AYURVEDIC TREATMENT OF PALMO-PLANTAR PSORIASIS: A CASE STUDY

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ABSTRACT
Healthy skin is a reflection of overall wellness. Skin is the largest organ of the body and also considered as beauty symbol in society. Any disease related to skin disturbs the physical and mental health status of an individual. Palmo-plantar psoriasis is a non-infectious chronic inflammatory disease of skin, mainly affects palms and soles. It is characterized by well-defined erythematous plaques with silvery scales. There is hyperproliferation and abnormal differentiation of epidermal keratinocytes, infiltration by T-lymphocytes and various endothelial vascular changes in the dermis. In Ayurveda all skin diseases are described under single heading i.e. Kustha. Although there seems no direct correlation between disease described in Ayurveda but it can be correlated with Vipadika which is one type of Kshudrakushtha. In present case of palmo-plantar psoriasis patient has taken treatment from different Pathies but due to frequent recurrence, he preferred Ayurvedic treatment. Patient got clinically significant improvement within one month of Ayurvedic treatment including internal medication and some external therapy.

KEYWORDS: Palmo-plantar psoriasis, Kshudrakushtha, Vipadika, Internal medication, External therapy.

INTRODUCTION
Healthy skin is a reflection of overall wellness. Skin is the largest organ of the body and also considered as beauty symbol in society. Any disease related to skin disturbs the physical and mental health status of an individual. Palmo-plantar psoriasis (PPP) accounts for 3-4% of all psoriasis cases, produces significant functional and social disability.[1] It is the second most common type of psoriasis followed by chronic plaque psoriasis.[2] Palmo-plantar psoriasis is a non-infectious chronic inflammatory disease of skin, mainly affects palms and soles. It is characterized by well-defined erythematous plaques with silvery scales similar to psoriasis elsewhere and patchy or generalized thickening and scaling of entire surface of palms and soles without redness.[3] Though only small body surface area is affected, it is difficult to treat and seriously interferes with the patient’s quality of life.[4]

In Ayurveda all skin diseases are described under single heading i.e. Kustha. Although there seems no direct correlation between disease described in Ayurveda but it can be correlated with Vipadika which is one type of Kshudrakushtha. It is included in Kshudrakushtha with Vata-Kapha Dosha predominance and it is characterized by Pani-Pad Sphutana (fissure in palms and soles) and Tivravedana (with severe pain) which are the cardinal symptoms.[5]

CASE REPORT
Name of patient: ABC  
Gender: Male  
Age: 55 years  
Date of Examination: 24/6/2017

Chief Complaints  
A 55 years old male, visited to Rognidan OPD of Government Ayurved College & Hospital, Nanded with complaints of, fissuring, scaling and severe itching and pain on both palms and soles since two years.

Past History  
No H/O any medical or surgical illness present.

Personal History  
Ahar: Mixed, Amla- Lavana- Katu Rasapradhan, Adhyashan, Anyamit ahar sevan  
Vihar: Shram, Diwaswap 2 hours daily  
Vyasan: Bidi smoking since last 22 years  
Vyavasay: Tailor

On Examination  
Nadi (pulse): 78/min, regular
Mala (stool): Malavashtambha (constipation)
Mutra (urine): Samvak
Jivha (tongue): Sama (coated)
Shabda (speech): Prakrut
Sparsha (skin touch): Ushna (warm)
Druka (eyes): Shweta (clear)
Akruti (built): Krusha (thin)
Blood pressure: 130/78 mm hg

Systemic Examination
RS: Air entry bilaterally clear
CVS: S1 S2 normal, normal rate and rhythm
CNS: Conscious and oriented

Investigations
HB %: 11gm%
ESR: 26 mm at the end of 1 hour
Urine: Albumin & Sugar - Nil
BSL (Random): 98 mg/dl

Treatment Given
1. Abhyantara Chikitsa (Internal Medications).

<table>
<thead>
<tr>
<th>Sr no.</th>
<th>Drug</th>
<th>Dose</th>
<th>Anupan</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Triphala + Musta + Vidang Kwath</td>
<td>30 ml BD before meal</td>
<td>Luke warm water</td>
<td>First 15 days</td>
</tr>
<tr>
<td>2.</td>
<td>Aarogyavardhini vati</td>
<td>500 mg BD after meal</td>
<td>Water</td>
<td>1 month</td>
</tr>
<tr>
<td>3.</td>
<td>Gandhak rasayan</td>
<td>500 mg BD after meal</td>
<td>Water</td>
<td>1 month</td>
</tr>
<tr>
<td>4.</td>
<td>Gandharva Haritaki churna</td>
<td>5 gm at bed time</td>
<td>Luke warm water</td>
<td>1 month</td>
</tr>
<tr>
<td>5.</td>
<td>Mahamanjishthadi kwath</td>
<td>20 ml BD after meal</td>
<td>Water</td>
<td>1 month</td>
</tr>
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</table>

2. Bahya Chikitsa (External Therapy).

<table>
<thead>
<tr>
<th>Sr no.</th>
<th>Drug</th>
<th>Use</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Triphala kwath</td>
<td>Dhavan (local cleaning)</td>
<td>First 15 days</td>
</tr>
<tr>
<td>2.</td>
<td>Nimba taila + Karanja taila + Vaseline jelly</td>
<td>Local application twice a day</td>
<td>1 month</td>
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</tbody>
</table>

OBSERVATION

<table>
<thead>
<tr>
<th>Sr no.</th>
<th>Clinical features</th>
<th>Before treatment (24/6/2017)</th>
<th>After treatment (17/7/2017)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Fissure (both palms and soles)</td>
<td>+++</td>
<td>+</td>
</tr>
<tr>
<td>2.</td>
<td>Scaling of skin</td>
<td>+++</td>
<td>No scaling of skin</td>
</tr>
<tr>
<td>3.</td>
<td>Itching</td>
<td>+++</td>
<td>No itching</td>
</tr>
<tr>
<td>4.</td>
<td>Pain</td>
<td>++</td>
<td>No pain</td>
</tr>
</tbody>
</table>
DISCUSSION

In Ayurveda all skin diseases are described under single heading i.e. Kushta. Palmo-plantar psoriasis can be correlated with Vipadika in Ayurveda which is one type of Kshudrakushta. It is included in Kshudrakushta with Vata-Kapha Dosha predominance.[5] The treatment given in this patient was in accordance with the following properties of medications. His clinical features indicated vitiating of Vata and Kapha Dosha. In this patient a combination of Triphala, Musta and Vidanga churna in the form of kwath was given for Rukshana and Aampachan. Triphala is used as antioxidant due to its Rasayan karma and act as a mild purgative which is useful in skin disease. Musta and Vidanga are also useful to pacify increased or vitiated Dosha in skin, hence this drug combination was given for first 15 days. Aarogavardhini vati was given for 1month, as it is indicated in all types of Kushta roga specially Vata – Kaphaja. [6] Gandhk rasayan has kandughna (alleviates itching) and kushtaghna (alleviates skin diseases) properties hence it was given for 1month. [7] Gandharva Haritaki churna was given for Kostha Siddhi (purgative) as well as Strotoshuddhi (cleaning of body channels) so that medicines should be reached up to the targeted cells. And also Erand taila has effect in Kushtroga also it’s a best act on Vata – Kaphaja Dosha. Mahamajishthadi kwath is given in Kushta chikitsa in Vrindamadhav as it is raktashodhak (blood purifier), kaphaghna (alleviates kapha) and kushta nashak (alleviates skin ailments).[8]

Triphala kwath was used for cleaning of lesions because Triphala is anti-inflammatory and astringent which is helpful to shed the scales of palms and soles. The Chikitsa sthana of the Sushruta Samhita recommends Triphala among medicines that are good for purification. [9] Neem taila, Karanja taila and Vaseline jelly were used for local application. Neem is Kandughna (alleviate itching),[10] and Karanja has Jantughna (antimicrobial), Kandughna, vranaropan (wound healing), vedanasthapan (pain reliever) properties[11] Vaseline jelly is best for dry and itchy skin, cracked skin and promote healing hence it was used for local application.

CONCLUSION

After observation of all data we conclude that the holistic approach of Ayurveda best acts on case study of palmo-plantar psoriasis and gives permanent relief to the patient.

REFERENCES