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RESEARCH ARTICLE

ROLE OF KOSTHASHODHANA WITH SHAMAN CHIKITSA IN THE MANAGEMENT OF EKA-KUSTHA (PSORIASIS) – A CASE REPORT

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Abstract

Introduction: Psoriasis is a chronic immune-mediated inflammatory, proliferative skin disorder that affects individuals across all age group, but its manifestation in order adults poses unique challenges. In this population, age related changes in skin physiology, multiple comorbidities, and polypharmacy may influence both disease expression and therapeutic choices. Clinical presentation in the elderly can be atypical and is often complicated by fragile skin, reduced healing, capacity, and increased susceptibility to adverse drug reaction. According to the Ayurveda symptoms of the Eka-Kustha, which is a Vata-Kapha dominant Kshudra Kushtha, which can be correlate with Psoriasis in modern. A 72 years male patient suffered from erythematous plaques on all over body (mainly bilateral lower limb, bilateral upper limb, Scalp region, and nape of neck) associated with severe itching, burning sensation, blood discharge from lesion and silvery scales on all over body along with sleep disturbance and generalized weakness since 10 years undergoing various allopathic treatment without sustained relief. Deepana-Pachana drugs treated him, Kosthashodhana along with Shaman Chikitsa.

Conclusion: Following the Ayurvedic regimen. The patient experienced marked improvement in all the symptoms after 21 days of treatment. The psoriasis area and severity index (PASI) scores were used to assess severity of disease, which showed marked improvement after treatment.

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Introduction:-

In Ayurvedic texts, a wide range of skin disorders is described under the single term Kushtha. Eka-Kustha is mentioned under the heading of Kshudra Kushtha. The causative factors of Eka-Kustha are same as those of Kushtha. Dietary factors include Vriddha Ahara and excessive consumption of Snigdha and Guru Ahara, curd, salt and sour substances. Vegadharana specially Vamana and other sinful acts are major aetiologies.¹ Psoriasis is one of the common dermatologic disease, affecting up to 2% of world population. The word psoriasis is derived from Greek

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word psora, means itching, and –sis meaning a diseased condition. Psoriasis is an immune-mediated disease clinically characterized by erythematous, sharply demarcated papules and round plaques covered by silvery scales. The most common variety of psoriasis is known as plaque type psoriasis. The aetiology of psoriasis is still poorly understood. Psoriatic lesions contain infiltrates of activated T cells that are believed to produce cytokines responsible for keratinocyte hyper proliferation, resulting in the characteristic clinical features of the disease.²Patients not only have a physical problem but also suffer mental and social distress. In conventional medicine, treatments such as corticosteroids and phototherapy are commonly used; been practised which has adverse effects on long-term usage. Therefore, there is need to develop management strategies for psoriasis that provide long-term benefits without adverse effects or recurrence.

In Ayurveda, psoriasis can be correlated to Eka-Kustha, Which is a type of Vata-Kapha predominant manifestation characterized by symptoms such as Aswedanam (does not sweat), Mahavastu (broadly spread all over the body), MatsyaShakalopamam (resembles “fish from” scaling in the skin), and become black and pink in color caused by vitiation of Vata and Kapha Doshas. Classic explained the Hetu (causative factors) of Eka-Kustha as consumption of Viruddhahara (disordered dieting- incompatibility), following Diwaswapna (daytime sleep) and Papkarma (indulgence in sinful acts) etc.³this case report is an attempt to manage a case of Eka-Kustha through Ayurveda approaches. The present study observed the efficacy Koshthashodhana followed by Shamana therapy in the patient with clinical symptoms of psoriasis.

Case Report:-

A 72-year-old male patient apparently normal before 10 years. Then he suffered from erythematous plaques on bilateral lower and upper limb, scalp region, nape of neck associated with severe itching, burning sensation, blood discharge from lesions and silvery scales on all over the body, along with sleep disturbance and generalized weakness since ten years undergoing various allopathic treatment without sustained relief. Then he came to the Kayachikitsa outpatient department. He was admitted on date 07/10/2024 further Ayurvedic treatment in Kayachikitsa indoor patient department, ITRA, Jamnagar. He was a known case of type 2 diabetes since twenty years, hypertension since two years for which was taking advised allopathic medication regularly (tablet losartan 50mg once a day after food and tablet metformin 500mg once a day after food). No drug allergy or previous surgery was reported. No history of alcohol, smoking or any other drugs was found.

Ashtaviddha Pariksha:

- Nadi – Vata Pradhana Kaphaja
- Mutra – frequency 7-8 times a day, normal colour (pale yellow)
- Mala – twice a day – Semisolid
- Jivha – Sama, lipt (white, coated)
- Shabda – Speech and hearing was normal
- Sparsha – Ruksha (Dry skin as the site of lesion)
- Drik – Normal
- Aakriti – Madhyam (Height- 147cm and weight 51 kg BMI 23.6kg/ m² was normal).

On examination:

The patients general state was anxious and poor appetite, Vitals were normal (Pulse rate-76 beats per minute, Respiratory rate – 20 breathes per minute, Blood pressure -122/80 mm/hg). General examination, pallor icterus, clubbing, cyanosis and lymphadenopathy was absent.

Dashaviddha Pariksha (tenfold examination) was Vata Pradhana Pitta Prakriti, Vikruti Kapha, Vata, Pitta and Rakta, Sama, Samhanana and Pramana, Sarva Satmya with Madhyama Vyayama Shakti and Bala and Vriddhavastha.

Integumentary system examination:

- Site – Bilateral upper limb and lower limb, back region, scalp region, nape of neck
- Colour – Reddish patches with white scales.
- Size – Patches and plaques of varying size.
- Consistency – Thick.
- Distribution – Bilateral symmetrical and scattered all over body.
- Primary Lesions – Erythematous patches and plaques covered with scales.
- Sign – Auspitz sign, present

Nidana Panchaka:

- **Nidana** – Divaswap (daytime sleep) – 1/2hrs/day after meal, Viruddhahara Sevana (Consumption of milk and salty snacks at the same time) and Rakta Dushtikar Ahara-Vihara (Overindulging in sour food likes pickles and curd, prolonged exposures to direct sunlight).
- **Samprapti:** Dosha – Kapha, Vata Pitta, and Rakta
 - ❖ Dushya – Rasa Dhatu, Rakta Dhatu
 - ❖ Agni – Mandagni: Aam – Jatharagni and Dhatvagni Janya
 - ❖ Srotas – Rasavaha, Raktavaha
 - ❖ Adhisthana – Twaka
 - ❖ Rogamarga – Bahya
 - ❖ Swabhava – Chirakari (Chronic)
 - ❖ Sadhyasadyata – Kricchrasadya (difficult to treat)
- **Purvarupa** –Kandu (itching), Rukshtyam (dryness).
- **Rupa**- Aswedanam (Absence of sweating), Twaka similar to Matsya Shakalopamam (resembles to the scales of fish) on hasta (hands), Pada (foot), and Greeva Pradesh (scalp region).
- **Upashaya** – Bahya Shita Sparsha and Abhyanga (improvement on wet cold sponging and oil application).
- **Anupashaya** – Ushna Sparsha (increased symptoms in work in hot and humid climates).

Diagnosis Assessment:

By Examination the clinical appearance, nature of skin lesions and positive Auspitz sign, the diagnosis of plaque psoriasis was validated Kandu (itching), scaling Rakta Varnata (redness), Daha (burning sensation), and the involvement of Kapha, Vata, Pitta and Rakta determined in this case and the Ayurvedic classics for Kushtha Roga and Nidana Parivarjana, Prakriti Vighatana, repeated Shodhana, Shamana, Lepa. Hence, in this case Kosthashodhana along with Shaman Chikitsa selected for present.

Therapeutic interventions:

The patient was first put on Deepana-Pachana than Kosthashodhana with Ayurvedic oral medication (Table no.1) and along with daily external application of Gandhaka Malhara to the affected area. He was advised to avoid dietary restrictions (avoid excessive sour, salty and spicy substances), advised to avoid day sleep, and suggested to maintain personal hygiene.

Outcome and Follow Up:

The patients was close observation in In-patient department of ITRA for 21 days and no side effect was reported. The basic assessment was done using the Psoriasis Area Severity Index (PASI) score that was found to be 34.3. Routine laboratory investigation were done on 08 October 2024 and in which complete blood count, Liver function. Renal function test were found to be within normal limits. Ayurvedic treatment were started on October 08, 2024 and Shamana Chikitsa was started after Kosthashodhana. The plaque showed good improvement, there was a reduction in the erythematous plaques over the entire body. There was a marked decrease in scaling of the skin, itching and burning sensation over the erythematous plaque involving the bilateral upper and lower limb, scalp region and nape of neck. A significant reduction in Absolute Eosinophil Counts (AEC) was observed, from 1418 cells/mL on 08/10/2024 to 534 cells/mL on 09/11/2024. Overall improvement was assessed on basis of PASI score (Table no.4).

Table No. 1: Time Line of the Case

Date	Clinical events	Interventions/procedures	Outcome
08/10/2024	Deepana-Pachana	Avipattikar Churna 3 gm twice a day before meal with Anupana of Koshna Jala and Aampachana Vati 2 Vati thrice after meal	Appetite was improved
10/10/2024	Kosthashodhana after Sarvang Abhyanga with Bala Taila and Bashpa Swedana	Trivrittavaleha 30 gm with 80 ml Triphala Kwatha Vaigiki Shudhhi -7 Vega	Not relief in symptoms
10/10/2024 To	Sansarjana karma	3 days as per Shudhhi	Mild relief in itching and erythema, burning

12/10/2024			sensation
13/10/2024 To 27/10/2024	Shaman Aushadhi was started	Manjisthadi Kwatha 40 ml twice a day before meal Kaishor Guggulu 2 tablet thrice a day after meal with warm water Combination of ArogyavardhiniRasa 500mg and Triphala Churna 3gm, Sariva Churna 1gm twice a day after meal with warm water Trivrittavaleha 5gm HS at night after meal with Koshna Jala Dushivishari Gutika 1 Vati Twice a day after meal was given along with Gandhaka Malhara for local application	Moderate relief in itching and erythema, burning sensation
28/10/2024	Patient was discharged	ManjisthadiKwatha 40 ml twice a day before meal Kaishor Guggulu 2 tablet thrice a day after meal with warm water Combination of ArogyavardhiniRasa 500mg and TriphalaChurna 3gm, SarivaChurna 1gm twice a day after meal with warm water Trivrittavaleha 5gm Hs at night after meal with KoshnaJala Dushivishari Gutika 1 Vati twice a day after meal was along with Gandhaka Malhara for local application	Moderate relief in itching and erythema, burning sensation
04/11/2024	Follow up 1 No fresh complaints	Manjisthadi Kwatha 40 ml twice a day after meal Kaishor Guggulu 2 tablet after thrice a day after meal with warm water Combination of Arogyavardhini Rasa 500mg Triphala Churna 3gm, Sariva Churna 1gm, twice a day after meal with warm water Trivrittavaleha 5gm HS at night after meal with Koshna Jala Dushivishari Gutika 1 Vati twice a day after meal was given along with Gandhaka Malhara for local application	Moderate relief itching and erythema, burning sensation
11/11/2024	Follow up 2 No fresh complaint	Same treatment continued	Moderate relief in itching and erythema, burning sensation
18/11/2024	Follow up 3 No fresh complaint	Same treatment continued	Moderate relief in itching and erythema, burning sensation
28/11/2024	Follow up 4 No fresh complaint	Same treatment continued	Moderate relief in itching and erythema, burning sensation

Result:-**Table No 2: Images of patient before and after treatment**

Before treatment			
			
Figure1.A	Figure 2.A	Figure 3.A	Figure 4.A
After treatment			
			
Figure 1.B	Figure 2.B	Figure 3.B	Figure 4.B

Table No. 3 Showing the PASI score calculation and grading

Plaque characteristic	Lesion Severity Score	Area Involved for each body region affected i.e. Area score	Amount of body Surface area represented by the region
1. Erythema/redness	0- None	0- 05	0.1 – Head and neck
2. Induration/thickness	1- Mild	1- 1-9%	0.2- Upper limb
3. Desquamation/scaling	2- Moderate	2- 10-29%	0.3- Trunk
	3- Severe	3- 30-49%	0.4- Lower limbs
	4- Very severe	4- 50-69%	
		5- 70-89%	
		6- 90-100%	

Table No. 4: PASI Score before and after treatment:

	Head			Arms			Trunk			Legs		
	BT	AT	V1	BT	AT	V1	BT	AT	V1	BT	AT	V1
Erythema	3	2	1	3	1	1	2	1	0	3	1	0
Induration	3	2	2	3	1	2	2	1	2	3	1	0
Scaling	3	2	2	2	1	1	2	1	1	3	1	0
Area%	70-89	70-89	<10	50-69	30-49	<10	30-49	10-29	0	70-89	30-49	0
Total	34.3	10.2	1.5	34.3	10.2	1.5	34.3	10.2	1.5	34.3	10.2	0

BT: Before treatment; AT: After treatment; V1: First visit

Discussion:-

The main causative factors in the manifestation of pathology of Eka-Kustha are Vata- KaphaPradhana Tridosha that vitiates Twaka, Rakta, Mansa and Ambu. Consumption of Nidana (etiology) leads to simultaneous vitiation Doshas and Shaithilyata (laxity) in Dhatus (Twaka, Rakta, Mansa and Lasika). Vitiating Doshas further affect ShithilaDhatu (looseness of Dhatus) leading to the manifestation of Eka-Kustha.⁴ In the present case, an unwholesome diet (milk and salt, curd in excess and excessive salty and sour food item) and sleeping during the daytime by the patient might triggered the vitiation of Doshas that possibly lead to the manifestation of Eka-Kustha. Exact Mechanism of such pathogenesis in modern term needs to be understood Based on the involved Dosha and Dushya, Vata-Kapha Shamaka (Pacifying Vata- Kapha) treatment was given along with Pathya diet including light easily digestible food, vegetables having bitter taste such as Neem leaves and pulses such as Moonga and old cereals.⁵

Probable mode of Action for interventions:

Deepana-Pachana because this patient had, ongoing Nidana Sevana Agnimandya was there Avipattikar Churna (Pitta Shamaka properties) and AampachanaVati before meals improves digestive power by regulating Agni and aiding in Ama digestion by its Tikta Rasa, Ushna Virya and Deepana, Amulomana properties.⁶

Kosthashodhana Karma refers to the purification and evacuation of the gastrointestinal tract to restore the normal functioning of Agni and ensure proper elimination of Dosas. After Abhyanga and Swedana, Kosthashodhana was administered using Trivrita Avaleha, known

For including Sukha Virechana (painless and effective purgation), which was required in this case. The use of Trivrittavaleha in Eka-Kustha offers a classical yet practical detox approach, supporting Dosha Shodhana and reducing dermatological symptoms by its Tikta, MadhuraRasa, Ushna Virya and Shodhana attributes.⁷

Manjisthadi Kwatha, composed of herbs like Manjistha, Triphala, Katuki, Vacha, Devadaru, Nimba etc. possesses Kashaya, Tikta and Katu Rasa along with Laghu, Ruksha Guna and Ushna Virya. These attributes make it effective in Pitta-Kapha Shamana, Agnideepana, RaktaShodhana, and Srotoshodhana and as a Kushtagna. It contains maximum phenols and antioxidants. Through these actions, it helps break the pathological process of Eka-Kustha supporting both systemic detoxification and symptoms relief.⁸

Kaishor Guggulu experts its effect of Eka-Kustha through Rakta Shodhana, Aampachana and Tridosha Shamana. Herbs like Guduchi, Triphala and Guggulu purify the blood, boost metabolism and reduce inflammation. Its Katu-Tikta rasa and Ushna Virya relieve itching, scaling a discoloration. Additionally, its ant allergic, antibacterial, and detoxifying properties support long-term disease control and prevent recurrence.⁹

Dushivishari Gutika was used to eliminate toxins in a patient with chronic exposure to heat and chemical substances. The formulations contain ingredients with Vishagna, Kushtagna, Deepana, Rasayana and Shothahara properties. Herbs like Pippli, Ela and Kushtha support Agni at a cellular level though Deepana Pachana actions. Components such as Jatamansi, Chandan, Gairika and Tagara act as blood purifiers and counter Dooshivisha.¹⁰

Arogyavardhini Rasa¹¹ when combined with Triphala offers a synergistic effect in managing Eka-Kustha. It acts through Deepana, Pachana, Rakta Shodhana and Lekhana properties, correcting Agni, removing Ama, and purifying the blood. Key ingredients like Tamra Bhasma, Katuki and Shuddha Parada enhance liver function and metabolism along with DoshaSanghata Bhedana, aiding in skin detoxification. Triphala supports bowel regulation and further assist in Rasa- Rakta Shudhhi with antioxidant and anti-inflammatory properties.¹² Gandhaka Malhara is an Ayurvedic medicine. It is an ointment used to treat skin disease. Reference Rasa Tarangini 8/63-65, AFI, Vol II, 9.

Conclusion:-

Eka-Kustha, which is a type of Kshudra Kushtha, can be correlated to psoriasis. From the above case study, it can be concluded that Ayurvedic treatment modalities, like Koshthashodhana followed by Shamana Chikitsa are useful in the management of Eka-Kustha. This protocol not only eliminates deep-seated Doshas and Dooshivisha but also restores Agni, purifies Rakta Dhatu, and alleviates symptoms like itching, scaling, and discolouration. By addressing the root cause and preventing recurrence, this integrated Ayurvedic line of management proves both effective and clinically relevant for chronic skin disorders like Eka-Kustha.

Patient consent details:-

Authors declare that they have obtained patient consent form, where the patient has given his consent for reporting the case along with the images and other clinical information in the journal. The patient understands that her name and initials will not be published and due efforts will be made to conceal her identity.

Conflict of Interest – The authors declare no conflicts of interest.

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