A CASE STUDY OF AYURVEDIC MANAGEMENT OF SHWITRA KUSHTA WITH SPECIAL REFERENCE TO PRACHHAN KARMA (BLOOD LETTING).

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ABSTRACT

Shwitra or Shweta Kushta is a skin disease described in Ayurveda literature in which discoloration of skin occurs and skin color becomes white. In modern science it is called as Vitiligo in which due to hypo-pigmentation is due to absence of melanin in the skin. it affects the individuals of all ethnic and both sexes. Vitiligo affects the 1% of world’s population. In Shwitra Kushta Vata and Bhrajaka pitta in the skin (twak) get vitiated. Skin is cover of the whole body. Hence Bhrajaka pitta should be in its normal state. To maintain Bhrajaka pitta in normal state dietary and lifestyle regimens should be followed. An imbalance in Vata and Bhrajaka pitta may cause skin diseases. In Ayurveda management for Shwitra Kushta is explained as - 1. Prachhan karma (Blood-letting by specific procedure), 2. Bahya Snehan (external oil massage), 3. Soorya pada santhapam (exposure of Shweta Kushtha vrana under the Sun) and 4. Internal medicines. In present case study patient was treated Prachhan karma (Blood-letting) and Bakuchi oil Bahya snehan (external application of Psoralea Corylifolia Linn. oil). Along with above therapy, Bakuchi Churna (Psoralea Corylifolia Linn) one gm twice a day internally was administered. Above treatment was aimed to stimulate melanocytes pigmentation in the skin. We observed good results in the patient of Shwitra Kushta by above management.

Keywords: Shwitra Kushta, management of Shwitra Kushta Prachhan Karma, Lepa, Bakuchi Churna (Psoralea Corylifolia Linn).

1. INTRODUCTION

Vitiligo is mentioned as Shwitra or Shweta Kushta in Ayurvedic classical literature. Shwitra is of two types viz. Kilas and Varuna.1 According few literatures and as per opinion of senior Ayurveda Vaidyas these two are synonymous.2 According to Ayurveda, Shwitra is enumerated as Raktaja Vikara. In Shwitra Kushta Vata and Bhrajaka pitta from the skin get vitiated causing discoloration of the skin. Skin is cover of the whole body. Hence Bhrajaka pitta should be in its normal state. To maintain Bhrajaka pitta in normal state dietary and lifestyle regimens should be followed. An imbalance in Vata and bhrajaka pitta may cause skin diseases. Pathology of Vitiligo as per modern science gives stress upon impaired melanocytes production. Melanin, one of the pigments present in the skin, is distributed improperly underneath the skin, hence it gives rise to white discoloration to the skin which is known as Vitiligo. This may be hereditary, medicine originated (caused due to toxicity), as an adverse effect of radiation, post chemotherapy effect etc. However, practically most people found having Vitiligo without any of the abovesaid causes and hence it is termed idiopathic leukoderma.3

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Charaka, Sushruta, Vagbhata and other Ayurveda Acharyas have grouped Shwitra under Kushtha (skin disorder). Shwitra though grouped under Kushtha it has separate entity as a disease. Different Samhitakar have explained Hetus (causes) of Shwitra Kushtha which are totally different as mentioned in Modern science. Consideration of Hetu, Samprapti and Samprapti Ghatak prior treating any diseases is important as per Ayurveda philosophy. Hence it is important to study Hetus (causes) explained in classical literature and to find specific Hetu in the patient also. Hetu of Shwitra found in Ayurvedic literature are as follows –

- **Viruddha ahara** (taking different foods together which are of opposite properties)
- **Chardi nigraha** (suppression of vomiting; overuse of modern antiemetics should also considered here)
- **Atibhojana** (Consumption of excess food which is beyond need of body)
- **Ati Amla** (Sour food consumption in large amount)
- **Lavana** (Salty food consumption in large amount)
- **Madhura** (Sweet food consumption in large amount)
- **Katu** (Spicy food consumption in large amount)
- **Nava anna** (use of grains within one hour after harvesting)
- **Dadhi** (curd and other sour milk products)
- **Matsyabhakshana** (fish and other sea food)
- **Vipra-Guru Gharshana** (insulting elders), etc.

### 2. METHODS

#### 2.1. Objectives

**Primary Objective:**
- To study role of Prachhan karma, Bakuchi tail (externally) and Bakuchi Churna (internally) in the management of Shwitra Kushtha.

**Secondary Objectives:**
- To study Shwitra Kushtha in detail from Ayurveda literature.
- To Study karmukatva of Bakuchi churna (internally) and Bakuchi Tail (externally) in the management of Shwitra Kushtha.
- To evaluate effect of Prachhan karma in Shwitra Kushtha.

#### 2.2. Case History

**A. Diagnosis:**
Kaphaj Shwitra Kushtha.

**B. Chief Complaint:**
Shwets twak vaivarnya (white discoloration) at lower back for 20 days. Size of patch was approximately 4 cm x 3 cm.

**C. Past History:**
No any major illness in past. Family history of Shwitra Kushtha found.

**D. History of Treatment:**
Patient directly approached for Ayurvedic treatment. He did not take any treatment in past.

**E. Hetu:**
- **Family History:** Father had history of Shwitra Kushtha.
- **Ahara:** Aniyamita ahara (Irregular food habits), Viruddha ahara (Fruit salad i.e. fruits + milk), Dadhi (over use of Curd), Ati Madhur-Lavan Rasa sevana (excessive use of Sweet and Salty food in diet).
- **Vihar:** Diwaswap.

**F. Samprapti:**
After Hetu (causative factors) sevan all three Doshas got vitiated. Tridoshas reached all over body by tiryak gati. Pathogenesis (Sthansanshraya) took place underneath the skin at lowerback region giving rise to white discoloration of the skin at that place (Vyakti). In this way Shwetra Kushtha abhivyakti was observed in the patient. Following Samprapti Ghataka were observed in the patient.
- **Dosha:** Vata, Pitta and Kapha.
After proper analysis of patient Prachhan Karma was done on white patch. After Prachhan Karma he had been prescribed Bakuchi churna 1 gm with warm water twice a day after meal and Bakuchi Taila for local application over affected area followed by exposure to early morning sun light. Details of Drug Administration are shown in Table No. 1. The patient had been followed up every 7 days for 21 days.

1. Pathya
Cow milk, Cow ghee, Mungo (Green gram), Padval (pointed gourd), Methi (Fenugreek) and Laghu ahara (diet easy to digest).

2.3. Method of Prachhan Karma

Equipments and drugs:
Surgical blade, Spirit swab, One pair of No 7 surgical gloves and sterile cotton swabs as per need.

Purva karma:
Prachhan karma procedure was explained in details in the language which patient can understand. He was counselled and told not to worry. Informed written consent was taken. Prior Pradhana karma (actual procedure), area of Shwitra Kushtha along with its peripheral area was cleaned with Spirit swab as an aseptic precaution.

Pradhana Karma:
With the help of Surgical blade very close, continuous and superficial cuts were taken over the area of Shwitra Kushtha. Blood coming out of wound was allowed to flow and the blood was mobbed continuously with sterile cotton swab.

Paschat Karma:
Tight pressure bandage was applied over the cut area to prevent bleeding. Patient was advised to take rest. Further he was advised not to use soap till wound get healed. Patient was called for alternate day dressing till the wound gets healed.

3. RESULTS AND DISCUSSION

After Prachhan Karma, local application of Bakuchi Taila and sitting under morning sun light, blisters and reddish discoloration was observed over the white patch of Shwitra Kushtha. Patient suffered from irritation and itching at that spot but he was told to ignore as per he counselled prior the procedure. Slowly reddish area turned black and slowly skin color was achieved at that spot. Size of patch reduced slowly. Results are shown in Table No. 2. The treatment of Shwitra Kushtha done with Prachhan karma, Bakuchi churna (internally) and Bakuchi Taila (externally) had been found effective and useful. Patient was satisfied at the end of three weeks.

Prachhan Karma is one of the Panchakarma (body purification therapy) procedures. It is type of Raktamokshana. Due to Prachhan karma, Dushta Rakta (impure blood) is expelled out of body and fresh blood replaces it. Fresh circulation is allowed at pathological area and blood circulation flow is also increased after blood-letting. It gives rise to correct the skin and underneath pathology. Also, along with blood Dushta Doshas are expelled out of the body. It helps to break Dosha-Dushya samurchna (pathological bonding) and in turn helps to grow healthy tissues at that site.

Bakuchi is vyadhi pratyanik drug (first choice drug) for Shwitra Kushtha. The rasa of Bakuchi is Katu, Tikta, Katu Vipak Ruksa Guna. Katu-Tikta Rasa, Ruksa Guna, Katu Vipaka helps to correct Srotodushti in Shwitra Kushtha. Blood circulation of affected area is increased giving rise to formation of Prakrut Bhrajak Pitta. Melanin synthesis is increased. Ultraviolet rays of morning sun light along with application of Bakuchi taila encourages the growth of melanocytes. Ushna Guna reduces of Kapha-Vata Dosha and achieves Agnideepan and Pachana. Laghu, Ruksa Guna helps to reduce Kapha Dosha. Katu Vipaka helps to remove Srotodushti by its Srotodshuddhikar property. Bakuchi is mentioned as Kushthaghna (useful in skin disorders), Kaphvatahar
(Normalizes increased Kapha and Vata) and Twachya (promotes healthy skin).

Bakuchi (Psoralea corylifolia) extract contains various phytochemicals viz. flavonoids, coumarins and meroterpenes. Flavonoids include neobavaisoflavone, isobavaflavone, ba-vachalcone, bavachinin, corylin, corylifol, coryfolin etc. Coumarins include psoralen, psoralidin, isopsoralen, angelicin etc. Meroterpenes include bakuchiol and 3-hydroxybakuchiol. It possesses few antioxidant properties also. All these constituents supposed to helps in formation of melanocytes and blackish discoloration of skin. The mode of action of any of above constituents totally depend upon the formulation of drug and route of administration.

4. CONCLUSION

Prachhan Karma, Bakuchi Tail (externally) and Bakuchi Churna (internally) were found significantly effective in Shwitra Kushtha. No adverse effects were observed during the treatment period. The use of morning sun light is may promote growth of melanocytes under skin along with Bakuchi Taila. Treatment duration was very less. Further trials are needed in large sample, for longer duration using control drug.

5. REFERENCES

6. TABLES

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Subject</th>
<th>Bakuchi churna</th>
<th>Bakuchi tail</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Matra</td>
<td>1 GM X BD</td>
<td>Yathavshak</td>
</tr>
<tr>
<td>2.</td>
<td>Kala</td>
<td>Adhobhakta&quot;&quot;&quot;&quot;</td>
<td>In Morning</td>
</tr>
<tr>
<td>3.</td>
<td>Anupan</td>
<td>Koshna jal</td>
<td>-</td>
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<tr>
<td>4.</td>
<td>Kalavadhi</td>
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Table No.1 Drug Administration

<table>
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<tr>
<th>Follow up</th>
<th>Day</th>
<th>Observation (size of white patch in cm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline</td>
<td>1</td>
<td>4 X 3 cm</td>
</tr>
<tr>
<td>1st</td>
<td>2</td>
<td>4 X 2.5 cm</td>
</tr>
<tr>
<td>2nd</td>
<td>14</td>
<td>3.5 X 2.5 cm</td>
</tr>
<tr>
<td>3rd</td>
<td>21</td>
<td>3 X 2 cm</td>
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</tbody>
</table>

Table No.2 Follow up wise results

Cite this article as: