

A CASE REPORT: UNVEILING THE MANAGEMENT OF VICHARCHIKA (ECZEMA) THROUGH AYURVEDA

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ABSTRACT

Eczema is a common skin condition that often causes dry, itchy and inflamed patches on the skin. Eczema is also known as atopic dermatitis. It is a chronic inflammatory skin condition that affects remarkable percentage of population worldwide. People with eczema often have a weakened skin barrier, which makes their skin more susceptible to irritants, allergens and moisture loss. The symptoms may vary from person to person but commonly include dry, itchy, red patches on the skin. These patches may become swollen, cracked or even bleed in some cases. This case study explores the journey of patient who has been living with complaints of *Bahusrava* (Excessive exudation), *Pidika* (Papule), *Shyava Varna* (Blackish brown discoloration) since last twenty years. Here, aim is to gain insights into her experience, as well as identify effective treatment strategies for managing the condition. Through a comprehensive examination and personalized treatment plan (*Virechan* therapy, *Rakatshodhak* and *Kushthahar Chikitsa*), patient was able to minimize symptoms and improve the quality of her life. The patient achieved significant improvement in her symptoms and regained control over her skin health.

Keywords: *Vicharchika*, *Eczema*, *Virechana*, *Shaman Chikitsa*, *Ayurveda* case report.

INTRODUCTION: Eczema is an inflammatory condition characterized by variable clinical findings with common histologic finding of intercellular edema of epidermis and primary lesions having erythematous macules, papules, vesicles later on forming plaques or patches.¹ In some cases, dryness, scaling and itching may predominate and clinical picture may be modified later on with skin thickening i.e., lichenification.¹ Prevalence of Atopic Dermatitis has increased over the past 30 years. It is currently estimated that 10–20% of children and 1–3% of adults in developed countries are affected by the disorder.² The causes of eczema are varied

from genetic pre-disposition, immunological factors, barrier dysfunction to environmental factors like climate changes, sweating, contact allergens, stress and foods.³ About 50% of people suffering from eczema also become sensitized to environmental allergens, such as house dust mite, and may then be classified as having Eczema under the revised World Allergy Organization nomenclature.⁴ Conventional medicine has anti-inflammatory ointments, emollients, corticosteroids, immune modulators and antibiotics as mainstay of therapy yet permanent cure is not possible every time.² Eczema is a complex disease with varied

course which is mostly chronic and/or recurrent. Spontaneous cure is also possible sometimes but about 30% of the children who suffer from the disease may have episodes in adulthood.⁵

In Ayurveda classics, *Vicharchika* explained under *Kshudra Kushta*⁶ (minor skin disorders) offers a clear resemblance to the features of eczema. . Most *Vicharchika* patients have a chronic, relapsing disease course characterized by absolution and intermittent flares. Thus, controlling symptoms of chronic *Vicharchika* is still grueling.⁷

Ayurveda management for *Vicharchika* focuses on restoring the balance of *Doshas*. Approach involves a combination of lifestyle modifications, dietary changes, herb-mineral remedies, detoxification measures and external applications. It is important to note that treatment is tailored specific to individual's unique constitution and underlying cause. In the present case study, a young adult female was intended to treat with *Samshodhana* (Bio-cleansing therapy) and *Sanshaman* (pacifying) therapy for the treatment of *Vicharchika*.

Patient Information:

A young homemaker female aged 37 years visited the out-patient department of the hospital with complaints of generalized itching, more on lower limbs with hyper pigmented oozing lesions on lower limbs and upper limb for more than twenty years.

History of Present Illness: According to the patient she was apparently alright

twenty years back when she gradually started developing itching on lower limbs followed by involvement of whole body. Severity of itching increased gradually with further development of hyper pigmented patches on lower limbs which further lead to peeling of skin and oozing of blood from the lesions. Simultaneously both upper limbs were also involved. Patient further told that the symptoms aggravated on wearing woolen clothes and on weather changes. For last three months she also complained of pain, redness and burning sensation on cheeks. For above she took treatment from various hospitals but got temporary relief only. With above complaints she visited the hospital and was taken up for further evaluation and management.

Past History: She is a known case of Rheumatoid Arthritis.

Family History: Patient's mother is Diabetic and her grandmother is allergic to pollens, grass and dust.

Drug History: Patient took several medications for same and got symptomatic relief only.

Intervention:

Patient visited the hospital and *Virechana* (purgation) was planned after which *Sanshamana* (*Dosha* pacifying) drugs were administered to the patient.

Procedures administered

Table No 1. Purvakarma and Pradhan Karma

Procedure	Medication	Dose	Duration
<i>Deepan Pachan</i>	<i>Chitrakadi Vati</i> <i>Panchkola Churan</i>	250mg twice a day after food with Luke warm water. 3gm twice a day with first bite of	3 days

		meal.	
<i>Snehapan</i>	<i>Go ghrít</i> Medicated with <i>Neem, Vasa, Giloy, Manjishta, Haridra</i>	Day I- 30ml Day II- 60ml Day III- 90ml Day IV- 120ml Day V- 120ml	5 days
<i>Sarvanga Abhyanga</i> and <i>Sarvang Swedana</i>	<i>Til taila</i>		3 days
<i>Virechana</i> (administered after <i>Sarvanga Abhyanga</i> and <i>Swedana</i> on same day also)	<i>Ichhabhedi Rasa</i> with <i>Triphala+ Katuki Kwath</i> 10 gm each. Decoction done in 200 ml of water further reduced to 50ml	2 tab 50ml	

Table No 2: Sansarjan Krama

Day	Morning	Evening
Day-1	-----	Rice gruel
Day-2	Rice gruel	Rice gruel
Day-3	Khichadi	Khichadi
Day-4	Thick vegetable soup	Thick vegetable soup (with added ghee, salt and spices)
Day-5	Thick gram soup	Thick gram soup (with added ghee, salt and spices)
Day-6	Thick gram soup (with added ghee, salt and spices)	Normal Diet

Table No 3: Sanshaman Chikitsa

S.No.	Name of Drug	Dosage	Anupan	Duration
1.	<i>Gandhak rasayan</i>	500 mg twice a day After meals	With luke warm water	3 week
2.	<i>Praval pishti</i>	250 mg twice a day After meals	With honey	3 week
3.	<i>Arogyavardhani vati</i>	250 mg twice a day After meals	With luke warm water	3 week
4.	<i>Nimbadi churan</i>	1.5gm thrice a day After meals	With luke warm water	3 week
5.	<i>Aargwadhadhi kashayam</i>	25 ml twice a day After meals	With luke warm water	3 week
6.	<i>Haridra khand</i>	2 gm thrice a day After meals	With luke warm water	3 week
7.	<i>Chandanasava</i>	15 ml twice a day After meals	with equal amount of water	3 week

OBSERVATIONS AND RESULTS:



First Visit: 20/02/2021

Figure 1: Hyper pigmented lichenified lesions with oozing of blood on posterior surface of lower limb near ankle joint and on lateral aspect near knee.



Second Visit: 25/3/2021

Figure 2: Lesions dried up with less oozing of blood and reduced itching.



Third Visit: 19/4/2021

Figure 3: Dried up lesions and slightly reduced in size with marked improvement in itching yet hyperpigmentation is present.

The patient presented at the hospital with significant complaints including pain, severe itching, and hyper pigmented lesions affecting both upper and lower limbs.(Figure. 1) Excessive itching had led to ulceration, characterized by redness,

blood discharge, and oozing from the lesions on her lower limbs. Upon evaluation, the patient was recommended *Samshodhana* (detoxification) therapy. Following preparatory measures including *Deepana Pachana*, (Digestive stimulant

and aid) *Snehapana* was administered for five days, followed by *Virechana* (Table no. 1) and subsequent *Samsarjana krama* (gradual reintroduction of food). (Table no. 2) Post-treatment assessment revealed a notable reduction in pain and blood discharge, with moderate improvement in itching. (Figure. 2) Following

Samsarjana, the patient commenced *Sanshaman Aushadh* (Table no. 3) therapy for a duration of three weeks, resulting in marked improvement in discharge, redness, and pain, albeit with mild residual itching noted during the third assessment. (Figure. 3)

Table No. 4: Assessment on subsequent visits

S.no	Assessment		Observations			
			Pain	Itching	Discharge	Redness
1.	I (20/02/2021)	First visit to OPD (Fig. 1)	+++	++++	+++	+++
2.	II (25/3/2021)	After instillation of <i>Virechana</i> and <i>Samsarjana Krama</i> (Fig.2)	++	+++	+	++
3.	III (19/4/2021)	20 days after <i>Sanshaman Aushadh</i> (Fig. 3)	-	+	-	-

DISCUSSION: Skin is largest organ of the body. Besides acting as a first line of defense it is one of the most important physical characteristics of a person. Majority of skin disorders are not life threatening but, chronicity of such disorders with their physical and psychosocial impacts affects the quality of life of a person badly. So becomes a major area of concern. In Ayurveda texts various skin conditions has been mentioned under different headings like *Kushtha* (dermatological diseases) *Visarpa* (Erysipelas), *Vidradhi* (Abscess), *Dushi Visha* (cumulative poisoning) *Gar Visha* (poisoning due to two or more combinations), *Kshudra Kushtha* (minor skin disorders) etc. As per classics main reason behind skin manifestations is *Rasa-Rakta Dhatu Dushti* (vitiation of *Rasa* and *Rakta Dhatu*) by all the three *Doshas*. Etiological factors like excessive consumption of dry, stale, cold, salty, sour,

fermented, fried food, late night work schedule, excessive physical and mental exertion, indulgence in sexual activities and stress causes vitiation of *Tridosha* (three humors) further leading to *Shaitihilya* in *Twak* (skin), *Rakta* (blood tissues), *Mamsa* (muscle tissues) and *Ambu* (body fluids) which in turn gets seated in *Shithila Dhatu* (weakened tissue) and vitiating them with manifestation of *Kushta*.¹⁶ Depending on the predominance of *Doshas*, *Kushta* is divided in to various types of which *Vicharchika* is described under *Kshudra Kushta* as lesions presenting with hyper pigmentation, itching and discharge.⁶ These features totally resembled the patient's condition in present case. The clinical signs like *Kandu* (itching), *Utsedha* (inflammation), *Kleda* (discharge, moistness) shows presence of *Kapha Dosh* while, *Daah* (burning sensation), *Raag* (erythematous lesions), *Anga-Sphutana* (fissuring) and *Twak*

vaivarnaya (discolouration) are the features of Pitta dominancy.¹⁷ Different treatment modalities have been prescribed by Acharayas for the management of Kushta on the basis of Dosha dominance. For Vata predominant Kushta, Ghritpan (intake of medicated ghee) can be prescribed, Pitta predominant state is best managed with Virechana (purgation) followed by Rakta Mokshna (bloodletting), and for Kapha predominant condition Vamana (therapeutic vomiting) can be utilized.¹⁸ In the present study Virechana was done following Purvakarma (preliminary treatments) followed by Samsarjana Krama and Sanshaman Aushada. (Table No 1 and 2)

For Snehana therapy, 500 ml Go-Ghrit was prepared using 125gm of Kalka prepared from Neem, Vasa, Giloy, Manjishtha and Haridra in equal ratio in two liter of water. Mridu Paka (gentle cooking) of Ghrit was done as per standard protocols and was given to the patient for five days. (Table no.1) Drugs used were preferably selected because of Kushtaghana (antidermatitic) and Pittashamak properties. Virechana (purgation) is a detoxifying measure best suited in Pitta and Kapha Pradhan Doshas. Virechana drugs with the Ushna (warm), Tikshna (pungent), Sukshma (subtle), Vyavayi (fast pervading) and Vikasi (loosening tissues) properties works to bring out accumulated and vitiated Doshas (humours) from the body.¹⁹ Drugs used for Virechana were Ichabhedhi rasa along with Triphala and Katuki Kwath. (Table No. 1) Sanshaman aushadh was administered following Samshodhana for duration of three weeks. (Table No. 3 and 5)

Gandhak Rasayana is constituted with a number of Bhavana dravyas (triturations) like Bhringraj, Guduchi, Haritaki etc. thus act as Kaphaghana (Kapha pacifying), Kledaghana (discharge absorption), Krimighana (anti-microbial), Raktaprasadak (haematogauge) and Kushtaghana (antidermatitic).²⁰ Gandhak is said to have potent antimicrobial and antifungal properties²¹ thus acting as a great healer drug. Praval Pishti is Sheeta (cool), Kshaya (astringent), Kapha-Pitta Shamak and Viryakantikara (vitalizer)²² and a natural source of calcium. Aragwadhadi Kshayam is having Kapha-Pittahara properties and is being indicated in Dushta Vrana (infected wounds), Kushta (dermatological conditions), Kandu (itching) and Visha Vikara (poisonings). Nimbadi Yoga itself has combination of twenty one Ayurvedic medicines and very effective in wound healing and act as anti-inflammatory²³ anti-bacterial, anti-fungal,²⁴ Ropana (healing property) and anti-eczematous²⁵ in Vicharchika. Chandanasava a Sandhana Kalpa (fermented formulation) which is commonly used in urinary and skin disorders²⁶ is supposed to have Pittashamak effect thereby also helping in other systemic features like burning sensation in face. Arogyavardhani Vati being a Rasayan (rejuvenator) is having direct effect on Dhatvagni (tissue metabolism) thereby, possessing Tridosha Shamak effect. Contents like Shilajit, Guggul, Parad, Loha bhasam, Gandhaka are having Sukshamasrotogami (micro channel penetrating property), Kledasoshana (discharge absorption), Vrana shodhana (wound cleansing) actions thus help in Sthirikara (stabilization) of Twak and Mamsa.²⁷ Far

more all the ingredients are having independent *Twak Rog Shamak* properties. *Haridra Khand* has anti-allergic, *Raktashodhak* (blood purifying), *Rasayana* (rejuvenating), *Jeevaniya* (supporting life), *Balya* (strengthening), *Ojovardhaka*

(immunomodulatory) & *Dhatuposhaka* (tissue nourishing) properties which increase the immunity. Various ingredients of *Haridra Khand* have *Tridosha Shamaka* properties that help to bring the affected *Doshas* in normal level.²⁸

Table No. 5: Rationale use of medicines

S. No	Formulation	Ingredients	<i>Karmukta</i>	<i>Dosha hara</i>
1	<i>Gandhak Rasayan</i> ⁸	<i>Shudh Gandhak, Dalchini, Tejpatra, ela, Nagkeshar</i>	<i>Dhatukshaya, Mandagani</i>	<i>Pitta-Rakta Shamak</i>
2	<i>Prawal Pishti</i> ⁹	<i>Prawal</i>		<i>Tridosha Shamak</i>
3	<i>Arogyavardhini Vati</i> ¹⁰	<i>Parad, Gandhak, Loh Bhasam, Abhrak Bhasam, Tamra Bhasam, Triphala, Shilajit, Shudh Guggulu, Chitrakmool, Katuki</i>	<i>Rasayan, Deepan Pachan Dhatvagnivardhak</i>	<i>Sarvdosha Shaman</i>
4	<i>Nimbadi Churan</i> ¹¹	<i>Nimba, Amrita, Abhya, Amalaki, Bakuchi, Chakramard, Shunthi etc</i>	<i>Vatraktahara, Kan du, Kotha, Kushta, Ch harmadal Nashan, Vran Nashan</i>	<i>Tridosha Shamak</i>
5	<i>Aargwadhadi Kashyam</i> ¹²	<i>Aragwada, Indrayava, Nimba, Murva, Patha, Bhunimba, Sahachara, Patola, Saptachaddha, Chitraka, Karavi, Madhanaphala, Sahachara, Pugavishesha, PutiKaranja, Bana e sharpunka</i>	<i>Visha vikara, Chardhi, Kushtha, Vishajwara, Kandu, Prameha, Dustavrana Vishodhana</i>	<i>Kaphapitta hara</i>
6	<i>Haridra Khand</i>	<i>Haridra, Ghrit, Guda, Dugdha, Trikatu, Trijat, Triphala</i>	<i>Kandu, Visphota Dadru nashan, Sheetpitta, Udarda ,Kothanashan</i> ¹³	<i>Vatkaphas hamaka and tridosha shamaka.</i> ¹⁴
7	<i>Chandanasava</i> ⁵	<i>Chandan, Musta, Gambhari, Priyangu, Nilotpala, Manjishta, Rakta Chandan, Draksha, Dhataki etc.</i>	<i>Agnimandya, Karshya, Balakshya shukrameha</i>	<i>Pittashama k</i>

CONCLUSION:

Through personal dietary recommendations with proper *Samshodhana* and *Sanshamana* therapy

skin disorders can be effectively managed ensuring both safety and optimal results. While there is no one size fits all solution for skin disorders, meticulous observation

and correct choice of intervention can lead to improved outcomes and better quality of life. As we continue to explore and document such cases, we enhance our ability to provide effective care using Ayurveda.

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Source of support: Nil Conflict of interest:
None Declared

Cite this Article as : [Chander Shekhar Sharma et al : A Case Report:Unveiling the Management of Vicharchika (Eczema) Through Ayurveda]www.ijaar.in : IJAAR VOL VI ISSUE VI JAN - FEB 2024Page No:273-281