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“AN AYURVEDIC APPROACH IN THE MANAGEMENT OF KITIBHA KUSHTHA W.S.R. TO PSORIASIS”

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ABSTRACT:

Psoriasis is a chronic, immune-mediated inflammatory skin disorder characterized by erythematous, scaly plaques associated with itching, dryness, and recurrent episodes. In Ayurveda, it can be correlated with Kitibha Kushtha, a type of Kshudra Kushtha, predominantly involving vitiation of Vata and Kapha Dosh along with Rakta Dushti. The present study aims to evaluate the efficacy of Ayurvedic management in a diagnosed case of psoriasis.

A 65-year-old male patient presented with complaints of thickened scaly lesions, itching (Kandu), and dryness (Rukshata) over both palms for six months. The patient had a history of temporary relief with allopathic treatment followed by recurrence. Ayurvedic intervention included Shamana Chikitsa (Panchtikta Ghrita Guggulu, Gandhak Rasayan, Khadirarishta, Gandharvahratika) along with local application of Somraji Taila and Shodhana Chikitsa in the form of Raktamokshana (Siravedha).

Assessment was carried out using subjective parameters such as Kandu, Rukshata, Vaivarnya, and lesion size. Significant improvement was observed within 7 days of treatment, with marked reduction in itching, scaling, discoloration, and lesion size. The study highlights the potential of Ayurvedic therapy in effectively managing psoriasis and reducing recurrence.

KEY WORDS:- Psoriasis, Kitibha Kushtha, Ayurveda, Raktamokshana, Shamana Chikitsa

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INTRODUCTION

Psoriasis is a chronic, immune-mediated inflammatory skin disorder characterized by erythematous, scaly plaques commonly affecting elbows, knees, and scalp. It affects about 2–3% of the global population¹. The disease involves abnormal proliferation of keratinocytes due to immune dysregulation, especially T-cell activation². Clinically, it presents with itching, dryness, scaling, and Auspitz sign³.

In Ayurveda, psoriasis can be correlated with Kitibha Kushtha, described under Kshudra Kushtha. It is characterized by Shyava Varna, Rukshata, and Khara Sparsha⁴. The condition mainly involves vitiation of Vata and Kapha Dosha along with Rakta Dushti. Nidana such as Viruddha Ahara and improper lifestyle contribute to its development⁵.

Ayurvedic management includes Nidana Parivarjana, Shodhana (Virechana), Shamana, and Bahirparimarjana Chikitsa, which help in reducing symptoms and recurrence⁶.

AIM – Conceptual study of Kitibha Kushtha (Psoriasis).

MATERIAL AND METHOD

The present work is based on a review of classical information, relevant published research Works, and modern literature.

Case report

A 65-year-old male patient came to us with chief complaints of:

Thickened scaly skin lesions (Twak Parushyata)

Itching (Kandu)

Dryness (Rukshata)

over both palms for 6 months

History of present illnesses

A 65-year-old male came to OPD with complaints of thickened scaly skin lesions (Twak Parushyata), Itching (Kandu), and dryness (Rukshata) over both palms since 6 months. He consulted an allopathic dermatologist for the same and was diagnosed with psoriasis. He took the allopathic treatment for 1 month and experienced significant relief. However, soon after stopping the treatment, scaly lesions with itching and dryness were noticed. Then, he consulted our OPD for the possibility of treatment.

Past history

No specific history of any major illness, drug allergy, or previous surgery was given by the

patient.

Family history

Positive family history showing the same complaints of the thick scaly patch with itching in his sibling was observed.

Ashtavidha pariksha

- Nadi - 82/min, regular with Vata-Pitta dominance
- Mutra- Samyak 5–6 times/day and 0–1 times/night
- Mala-saam, 1-2 times/ day
- Jihva- saam (undigested food particles)
- Shabda -Spashtha (clear)
- Sparsha - Anushnasheeta (not too hot)
- Drik -Prakruta (normal)
- Akrti (body stature)- Madhyama (average built)

CLINICAL FINDINGS

On dermatological examination, there were well-defined erythematous scaly plaques over both the palms with thickening of the skin. The lesions showed dryness and scaling with a rough surface (Khara Sparsha) and slight elevation.

These lesions were associated with the symptoms of Kandu (itching) and Daha (burning sensation). Other physical parameters were within normal limits.

Systemic examination

Blood pressure, respiratory rate, and temperature were within normal limits. Systemic examination did not reveal any abnormality.

Treatment details

Shaman chikitsa

Sr. No.	Medicine	Dose	Duration	Anupan
1	Panchtikta Ghrita Guggulu	500 mg	Twice a day	Lukewarm water
2	Gandhakrasayan vati	250 mg	Twice a day	Lukewarm water
3	Khadirarishta	15 ml	Twice a day	Lukewarm water
4	Gandharvaharitaki	500 mg	Hs	Lukewarm water
5	Somraji tail	2-4 ml	Twice a day For local application	-

Panchkarma chikitsa

Raktamokshana⁷

The term 'Raktamokshana' refers to the therapeutic removal of vitiated blood. It is a type of Shodhana therapy described in Ayurveda, wherein impure blood is eliminated from the body through various methods such as Siravedha to purify Rakta and alleviate disease conditions.

PROCEDURE

The patient is seated comfortably, and a suitable vein in the forearm is selected. After proper cleaning, Siravedha is performed using a sterile needle, and controlled bloodletting is done. After the required amount of blood is removed, the site is dressed properly. The procedure can be repeated as needed.



Assessment Criteria⁸

Assessment of the patient was done on the basis of improvement in subjective parameters like Kandu (Itching), Rukshata (Dryness), Parushata (Roughness/Scaling) and Twakvaivarnya (Discoloration).

Gradation of parameters

Symptoms	Grade 0	Grade 1	Grade 2	Grade 3
Vaivarnya (discoloration)	Prakrut Twak varna	Krushna	Krushna raktabh	Raktabh
Srava (Discharge)	Nissrava	Jala sannibh srava	Pooya srava	Sarakta pooya srava
Kandu (Itching)	Absent	Madhyam kandu but not disturbing normal activity	Occasional kandu disturbing normal activity	Satata kandu with nidranash
Ruja(pain)	Absent	Ruja on deep pressure	Savedana sparsha	Asparsha vedana
Lesion Size	Lesion as a scar	Lesion less than 1cm	Lesion between 1 to 3cm	Lesion more than 3 cm

OBSERVATIONS AND RESULTS

Assessment before and after the treatment.

Symptoms	On day 0	On day 7
Vaivarnya (discoloration)	2	1
Srava (Discharge)	0	0
Kandu (Itching)	3	1
Ruja(pain)	0	0
Lesion Size	3	1

Result Clinical examination of the patients revealed regression of all symptoms within 7 days.

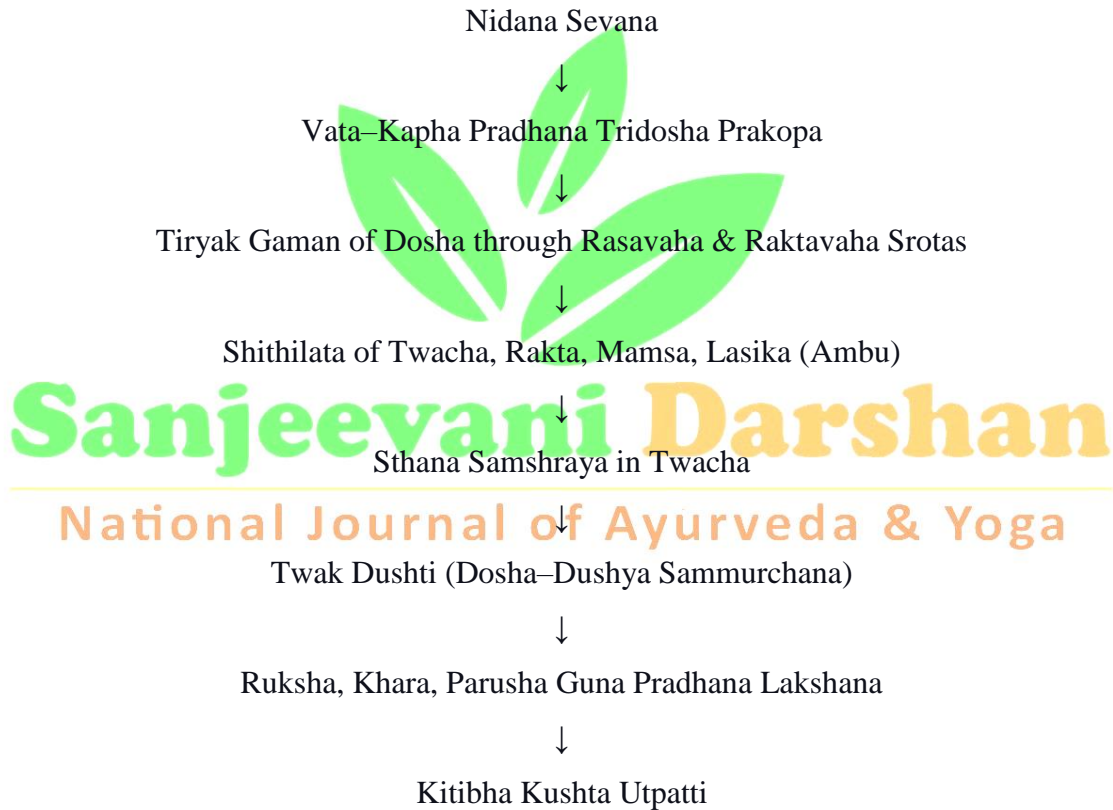
Before treatment

After 7 days of treatment



Hetu

In Ayurvedic classics, the specific Nidana of Kitibha Kushta is not described separately. As it is included under Kushta Roga, the general etiological factors of Kushta are considered applicable, such as Adhyashana (eating before digestion of previous meal), Vishamashana (irregular diet), Atyashana (overeating), Shitoshna Vyatyasa Sevana (alternating hot and cold regimens), Anupurva Sevana (improper sequence of diet and regimen), improper use of Santarpana and Apatarpana Ahara, Kupathya during Panchakarma, Diwaswapna after meals, and unethical practices like Papa Karma and Vipra-Guru Tiraskara. These factors vitiate Tridosha and contribute to the manifestation of Kitibha Kushta.⁹

Samprapti⁹**Samprapti ghataka**

Dosha- Vata & Kapha Pradhan Tridosha

Dushya- Twacha, Rakta, Mansa & lasika

Srotas- Raktavaha

Strotadushti- Sanga

Adhishtana-Twacha

Rogamarga- Bhaya

Acharya Charaka explains that Kushta involves deeper layers of Tvak where Dosha–Dushya Sammurchana occurs¹⁰. Acharya Sushruta describes seven layers of skin—Avabhasini, Lohita, Shweta, Tamra, Vedini, Rohini, and Mamsadhara—and states that Kushta mainly affects the 4th (Tamra) and 5th (Vedini) layers¹¹

DISCUSSION

Panchatikta Ghrita Guggulu

Panchatikta Ghrita Guggulu is useful in the management of Kitibha Kushta. It contains Tikta Rasa drugs like Nimba, Patola, Vasa, Guduchi, and Kantakari, which help in Rakta Shodhana and Kushtaghna action. Ghrita acts as Rasayana and enhances drug delivery, while Guggulu has Lekhana and Shothahara properties, reducing scaling and inflammation. It mainly pacifies Vata–Kapha Dosha and improves Twacha, Rakta and Mamsa Dhatu, thereby reducing symptoms like Rukshata and Kharata¹².

Gandhak rasayan

Gandhak rasayan is a polyherbal drug which is Rakta shodhak, kandughana and Rasayan mainly indicated in kushtha rog. It is prepared from chaturjata, triphala, Shunthi, and swaras of guduchi, bhringraja, adraka, and pure gandhak. It has antifungal and Antibacterial properties. Thus, it reduces the infection. It reduces features of raag, pidika with raktashodhak and Kushthaghana properties .¹³

Khadirarishta

Khadira has immunomodulatory, anti-inflammatory, and antioxidant properties that can play a beneficial role in autoimmune and chronic inflammatory conditions. Bakuchi is also known as Kushtanashini and has immunomodulatory, anti-inflammatory, antioxidant, anti-psoriatic, anti-leprotic, and antibacterial properties. It acts through regulating multiple pathways to correct the pathophysiology of chronic skin ailments.¹⁴

Gandhrvaharitaki vati

This Kalpa helps to digest and excrete the Apakva Mala out of the body by its Anulomak action. It is a Snigdha Rechak Kalpa; thus, it helps to relieve constipation and restore niramta.¹⁵

Somraji tailam

Dadru is a Kapha Dosha dominant Tridoshaja skin disorder. Local application of Somraji Taila reduces symptoms of Dadru or Dermatophytosis Due to its Katu, Tikta taste, Ushna Veerya, Laghu, Ruksha Guna, and Katu Vipaka. Some contents of Somraji Taila also have Rakta Shodhaka property, which helps to get Rid of the growth of fungus on the skin. Various research on the contents of Somraji Taila has proved its antifungal, antimicrobial, and anti-inflammatory activities. The other contents of Somraji Taila, such as Haridra, Sarshapa, and Amalatasa, have anti-inflammatory, anti-microbial, and antifungal activities. Somraji oil, having the property of deep penetration, helps to remove inflammatory substances and promote the regeneration of new tissue. The local application of Somraji oil acts quicker due to the physiological effect of heat on the skin.¹⁶

Raktmokshan

Siravedha is a type of Raktamokshana indicated in Kushta Roga including Kitibha Kushta. It helps in elimination of vitiated Rakta, thereby reducing Kandu (itching), Rukshata, discoloration and thickness of lesions. It also pacifies Vata–Kapha Dosha and improves local circulation. Hence, Siravedha is effective in detoxification and management of Kitibha Kushta¹⁷.

Probable mode of action

Raktamokshana (Siravedha) helps in removal of vitiated Rakta, leading to Rakta Shodhana. It reduces Kandu, Rukshata, Vaivarnya and scaling, and pacifies Vata–Kapha Dosha. It also improves local circulation and shows anti-inflammatory effects, thereby reducing the thickness of lesions in Kitibha Kushta.

CONCLUSION

Psoriasis, correlated with Kitibha Kushtha in Ayurveda, is a chronic and recurrent skin disorder that significantly affects the quality of life. The present case study demonstrates that Ayurvedic management, including Nidana Parivarjana, Shamana Chikitsa, and Raktamokshana, plays a crucial role in alleviating the symptoms and controlling disease progression.

The combination of internal medications and external therapies showed significant improvement in clinical features such as itching, scaling, dryness, and discoloration within a short duration. Raktamokshana (Siravedha) proved to be particularly effective in eliminating vitiated Rakta and reducing local symptoms.

Thus, Ayurvedic treatment provides a safe, cost-effective, and holistic approach in the management of psoriasis with promising outcomes and minimal chances of recurrence. However, further large-scale clinical studies are required to validate these findings.

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