

Ayurvedic Management of Scabies - A Case Study

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Abstract:

Human scabies is an intensely pruritic skin infestation caused by the host-specific mite *Sarcoptes scabiei hominis*. It is a highly contagious, neglected cutaneous parasitic disease, associated with poor individuals, community, environmental circumstances and health. The present case study reports a 19-year-old male treated with Ayurvedic management principles of *Paama* (*Kapha Pittaja Kushta*) with complete cure of symptoms within 2 weeks.

Key words: *Kushta*, Scabies, *Paama*, *Patolakaturhinyadi kwatha*

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Introduction:

Human scabies is an intensely pruritic skin infestation caused by the host-specific mite *Sarcoptes scabiei hominis*^[1]. Approximately 300 million cases of scabies are reported worldwide each year and may cause large nosocomial outbreaks with considerable morbidity among patients and healthcare workers^[2]. Scabies was added to the World Health Organization's (WHO) list of neglected tropical diseases in 2013^[3]. The clinical presentation includes pruritus and a variety of dermatological lesions ranging from papules, pustules, burrows, nodules, and wheals^[4]. Lesions are commonly found on the wrists, finger webs, antecubital fossa, axillae, areolae, periumbilical region, lower abdomen, genitals, and buttocks. Diagnosis is based on the history, physical examination, and demonstration of mites, eggs or scybala on microscopic examination^[5]. The incubation

period for scabies is about four to six weeks. The itch leads to frequent scratching, which may predispose the skin to secondary infections. Close skin contacts such as family members and sexual partners are the commonly mentioned modes of transmission. The clinical presentation of the initial dermatologic condition varies significantly with the host's level of hygiene. The classic burrowing rash and interdigital pustules are a common finding in persons with poor hygiene standards or lowered immune status^[6]. Diagnosis is based on clinical history and physical signs.

The clinical condition can be correlated to "*Pama*" as described in *Ayurveda* Classics. *Pama* is one of the eighteen types of *Kushta* ("Skin Disease"), which is caused by *Kapha Pittaja Samprapti*. It is characterized by extreme itchy eruptions of white, reddish or black color seen over *Sphika* (*Buttocks*), *Pani-*

Pada (Hands & Foot), *Kurpara* (Forearm or elbow region). Diagnosis is based upon signs and symptoms of *Pama Kushta* such as *Toda* (Pain), *Kandu* (Itching), *Daha* (Burning sensation), *Pitika* (Burrows) [7]. The main aim of treatment was to address the *Kapha Pitta Dushti* with *Kleda Adhikya* with *Sukshma Krimi*. Personal hygiene and *Pathya-Apathya* i.e. dietary modifications were a very necessary part of the treatment.

Case report:

A 19-year-old male; tailor by profession came to Institute's OPD, with the chief complaints of

1. Lesions over both hands, wrists and forearms
2. Itching in between the fingers
3. Itching intensifies during night time
4. Discharge from rashes after itching
5. After healing of rashes, scaling occurs

All symptoms aggravated before 2 weeks.

Patient had the above symptoms with intermittent episodes since the last 4 years.

On Examination:

1. Papulo-vesicular lesions with discrete presentation were distributed bilaterally over hands, wrists & forearms.
2. Multiple erythematous papules, Round shaped with a well-defined border measuring from 1 to 2 mm in diameter, with no scales.

3. Multiple spherical vesicles with a size range measuring from 2 to 3 mm in diameter with erosions that has already healed and crusted.

History of present illness:

4 years back, the patient had developed a few rashes in between the fingers and started itching. Itching started from his fingers first which later spread to his wrist, forearm within 4 to 6 months. Furthermore, he said that the itching worsens at night and his sleep was disturbed by intense pruritis. History of pyrexia was denied. He had consulted an allopathic doctor and had taken treatment for the same and got relief, but again rashes and itching in between the fingers started before 2 weeks. This time, he came for Ayurvedic treatment to our OPD.

Past History:

During childhood, at the age of 9, an episode of allergic dermatitis which subsided with Allopathic drugs.

Family History:

Previously, his elder brother had experienced the same complaint. Also, he had a history of sharing the same room and bed with his brother.

Table 1: Personal History:

Appetite: Moderate	Bowel: Irregular	Weight: 50 Kg
Prakriti: Vata-Pitta	Sleep: Disturbed	Height: 156 Cm
Diet: Mixed (more non-veg)	Bladder: Regular	BP: 110/ 70 mm Hg.
Roga Bala: Madhyama	Agni – Vishama	Koshta – Krura
Rogi Bala – Madhyama	Satva – Madhyama	

Table 2: Ashta Sthana Pariksha

<i>Nadi - Vata Pitta</i>	<i>Shabda - Spashtam</i>
<i>Mutra – Samyak</i>	<i>Sparsha - Anushna sheeta</i>
<i>Mala – Badham</i>	<i>Drishti - Samyak</i>
<i>Jihva – Saama</i>	<i>Akruti - Krisha</i>

Table 3: Treatment given - internal (14 days with 7 day follow up)

Medicine	Dose	Kala	Anupana	Properties
<i>Patoladi Kwatha</i>	40 ml TDS	<i>Prakbhakta</i>	<i>Ushna Jala</i>	<i>Kapha Pitta Kushta, Visha Shamana</i>
<i>Sukshma Triphala</i>	250 mg TDS	<i>Adhobhakta</i>	<i>Ushna Jala</i>	<i>Anulomana, Kleda, Krimi Nashana</i>
<i>Madhusnuhi+ Nimba+ Vidanga+ Khadira</i>	500 mg each TDS	<i>Adhobhakta</i>	<i>Ushna Jala</i>	<i>Krimi Kleda Nashana, Kushta Hara Kandughna</i>
<i>Avipattikara Churna</i>	5 g	<i>Nishi</i>	<i>Ushna Jala</i>	<i>Pitta Anulomana</i>
<i>Dashanga Lepa Churna</i>	1g TDS	<i>Adhobhakta</i>	<i>Ushna Jala</i>	<i>Visha Shamana, Rakta Prasadana</i>

Table 4: External treatment

<i>Panchavalkaladi Kwath Parisheka</i>	<i>Panchavalkala, Nimba, Karanja, Chakramarda</i>	<i>Krimi, Kleda Nashana</i>
<i>Gandak Malam+ Yashada Lepa</i>	<i>Gandhaka, Yashada</i>	<i>Varana Shodhana Vrana Ropana</i>

Table 5: Pathya - Apathya

Pathya	Apathya
<i>Ahara- Mudga, Shali, Ushna jala, Shaka</i>	<i>Ahara- Mamsa, Matsya, Dadhi, Kalaya, Chanaka, Sheeta jala, Aluka Taila bhrshata, Ati madhra-amlav-Lavan</i>
<i>Vihara -Chankramana, Ratri Swapna, Diva jagarana, Snana, Shoucha</i>	<i>Vihara -Diva swapna, Vega dharana.</i>



Fig-1 Skin scabies infection before treatment



Fig-2: After treatment web of fingers

Table 6: Assessment of treatment on the basis of grading subjective parameters

Symptom	Grade	Symptom	Grade
Toda – Severe	3	Daha -Severe	3
Moderate	2	Moderate	2
Mild	1	Mild	1
No	0	No	0
Kandu – Severe	3	Srava -Severe	3
Moderate	2	Moderate	2
Mild	1	Mild	1
No	0	No	0
Pitaka - More Than 10	3		
5 To 10	2		
Dry Up (Fade)	1		
No Pitaka	0		

Visits	Toda	Kandu	Daha	Pitaka	Srava
First	1	3	2	3	1
7 Days	0	1	1	1	0
14 Days	0	0	0	0	0

As it has been shown, there was complete cure from the symptoms in 2 weeks.

Discussion:

Pama is a *Kapha-Pitta* predominant *Kushta* with severe *kandu*, *daha*, *srava* causing high morbidity in health care workers and in low socio-economic sectors of the society. Ayurveda has proper guidelines to clear the condition from the body.

Patoladi Kwatha ^[8] is indicated in *kapha pittaja kushta* and is *visha shamana* and *kamala hara*. Due to *virudha ahara* and *vihara*, there occurs *ama sanchaya* in the body leading to *visha rupa* with hypofunctioning of *samana vayu* and *pachaka pitta*. The proper *pachana* without aggravating *pitta* is being achieved by the use of *tikta dravya*. *Rasa* and *Rakta Pachaka Dravyas* ^[9] help in proper *pachana*.

Dashanga churnam ^[10] is indicated in *visha*. Here, it was used internally as *Visha Shamana*, *Kleda Nashana* and *Krimihara*. *Shirisha*, *Haridra*, *Rakta Chandana* etc are *Tikta Kashaya Dravyas*. *Tikta Rasa* Is *Deepana*, *Pachana*, *Krimihara* and *Visha Shamana* ^[11]. *Yashti* is *varnya* and *balya* which helps to

regain the integrity of skin. *Jatamansi* has the *shamana* action.

Sukshma Triphala: Each tablet contains *kajjali* (8mg) and *triphala* (242mg). *Kajjali* is *yogavahi*, *sookshma*, helps in *sroto shodhan*.^[12] *Triphala* acts as in *vrana shodhana* and *vrana ropana*. Both the *dravya* has high antimicrobial and anti-inflammatory activity.

Madhusnuhi, Nimba, Vidanga, khadira: *Vyadhi Pratyaneeka* by *Kushtahara*, *Krimihara* property.

Avipattikara Churna ^[13] is used for *pitta Anulomana*, *Krimihara* and *Kleda Nashana*.

Panchavalkaladi Parisheka is used for proper cleaning and removal of all *bahya krimi* with rejuvenation of skin.^[14-16]

Conclusion:

The patient got relief in 2 weeks by the use of proper *Hetu Vipareeta* and *Vyadhi Vipareeta Chikitsa*. We should use such protocols in more numbers of patients with the principles of *Ayurveda*.

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