



## RESEARCH ARTICLE

### AYURVEDIC MANAGEMENT OF VIPADIKA W.S.R. TO PALMER PSORIASIS

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#### ABSTRACT

**Background:** Skin Disease in Ayurveda described under the *Kushta Roga Adhyay*. *Kushta Roga* is classified into seven *Mahakushta* (seven types of major skin disease) and eleven *Kshudra Kushta* (minor skin disease) Vitiating of *Twak* (skin), *Rakta* (blood), *Mamsa* (muscle tissue) and *Lasika* (lymph) leads to *Kushta*. *Vipadika* is one of the *Kshudra Kushta* (minor skin disease), characterized by *Pada-Pani Sphutana* (cracks on heels and hand) and *Vedana*(pain). In modern point of view *Vipadika* is correlated with Palmoplantar Psoriasis which is primarily affects the palms of feet & soles of the feet causing thick, scaly, painful patches. These patches may crack bleed, leading to difficulty with daily activities. **Aim:** To study the management of *Vipadika* w.s.r. to palmer psoriasis with Ayurvedic modalities. **Objectives:** 1) To study the role of *Shodhan & Shaman Chikitsa* in management of *Vipadika*. 2) To Study Palmoplantar Psoriasis disease in details. **Material & Methodology:** A 17 Yrs Female patient came to OPD with complaints of *Ubhay Hasta Anguli Pradeshi – Twak Sphutan, Twak Vaivarnya, Kandu, Shoola, Shweta Strav* and Intermittently *Raktaastrav, Malabadhata, Agnimandya* in the last 8 months. Was effectively treated with *Shodhan Chikitsa* followed by *Shaman Chikitsa* along with *Bahyachikitsa*. Results after the complete treatment assessed by subjective & objective diagnostic criteria. **Results :** Patients show 100 % result after *Shodhan Chikitsa* followed by *Shaman Chikitsa* along with *Bahyachikitsa*. **Conclusion:** The case study reveals that, *Vipadika* was treated using solely *Virechan* and Ayurvedic medicine. In the care of *Vipadika*, *Pathya Sevan* is crucial. Avoiding *Apathya* is advised. As a result, the offered Ayurvedic medication proved effective in curing the *Vipadika*.

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## INTRODUCTION

Ayurveda includes all the skin diseases under the broad name *Kushta*. There are 18 types of *Kushta* described in Ayurved Samhitas. <sup>[1]</sup> *Vipadika* is one among the *Kshudra kushta*, commonly elicited causative factors for the development of *Kushta* are consumption of *Virudha Ahara*, *Drava*, *Snigdha Guru Bhojana*, intake of food in *Ajirna Avastha*, *Divaswapna* and *Mithyopachara* of *Panchakrmas* etc, which is characterised by *Pani-Pada Sphutan* (fissures in palm and sole), *Tivra vedana* (severe pain), *Mandakandu* (itching), *Swaraga Pidika* (red patches). <sup>[2]</sup> *Vipadika* is explained by Acharya Charaka in Charaka Chikitsasthan 7th chapter i.e., *Kushtachikitsa Adhyaya*, Madhava Nidana 49th chapter i.e., *Kushta Nidana*. <sup>[3]</sup> Vitiating *Doshas* further causes vitiation of *Twak* (skin), *Rakta* (blood), *Mamsa* (muscular tissue) and *Lasika* (serum/lymph) and ends up in manifestation of *Kushta*. As per modern point of view, *Vipadika* bears a resemblance to Palmer psoriasis. Globally, the incidence of psoriasis is estimated to be between 2 and 3%. Psoriasis prevalence varies from 0.44 to 2.88% in India as well. <sup>[4]</sup> It may also occur in feet and hand both or either feet or hand, hence often referred as palmoplantar psoriasis. <sup>[5]</sup> Palmoplantar psoriasis is caused by a combination of genetic and environmental factors. The most common genetic factor associated with palmoplantar psoriasis includes the human leucocyte antigen (HLA). <sup>[6,7,8]</sup> It is characterized by hyperkeratosis, fissures, erythema and occasionally inflammation and pustules. With above due consideration, Ayurveda offers prime treatment in *Vipadika*, that can treat this disease and reverse its effect without any side effect. Ayurvedic treatments mainly focus on restoring the balance of *Dosha* through a holistic approach involving *Nidanparivarjan* (to eliminate the causative factors) *Ahar* (dietary adjustments), *Vihar* (lifestyle changes), and *Shaman & Shodhan Chikitsa* along with *Bahyachikitsa* (External application). By overviewing this disease, the case study was studied and completely treated with Ayurvedic treatment.

**AIM:** To study management of *Vipadika* with Ayurvedic modalities.

#### OBJECTIVES

- To study the role of *Shodhan & Shaman Chikitsa* in management of *Vipadika*

- To evaluate efficacy of Ayurvedic treatment in *Vipadika*.
- To study *Vipadika* & Palmoplantar Psoriasis in detail.

## METHADODOLOGY

**Case study:** A 17 Yrs Female patient came to OPD with complaining of

- *Ubhay Hasta Anguli Pradeshi – Twak Sphutan, Twak Vaivarnya, Kandu, Shoola, Shweta Strav* and Intermittently *Raktaastrav*.
- *Malabadhata*
- *Agnimandya*

All symptoms occurred in the last 8 month but elevated in last 15 days.

**History of Present Illness:** On examination multiple fissures with pus or sometimes blood discharge was seen on both palm and back region of hand. Skin has reddish discoloration with dryness and local tenderness was present on both palms. The patient was unable to move her fingers, to hold pen and unable to writing due to the above complaints. She had taken treatment for same complaints. But There was recurrence in her complaints. Hence, she came to O.P.D. for Ayurvedic treatment.

**History of Past illness:** No history of any Major illness found.

**Family history:** Not specific family history found regarding skin disease.

**Menstrual History:** Patient was having regular menstrual cycle with interval of 28 days.

### Personal history

#### Aharaj

- **Appetite:** *Agnimandya*
- Taking Non – Vegetarian diet - Weekly 3 or 4 times
- Junk food / Fast food – Weekly 2 times
- Habit of eating spicy food and stale food .

#### Viharaj

- Late night sleeping.

### General Examination

- **Appearance:** Normal
- **Built:** Moderate
- **Nourishment:** Moderate
- **Pallor:** Absent
- **Oedema:** Absent
- **Cyanosis:** Absent

### Vital Data

- Pulse rate: 78 beats/min
- BP: 120/70mmof Hg
- Respiratory Rate: 18 beats/mins
- Weight: 48kg

### Ashtavidha Parikshan

Table No. 1 Showing Ashtavidh Parikshan

Sr. No.	Characters	Observation
1	<i>Nadi</i> (Pulse)	78 / min
2	<i>Mala</i> (Stool)	<i>Malabadhata</i>
3	<i>Mutra</i> (Urine)	<i>Samyak</i>
4	<i>Jivha</i> (Tongue)	<i>Alpa Saam</i>
5	<i>Shabda</i> (speech)	Normal
6	<i>Sparsh</i> (Skin)	<i>Ruksha</i> (Dry)
7	<i>Druka</i> (Eyes)	Normal
8	<i>Akruti</i> (Built)	<i>Madhyam</i>

## Skin Examination

- **Site:** *Ubhay Hasta Anguli* (both hands finger)
- Blackish Discoloration
- **Distribution:** Symmetrical (Both palms)
- **Dryness:** Itching and Cracking is visible in both hands finger which is painful
- **Surface:** Rough and Dry
- **Margin:** Irregular

## Diagnostic Assessments

**Table 2. Showing Subjective criteria for assessment of therapy**

Sr. No.	Sign and Symptoms	Grades			
		0	1	2	3
1	<i>Pani Pada Sphutan</i> (Fissures/cracks)	No cracks	Mild	Moderate	Severe

**Table 3. Showing Objective criteria for assessment of therapy**

Sr. No.	Sign and Symptoms	Grades				
		0	1	2	3	4
1.	<i>Kandu</i> (Itching)	No itching	1-2 times a day	Frequent itching	Itching disturbs the sleep	-
2.	<i>Tivra Vedana</i> (Excessive Pain)	No pain	Mild pain of easily bearable nature; comes occasionally	Moderate pain, but no difficulty	Appears frequently & requires some measures for relief	Pain requires medication and may remain throughout the day
3.	Auspitz sign	Absent	Less often bleeding (oozing)	Often bleeding but in less amount	Often bleeding & excessive	-

**Treatment:** The patient was administered classical followed by *Shamana Chikitsa* (Palliative treatment) along with *Bahyachikitsa* (External Application).

**Table 4. Showing Abhyantar Snehapan with Panchatikta Ghrita**

Days	Sneha	Dose	Route	Frequency	Anupan
1.	<i>Panchatikta Ghrita</i>	30	Oral	Morning empty stomach	Warm water
2.	<i>Panchatikta Ghrita</i>	60	Oral	Morning empty stomach	Warm water
3.	<i>Panchatikta Ghrita</i>	90	Oral	Morning empty stomach	Warm water
4.	<i>Panchatikta Ghrita</i>	120	Oral	Morning empty stomach	Warm water
5.	<i>Panchatikta Ghrita</i>	140	Oral	Morning empty stomach	Warm water
6.	<i>Panchatikta Ghrita</i>	160	Oral	Morning empty stomach	Warm water
7.	<i>Panchatikta Ghrita</i>	160	Oral	Morning empty stomach	Warm water

## Virechan (purgation therapy):

The *Virechan* procedure is conducted in three stages, as per classical Ayurvedic guidelines:

- *Purva Karma*
- *Pradhan Karma*
- *Paschat Karma*

**Purva Karma:** *Purva Karma* involves *Deepan-Pachan*, *Snehapan* and *Abhyanga Swedana*. *Deepana* and *Pachana* was given by administration of *Aampachak Vati* 2 BD for 7 days after food. *Abhyantar Snehapan* with *Panchatikta Ghrita* was started before *Virechana* Table 4. After obtaining *Samyak Snigdha lakshanas* (symptoms of proper oleation like oiliness of skin, passing stool containing fat, feeling of aversion of *Ghee*), after 8th day of *Snehapana*, patient was subjected to perform *Abhyang* and *Sarvang Swedan* by *Nadi Swedan* for 3 days. During all these days *Laghu Ahar* (light food) and *Koshna Jala* (lukewarm water) was given.

**Pradhan Karma:** On the day of *Virechan* Procedure, Patient was asked to be empty stomach. *Abhyang* and *Nadi Swedan* was performed, before administration of *Virechan Dravya* Blood Pressure, Respiratory Rate, Pulse, and Temperature were recorded. It was recorded at regular interval during the *Pradhan Karma*. *Virechan* was given by *Abhyadi Modak* 4 tablet with *Aargwad Phala Majja Phanta*. After that, Vitals of the patient recorded to avoid any complications. Number of motions after administration of *Virechana* drug was counted till the symptoms of proper purgation like stopping of purgation on its own, passing of stool with mucus in the last one or two motions, feeling of lightness in the body appeared. 12 *Vegas* (number of motions) were observed.

**Pashchat Karma (post procedure of dietetic indication):** After the completion of *Virechan* (purgation), patient was kept on *Samsarjana Krama* (post procedure of dietetic indication) of considering the '*Shuddhi*' as '*Madhyam*' type of '*Shuddhi*' (moderate purification). Patient was advised to take rest and special diet i.e *Manda*, *Peya* (Rice gruel) was advised for 5 days.

**Shaman Chikitsa:** *Abhtantar Aushadhi* and *Bhirparimarjan chikitsa* given for 3 months (Table, 5) (Table, 6)( Table, 7) (Table, 8).

**Table 5. Showing *Abhyantara chikitsa* for first month**

Sr. No.	Drug	Dose	Anupan	Duration
1.	<i>Arogyavardhini vati</i>	500 mg BD Before meal	Water	For 21 days
2.	<i>Gandhak rasayan</i>	500 mg BD after meal	Water	
3.	<i>Khadirarishtam</i>	20 ml BD after meal	Water	
4.	<i>Avippatikar Churna</i>	5 gm at bed time	Water	

**Table 6. Showing *Abhyantara chikitsa* for second month**

Sr. No.	Drug	Dose	Anupan	Duration
1.	<i>Arogyavardhini vati</i>	500 mg BD Before meal	Water	For next 21 days
2.	<i>Gandhak rasayan</i>	500 mg BD after meal	Water	
3.	<i>Khadirarishtam</i>	20 ml BD after meal	Water	
4.	<i>Sukshma Triphala</i>	250 mg TDS after meal	Water	
5.	<i>Avippatikar Churna</i>	5 gm at bed time	Water	

**Table 7. Showing *Abhyantara chikitsa* for third month**

Sr. No.	Drug	Dose	Anupan	Duration
1.	<i>Panchatikta Ghrita</i>	10 ml mornig Empty Stomach	Lukewarm water	For next 21 days
2.	<i>Kaishore Guggula</i>	500 mg BD Before meal	Water	
3.	<i>Gandhak rasayan</i>	500 mg BD after meal	Water	
4.	<i>Raktapachak Kashay</i>	20 ml BD after meal	Water	
5.	<i>Avippatikar Churna</i>	5 gm at bed time	Water	

**Table 8. Showing *Bhirparimarjan Chikitsa***

Sr no.	Drug	Route	Duration
1.	<i>Jivantyadi Lepam</i>	For Local Applicaion	For 1 month(Twice a day)
2.	<i>Sinduradi Lepam</i>	For Local Applicaion	For next 1 month (Twice a day)
3.	<i>Jatyadi tail 100ml + Coconut oil 100 ml</i>	<i>Avgahan</i> of both palms	For 3 months once a day

**Pathya - Apathya:**

**Ahara:** Light, easily digestible food, vegetables having bitter taste. Avoid oily, junk food, milk, curd, any type of sour substance, fish, meat of marshland. *Avoid Samasana, Adhyasana, Visamasan.*

**Vihara:** *Divaswapna* (sleeping in day time) *Ratrijagaran* (awakening in night)

## OBSERVATION AND RESULTS

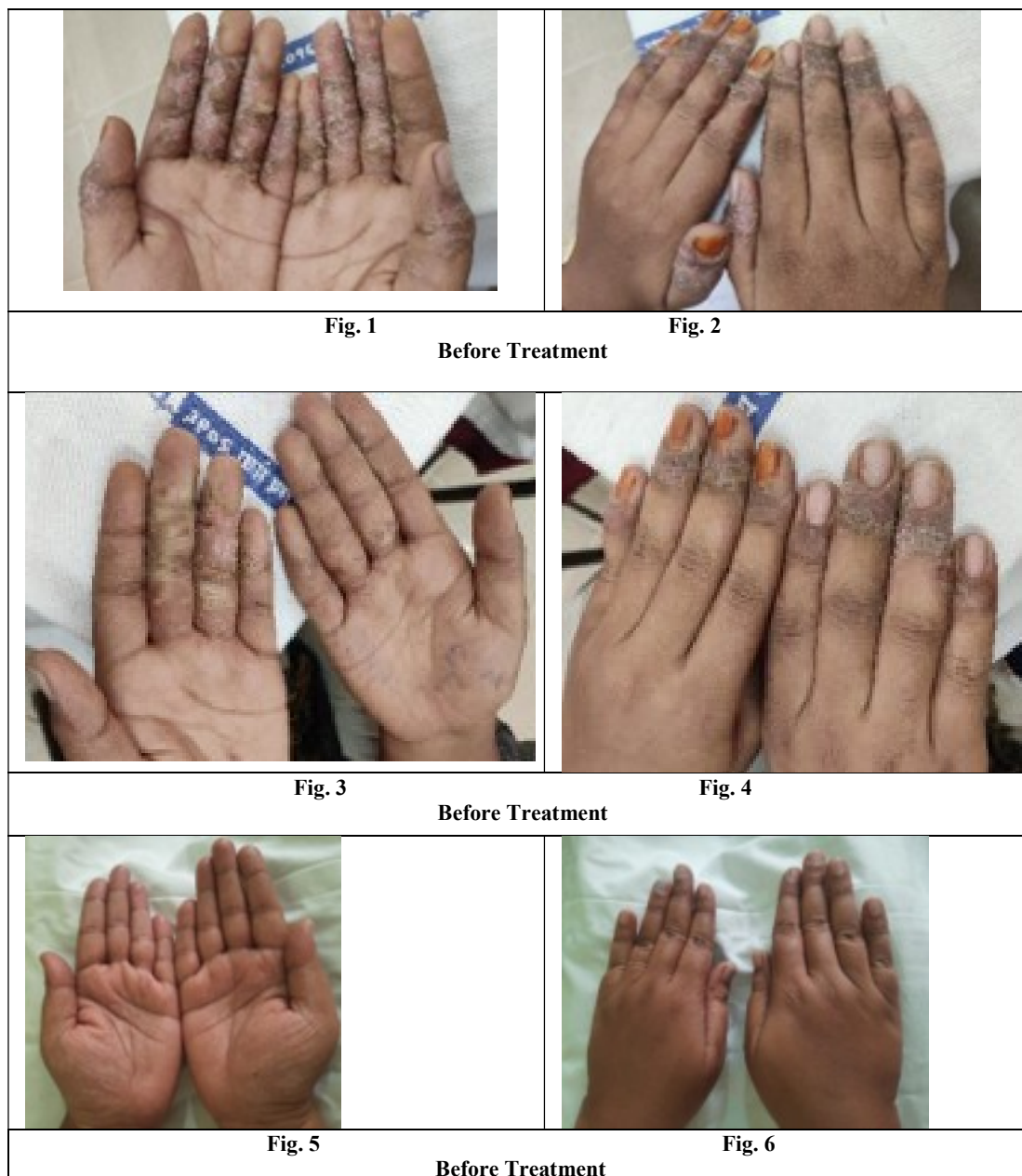
The result was observed after Each follow-up of 20 days and pre- and post-treatment after analysed the assessment criteria of the Patient. After the complete treatment for 3 months, the condition of the patient after each follow up is as follows (Table 9):

**Table 9. Showing Assessment of each follow up**

Sr. No	Complaints	Before Treatment	After Treatment				
			After Dipan & Pachan (7 days)	After Virechan	1 st Follow up (21 days)	2 nd Follow up (21 days)	3 rd Follow up (21 days)
1.	<i>Panipada Sphutan</i> (Cracks)	Severe cracks	Severe cracks	Moderate Cracks	Mild Cracks	Mild cracks	Absent
2.	<i>Kandu</i> (Itching)	3	3	1	1	0	0
3.	<i>Tivra Vedana</i> (Excessive Pain)	3	3	2	1	0	0
4.	Auspitz sign	2	2	1	0	0	0

After a complete treatment assessment score is 0, it shows that the patient has 100 % relief in *Twak Sphutan*, *Kandu*, *Daha*, and *Vedana*. Pictures of the both palms also show significant relief during the treatment and after the treatment [Fig. 1] [Fig. 2] [Fig. 3] [Fig. 4] [Fig. 5] & [Fig. 6]

### Images showing Result after Treatment



## DISCUSSION

- *Vipadika* which is characterized by *Panipada sphutana*, *Tivravedana* where there will be a vitiation of *Twak*, *Rakta*, *Mamsa* and *Lasika* along with *Tridosha* vitiation.<sup>[9]</sup> This case of *Vipadika*, treated with *Shodhan & Shaman Chikitsa* along with external application of *Jivantyadi Yamak*, *Sinduradi Lepam* and *Jatyadi Tail Avgavan*.
- *Virechan* is one of the *Panchakarma* therapy where in purgation is induced by drugs and it specially aims at the elimination of excessive *Pitta Dosha* from the body and also helps in *Rakta Prasadan Karma*. By expelling it out the disease gets cured.<sup>[5]</sup> It is advised in *Pitta* and *Rakta Dushti* disorder and also very effective in skin diseases. *Virechan* is performed by *Abhayadi Modak* with *Aargwad Phal Majja Phant*. *Aargwad* is best in *Sansran*, *Rakta Prasadan* and *Kushthahar* property.
- *Deepan-Pachan* was administered with *Aampachak Vati* which enhanced the digestive power and also facilitated for the early digestion of *Sneha*.
- *Panchatikta Ghrita* mainly medicine contains *Ushana*, *Tikshana*, *Vyavayi*, *Vikashi*, *Katu*, *Tikta Rasa* and *Katu Vipaka*, which helps in balancing of *Pitta Dosh*. It mainly acts on *Pitta*, *Rakta*, *Mansa Kleda*, *Lasika* which helps in balancing the vitiated *Dosha* and *Dhatu*. It acts as *Raktasodhak*, *Kushtaghna*, *Kandughna*, *Varnya*<sup>[10]</sup>.
- After *Virechana*, internal medicine such as *Arogyavardhini Vati*, *Gandhak rasayan*, *Panchatikta Ghrita*, *Kaishore Guggul*, *Raktapachak Kashay Sukshma Triphala & Avipattikar Churna* was given to the patient.
- *Arogyavardhini Vati*: - *Kushtha Vyadhi* vitiates *Tridoshas* and then *Twaka*, *Mansa*, *Rakta* and *Lasika* (*Dravyasangrahsaptak*). As we see from modern pathophysiological aspect, *Kushtha* is mainly caused due to *Grahani Vikruti*. Due to malfunctioning of *Grahani*, *Malavrodha* happens. *Vata Dosha* between the *Grahani* and *Pakwashay* vitiates due to that *Malavrodha* and overall

prokinetic and propulsive action of *Grahani* becomes defective. Due to this, some organic toxins formed and get absorbed resulting in *Dhatu Dushti* and finally *Kushtha Vyadhi*. Arogyavardhini overall works on functioning of *Grahani* and *Pakwashaya* and makes it smooth and fine.<sup>[11]</sup> It acts as *Uttam Rasayana*, *Deepan*, *Srotoshodha*, *Kanduhara*, *Mala-Shuddhi* *Karak*.

- **Gandhak Rasayan :-** Possesses *Kushtaghna*, *Kandughna*, and *Dahaprshamana* properties. It functions as a *Shaman*, *Raktashodhak*, *Vranaropaka*, *Twachya*, and *Krumighna*. This formulation is commonly used to treat *Kushtaroga*. Purified sulfur, the main ingredient, is effective in treating various skin disorders (*Twacharoga*) and helps reduce itching. It can be used both externally and internally for skin conditions.<sup>[12]</sup>
- **Khadirarishta :-** Main ingredients of *Khadirarishta* is *Khadira* which is *Krimighna* and *Kandugna* with *Kapha Pitta Shamak* properties. It is helpful in subsiding the symptoms of itching, rashes and sensitivity.<sup>[5]</sup>
- **Kaishora Guggulu :-** *Guggulu* also has anti-infective and antibacterial properties.<sup>[10]</sup> The *Yogavahi* (synergistic) property of *Guggulu* in the *Kaishora Guggulu*, potentiates the action of other herbs constituting the formulation such as *Guduchi*, *Triphala*, *Trikatu* etc. *Kaishora Guggulu* has mentioned in *Vatarakta Chikitsa* and also indicated for *Kushta* and *Vrana* (wound). In the present case, it relieved pain, redness, and inflammation by its anti-inflammatory and anti-bacterial properties.<sup>[13]</sup>
- **Raktapachak Kashay:-** It contains *Patol*, *Sariva*, *Musta*, *Patha*, *Kutaki* acts as *Raktaashodhak* and *Shothahar*, *Raktaprasadak*.<sup>[14]</sup>
- **Avipattikara Churna:-** It is a herbo mineral compound formulation having clinical significance in the treatment of *Amlapitta* and *Vibandha*. Majority of drugs in *Avipattikara Churna* are possessing *Katu*, *Tikta*, *Madhura Rasa*; *Laghu*, *Ruksha*, *Tikshna*, *Snigdha Guna*; *Ushna-Shita Virya*; *Madhura* and *Katu Vipaka*. Apart from *Sharkara* the main ingredient is *Trivruta* (*Operculina turpethum* L.). It has *Katu*, *Tikta Rasa*; *Laghu*, *Tikshna*, *Ruksha Guna*; *Ushna Virya* and *Katu Vipaka*. It has *Bhedana*, *Rechana* and *Shothahara* properties leading to *Pitta Virechana* useful in *Samprapti Vighatana* of *Amlapitta* and *Vibandha*.<sup>[15]</sup>
- **Sukshma Triphala Vati:-** Purifies *Pitta*, act on *Yakrit* & act as *Kushtaghna*, *Rasayan* and *Raktashodhana* which plays important role in the nourishment of the skin.<sup>[16]</sup>
- **Jivantyadi Yamaka Lepa:-** It is having anti-inflammatory, antimicrobial, wound healing as well as tissue regeneration properties. Which help reduces the symptoms and promotes healing by enhancing tissue regeneration and repair. The *Lepa* will also provide moisturizing effect to the skin and reduces the itching sensation. The moisture content of *Lepa* will prevent dryness of skin and promotes overall skin health.<sup>[9]</sup>
- **Sinduradi Lepam:-** The ingredients of *Sinduradya malahara*, i.e., *Girisindura* is indicated for *Kshudra Kushta* (minor skin disease) like *Pama*, *Vicharchika*, *Sidhma*, etc.; it is *Twachya* (good for skin), *Vranashodhaka* (cleanses wound), *Vranaropaka* (heals wound). It acts as *Bhutaghna* (anti- microbial), *Rakta Dosha Nivaraka* (removes abnormalities of Rakta). *Girisindhura* has dual property of *Vrana Shodhaka* and *Ropana*. Another main ingredient of *Sinduradya Malahara* is *Tankana* (borax), helps in reducing vata- kapha dosha. *Madhuchista* is *mrudu* (smooth), *Snigdha* (unctuous), *Bhutagrahanashaka* (anti- microbial), *Vranaropana* (wound healing) and indicated in *Kushta*, *Visarpa* (skin disease)<sup>[17]</sup>
- **Jatyadi Taila:-** *Jatyadi Taila* is *Tikta* and *Kashaya Rasa Pradhana*, both of which are *Pitta Kapha hara* and have the properties of *Vrana Shodhana*, *Ropana*, *Putihara*, and *Vedanasthapana*. *Jaati* contains salicylic acid, which has antibacterial, anti-inflammatory, and antifungal properties.<sup>[18]</sup>
- **Narikela Taila:-** It is *Balavardaka*, *Kesya*, *Vatapittasamana*, *Madhur Rasatmak* and *Madhura Vipaka*, *Raktapittahara*.<sup>[19]</sup>

## CONCLUSION

The present case study of *Vipadika* conclude that better significant result can be achieved by *Shodhan Chikitsa* followed by *Shaman Chikitsa* & *Bahyachikita* along with *Pathya – Apathya*. Recovery in the present case was promising as well as worth documenting. Herbal and Herbo - Mineral medicines plays crucial role in *Twakroga* and need in depth researches. A controlled pilot study is necessary to provide preliminary evidence of efficacy.

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