

# Management of Vaipadika Palmo Plantar Psoriasis Through Shodhana and Shamana: A Case Study

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## Abstract

A localized form of Psoriasis known as Palmo plantar psoriasis is characterized by the development of thick, scaly and hyperkeratotic plaques. Despite the fact that this disease mostly affects the palms and soles, the hardness of the skin makes it difficult to do daily tasks. This condition is related to *Vaipadika* in *Ayurveda*. In the framework of *Kshudra kusta*, *Vaipadika* is explained. This illness is mostly caused by the *Vatakapha dosha*, which is identified by *Pani pada sphuthana* and *Teerva vedhana*. Here is a case of a 55 years old female with history of dryness, scaling and cracks over her bilateral palms and soles associated with pain, blackish discoloration and severe itching and burning sensation, associated with bloody discharge since 1 year. Patient was treated with *Snehana* and *Swedana* and later *Shamana oushadi* were given for 7 days along with life style modification. Patient had good relief in symptoms.

**Keywords:** Palmo plantar psoriasis, *Vaipadika*, *Shodhana* and *Shamana*

## Introduction

Palmoplantar psoriasis refers to a condition that affects the palms and soles, however the illness can also have many distinct morphologic patterns<sup>1</sup>. ranging from painful, thick, scaly, hyperkeratotic plaques with pustular lesions as the prominent feature<sup>2</sup>. The incidence of palmoplantar psoriasis among psoriasis cases ranges from 3 to 4%<sup>3</sup>. Palmoplantar psoriasis is a long lasting autoimmune disease. This condition is described in the context of *Kshudra Kushta* in *Ayurveda* and is correlated to *Vaipadika*. According to Archarya Charaka<sup>4</sup> it is referred as *Vaipadika* and with a different name as *Paadadari* according to Archarya Sushruta<sup>5</sup> According to Charaka, the primary doshas responsible for symptoms like *Panipada Sphutana* (cracks in the palms and soles) and *Teevra Vedana*<sup>6</sup> (severe pain) are *Vata* and *Kapha* doshas<sup>7</sup>. The present case is having a history of 1 year on the basis of the clinical features such as of dryness, scaling and cracks over her bilateral palms and soles associated with pain, blackish discoloration, severe itching and burning sensation, associated with bloody discharge along with swelling of bilateral foot. Based on the presentations the underlying *dosha* can be understood and specific line of treatment such as *shodhana* and *shamana chikitsa* has been performed and the condition has been improved.

### Case Report

A 55 years old female patient visited Agada Tantra outpatient department (opd) of our institute with the clinical features such as of dryness, scaling and cracks over her bilateral palms and soles associated with pain, blackish discoloration, severe itching and burning sensation, associated with bloody discharge along with swelling of bilateral foot which was disturbing her daily activities. She is known case of hypertension since 5 years and is under medication. Initially she neglected the complaint but as the complaint got aggravated she approached an nearby allopathic hospital and was prescribed with topical applications and some medications (details not known) but there was no relief found and the symptoms occurred frequently. So as there was no relief found she approached *Ayurvedic* hospital for further management.

### Past History

There was no history of similar complaints in the past.  
k/c/o HTN and under medication since 5 years

### Clinical Findings

On the day of general examination the person was of normal built without any pathological presentation. On local examination there were dryness, scaling and cracks over her bilateral palms and soles associated with pain, blackish discoloration, severe itching and burning sensation, associated with bloody discharge along with swelling of bilateral foot.

### *Astha sthana pareeksha* ( Eight types of examination)-

- *Nadi- 76bpm*
- *Mala- nirama*
- *Mutra- 4 to 5 times per day*
- *Jhiva- alipta*
- *Shabdha- prakrutha*
- *Sparsha- mrudu*
- *Drik- prakrutha*
- *Akruthi- madhyama*

### *Dasha vidha pareeksha* (Ten types of examination)-

- *Prakruthi- Kaptha vata*
- *Vikruthi- Pitta kapha*
- *Sara- medho sara*
- *Samhana- madhyama*
- *Satva – madhyama*
- *Satmya- sarva rasa satmya*
- *Ahara shakthi- madhyama*
- *Vyayama shakthi- avara*
- *Vaya- madhyama*

**Diagnostic Criteria**

Hb was 11.8 gm%, ESR was 50 mm/hr, PCV was 33.1%, MCV was 70fl, MCH was 25.2 Pg (RBC, WBC, PALTELET COUNT SERUM CREATNINE BLOOD UREA are within normal range).

On local examination there were dryness ,scaling and cracks over her bilateral palms and soles associated with pain , blackish discoloration, severe itching and burning sensation, associated with bloody discharge along with swelling of bilateral foot.

Appetite- good

Bowel- regular

Sleep- sound

**Management**

*Rukshana* followed by internal medications such as Usirasava, Aragwadadi kashaya, Laghu sootha shekara rasa, Nimbamrutha eranda taila were given

DAY	DATE	MEDICINE	DOSAGE	USHADA KALA
1	23/8/2023 to 29/8/2023	USHIRASAVA	10-0-10ML	A/F
2	23/8/2023 to 29/8/2023	ARAGWADADI KASHAYA	10-0-10 ML	A/F
3	23/8/2023 to 29/8/2023	ARYOGYAVARDHINI VATI	1-0-1	A/F
4	23/8/2023 to 29/8/2023	AVIPATTIKARA CHOORNA	2.5-0-0 GMS	B/F
5	23/8/2023 to 29/8/2023	LAGHU SOOTHASHEKARA RASA	1-0-1	A/F
6	23/8/2023 to 29/8/2023	NIMBAMUTHA ERANDA TAILA	1-0-0 TSP	A/F
7	23/8/2023 to 29/8/2023	PINDA TAILA	-	FOR E/A

*Abhyantara snehapana- Gritha selected is Mahathikitha gritha*

DAY	DATE	QUANTITY	TIME OF APPETITE
1	30/8/2023	30ML	1.00PM
2	1/9/2023	60ML	2.30PM
3	2/9/2023	100ML	3.30PM
4	3/9/2023	120ML	4.00PM

*Abhyanga –Taila selected was Pinda taila followed by bhaspha swedha*

DAY	DATE	THERAPY	MEDICINE
1	4/9/2023	SARVANGA ABHYANGA +BHASPHE SWEDHA	PINDA TAILA ( for abhyanga)
2	5/9/2023	SARVANGA ABHYANGA +BHASPHE SWEDHA	PINDA TAILA ( for abhyanga)

3	6/9/2023	SARVANGA ABHYANGA +BHASP SWEDHA	PINDA TAILA ( for abhyanga)
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Virechana – Trivruth lehya 25 gms

DATE	THERAPY	MEDICINE
6/9/2023	SARVANGA ABHYANGA+ SWEDHA	PINDA TAILA ( for abhyanga)
6/9/2023	VIRECHANA	TRIVRUTH LEHYA 25 GMS

Patient was discharged after 14 days of the procedure and was prescribed with discharge medications such as

SL.NO	MEDICINE	DOSAGE	OUSHADA KALA	DURATION
1	DOOSHIVISHARI GULIKA	1-0-1	A/F	7 DAYS
2	PUNARNAVA MANDOORA	1-0-1	A/F	7 DAYS
3	ARAGWADADI KASHAYA	10-0-10 ML	A/F	7 DAYS
4	KUSUMOLIN OINTMENT	-	E/A	

**OBSERVATION AND RESULT**

SL.NO	CLINICAL FEATURES	BEFORE TREATMENT	AFTER TREATMENT
	DRYNESS	+++	+
	SCALING	+++	+
	CRACKS	++++	++
	ITCHING	+++	+
	PAIN	++++	+
	BURNING SENSATION	+++	+
	BLACKISH DISCOLORATION	++	+

**BEFORE TREATMENT**



## AFTER TREATMENT



## DISCUSSION

As this is a chronic condition, the path of treatment chosen in this instance is shodhana followed by *shamana chikitsa*. Therefore, in this instance, virechana, which is kapha pitta *hara* and *vatanulomaka*, is being chosen. Considering the potent action of *Mahatiktha gritha* for its *pittahara* and *kandugna* action. Mahatikta Ghrita contains a large number of medicinal herbs which are bitter in nature. Tikta Rasa (bitter taste) is very useful in balancing the Pitta Dosha, it has been opted in this case for *snehapana*. *Madhuchistha* one of the ingredient of *Pinda taila* helps in the reduction of roughness of skin. It has the ingredients such as *sarja rasa* and *manjistha* which are having *varnya* properties helps in curing the discoloration of the skin.<sup>8</sup>. *Trivruth lehya* where *trivruth* is best *sukha virechaka* was given for *Virechana*<sup>9</sup>. Patient found relief after *Virechana* and 12 vegas. As there was *madhyama shuddhi* 5 days of *peyadi samsarjana karma* was explained to the patient.<sup>10</sup>

## CONCLUSION

Palmoplantar psoriasis which can be correlated with *Vaipadika* is been explained in the context of *Kshudra kustha*. It has been effectively managed through *Shodhana karma*. The present case was successfully treated and managed through *Virechana karma*. After the treatment there was much reduction in signs and symptoms such as. dryness, scaling and cracks over her bilateral palms and soles associated with pain, blackish discoloration, severe itching and burning sensation, associated with bloody discharge along with swelling of bilateral foot. From the current case study we can draw a conclusion that *Vaipadika kustha* can be successfully treated and managed through *Ayurvedic* line of treatment. No adverse reactions were observed during the course of treatment and later patient was advised to follow proper *ahara* and *vihara* to avoid the recurrences of the disease.

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