

## Sri Lankan traditional Virechana Karma with Ehela Peni (*Cassia fistula*) and application of Kaluwala Alepa (*Alpinia malaccensis*) in treatment of Sidhma Kushta (Pityriasis versicolor) - A case study

W. L. Navodi,<sup>1</sup> E.R.H.S.S. Ediriweera,<sup>2\*</sup> H.B.K. Ajith Kumara<sup>3</sup>

<sup>1</sup> 5<sup>th</sup> BAMS Scholar, <sup>2</sup> Professor, Dept. of Nidan Chikitsa, Institute of Indigenous Medicine, University of Colombo, Rajagiriya, Sri Lanka

<sup>3</sup> Medical officer, Bandaranaike Memorial Ayurveda Research Institute, Nawinna, Sri Lanka

\*Corresponding author: email: [ayurvedadocsujatha@yahoo.com](mailto:ayurvedadocsujatha@yahoo.com) Mob: 0094714447648

### Abstract:

Pityriasis versicolor is a widespread fungal skin infection and also a cosmetic problem. It can be correlated with *Sidhma Kushta*, a skin disease described in Ayurveda. *Virechana Karma* (purgation) is a therapeutic procedure prescribed in treatment of skin diseases. According to Ayurveda, *Sidhma Kushta* (pityriasis versicolor) is caused by vitiation of *Vata* and *Kapha Dosha*. *Virechana Karma* helps to eliminate vitiated *Dosha* from the body. *C. fistula* and *A. malaccensis* possess properties to mitigate vitiated *Vata* and *Kapha Dosha*. Antifungal effect of *C. fistula* and *A. malaccensis* are scientifically proven. Purgation using fruit pulp of *Ehela Peni* (*Cassia fistula* Linn) followed by external application of paste of *Kaluwala* (*Alpinia malaccensis* (Burm.f) Roscoe) was used by Sri Lankan traditional physicians. On the day first *Virechana Karma* was performed followed by externally application of paste of *A. malaccensis* from next day to 10 days. Clinical features such as mild itching, whiteness, roughness and scaling of the skin were completely relieved after the treatment regimen. It is concluded that *Virechana Karma* using *Cassia fistula* (*Ehela Peni*) along with external application of *Kaluwala Alepa* (*Alpinia malaccensis*) is beneficial in treatment of *Sidhma Kushta* (pityriasis versicolor).

**Key words:** *Alpinia malaccensis*, *Cassia fistula*, *Pityriasis versicolor*, *Sidhma Kushta*, *Virechana Karma*.

### Introduction:

Pityriasis versicolor is a common fungal infection. Pityriasis means a type of fine skin scaling and versicolor means changing colour. This starts as small pale patches and usually appears on back, chest, neck or upper arms and sometimes on abdomen and thighs. Occasionally it may affect face. More patches may appear and patches next to each other may join

together. The affected skin may become slightly scaly. <sup>[1-2]</sup> Pityriasis versicolor can be correlated with *Sidhma Kushta*, a skin disease described in Ayurveda.

In Ayurveda, Charaka and Madhava described clinical features of *Sidhma Kushta* that are whitish, reddish or coppery colour lesions in the skin, appearing in large numbers with mild itching and pain, scales falling off when rubbing and

resembling the flower of ash gourd.<sup>[3-4]</sup> In Charaka advised *Virechana Karma* should in treatment *Sidhma Kushta* (Pityriasis versicolor).<sup>[5]</sup> Sharangadhara describes that *Cassia fistula* Linn (Sinhala name: *Ehela*; Family: Fabaceae) as a purgative.<sup>[6]</sup> Hence it was decided to conduct *Virechana Karma* using *Ehela Peni* (pulp of *C. fistula*). The paste of *Kaluwala* (*Alpinia malaccensis*) is used in the treatment of *Sidhma Kushta* (pityriasis versicolor) with successful results in rural area by Dr.N. Karunarathna with positive results. Hence it was decided to observe the effect of *Virechana Karma* and external application of *Kaluwala*, on patient suffering from *Sidhma Kushta* (pityriasis versicolor).

### Case Report:

A 28 years old female patient, who attended the Outdoor Patients Department of Ayurveda Teaching Hospital, Borella, Sri Lanka for treatment of *Sidhma Kushta* (pityriasis versicolor) was selected for the study and admitted in the Panchakarma ward. She had white patches in the skin with mild itching and intermittent scaling when rubbing, since six months (Fig-1). Selected patient was clinically thoroughly examined. Severities of the clinical features were recorded before and after treatment using a specially prepared grading scale. Therapeutic effects of research drugs were evaluated through symptomatic relief. Grading scale is given below.

#### Grading scale

##### 1. Whitish skin (*Shwetham*)

Nil = 0 = Normal skin

Mild = 1 = Slightly whitish skin

Moderate = 2 = Mildly whitish skin

Severe = 3 = Moderately whitish skin

More Severe = 4 = White skin

##### 2. Scales fall off when rubbing (*Rajah Vimuchchati*)

Nil = 0 = No scaling

Mild = 1 = Occasional scaling

Moderate = 2 = Intermittent scaling

Severe = 3 = Frequent scaling

More Severe = 4 = Always scaling and disturb sleep

##### 3. Mild itching (*AlpaKandu*)

Nil = 0 = No itching

Mild = 1 = Occasional itching

Moderate = 2 = Intermittent itching

Severe = 3 = Frequent itching

More Severe = 4 = Always itching

##### 4. Mild pain (*AlpaVedana*)

Nil = 0 = No pain

Mild = 1 = Feel pain occasionally

Moderate = 2 = Feel pain intermittently

Severe = 3 = Feel pain often

More Severe = 4 = Feel pain always

##### 5. Roughness (*Parusha*)

Nil = 0 = No roughness

Mild = 1 = Very slight roughness

Moderate = 2 = Mild roughness

Severe = 3 = Moderate roughness

More Severe = 4 = Feel like a sand paper to touch

The patient was treated for ten days. On the first day (Day 1), *Virechana Karma* (purgation) was conducted according to Sri Lankan traditional method, by giving 20ml of *Ehela Peni* early in the morning on an empty stomach. Before administration of purgative, sesame oil was applied on Pakwashaya Pradesha and fomented using vapour arising from a towel dipped in

boiling water. The patient had five bouts of bowel movements (three semisolid and two watery motions). Thin rice gruel with little salt (*Lunu Kenda*) was given for lunch and dinner. The patient was given normal diet from next morning. In contrast to the customary Ayurvedic practice, Sri Lankan traditional physicians do not conduct *Snehapana* and *SwedaKarma* prior to *Virechana Karma*. Ayurveda describes *Snigdha Virechana* and *Ruksha Virechana*.<sup>[7]</sup> *Ruksha Virechana* may have come into practice in conventional Sri Lankan system of traditional medicine.

The paste of *Kaluwala* 5g was applied from day second to 10 days and was kept on for a period of two minutes. Then the paste was gently scraped off (using a finger) and the residue was allowed to dry. After one hour, the treated area was rinsed off with water. (The paste should not be kept for a longer

period as it may produce burning sensation in the skin)

#### **Preparation of *Ehela peni* (*Cassia fistula*):**

Sri Lankan traditional physicians use various methods to prepare *Ehela Peni*. In this research *Ehela Peni* was prepared with matured fruits of *Cassia fistula* were taken (Fig-3). Then the dark coloured pulp of fruit which is coating the seeds was collected. 15g of pulp was dissolved in 20ml of boiling water.





#### **Preparation of paste of *Kaluwala* (*Alpinia malaccensis*):**

15 g of fresh rhizome of *Kaluwala* (*Alpinia malaccensis*) (Fig-4) was ground with 5ml of lime juice (*Citrus aurantifolia*) till it became a fine paste.

**Table 1: Percentage of reduction of symptoms:**

| Symptoms  | Before treatment | After treatment             |                      |                |                      |
|---|------------------|-----------------------------|----------------------|----------------|----------------------|
|   |                  | After <i>VirechanaKarma</i> |                      | After (10days) |                      |
|   | Grade            | Grade                       | Percentage of relief | Grade          | Percentage of relief |
| Whitish skin ( <i>Shwetham</i> )                          | Grade 3          | Grade 3                     | 0%                   | Grade 0        | 100%                 |
| Roughness ( <i>Parusha</i> )                              | Grade 2          | Grade 2                     | 0%                   | Grade 0        | 100%                 |
| Mild itching ( <i>AlpaKandu</i> )                         | Grade 1          | Grade 1                     | 0%                   | Grade 0        | 100%                 |
| Scales fall off when rubbing ( <i>Rajah Vimuchchati</i> ) | Grade 3          | Grade 3                     | 0%                   | Grade 0        | 100%                 |

**Images:**

|  |   |
|--|---|
|   |   |
| <i>Fig-1: Before Treatment</i>   | <i>Fig-2: After Treatment</i>   |
|  |  |
| <i>Fig-3: Cassia fistula</i>   | <i>Fig-4: Alpinia malaccensis</i>   |

**Results and Discussion:**

After the single dose of *Virechana* (purgation), none of the symptoms were reduced (Table 1). But after completion of entire treatment symptoms such as whiteness and roughness in the skin, itching and falling of scales were completely relieved (Fig-2).

*Sidhma Kushta* occurs by vitiation of *Vata* and *Kapha Dosha*. Ancient sages have prescribed *Virechana Karma* as one of the therapeutic measures in treatment

of *Kushta* including *Sidhma Kushta* (pytriasis versicolor). *Virechana Karma* helps to eliminate vitiated *Dosha* through *Adhobhaga* especially *Pitta Dosha* and also *Kapha Dosha*. This therapy alleviates vitiated *Vata Dosha*. Therefore, *Virechana Karma* is beneficial in *Sidhma Kushata*. *C. fistula* mitigates vitiated *Vata Dosha* as it possesses *Madhura Rasa*, *Snigdha Guna* and *Madhura Vipaka*. It also helps to alleviate vitiated *Kapha Dosha* due to its *Thiktha Rasa*. Antimicrobial, antifungal,

antioxidant, analgesic properties of *C. Fistula* are scientifically proven.<sup>[8,9,10]</sup> Hence in this case, *Virechana Karma* using *Ehala Peni* (*C. fistula*) was found beneficial in treatment of *Sidhma Kushta* (pytriasis versicolor).

*Alpinia malaccensis* (*Kaluwala*) possess properties such as *Amla Rasa*, *Ushna Veerya* and *Madura Vipaka*. Hence it is beneficial in pacifying vitiated *Vata Dosha*. It also contains *Katu*, *Thikta*, *Kashaya Rasa*, *Ruksha*, *Laghu*, *Thikshna Guna*, *Ushna Veerya* and *Katu Vipaka*. Therefore, it pacifies vitiated *Kapha Dosha*. Antimicrobial, antifungal and antioxidant properties of *Alpinia malaccensis* are scientifically proven.<sup>[11-13]</sup> Thus it was shown effective in the treatment of *Sidhma Kushta* (pytriasis versicolor).

### Conclusion:

*Virechana Karma* using *Ehela Peni* (*Cassia fistula*), followed by external application of paste of *Kaluwala* (*Alpinia malaccensis*) is effective in treatment of *Sidhma Kushta* (pytriasis versicolor) and required to be studied in more number of cases.

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