



# SIGNIFICANT IMPROVEMENT IN QUALITY OF LIFE: AN AYURVEDIC CASE STUDY ON KITIBHA KUSHTA

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## ABSTRACT

This article presents a comprehensive case study on the Ayurvedic management of Kitibha Kushta, a chronic skin disorder characterized by patches and lesions that can lead to significant discomfort and psychological distress. The Kitibha Kushta can be correlated with the Psoriasis in Contemporary science. Psoriasis is common chronic skin condition which is characterized by the development of erythematous, well defined, dry, scaly papules and plaques of size ranging from a pinhead to larger size. The study focuses on a 22-year-old male patient who exhibited typical symptoms of Kitibha Kushta. The management plan included a holistic approach combining dietary modifications, herbal formulations like Khadiraarishta, Nimbadi Kashaya etc. and therapeutic treatments such as Panchakarma like Vamana & Virechana. The efficacy of the treatment was assessed through both qualitative observations and quantitative measurements of symptom relief over a 3 months period. Results demonstrated a marked improvement in the patient's skin condition, reduction in itching and inflammation, and enhanced overall well-being. This case study underscores the potential of Ayurveda as a viable treatment modality for chronic skin conditions, highlighting the importance of individualized therapy and lifestyle adjustments in achieving long-term health outcomes. The findings contribute to the growing body of evidence supporting Ayurvedic practices in dermatological care and encourage further research into the mechanisms and effectiveness of such interventions.

**KEYWORDS:** Kitibha Kushta, Psoriasis, Erythematous, Scaly papules, Plaques, Khadiraarishta, Nimbadi Kahasya, Panchakarma, Vamana, Virechana

## INTRODUCTION

There is a growing number of population-based studies providing worldwide prevalence estimates of psoriasis. Prevalence of psoriasis varies in different parts of the world. According to published reports, prevalence in different populations varies from 0% to 11.8%. For most of the data given, the range extends from around 0.5% to close to 2.5%. Psoriasis is common chronic skin condition which is characterized by the development of erythematous, well defined, dry, scaly papules and plaques of size ranging from a pinhead to larger size. Scales are dry in nature, associated with itching, Plaques like patchy formation on skin<sup>1,2</sup>. It is mainly occurring on elbow, scalp, hand, legs etc. In Ayurveda all the skin related diseases are classified under the broad concept of Kushta. In Ayurveda, the definition of Kushta is mentioned as like –

“कालेनोपेक्षितं यस्मात्सर्वं कुष्णाति तद्वपुः”

If not given treatment on time and ignored which makes the entire body ugly is said to be Kushta<sup>3</sup>. Kushta is divided mainly in two types Mahakushta and Kshudrakushta<sup>4</sup>. The kshudrakushtas are subdivided into 11 types and Kitibha Kushta is one among them<sup>5</sup>. Kitibha kushta can be correlated with plaque psoriasis. Kitibha kushta is mainly associated with Vata and kapha vitiation and the

symptoms like Shava varnayukta (Blackish Discoloration), Kinakhara Sparsha (rough in nature), Ruksha (dry), Kanduyukta (with Itching)<sup>6</sup>. Acharya Charaka Mentioned that the Kushta is Bahudoshha Avastha in which Shodhana should be performed<sup>7</sup>, Acharaya Chakrapani commented over that the shodhana should be done repeatedly to remove the doshas in little quantity every time because if at a time removes the doshas from the body it causes loss of strength and death also<sup>8</sup>.

**Case Presentation:** A 22-year-old male patient, had come to OPD of Kayachikitsa AAMC, Tumkuru complaining of Blackish coloured lesion, rough and whitish scaly multiple lesions over back of ears, scalp, forehead and legs associated with severe itching and pain in the past 8 months.

**History:** As per patient he was normal 1 year back. Developed with blackish spot over leg associated with itching which is rough and dry. Took Allopathic treatment and got temporary relief. Presently the same complaint relapsed once again with the similar features aggravated with multiple lesions over back of ears, scalp, forehead and legs with severe itching and pain in the past 8 months. So, he consulted to our hospital OPD for treatment. He is not known case of DM and HTN.



### Personal History

**Diet:** Excessive consumptions of Madhura (sweet), Amla(sour), and Guru Ahara (heavy food)

**Appetite:** Reduced

**Bowel:** 1 time/day

**Micturition:** 4-5 times/day

**Sleep:** Good

### Physical Examination:

BP- 110/80 mmhg

PR- 78/min

RR- 18/min

Temperature- 98° f

### Astasthana Pariksha

Nadi- 78/min

Mala- Prakruta

Mutra- Prakruta

Jivha- Nirama

Drik- Prakruta

Shabdha- Prakruta

Sparsha- Ruksha and Khara Sparsha

Akriti- Madhyama

### Systemic Examination:

RS- NVBS heard

CVS- S1 S2 heard, No murmurs

CNS- Conscious and well oriented to time & place

P/A- Soft & non-tender

### Integumentary Examination

Inspection	Site: Right lower limb, Forehead and scalp, over back of the ears
	Shape: circular lesion over lower limb over back, irregular lesion over scalp and forehead
	Colour- Blackish white
	Discharge- Absent
Palpation	Temperature- Felt Texture of lesion- dry, rough & scaly Distribution – symmetrical
Tests	Candle grease sign- Positive Auspitz sign- Negative Koebner phenomenon- Negative

### Samprapti Ghataka-

*Dosha- Vatakapha pradhana tridosha*

*Dhatu- Rasa, Rakta, Mamsa*

*Upadhatu- Twak*

*Agni- Jatharganimandya*

*Srotas- Rasa, Rakta, Mamsa*

*Srotodushti prakara- Sanga*

*Rogamarga- Bhaya*

*Udbhava Sthana- Amashaya*

*Vyaktasthana- Twak*

*Roga Swabhava- Chirkari*

*Sadhyasadhyata- Krichrasadhya*

### Samprapti-

Nidana sevana  $\Rightarrow$  Tridosha Prakopa  $\Rightarrow$  Spread in tiryaka gata shiras  $\Rightarrow$  Twak, Rakta, Mamsa, Lasika

Dosha dushya takes sthanasamsraya in Twak

Kushta



*Vyavachedaka Nidana- Kitibha Kushta, Sidma, Dadru, Vipadika*

*Vyadhi Vinischaya- Kitibha Kushta*

**Centre of the study:** This study was carried out in OPD of Kayachikitsa AAMC, Tumkur

**MATERIAL & METHODS:** *Shamana Aushadi* (Internal Medicine), *Amapachana, Arohana Snehapana* (internal Oleation therapy), *Vamana* (Emesis therapy), *Virechana* (Purgation therapy), *Pathya-Apathya* (Diet).

### Treatment

#### *Shamana Aushadi*

Sl. No.	Shamana Aushadi	Dose	Time	Anupana
1	Caps. Skintone DS	1 capsule	3 times before food	Normal water
2	Khadirarishta	15ml	3 times before food	Lukewarm water
3	Nimbadi Kashaya	15ml	2 times before food	Lukewarm water
4	Caps. Atrisor	1 capsule	3 times before food	Normal water
5	Atrisor Lotion	Two times	External Application	

**Note:** Shamana Aushadi given from 29/07/2024 to 10/08/2024

#### *Shodhana (VamanaKarma)*

Sl. No.	Procedure	Date	No.of Days
1	Deepana Pachana with Sujeerna Caps- 1-1-1 before food	12/08/2024 – 22/08/2024	10
2	Snehapana with Mahatiktaka Ghrita <sup>9</sup>	23/08/2024- 30 ml 24/08/2024-50 ml 25/08/2024- 70 ml	3
3	Sarvanga Abhyanga with Brihat Dantapala Taila followed by Baspa sweda	26/08/2024 to 29/08/2024	4
4	Vamana Karma with Madanaphaladi yoga (Madanaphala, Vacha, Yashtimadhu, Saidhava Lavana)	29/08/2024	1

**Note:** Advise to Follow Samsarjana Krama.

#### *Shodhana Karma (Virechana Karma)*

Sl. No.	Procedure	Date	No.of Days
1	Snehapana with Mahatiktaka Ghrita	8/09/2024- 30ml 9/09/2024- 50 ml 10/09/2024– 70 ml	3
2	Sarvanga Abhyanga with Brihat Dantapala Taila followed by Baspa Sweda	11/09/2024 To 12/09/2024	2
3	Virechana with Trivrit Leha (Vaidyaratnam) 35gm	13/09/2024	After Sarvanga Abhyanga and Baspa sweda

**Note:** Advise to Follow Samsarjana Krama

#### *Shamana Aushadhi*

Sl. No.	Shamana Aushadi	Dose	Time	Anupana
1	Caps. Skintone DS	1 capsule	2 times before food	Normal water
2	Khadirarishta	15ml	2 times before food	Lukewarm water
4	Panchatikta Kashaya	15ml	Morning before food	Lukewarm water
5	Nimbadi Kashaya	15ml	Night before food	Lukewarm water
6	Caps. Atrisor	1 capsule	2 times before food	Normal water
7	Atrisor Lotion	Two times	External Application	
8	Atrisor Soap	One time	For Bathing	

**Note:** Shamana Aushadi given from 23/09/2024 to 23/10/2024

### RESULTS

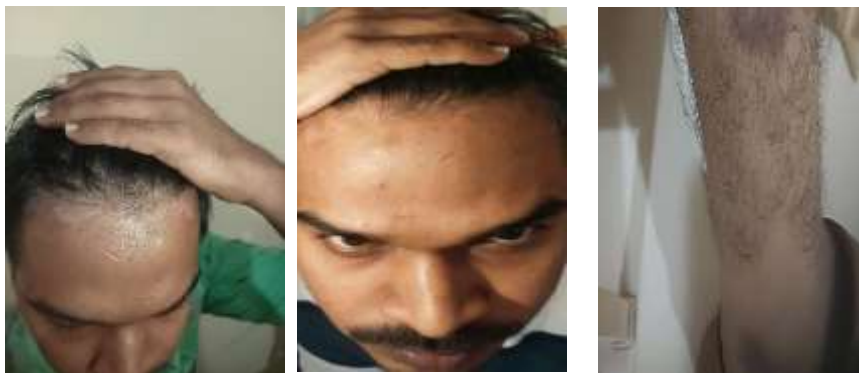
Sl no.	Complaints	BT	AT
1)	Shyava Varna	Present	Reduced
2)	Kandu	Present	Absent
3)	Khara Sparsha	Present	Reduced
4)	Parushata	Present	Reduced



### Before Treatment



### After Treatment



## DISCUSSION

*Kitibha Kushta*, a type of chronic skin disorder mentioned in the classical Ayurvedic texts, is characterized by the presence of scaly, itchy lesions, often with erythema and dryness. It is believed to be caused primarily by an imbalance of *vata* and *kapha* doshas, which leads to the accumulation of ama in the body, eventually manifesting as dermatological symptoms. The case presented in this article demonstrate the effectiveness of Ayurvedic principles and therapies in managing *kitibha kushta*, contributing to a holistic understanding of its treatment approach. The Ayurvedic management of *Kitibha Kushta* focuses on restoring balance among the doshas, eliminating toxins from the body, and alleviating symptoms of the disease. The treatment is multifaceted, including *Shamana Aushadhis* (internal medications), *Shodhana* (external therapies), dietary modifications and lifestyle changes.

### Shamana Aushadhis

In this case, a combination of herbs with *kushta* healing properties was utilized, such as *Khadiraarishta* which contains *Khadira*, *Devadaru*, *Bakuchi*, *Triphala* and other *prakshepaka dravyas*. The *dravyas* used in *Khadiraarishta* are *Tikta* and *Kashaya rasa* predominant and having *kushtahara* action. *Nimbadi Kashaya* also contains *Nimba*, *Vishwa*, *Amruta*, *Daru*, *Bhunimba* etc. *Dravyas* which are *tikta* in rasa and *kushtahara* also. *Panchatikta Kashaya* contains *Amruta*, *Kshudra*, *Nagara*, *Pushkara*, *Kiratikta* which are having antimicrobial activity and corrects the immunity. Skintone Ds capsule contains *Nimba*, *Chakramarda*, *Aragwadha*, *Harretaki*, *Amalaki*, *Vidanga*, *Haridra*, *Shatashuddi*, & *Gandhaka* which are indicated mainly in skin diseases. Atrisor capsules contains *Darvi*, *Kalinga*, *Kantakari*, *Amruta*, *Nimba*, *Ativisha*, *Vasa*, *Agni*, *Patola* and *Patha* which controls the process of keratinization and facilitates shedding of dead cells and there by decreases the accumulation of silvery white flakes on the skin and also reduces itching associated with psoriasis. Atrisor Lotion contains *Jivanti*, *Manjistha*, *Haridra*, *Streekutaja*, *Kerataila*, *Tuvaraka Taila* and *Kumari* which keeps the skin soft and supple. Prevents further dryness and exacerbation of the lesion.

### Mode of Action of Shodhana

The classical *Shodhana* consist of *Purva karma* (Pre - operative procedures), *Pradhana karma* (Operative procedures) and *Pashchat karma* (Post operative procedures). *Purva karma* mainly consist of *Deepana*, *Pachana*, *Snehana* and *Swedana*. *Pradhana karma* consist of *Vamana* and *Virechana* in this case. *Paschat Karma* includes *Dhumapana*, *Samsarjana Karma*, use of *Shamana aushadhis*.

**Deepana & Pachana:** In this case study for *Deepana Pachana* *Sujeerna* capsules was given in three times before food. *Sujeerna* capsules contains *Ardraka*, *Maricha*, *Bilva*, *Musta* and *Parpata* which are *tikta* in rasa and having *Deepana*, *Pachana* and *Sangrahi* properties.

**Snehapana:** In this case the *Snehapana* was given with *Mahatiktaka ghrta* which contains *Saptaparna*, *Ativisha*, *Tiktaroohini*, *Patha*, *Ushira*, *Triphala*, *Patola*, *Parpataka*, *Chandana* etc. In the case of *Kushta* doshas exist in dhatus such as *Rasa*, *Rakta*, *Mamsa* and *Meda*. The *Ghrta* has *Sukshmastrotogamitva* action and it can reach and also nourish the *shukra dhatu*. Moreover, in *Kushta* the medicated *ghrita* fortified with *tikta* and *Kashaya rasa* has been recommended for internal and external use. Various active phytoconstitues extracted in the *Mahatiktaka ghrta* work synergistically to cure *kushta*, possibly through the liposomal drug delivery system.

### Sarvanga Abhyanga and Baspa Sweda

In this case *Abhyanga* was done with *Brihat Dantapala taila* which contains *sweta kutaja*, *Jyothishmati*, *Bakuchi*, *Kera taila* which is mainly indicated in *Psoriasis*. *Achrya Sushruta*, while explaining the importance of *Abhyanga* he stated that *abhyanga* is *Mardavakara*, *Kaphavatahara*, *Dhatupushtikara*, *Mruja*, *Varna* and *Balaprada*. It helps to pacifies the *vata*, cures itching, normalize the colour of the skin by its action. *Swedana karma* increases the exchange process between cells and do the liquification of doshas because of liquification the doshas. Because of *Snehana* and *Swedana*, the doshas which are present in shakas will come to koshta by *Anupravana bhava* and after that they will be expelled out by *Vamana* or *Virechana karma*.



### Mode of action of Vamana Karma

Vamana Yoga, which includes Madhu, Saindhava, Madhaphala Pippali, and Vacha Churna, can be used to treat skin conditions, and

Yashtimadhu Phanta can be utilized as Vamanaopaga Dravya.



Ushna, Teekshna, Sukshma and Vikasi Vamana drugs



Due to their veerya, move to Hridaya and circulate through Dasha dhamani (Vyavayee)



Act over the vitiated doshas in the body



With Agneya guna it liquifies the doshas (Vishyandana)



With Teekshna guna- break down them into several partiicles



Liquified doshas comes to koshta from shakha (Pravana bhava of Sukshma guna)



Vayu predominance Vamak drugs stimulates liquefied Doshas from Aamashaya



Urdhhabhaghara Prabhava ultimately leads migration of Doshas towards upper body part and Expelled out the Doshas from mouth

### Mode of action of Virechana Karma

Intake of Trivrut leha which is rooksha, Tikshna, usna, and having rechana karma



Due to their veerya, move to Hridaya



From there, through Dasha dhamani (Vyavayee), reaches to macro and micro channels of the body (Anutva guna)



Act over the vitiated doshas in the body



With Agneya guna it liquifies the doshas (Vishyandana)



With Teekshna guna- break down them into several partiicles



Liquified doshas comes to koshta from shakha (Pravana bhava of Sukshma guna)



Because of Prithvi and Jala Mahabhutas it moves in downward direction & Expelled out from the guda marga





**Samsarjana Karma:** Samsarjana Karma is an important sequence to enhance the Agni in a systematized manner after Samsodhana karma. A special diet plan known as Samsarjana karma which refers to the correct sequence of Peya-Vilepi-Kirtakirita Yusha- Kiritaakirta Mamsarasa is followed. In Samsarjana karma, diet is introduced step by step from Lghu Ahara to Guru Ahara in order to strengthen the Agni. Acharya Charaka while explaining the Importance of Samsarjana karma he gives a simili that-

“यथाऽग्निरग्निस्तृणगोमयाद्यैः सन्धुक्ष्यमाणो भवति क्रमेण महान् स्थिरः सर्वपचस्तथैव शुद्धस्य पेयादिभिरन्तरग्निः॥”<sup>10</sup>

Just as small fire gradually grows larger and more stable with the help of grass, cow dung etc. so, in the case of Agni after Vamana and virechana karma, Peyadi karma causes the Agni to digest all kinds of food. In this case the Samsarjana karma is followed for Pravara Suddhi.

Day	Time	Annakala	Pravara Shuddhi
1	Morning		
	Evening	1 <sup>st</sup>	Peya
2	Morning	2 <sup>nd</sup>	Peya
	Evening	3 <sup>rd</sup>	Peya
3	Morning	4 <sup>th</sup>	Vilepi
	Evening	5 <sup>th</sup>	Vilepi
4	Morning	6 <sup>th</sup>	Vilepi
	Evening	7 <sup>th</sup>	Akruta yusha
5	Morning	8 <sup>th</sup>	Akruta yusha
	Evening	9 <sup>th</sup>	Kruta yusha
6	Morning	10 <sup>th</sup>	Kruta yusha
	Evening	11 <sup>th</sup>	Akruta Masha yusha
7	Morning	12 <sup>th</sup>	Krita Masha yusha
	Evening	13 <sup>th</sup>	Normal diet

## CONCLUSION

The case study's demonstration of the Ayurvedic treatment of *Kitibha Kushta*, in conclusion, highlights the potential of traditional therapeutic methods in treating persistent skin conditions. Using Panchakarma therapies, dietary changes, lifestyle adjustments, and certain herbal formulations, the holistic approach offers a thorough framework for treating the underlying causes as well as managing symptoms. Through the use of internal and external therapies for detoxification and the balancing of doshas, specifically Vata and Pitta, the case study demonstrates how Ayurvedic principles can result in notable improvements in the patient's skin condition and general well-being. Here, the decrease in the typical *Kitibha Kushta* symptoms—such as erythema, itching, and lesions—demonstrates the effectiveness of specific Ayurvedic treatments. Although more clinical investigations and bigger sample sizes are required to confirm and improve Ayurvedic treatment plans for *Kitibha Kushta*, this case study provides encouraging information about how Ayurveda might be used in conjunction with contemporary dermatology. It highlights the value of a customized, multifaceted approach to treatment that addresses the psychological as well as the physical components of skin disorders, helping people with this chronic illness experience long-term relief and an enhanced quality of life.

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