



**AYURVEDIC MANAGEMENT OF *KITIBHA KUSHTHA* W.S.R. TO
PSORIASIS – A CASE STUDY**

VAGHAMSHI MJ¹, PATIL DB^{2*} AND TOSHIKHANE SH³

- 1:** PG scholar, Department of Panchakarma, Parul Institute of Ayurved, Parul University, Vadodara, Gujarat, 391760
- 2:** Associate Professor, Department of Panchakarma, Parul Institute of Ayurved & Research, Parul University, Vadodara, Gujarat, 391760
- 3:** Professor & H.O.D., Department of Panchakarma, Parul Institute of Ayurved, Parul University, Vadodara, Gujarat, 391760

***Corresponding Author: Dr. Dinesh B. Patil: E Mail: dr.dineshpatil3@gmail.com**

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ABSTRACT

As per Ayurveda classics, all skin ailments are generally classified as '*Kushtha*'. *Mahakushtha* and *Kshudrakushtha* are the two main types of *kushtha*. *Kitibha Kushtha* is one of the *Kshudrakushtha*. It is *Raktapradoshaja vyadhi* with *kapha* and *vata* dominance. Due to the similarity of symptoms, *Kitibha Kushtha* can be linked to Psoriasis. In this study, we attempted to demonstrate the importance of *Basti chikitsa* as a *Shodhana* measure in the treatment of *Kitibha Kushtha*. A 48-year-old male patient presented with classical *Kitibha Kushtha* features such as *Kin khara Sparsha* (Rough on touch), *Shyavavarna* (Brownish-black discolouration), *Parushata* (Dryness of skin), *Kandu* (Itching), and Scaling from skin lesions for 7-8 years and was referred to *Panchakarma* OPD at Parul Ayurved Hospital. After proper assessment, the patient was treated according to a protocol of *Yogabasti* with *Darvyadi Niruhabasti*, *Madanadi tail Anuvasanabasti*, and *Shamana chikitsa*. The patient showed significant results through *Panchakarma* treatment followed by oral medications.

Keywords: *Kitibha Kushtha*, Psoriasis, *Darvyadi Niruhabasti*, *Shamana chikitsa*, *Anuvasanabasti*

INTRODUCTION:

The skin is the integumentary system's important organ, and the *Gyanendriya* receives touch stimuli. Its functions include body protection against physical, chemical, mechanical, and biological damage, thermoregulation, and so forth. Any skin deformity or disease state causes the patient physiological and psychological distress [1]. In Ayurvedic classics by various *Acharyas*, all skin problems are explained under the one term *Kushtha*, which is included in *Ashta Mahagada* and further divided into *Mahakushtha* and *Kshudrakushtha*. According to the Dosha involvement and other clinical features, 18 types of *Kushtha* are mentioned. Among them, *Kitibha kushtha* is one of the *Kshudrakushtha*. It is of *Vata – Kaphaja* in nature. *Kitibha kushtha* can be compared with psoriasis due to its resemblance with it. *Lakshanas* are *Shyavavarna* (Blackish/ brownish discolouration of the skin), *Kin Khara Sparsha* (rough on touch just like the scar of the wound), *Parusha* (hard and dry), associated with *Kandu* (Itching) and other complaints [2].

Psoriasis causes erythematous, elevated skin lesions that are covered with silvery-white scales. Psoriasis is a prevalent dermatological illness that affects 2% of the world's population. However, in the Asian population, the prevalence ranges from 0.4% to 0.7% [3]. Psoriasis prevalence in

India ranges from 0.44% to 2.8%. Males are twice as likely as females (2.03:1), and the majority of patients are in their third or fourth decade at the time of onset [4].

Climate, Infections, hormonal changes, Immune response and other factors can cause it to run in families. Psychological stress is a key triggering element in the disease's worsening [5]. PUVA and corticosteroids are used to treat psoriasis in modern medicine. However, this therapy may have major adverse effects such as liver and renal failure, bone marrow depletion, and so on by long-term use [6]. The management of psoriasis is a challenging task for every system of medicine, but through its three primary principles of treatment, *Shodhana*, *Shamana*, and *Nidana Parivarjana*, the unique Ayurvedic techniques provide relief to patients with long-term outcomes and a better life.

All *Acharyas* recommend '*Shodhana*' in the management of *Kushtha* due to *Bahudoshavastha*. Because all *Kushthas* involve *Tridosha* as well as *Tvak*, *Rakta*, *Mamsa*, and *Lasika*; because *Kitibha kushtha* has the same *Sapta Dushya & Vata - Kaphaja* in nature, *Shodhana* is mandatory. *Vamana*, *Virechana*, *Basti*, *Raktamokshana* and *Nasya* are all *Shodhana* measures. *Acharya Charaka* specifically indicated *Basti* treatment in the management of all sorts of *Kushtha* where we found *Vata*

dosha pradhanya; *Anuvasanabasti* and *Niruhabasti* are mentioned with specific medications in *Chikitsasthana*, [7] and *Panchatikta Panchaprasrutik basti* is described as *Kushthanut* in *Siddhithana* [8]. *Shamana* medications can be used after the appropriate *Shodhana* therapy. Hence, a case of a 48-year-old male patient treated with *Basti karma* as *Shodhana* and other *Shamana chikitsa* is presented.

CASE STUDY:

A 48-year-old male patient presented to Parul Ayurved Hospital's OPD with complaints of severe itching, scaling, brownish discolouration, and dryness with rough skin lesions on both lower limbs that had been present for 7 to 8 years; some associated complaints are of occasional Lower back pain. The patient was identified as a *Kitibha Kushtha* case following a comprehensive history. He works as a barber for 6-7 hours a day, generally standing. He has taken allopathic medications and homoeopathic medications for the same problems and visited our hospital for *Ritushodhana* prior (Seasonal detoxification procedures); found symptomatic relief after treatment but the symptoms got aggravated again. There was no history of lifestyle disorders like diabetes or high blood pressure and no family history of any skin disorders. Other systemic involvement was also not found.

▪ On examination:

Pulse rate: 78/min

BP: 120/70 mm of Hg

RR: 18/min

HR: 74/min

Kostha: Krura

Nidra: Disturbed (sometimes)

Kshudha: Samyak

Agni: Madhyama

▪ **Ashtavidha Pariksha:**

Mala: Vibandhita

Mutra: Samyak pravritti

Druk: Prakrita

Jihva: Ishat lipta

Sparsha: Prakrita

Akruti: Prakrita

Nadi: Pittanubandhi Vata

Shabda: Prakrita

▪ **Skin examination:**

Site – B/L lower limb below the knee

Distribution – Asymmetrical;
Itching, Scaling, Brownish
Discoloration

Surface – Dry and rough

Margin – Irregular; well
demarcated

▪ **Samprapti Ghatak:**

Dosha – Vata Kapha pradhana
Tridoshaja

Dushya – Rasa, Rakta, Mamsa,
Lasika

Srotas – Rasavaha, Raktavaha,
Svedavaha Srotas

Srotodushti Prakara – Sanga

Ama – Sama *Vyaktasthana – Tvacha (Ubhaya Pada); below the knee*
Agni – Jatharagni, Dhatwagni *Roga Svabhava – Chirkari*
Rogamarga – Bahya *Sadhyasadhyata– Krichchrasadhya*
Udbhava Sthana – Amashaya,
Pakvashaya **OBSERVATION & RESULTS:**

Table 1: Chikitsa

Duration	Shamana	Shodhana
5 days	<i>Aampachak vati 2-0-2 A/F</i>	-
8 days	<i>Laghumanjsthadi Kashaya: 40 ml BD B/F</i>	<i>Yogabasti karma with Daryadi Niruhabasti & Madanadi tail Anuvasanabasti</i>
15 days (After Pariharkala – 15 days)	<i>Aarogyavardhini vati: 3-0-3 A/F</i> <i>Panchatikta ghrit guggulu: 2-0-2 A/F</i> <i>Mahamanjishthadi Kashaya: 50ml BD B/F</i> <i>Gandhak Druti: 6 drops with Tambula Patra</i> <i>Gandhakarpura malahara for local application</i> <i>Trivrutta churna + Jatamansi churna: 1 TSF BD B/F</i>	-

Table 2: Basti Schedule

Yogabasti krma							
Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8
AB	NB	AB	NB	AB	NB	AB	AB

Anuvasan Basti – Madanadi taila – 70 ml (Madanphala, Yashtimadhu, Nimbavak, Kutajavak, Patolamoola, Til taila)		
Niruha Basti		
No.	Dravya	Quantity
1.	<i>Makshika</i>	50 ml
2.	<i>Saindhava</i>	05 gm
3.	<i>Sneha (Go Ghrita)</i>	70 ml
4.	<i>Kalka (Indrayava, Musta)</i>	10 gm
5.	<i>Kwatha (Darvi, Bruhati, Nimba, Madanphala, Patola, Aragvadh)</i>	400 ml
	Total	540 ml

Table 3: Assessment grade-wise

Grade	Shyavata	Kin Khara Sparsha	Parushata	Kandu	Scaling
0	Normal skin	Normal skin	Normal skin	No itching	Not present
1	Mild brownish	Mild rough	Mild hard	Occasional itching	One/two lesions
2	Moderate brownish	Moderate rough	Moderate hard	Generalised itching	Two or more lesions
3	Severe brownish	Severe rough, swelling	Severe hard	Severe itching	Lesions on whole body

Table 4, 5: OBSERVATION & RESULTS

Complaints	Before Treatment	After Treatment	After Follow up
<i>Shyavavarna</i>	1	2	1
<i>Kinkhara Sparsha</i>	2	1	0
<i>Parusha</i>	1	1	0
<i>Kandu</i>	2	1	0
<i>Scaling</i>	1	2	0

Parameters	Before Treatment	After Treatment	After Follow up
<i>Auspitz sign</i>	2	1	0
<i>Candle grease test</i>	2	1	0
<i>PASI Score</i>	4.8	4.8	2.4

Pictures – 1 to 4

**DISCUSSION:**

Due to haphazard routines, improper dietary habits and mental stress, there is an increase in the development of metabolic disorders like hypertension, renal disorders, diabetes mellitus, liver disorders and skin disorders. Among them, skin diseases can adversely affect almost every aspect of a person's life because when it comes to skin-related conditions, it is difficult to narrate, consult, and be treated correctly.

In Ayurveda, *Panchakarma* plays an important role by eliminating toxins, restoring metabolic activities, strengthening tissue function and preventing disease recurrence.

As we know the *Shodhana* measures including *Panchakarma* - *Vamana*, *Virechana*, *Nasya* and *Raktamokshana* in the treatment of *Kushtha* are generally practised as per standard protocols; *Basti karma* is also mentioned for specific conditions and can be practised though

Kushtha is mentioned as a contraindication for *Anuvasana* and *Niruhabasti* [9].

Before any *shodhana* procedures or *shaman* medications, *amapachana* is mandatory for better results. *Amapachana vati* is given for 5 days to correct the status of *Agni* and *Ama* at *koshtha* level.

Basti karma: *Basti* is stated as *Ardha chikitsa* as its capable of doing many actions with different drugs and combinations used in the formulations of *basti*. The condition involves *Vata-kapha pradhan tridosha* and *amashaya* with *pakvashaya* causing the disease, having the symptoms (*Rukshta*, *Kharta*, *Shyavavarna*) of increased *Vata*, associated with specific *Vataja Nidana* and chronic constipation like symptoms; *basti* is planned.

Darvyadi Niruhabasti: The majority of the herbs mentioned in *Darvyadi NiruhaBasti* are discussed in *Charaka's Kushthaghna* and *Kandughna Dasemani* as well as *Sushruta's Aragvadhadi Gana*, both of which include *Kushthahara* characteristics.

As a result, these medications can reduce erythema and *Kandu* (itching) in psoriasis. *Kitibha kushtha* is a condition characterised by a predominance of the *Vata-Kapha* dosha, the herbs mentioned in *Darvyadi Niruhabasti* like *Bruhati*, *Patola*, *Madanphala*, and *Aragvadha* contain *Vata-kaphahara* characteristics. The majority of the *Dravyas* in *Darvyadi NiruhaBasti* have *Tikta Rasa*, the medications will work as *Amapachaka* and alleviate the *Sanga* at *Srotas* level [10].

Madanadi taila Anuvasanabasti: Yashtimadhu, possesses *Varnya* properties that may have lessened the *Shyava Varna*, *Snigdha Guna* reduces excessive keratinization and scale peeling on psoriatic areas while reducing *Vata* [10].

Mode of action of *Basti*: Due to the unique activity of *Basti*, *Doshas* are expelled as a result of the *Vilayana* of *Doshas* that is produced by the *Purvakarma* of *Abhyanga* and *Swedana* and brings it back into *Pakvasaya*. Due to their lipid-soluble nature by mixing with *Ghrita*, *Dravyas* administered through *Niruhabasti* are easily absorbed into the rectum. Due to the rectum's abundant blood and lymphatic supply, a significant amount of *Niruhabasti dravya* can pass through the rectal mucosa and be transported into the portal circulation by the superior haemorrhoidal vein. The *AnuvasanaBasti* has a smaller quantity and might not be able to cross the upper rectum.

It might have entered the systemic circulation immediately through the lower rectum's middle and inferior haemorrhoidal veins. *Saindhava lavana* and honey both include sodium chloride and other ions, which aid in producing an action potential. Honey also contains sugar and enzymes. In electrolyte exchange, salt is helpful. Drug absorption into the bloodstream may be aided by the pressure of plasma proteins, which is greater than the hydrostatic pressure of capillary blood pressure. Higher volumes cause the pressure to increase, which is related to the frequency of the urge to defecate. The medication may still enter systemic circulation in the interim. *Basti* is therefore known to have systemic effects. Recent research has revealed that the pathophysiology of psoriasis may be influenced by increased ROS (Reaction Oxygen Species) generation and decreased anti-oxidant system activity. Therefore, medications with antioxidant capabilities play a big part in treating psoriasis [11].

The majority of the medications used in *Darvyadi Niruhabasti* have been shown to have immuno-modulatory and immuno-stimulatory effects in addition to anti-oxidant and anti-inflammatory qualities. Along with *Madanaphala* (Immuno-modulatory), and *Aragvadha* (Anti-oxidant), *Nimba* possesses anti-oxidant and immuno-modulatory properties, which may have prevented the skin cells from becoming

even more keratinized and reduced the immune-mediated inflammatory response in psoriasis. It's possible that *Kutaja* and *Yastimadhu's* anti-inflammatory effects had a big impact on lessening erythema. As a result, the delivery of all the aforementioned medications in *Basti* form may have caused them to enter the systemic and hepatic circulation promptly. The overall effect of the drugs when given in *Basti* form has demonstrated a combined synergetic effect in alleviating psoriasis effectively [11].

Laghumanjisthadi Kashaya: The correction of pathogenesis by *Kledasoshana*, *Amapachana*, *Agnideepana*, *Raktaprasadana*, *Mrudu virechana* and *Indriya prasadana* as it contains *Tikta* and *Kashaya rasatmak dravyas* mostly and also shows keratolytic, immunomodulatory and anti-inflammatory, mild purgative actions [12].

Arogyavardhini Vati: It is a Herbo mineral formulation. It possesses *Kushthaghna*, *Durmedonashaka*, *Raktaprasadana*, *Kledahara*, *Dhatu Gata Amapachana*, as well as *Dipana-Pachana* properties and acts on *Tridosha*; all of which are extremely beneficial for *Samprapti Vighatan* of *Kushtha* [13].

Panchatiktaghruta Guggulu: This is a highly effective remedy that *Kushtha Adhikar* prefers and is suggested for *Visham* and *Atiprabala Vata*. The contents of *Panchatikta* include *Vasa*, *Patola*, *Amruta*,

Nimba and *Kantakari*. In *Kitibha Kushtha*, both *Kapha* and *Vata* are present, but *Vata* is the one who disperses all of these *Doshas*. Both the *Vata* and the *Kapha* are affected by *Tikta Rasa. Guggulu* by its *yogavahi* properties causes *Kandughna*, *Vranashodhaka* and *Kledsoshana* as well as *Vikrut Meda upshoshana* effects [14].

Mahamanjishtadi kashayam: The qualities of *Mahamanjisthadi Kashaya* include *Varnya* (improves complexion), *Kapha Pittashamaka*, *Shothahara* (reduces oedema), *Kushthaghna* (treats skin ailments), and *Vranropaka* (heals wounds) helps in the treatment of *Kitibhakushtha* [15].

Gandhak Druti: *Gandhak* (sulphur) has *Kushthaghna*, *Kandughna*, *Deepana*, and *Pachana* properties as per *Ayurveda*. Its *Garavishahar* (anti-poisonous) and *Rasayana* (rejuvenation) properties aid in treating and eliminating the root causes of skin conditions. Sulphur has anti-inflammatory and antioxidant qualities, which are crucial in the treatment of autoimmune illnesses like psoriasis [16]. According to a classical source, three drops of *gandhak druti* and three *ratti* of *suddha parada* were taken over a betel leaf, thoroughly rubbed, and then consumed every day. This medication increases appetite and is mostly suited for *ama dosha* and *Santarpanjanya vyadhi* [17]. In this condition, *Gandhak druti* with *Tambula*

patra is given for *Amapachana* and *Vyadhi shamana*.

Gandhak Malahar: It has *Kandughna*, *Kustaghna*, *Varnya* and *Kaphavatahara* properties due to *Ushna virya* and *Katu vipaka* which provides the result regarding the *Bahya shaman aushadha*, [18] decreases *Kandu*, *Shyavata* in this condition.

Trivrutta churna - As a *Bahudoshajanya vyadhi*, *Acharya Sushruta* advises *Nitya virechana* in treatment of *Kushtha*. It eliminates toxins from the body and purifies the body on both a gross and cellular level. Gut absorption also significantly improves, and metabolism is also adjusted. *Pitta-Kapha Shamana* and *Raktaprasadana* are the two main effects [19]. Thus, *Trivrutta* was given for *Nitya virechana* as its *Sukhavirechaka*.

Jatamansi churna - *Jatamansi* also known as *Kantiprada*, is mentioned in *Kandughna gana* and it is *Visarpanut*, *Kushthanut*. It is frequently used to purify blood because of its bitter taste and *Pitta, Kapha* balancing properties. It reduces bloating and intestinal inflammation while stopping fermentation and gas production in the intestine. It is an antioxidant that gets rid of free radicals that harm the skin [20]. It is given for such skin-related benefits as well as for reducing stress and providing good sleep as it's a Nervine tonic.

CONCLUSION:

We can conclude from this case report that a combination of *Panchakarma* and internal medication can be effective and potent in the treatment of *Kitibha kushtha*. Even though this patient's condition was chronic, significant changes had been observed with *Shodhana* and *Shamana chikitsa*. There were no adverse effects or aggravation of symptoms noted during treatment. The current study explains the efficacy of *Basti chikitsa* with *Darvyadi Niruhabasti & Madanadi tail Anuvasanabasti* as a *Shodhana* measure in the treatment of *Kitibha Kushtha*. As a result, this treatment modality can be examined in a large sample size to determine the efficacy of *Basti chikitsa* in various skin disorders.

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