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INTERNATIONAL JOURNAL OF ADVANCED RESEARCH (IJAR)

Article DOI:10.21474/IJAR01/20344

DOI URL: <http://dx.doi.org/10.21474/IJAR01/20344>



RESEARCH ARTICLE

“A CASE STUDY OF PALMOPLANTAR PSORIASIS (VIPADIKA) WITH AYURVEDA MANAGEMENT”

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Manuscript Info

Manuscript History

Received: 28 November 2024

Final Accepted: 31 December 2024

Published: January 2025

Keywords:-

Vipadika, Pani-Pada Sphutana, Teevra Vedana, Kushtha, Virechana

Abstract

Palmoplantar Psoriasis is an uncommon form of psoriasis that affects the skin on the palms and soles. It is distinguished by the appearance of hyperkeratosis, scaling, numerous cracks in the palms and soles, as well as pain and bleeding. The Palmoplantar variety of psoriasis comprises 3 to 4 percent of all cases of psoriasis. In *Ayurveda*, all skin diseases are categorized as *Kushtha* and *KshudraKushtha*. Based on clinical signs and symptoms, Palmoplantar Psoriasis may be associated with *Vipadika* (a type of *KshudraKushtha* mentioned in *Ayurveda*). It is distinguished by *Pani-Pada Sphutana* (a fissure in either the palms or soles, or both) and *Teevra Vedana* (extreme pain). It mostly concerns the *Vata* and *Kapha Doshas*.

Aim: The aim was to evaluate the efficacy of *Shodhana (Virechana)*, followed by *Shamana* drugs, external washing with *Amla, Musta* decoction, and three sessions of *Jalaukavacharana* in the management of Palmoplantar Psoriasis (*Vipadika*).

Material and Method: A 32-year-old female patient presented to OPD of *Panchakarma* Department of Pt. Khushilal Sharma Govt. (Auto.) *Ayurveda* College and Institute Bhopal with the complaint of fissures, scaling, blackish discoloration, and severe pain in bilateral palms associated with itching and burning sensation for the past 8 years. She was treated with

Shodhanartha Snehan with *Panchtikata Ghrita* followed by *Sarvanaga Abhyanga* and *Vaspa Swedana* with *Dashmoola Tailam* and *Dhshmolavashpasweda*. *Virechan* was performed

with *Trivratadikashayam* with *Erand tailam* followed by *Shamana* drugs, external washing with *Amla, Musta* decoction, and three sessions of *Jalaukavacharana* (leech application was planned every 7 days).

Result: The result of the treatment is recorded as a photographic document. After two months of treatment, the patient's symptoms were relieved, and the skin condition improved noticeably.

Conclusion: The study concluded that Palmoplantar psoriasis can be successfully treated with *Ayurveda* management.

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Introduction:-

Psoriasis is an inflammatory, proliferative, non-communicable, chronic skin disease in which there are scaly papules and plaques that can involve any part of the body. Palmoplantar psoriasis (PPP) refers to psoriasis that develops on the palms and soles. However the disease can be associated with many different morphological patterns, including predominantly pustular lesions to thick scaly, hyperkeratotic plaques, or an overlapping of both of them. The main clinical features of Palmoplantar Psoriasis include dryness, scaling, itching and cracking of the Palms and soles with painful bleeding from the cracked region i.e. positive Auspitz sign along with well-defined indurated plaques. There is also evidence to suggest that PPP may be genetic variant of Psoriasis. The prevalence of Psoriasis imprecisely ranges between 2 and 3% worldwide^[1]. In India, the prevalence of psoriasis also varies from 0.44 to 2.88%^[2]. Palmoplantar Psoriasis remains a difficult dermatologic disorder to treat. Modern medical science treats Psoriasis with PUVA (Psoralen plus ultraviolet- a radiation) along with corticosteroid and immune-modulators^[3]. The treatment alternative accessible in modern medicine are associated with side effects which recurring setbacks.

Ayurveda includes all the skin disease under the broad name *Kushtha*. *Kushtha* are mainly divided into two groups i.e. *Mahakushtha* and *KshudraKushtha*. Palmoplantar Psoriasis is one such disease that can't be correlated exactly with any disease mentioned in Ayurveda but to a certain extent based on its symptoms, it can be correlated with *Vipadika* described as a type of *KshudraKushtha*. It involves predominantly *Vata* and *Kaphadosha* characterized by *Pani-Pada Sphutana* (Fissure either on palms or soles or at both) and *TeevraVedana* (severe pain)^[4]. It has a negative impact on the patient's quality of life and impedes her normal activities.

Aim and Objectives:-

To evaluate the efficacy of *Shodhana* (*Virechana*), followed by *Shamana* drugs, external washing with *Amla*, *Musta* decoction, and three sessions of *Jalaukavacharana* in the management of Palmoplantar Psoriasis (*Vipadika*).

Materials and Methods:-

Place of study- OPD of department of *Panchakarma*, Pt. Khushilal Sharma Govt. (Auto.) Ayurveda College and Institute Bhopal, M.P.

Case Report

The present case study is about successful Ayurveda management of Palmoplantar Psoriasis (*Vipadika*). A 32-year-old female patient with registration no. 066330 came to OPD of *Panchakarma* Department of Pt. Khushilal Sharma Govt. (Auto.) Ayurveda College and Institute Bhopal on 10/09/2024 with the complaint of fissures, scaling, blackish discoloration, and severe pain in bilateral palms associated with itching and burning sensation for the past 8 years.

History Of Present Illness

The patient claimed to be asymptomatic 8 years ago, but since then she has developed dry, rough and scaly skin on both palms which was progressively getting painful and fissured. She has taken modern medicine and was getting temporary relief, due to recurrence of the symptoms she came here for further treatment. On examination multiple cracks were presented on both palms, blackish discoloration with local tenderness. The patient was diagnosed with Palmoplantar Psoriasis (*Vipadika*) based on the clinical features.

Past History of Illness:

No history of Diabetes, Hypertension or any metabolic disorder.

Family History

No one in the family had any such disease.

Ashtavidh Pariksha

1. *Nadi* (Pulse)- 78/MIN
2. *Mutra* (Urine)- Normal
3. *Mala* (Stool)- Constipated
4. *Jihva* (Tongue)- Coated
5. *Shabda* (speech)- Normal
6. *Sparsha* (Skin)- *Ruksha* (Dry)
7. *Dreek* (Eyes)- Normal

8. *Akriti* (Built)- *Madhyam*

Personal History

1. Appetite: Moderate
2. Bowel: Irregular
3. Micturition: Normal
4. Sleep: Sound
5. Food: Mixed diet

General Examination

1. Appearance: Normal
2. Built: Moderate
3. Nourishment: Moderate
4. Pallor: Absent
5. Oedema: Absent
6. Cyanosis: Absent

Vital Data

1. Pulse rate: 74 beats/min
2. BP: 110/80mmof Hg
3. Respiratory Rate: 20 beats/mins
4. Weight: 72kg

Skin Examination

- Site- Plantar aspect of Palms
- Blackish Discoloration
- Distribution: Symmetrical (Both palms)
- Dryness: Itching and Cracking is visible in both palms (*Pani sphutana*) which is painful
- Surface: Rough and Dry
- Margin- irregular

Laboratory Examination

Hb%- 10.6gm%, Total WBC count- 5500/cu.mm, ESR:26mmFhr, B.T.-1:40 minutes, C.T.- 5:10minutes, HBA1C- 4.8%, LFT- Normal, KFT- Normal, Lipid profile-264.5mg/dl, HBsAg-Non-Reactive, HIV1 and HIV2- Non-Reactive, USG Abdomen- fatty liver grade 1.

Nidana Panchaka

1)*Nidana- Katu, Snighdha, Guru, Abhishyandi Ahara, Vataja Ahara*

2)*Poorva Roopa-Kandu*

3)*Roopa- Cracking of Palms with dryness, scaling, itching, bleeding and painful lesion*

4)*Samprapti-*

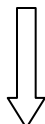
Nidana Sevena (Aharaja, Viharaja, Manasika)



Causes Agni Vikriti



Tridosha Vikruti along with Rasa, Rakta, Mamsa, Lasika Dushti



Sangaand Vimargagamana of doshas



Sthanasamshrayain Pada and Hastha



Causes VipadikaKushtha

5)Upashaya-Cracking and pain subsides on application of *Shatadhautaghrita*.

Table1:- Assessment Criteria Grading.

S.N.	Cretiria	Grade 0	Grade 1	Grade 2	Grade 3
1	<i>Pani-Sphutanam</i> (fissure in palm)	Absent	Mild	Moderate	Severe
2	<i>Vedana</i> (pain in palm)	Absent	Mild	Moderate	Severe
3	<i>Kandu</i> (Itching in palm)	Absent	Mild	Moderate	Severe
4	Scaling in palm	Absent	Mild	Moderate	Severe
5	Lichenified hyper pigmented lesion in palm	Absent	Mild	Moderate	Severe
6	<i>Daha</i> (Burning in Palm)	Absent	Mild	Moderate	Severe

Treatment Given

Intervention

- Poorva karma-** *Deepana-Pachana* was done with *Chitrakadivati* 250mg tid and *Panchkola Phanta* 20ml bid for 3 days (For increasing Appetite and Digestion).
- Snehapana**—*AbhyantarSnehpana* (increasing quantity) with *PanchtikataGhrita* starting from 30ml and it was continued for 7 days upto 210ml, by that *Samyak Sneha siddhilakshanas* were seen.

Table 2:-

Days	Dosage
1 st day	30ml
2 nd day	60ml
3 rd day	90ml
4 th day	120ml
5 th day	150ml
6 th day	180ml
7 th day	210ml

Table 3:-

Procedure	Medicine	Days
1. <i>Sarwanga Abhyanga</i> and <i>vashpa Sweda</i>	<i>DashmoolaTailam</i> and <i>Dashmoolavashpasweda</i> (3 days)	8 th , 9 th , 10 th day

2. <i>Virechana</i>	<i>Trivratadikashayam</i> 250ml with 100 ml <i>Erandtailam</i> (1 day) Total 22vegaobserved	11 th day
3. <i>Samsarjanakrama</i>	Next 7days	Day 11 th only at night time. Day 12 th , 13 th , 14 th , 15 th , 16 th , 17 th , 18 th
4. <i>Jalaukavacharana</i>	3 sessions (each session every 7 days)	After <i>Samsarjana krama</i>
5. External washing with <i>Amla+Musta</i> decoction	Three times a day	

Shamana Aushdhi(given aftersamsarjana krama) for 1month.

- 1) Combination of *Ras Manikya* 60mg+ *GandhakRasayan* 125mg+ *Arogya Vardhani vati* 125 mgbid after meal with lukewarm water.
- 2) *PanchtikataGhritaGuggulu* 2tab bid after meal with lukewarm water.

Observation table And Result

Table 4:-Improvement in symptoms after Treatment.

S.N.	Criteria	Grade Before treatment	Grade After treatment
1	<i>Pani-Sphutana</i> (fissure in palm)	3	0
2	<i>Vedana</i> (pain in palm)	3	0
3	<i>Kandu</i> (Itching in palm)	3	0
4	Scaling in palm	3	1
5	Lichenified hyper pigmented lesion in palm	3	0
6	<i>Daha</i> (Burning)	2	0

Before treatment



After treatment



Before treatment After treatment





Before treatment

After treatment

Discussion:-

- In this case, the *Shodhana (Virechana)*, followed by *Shamana* drugs, external washing with *Amla*, *Musta* decoction, and three sessions of *Jalaukavachara* were chosen based on the *Doshik* involvement (*Vata* and *Kapha*) in *Vipadika* for their ability to pacify the involved *Doshas* and provide symptoms relief. *Virechana*, one of the *shodhana chikitsa*, is particularly useful in treating a variety of skin conditions. *Virechana* has *Pitta shodhana*, whereas *Rakta prasada* leads to *Kledana* *hara*. *Virechana* was conducted by *Trivratadikashayam* with *Eranda Tailam*, which possesses *Vata Kphatamaka* qualities and relieves the symptoms of *Vipadika*.
- *Chitrakadivati* mainly consists of drugs with *Deepana*, *Pachana*, *Rochana*, and *Shoolprashamana* qualities, including *ushnaveerya*, *katu*, *tikata*, *lavana rasa*, *laghu*, *tikshana*, and *snigdha* *guna*, as well as *madhura* and *katuvipaka*^[5].
- *Panchkola Churna* has *Deepana*, *Pachana*, specifically *Ama dosha nashaka* and *Agni vardhaka* properties. It mostly contains medications that treat *Vata Kapha dosha* by *Katu rasa*, *Katuvipaka* and *Ushna veerya* to increase digestive fire, which is essential for *Sneha* digestion. *Kapha* is the primary *dosha* in *Agnimandhya* and it is treated with *Panchakolachurna*^[6].
- *Panchtikata Ghrita* contains *Nimba*, *Patola*, *Vyagri*, *Guduchi*, and *Triphala*. The medicine contains *Ushana*, *Tikshana*, *Vyavayi*, *Vikashi*, *Katu*, *Tikta Rasa* and *Katu Vipaka*. It was discovered that the activity of medications was mostly due to their qualities, which include *Deepana*, *Pachana*, *Amapachaka*, *Strotoshodhaka*, *Raktaprasadana*, *Raktashodhaka*, *Kandughna*, *Kushthaghna*, and *Varnyamechanisms* of action. They acted largely to eliminate *doshas* from the entire body and transfer them to *Koshtha*^[7].
- *Shamanamedicines*, which were used in this study to treat *Palmoplantar Psoriasis*, have already been proven to be effective for skin conditions.
- *Ras Manikya* purifies blood, which alleviates skin issues, acting as *Rakta shodhaka*. *Ras Manikya's* components work as *Kushthahar*, balancing *Kapha* and *Vata* to treat skin conditions. Immunological adversity that can cause skin manifestation is broken by *Ras Manikya*. Its antimicrobial qualities help to prevent skin infections and reduce pain, edema, and inflammation^[8].
- *Gandhak*. *Rasayana* contains antifungal and antibacterial qualities, therefore it decreases infection. It also relieves the symptoms of *Raag* (redness), *Pidika* (eruption), and possesses *Rakta shodhaka* (blood purifier) and *Kushthaghna* capabilities^[9].
- The pharmacological action of *Arogyavardhani Vati* is similar to *Kushthanashaka*, alleviating skin disorders. Its main ingredient *kutaki*, has anti-prickly and antioxidant properties and acts as a *Dhatu Poshaka*, resolving morbidity at the *Dhatu level*^[10].

- *PanchtikataGhritaGuggulu* contains medications such as *Giloy*, *Neem*, *Kantkari*, *Patol*, *Vasa*, and *Guggulu*, which have immunoprotective, anti-inflammatory, antioxidant, and skin-restorative properties. *PanchtikataGhritaGuggulu* works at the cellular level in the skin, reducing keratinization and enhancing the cell cycle. This reduces symptoms and eventually restores the skin to its normal condition^[11].
- According to *Acharaya Charaka*, one of the main causes of skin diseases is *Rakta Dushiti*^[12].
- *Jalaukavacharana* is used to help eliminate *Dushita Rakta*, which allows normal circulation to the tissues, aiding in their regeneration and relieving pain, is one among the bloodletting therapy which is used in *Atyantasukumaras*, *Twakvikaras*, *SthanikRakta dushiti etc.* *Jalaukavacharana* is best for diseases of *Pittaj* manifestations, *Daha* (Burning) was the associated symptoms in this patient^[13]. Palmoplantar Psoriasis can be cured by externally washing of palms three times a day with a decoction of *Amla*^[14] and *Musta*^[15], which have anti-inflammatory and antioxidant properties.

Conclusion:-

This case study demonstrated that *Ayurveda* management *Shodhana (Virechana)*, followed by *Shamana* drugs, external washing with *Amla*, *Musta* decoction, and three sessions of *Jalaukavacharana* seemed to be extremely effective in the treatment of Palmoplantar Psoriasis (*Vipadika*)-like skin condition.

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