Ayurved Treatment protocol in the management of Twakavikar (Psoriasis) - A Rare Case Report

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Abstract:
Psoriasis is a long-lasting autoimmune disease characterized by patches of abnormal skin. These skin patches are red, dry, itchy and scaly. A 45 years old female patient came to outdoor patient department with complains of Skin disease, itching all over body, discolouration, watery purulent discharge over Rt. Elbow joint since last 8 years on & off, associated symptoms were Constipation and Insommia. but severity observed since last 2 years. She had taken treatment from various doctors & skin specialist along with steroids but she didn’t get relief. A case was diagnosed as Twaka Vikar (psoriasis) with Kaphavata dominant & started Ayurved medicines on 5/09/2018 for a week and assured for observation of any changes occurred in strav(discharge), shula (pain), kandu (itching). After one week of treatment itching is very much reduced, pus discharge was completely gone and no constipation, also sleeping absolutely well after many years. She was successfully managed with Ayurvedic treatment including internal medication & some external therapy for 7 days.

Key words: Ayurveda, Twakavikar, psoriasis, autoimmune disease.
Introduction:

Skin disorders are very common in India and their incidences and patterns differ according to the region. The prevalence of skin diseases in the general population of India has varied from 7.86% to 11.16% in various studies. Ayurveda, the traditional medicinal system of India offers a wide range of formulations prepared from herbal, metal or mineral ingredients. These formulations are successfully prescribed by Ayurvedic physicians in various skin disorders for many ages.

In ayurveda varies skin lesion describe as a kushtha a broad term. Kushtharoga are devided in to mahakushtha and kshudrakushtha. We can compare this twaka vikara as a kshudrakushtha among this the symptoms can be correlated with ek-kushtha(psoriasis). The patient having the symptoms of Matsyashakalopam (scalling of fish skin), mahavastu (involved in most skin area).

Psoriasis is a chronic, non-contagious disorder which affects the skin and joints, characterized by flaking, redness and inflammation of the skin. Once thought to be a skin disorder, psoriasis is now understood to be a condition originating in the immune system. The scaly patches caused by psoriasis, called psoriatic plaques, are areas of inflammation and excessive skin production. Skin rapidly accumulates at these sites and takes on a silvery-white appearance. Plaques frequently occur on the skin of the elbows and knees, but can affect any area including the scalp and genitals. In contrast to eczema, psoriasis is more likely to be found on the extensor aspect of the joint. Psoriasis has many different appearances. It may be small flattened bumps, large thick plaques of raised skin, red patches, and pink mildly dry skin to big flakes of dry skin that flake off.

There are five main types of psoriasis that are plaque, guttate, inverse, pustular, and erythrodermic. Psoriasis is considered a non-curable, long-term (chronic) skin condition. It has a variable course, periodically improving and worsening. It is not unusual for psoriasis to spontaneously clear for years and stay in remission. Many people note a worsening of their symptoms in the colder winter months.

Psoriasis is seen worldwide, in all races, and both sexes. Although psoriasis can be seen in people of any age, from babies to seniors, most commonly patients are first diagnosed in their early adult years. Patients with more severe psoriasis may have social embarrassment, job stress, emotional distress, and other personal issues because of the appearance of their skin.

Case Report:

A 45 years old female patient came to outdoor patient department Govt. Ayurved hospital, Haryana, with complains of itching all over body, discolouration, watery purulent discharge over right Elbow joint and on since last 8 years, associated with Constipation and Insomnia. same lesion also presents at chest, lower back region. She had taken treatment from various doctors & skin
specialist along with steroids but she didn’t get relief. But severity observed since last 2 years. So, case was diagnosed as TwakaVikar (psoriasis) with Kaphavata dominant & started Ayurved medicines on 5/09/2018 for a week and assured for observation.

On examinations of right elbow it is observed thickening of skin with blackish discoloration, dryness and in left elbow observed silvery scaly lesion with extra dryness as compare to right elbow.

Treatment Given: Considering with vata kapha dominace and rakta dusthi the treatment is started for rukta shudhi and kapha vataghna chikitsa with rasayana chikitsa (Table-1).

Dos and Dont’s: Following dietary regimen were advised to the patient during treatment.
Dos: Mungdal, Wheat Roti and boiled vegetable diet.
Donts: Milk, Sugar, oil and spicy food is advised to avoid.

Table-1: Abhyantar Chikitsa for 15 days:

<table>
<thead>
<tr>
<th>Name of medicine</th>
<th>Dose and time</th>
<th>Anupam</th>
</tr>
</thead>
<tbody>
<tr>
<td>Triphala powder</td>
<td>3gms at evening</td>
<td>Warm water</td>
</tr>
<tr>
<td>Gandhak vati</td>
<td>(125 mg) 2tablets three times a day after meal</td>
<td>Water</td>
</tr>
<tr>
<td>Sanshamani vati</td>
<td>(500mg) 2 tablets three times a day after meal,</td>
<td>Water</td>
</tr>
<tr>
<td>Manjishthadi kwatha</td>
<td>20 ml two times a day empty stomach,</td>
<td>-</td>
</tr>
<tr>
<td>Guchuchi swarasa</td>
<td>10 ml two times a day before meal</td>
<td>-</td>
</tr>
<tr>
<td>Jatyadi tail +Gandhakchurna</td>
<td>Local application Twice a day</td>
<td></td>
</tr>
</tbody>
</table>

Table-2: Observations:

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Before treatment</th>
<th>After 7 days treatment</th>
<th>After 15 days treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strava (discharge/ scaling)</td>
<td>+++</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Kandu (itching)</td>
<td>+++</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>Shula (pain)</td>
<td>+++</td>
<td>+</td>
<td>-</td>
</tr>
</tbody>
</table>
Images before and after treatment:

**Fig-1:** Before treatment condition on 5/09/2018 Right Elbow

**Fig-2:** After one week of Ayurvedic treatment on 13/09/2018.

**Fig-3:** After 2 weeks on 24/09/2018

**Fig-4:** Before treatment condition on 5/09/2018 Left elbow

**Fig-5:** After one week of Ayurvedic treatment on 13/09/2018.

**Fig-6:** After 2 weeks on 24/09/2018
**Result and discussion:**

The symptoms like Srava, Kandu and Shool were remarkably reduced within seven days (fig-2 nad Fig-5). After two weeks of treatment all the symptoms were relieved and mild scar was noticed on both the sides (fig-3 nad Fig-6). The treatment given in this patient was in accordance with the following properties of medicines. Her clinical features strav (discharge), kandu (itching), shula (pain) indicated vitiation of Vata and Kapha (biological humors). Gandhakhurna was given for 7 days as it is indicated in all types of Kushtaroga (skindiseases) jatyadi taila were used for local application.\(^5\) Main contains of jatyadi taila is neem patra, jatipatra and patolpatra. Neem is kandughna (alleviate itching),\(^6\) jati has kusthaghna (alleviate skin diseases) , vranashodha (wound cleaning property), vranaropak(wound healing property).\(^7\) Mahamanjishtha is given in kusthachikitsa in vrindamadhavas it is raktaashodhak (blood purifier), kaphaghna (alleviates kapha) and kushthanashak (alleviates skin ailments).\(^8\) Sanshamanivati having only one contain is guduchi. Guduchi has been used in Ayurvedic preparations for the treatment of various ailments throughout the centuries. It is used as a rasayana (rejuvanator) to improve the immune system.\(^9\)

**Conclusion:**

From the above case study, it can be concluded that twakvikar (psoriasis) can be successfully managed with Ayurvedic intervention. Further study can be conducted on large number of patients for verification of efficacy.

**References:**


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