patient was asked to

do *Pani-Pada-Mukha Prakshalana*. Later *Samsarjana Karma* was given which includes *Peya, Vilepi, Yusha, Krushara* for 5 days as patient got *Madhyama Shuddhi* (18 Vegas). Patient was asked to follow up after 5 days of *Samsarjana Karma* is done. Patient showed relief after *Virechana*. Patient was having feeling of lightness of body, skin lesions and itching reduced.

**Internal Medications:** After 5 days of *Samsarjana Karma, Gandhaka Rasayana* 1 tablet twice a day, *Swayambu Guggulu* 1 tablet twice a day, *Arogyavardhini Rasa* 2 tablets at night along with *Sukoshnajala* as *Anupana* and *Khadiraristha* 20ml twice a day with 20ml of warm water, along external application of *Yastimadhu Taila* once in the morning 30mins before bath and *Atrisor* ointment after bath and once in the evening as *Shamanaushadi* for 1 month.

### Assessment of Clinical Features Based on Gradation System

#### 1. Shyavam:

Normal Skin Tone- 0  
Mild Brownish Discoloration- 1  
Moderate Brownish discoloration - 2  
Severe Brownish Discoloration - 3

#### 2. Kinakara Sparsha:

Normal Skin texture- 0  
Mild rough lesions on touch- 1  
Moderate rough lesions on touch- 2  
Severe rough lesions on touch with scaling- 3

#### 3. Parushatwa:

Normal Skin- 0  
Mild Hardness of lesions - 1  
Moderate Hardness of lesions - 2  
Severe Hardness of lesions with scaling- 3

#### 4. Kandu:

No itching- 0  
Mild / occasional localized itching which is tolerable- 1  
Moderate generalised itching - 2  
Very severe itching disturbing sleep and other activity- 3

### Result and Discussion:

After starting of treatment symptoms were decreased in 1 month. In the period of 3 months, the patient showed significant improvement with no signs of recurrence (Table-1).

**Table-1 Assessment of results:**

Symptoms	Before Treatment	After Treatment
Shyava	3	1
Kinakharasparsha	3	0
Parushatwa	3	0
Kandu	3	0

### Clinical images: Before and After Treatment

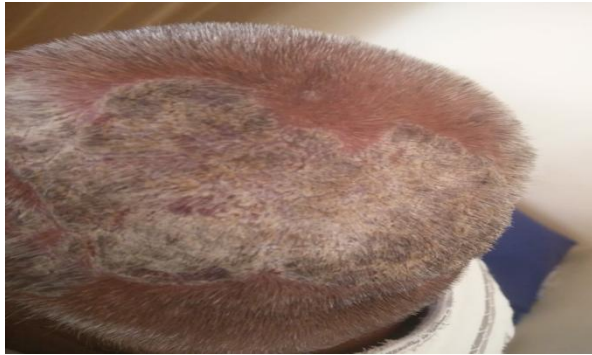


Fig-1: Before Treatment Psoriasis at scalp



Fig-2: After Treatment status

Patient had irregular dietary habits of excessive use of curds, pickles, non-vegetarian foods and tea. He also had a habit of doing divaswapna every day after his lunch. This might have been the causative factor for developing *Kitibha Kusta*. The main complaints of the patient were whitish brown scaly lesions all over the body including scalp associated with itching and powdery discharge. After examining the patient depending on the *Nidana and Lakshanas* the treatment was planned i.e. *Virechana karma* followed by *Shamanaushadis* along with *Nidana Parivarjana*.

Here initially *Amapaachana* was achieved with the administration of *Deepana-Pachana dravyas*, like *Agnitundi vati* and *Chitrakadi Vati*. Then *Snehapana* with *Panchatiktaka Guggulu Gritha* followed by *Sarvanga Abhyana* and *Parisheka Sweda* was administered to achieve *Dosha Shithilakarana* and bringing the *doshas* from *Shaaka* to *Kosta*. *Virechana* was administered to expel the *Dooshitha dosha* from the *Kosta*.

After *Shodana* followed by *Samsarjana karma*, the patient was administered with

*Gandhakara Rasayana*, *Swayambhu Guggulu*, *Arogyavardhini Rasa*, *Khadirarista* and *Yastimadhu taila*, *Atrisor Ointment* for a period of 1 month, which showed significant improvement of the clinical symptoms (Fig-2).

### Conclusion:

This case study is a documented evidence for the effective management of *Kitibha Kusta* through *Virechana* and *Shamanaushadis*. *Kitibhakustha* is one among *KshudraKustha* which is relapsing in nature. Hence according to the classics repeated administration of *Shodana* along with *Shamanaushadis* and *Nidana Parivarjana* can help in managing the disease. This protocol should be evaluated in more number of patients for its scientific validation.

### References:

1. Tripathi B. Charaka Samhita Chikitsasthana 7/13. Chaukhamba Surabharathi Prakashana, Varanasi: 2009. Pp 302.
2. Tripathi B. Charaka Samhita Chikitsasthana 7/28-29. Chaukhamba

**INTERNATIONAL JOURNAL OF AYUSH CASE REPORTS (IJA CARE)**

- Surabharathi Prakashana, Varanasi: 2009. Pp 306.
3. Tripathi B. Charaka Samhita Chikitsasthana 7/22. Chaukhamba Surabharathi Prakashana, Varanasi: 2009. Pp 305.
  4. <http://www.webmd.com/skin-problems-and-treatments/psoriasis/understanding-psoriasis-treatment> [Last Accessed on 2019 Aug 01]
  5. Tripathi B. Charaka Samhita Chikitsasthana 7/41. Chaukhamba Surabharathi Prakashana, Varanasi: 2009. Pp 308.
  6. Mishra SN, Bhaishajya RatnavaliCh 54/228-231. Chaukhamba Surabharati Prakashana, Varanasi: 2011. Pp 882.
  7. Tripathi B, Astanga Hridayam Sutrasthana 16/30. Chaukhamba Sanskrit Prathisthan, Delhi: 1999. Pp 209.

**Guarantor:** Corresponding author is guarantor of this article and its contents.

**Conflict of interest:** Author declares that there is no conflict of interest.

**Source of support:** None

**How to cite this article:**

Vivekaradhya M, Paltye P, Ranjan M. Ayurvedic Management of Kitibha Kushta (Psoriasis) - A Case Study Int. J. AYUSH CaRe. 2019; 3(3):212-217.