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RESEARCH ARTICLE

A CASE STUDY ON AYURVEDIC MANAGEMENT OF SHWITRA WITH KHADIR SAARA, AMALAKI AND BAKUCHI CHURNA

¹Dr. Bishnupriya Mohanty, ²Dr. Mohit Mahajan and ³Prof(Dr) Sangram Keshari Das

¹[MD (Samhita), PhD (Basic Principles)], Professor and Head, Department of Sanskrit Samhita and Siddhanta, Gomantak Ayurveda Mahavidhyalaya and Research Centre, Shiroda, Goa- 403103; ²MD Scholar, ³Professor & Head, Dravyaguna Vijnana, Gomantak Ayurveda Mahavidhyalaya and Research Centre, Shiroda; Goa- 403103

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*Corresponding Author: Dr. Bishnupriya Mohanty

ABSTRACT

According to Ayurveda Shwitra simple meaning is Twakvaivarnyata (Stwetabh, Shwetabhrakta, Raktabhshweta, Raktabh). Vitiligo affecting nearly 1- 1.5 % of the world's population, it I estimated between 3-4% in India, although an incidence as high as 8.8% has also been reported, irrespective of the races especially to dark skinned people. The incidence is a little more eminent in India. It occurs in males and females of all ages but most often the onset in females. Case history- 42 years old male patients come with complaints of white patches over lower back region since 5-6 years. Initially a small patch started on lower back then gradually increased in size. Examination- White milky patches, no pain, secretion & elevation. Diagnosis- appearing in later in life well deigned depigmented macula without scaling. Patient he had been prescribed: 1 part of Khadir Saar, 2 part of Amalaki, ¼ part of Bakuchi Churna(internally) – 2gm with warm water twice a day after meal followed by exposure to early morning sun light. Details of Drug Administration are shown in Table No. 1. The patient had been followed up every 7 days for 21 days. Results are shown in Table No. 2.

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INTRODUCTION

Vitiligo is mentioned as Shwitra or Shweta Kustha in Ayurvedic classical literature. Shwitra is of two types viz. Kilas and Varuna. According few literatures and as per opinion of senior Ayurveda Vaidyas these two are synonymous. According to Ayurveda, Shwitra is enumerated as RaktajaVikara. In Shwitra Kushta Vata and Bhrajaka pitta from the skin get vitiated causing discoloration of the skin. Skin is cover of the whole state. To maintain Bhrajaka Pitta in normal state dietary and lifestyle regimens should be followed. An imbalance in Vata and Bhrajaka Pitta may cause skin diseases. Pathology of Vitiligo as per modern science gives stress upon impaired melanocytes production. Melanin, one of the pigments present in the skin, is distributed improperly underneath the skin, hence it gives rise to white discoloration to the skin which is known as Vitiligo. This may be hereditary, medicine originated (caused due to toxicity), as an adverse effect of radiation, post chemotherapy effect etc. However, practically most people found having Vitiligo without any of the abovesaid causes and hence it is termed idiopathic leukoderma. Charaka, Sushruta, Vagbhata and other Ayurveda Acharyas have grouped Shwitra under Kushtha (skin disorder). Shwitra though grouped under Kushtha it has separate entity as a disease. Different Samhitakar have explained Hetus (causes) of Shwitra Kushtha which are totally different as mentioned in Modern science. Consideration of Hetu,

Samprapti and Samprapti Ghatak prior treating any diseases is important as per Ayurveda philosophy. Hence it is important to study Hetus (causes) explained in classical literature and to find specific Hetu in the patient.

Hetu of Shwitra found in Ayurvedic literature are as follows

- Viruddhaahara (taking different foods together which are of opposite properties)
- Chardinigraha (suppression of vomiting; overuse of modern antiemetics should also considered here)
- Atibhojana (Consumption of excess food which is beyond need of body)
- Ati Amla (Sour food consumption in large amount)
- Lavana (Salty food consumption in large amount)
- Madhura (Sweet food consumption in large amount)
- Katu (Spicy food consumption in large amount)
- Nava anna (use of grains within one hour after harvesting
- Dadhi (curd and other sour milk products)
- Matsya Bhakshana (fish and other sea food)
- Vipra-Guru Gharshana (insulting elders)
- Papakarma (unlawful and sinful activities), etc

Samprapti: Twacha is the part of the body, which completely cover the Meda, Shonita & other Dhatu & get spread upon the body. Acharya Vagbhatta described that Vata is causative factor for Twacha and its sensory function. Agni use for Rupa, Varna and Pitta. So Vata and bhrajaka Pitta reside in the Twak, Due to the above said reasons, all the three doshas are aggravated in association with skin, Rakta, Mamsa and Udaka, these Dushita Doshas get mixed with Rasa Dhatu and spreads from one Dhatu to next Dhatu. Then these Doshas move in Tiryakgata Siras and get lodged in Tamra layer of Twacha causing Vikruta of the local Rasavaha and Raktavaha Srotas. The reason behind Dosha-Dushya Sammurchana in Tamra layer of Twacha is due to the presence of Khavaigunya in the respective areas of Twacha. This leads to Kshaya of local Bhrajaka Pitta and causes Twak Shwetata.

Case Report: 42 years male patient came to OPD with complains of white patch over lower back since 5-6 years. Initially it is small patch over lower back then increases in size. There were no associated complains confined to lesions like itching or burning sensation and also no history of environment, occupation and related to contact with harmful dietary substance. Patient had received conventional treatment for a period of one year without any improvement.

Examination: The patch on lower back region having symptoms like *twakshwetata*, *twakrukshata*, *Daha* and *Romvivrnata*There is no family history of vitiligo. His childhood history had no significant events. On Examination it was found that he had no systemic problem; fair complexion, thin body built, Weight 68 kgs, height 154 cms. All vitals are normal.

Hetu: Ahara: Aniyamita Aahara (Irregular food habits), Viruddha Aahara (Fruit salad i.e. fruits + milk), Dadhi (over use of Curd), Ati Madhur-Lavan Rasa Sevana (excessive use of Sweet and Salty food in diet).

Vihara: Diwaswap.

Samprapti: After Hetu (causative factors) sevan all three Doshas got vitiated. Tridoshas reached all over body by Tiryakgati. Pathogenesis (Sthansanshraya) took place underneath the skin at lower back region giving rise to white discoloration of the skin at that place (Vyakti). In this way ShwetraK ushtaabhivyakti was observed in the patient. Following Samprapti Ghataka were observed in the patient. Dosha-Vata, Pitta and Kapha. Dushya- Rakta, Mans, Meda and Ambu. Adhisthan- Bahya Rogamarg i.e. Twacha(Skin). Srotodushti type-Srotavarodh

MATERIALS AND METHODS

Primary Objective: To study role of 1 part of Khadir Saar, 2 part of Amalaki, ¼ part of BakuchiChurna(internally)in the management of ShwitraKushta.

Secondary Objectives:

To study ShwitraKushta in detail from Ayurveda literature.

To Study karmukatva of 1 part of Khadir Saar, 2 part of Amalaki, ¼ part of Bakuchi Churna (internally) in the management of Shwitra Kushta.

Chikitsa Vivaran:

After proper analysis of patient he had been prescribed:

1 part of Khadir Saar, 2 part of Amalaki, ¼ part of Bakuchi Churna (internally) – 2gm with warm water twice a day after meal followed by exposure to early morning sun light. Details of Drug

Administration are shown in Table No. 1. The patient had been followed up every 7 days for 21 days.

Pathya: Cow milk, Cow ghee, Munga (Green gram), Padval (pointed gourd), Methi (Fenugreek) and Laghuahara (diet easy to digest).

RESULTS AND DISCUSSION

After treatment with 1 part of Khadir Saar, 2 part of Amalaki, ¼ part of Bakuchi Churna (internally) and sitting under morning sun light, blisters and reddish discoloration was observed over the white patch of Shwitra Kushtha. Patient suffered from irritation and itching at that spot but he was told to ignore as per he counselled prior the procedure. Slowly reddish area turned black and slowly skin color was achieved at that spot. Size of patch reduced slowly. Results are shown in Table No. 2.

Table. 1 Showing description of medication

Sr.No.	Subject	Medicine
1.	Matra	2 gm BD
2.	Kala	Adhobhakta
3.	Anupan	Koshnajal
4.	Kalavadhi	21 Days

Table 2. Showing the progress of Treatment on Skin Patch

Follow up	Day	Observation (size of white patch in cm)
Baseline	1	4 X 3 cm
1 st	7	4 X 2.5 cm
2 nd	14	3.5 X 2.5 cm
3 rd	21	3.2 X 2.3 cm

Treatment with 1 part of Khadir Saar, 2 part of Amalaki, 1/4 part of Bakuchi Churna (internally) had been found effective and useful. Patient was satisfied at the end of three weeks. Bakuchi is vyadhipratyanik drug (first choice drug) for Shwitra Kushtha. The rasa of Bakuchi is Katu, Tikta, KatuVipaka Ruksha Guna. Katu-Tikta Rasa, Ruksha Guna, KatuVipaka helps to correct Sroto-Dushti in ShwitraKushtha. Blood circulation of affected area is increased giving rise to formation of Prakrut Bhrajak Pitta. Melanin synthesis is increased. Ultraviolet rays of morning sun light along with application of Bakuchitaila encourages the growth of melanocytes. Ushna Guna reduces of Kapha-Vata Dosha and achieves Agnideepan and Pachana. Laghu, Ruksha Guna helps to reduce Kapha Dosha. KatuVipaka helps to remove Stroto-Dushti by its Stroto-shuddhikarproperty. Bakuchi is mentioned as Kushthaghna (useful in skin disorders), Kaphvatahar (Normalizes increased Kapha and Vata) and Twachya (promotes healthy skin). Bakuchi (Psoralea corylifolia) extract contains various phytochemicals viz. flavonoids, coumarins and meroterpenes. Flavonoids incldeneobavaisoflavone, isobavaflavone, bavachalcone, bavachinin, corylin, corylifol, coryfolin etc. Coumarins include psoralen, psoralidin, isopsoralen, angelicin etc. Meroterpenes include bakuchiol and 3-hydroxybakuchiol.

It possesses few antioxidant properties also. All these constituents supposed to helps in formation of melanocytes and blackish discoloration of skin. The mode of action of any of above constituents totally depend upon the formulation of drug and route of administration. Khadira- Khadir is having Tikta, Kashaya rasa, Sita virya which alleviates Pitta kapha. Caraka Acharya mentioned it as best Kustaharadravya in Agraprakarana. It has also the properties of Switraghna. Kandugna, Kustagna, Krimihara. The decoction has the important ingredients like catecnin (flavonoid), catechu tannic acid and tennis. There by Khadira helps for better absorption. Kashay rasa of khadir holds twakprasadak and raktashodhak properties which ultimately leads to raktaprasadan and reduction of vaivarnyata of skin. The Amalaki contains the compounds which have the dyeing action. It contains tannins- gallic acid & ellagic acid. Amalaki being, Alavanapancha rasa, Sita virya and Madhura vipaka acts as Tridoshahara.

Due to Rasayana and Vayasthapana property leads to formation of Prasastha dhatu which slows down the degeneration of cells and regenerates new cells as well. Even it has Kushthagna property. Switra being an auto-immune disorder. The potent immune modulator Amalaki acts against the Auto-Immune Mechanism in which antibodies against melanin were proved to be isolated from the serum of Vitiligo patients.

CONCLUSION

Treatment with 1 part of Khadir Saar, 2 part of Amalaki, ¼ part of Bakuchi Churna (internally) were found significantly effective in Shwitra Kushtha. No adverse effects were observed during the treatment period. The use of morning sun light is may promote growth of melanocytes under skin along with Bakuchi Taila. Treatment duration was very less. Further trials are needed in large sample, for longer duration using control drug.

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