



## Case Study

### A CASE REPORT ON AYURVEDA MANAGEMENT OF WET ECZEMA (*VICHARCHIKA*)

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#### ABSTRACT

Skin disorders are one of the major health issues in the present era. It is a multifaceted condition that includes the emotional and social impact on individuals, as it affects psychological status of person due to its appearance, severe itching, disturbs the daily routine. The prevalence of eczema is more common in rural areas than in urban ones. Eczema is an inflammatory reaction of the skin. Characterized by variable itching and soreness, crusting, dryness, erythema, excoriation, exudation, fissuring, hyper pigmentation, lichenification, oozing, scaling and vesiculation. No satisfactory treatment is available in contemporary medical practice except antihistamines and topical steroids. As it is a common chronic skin condition that can lead to recurrent infections and poor quality of life if left untreated. The clinical features can be correlated to *Vicharchika* in Ayurveda, as it is characterized by *Kandu*, *Srava*, *Pidaka* and *Shyava varna*. It has been described under *Kshudra Kustas* and it is a *Rakta Pradoshaja Vikara*, involving three *Doshas* with *Kapha* predominance. A case of 35 years male presenting with clinical features of diffuse hyperpigmented skin lesions all over the body (bilateral upper and lower limbs, abdomen, back, face and scalp) associated with severe itching and serous discharge since 2 months. The case was diagnosed as *Sravi Vicharchika*. Patients were treated on line of *Rakta Pradoshaja Vikara (Kustha)* i.e., *Sroto sodhana* and *Dosha Shamana chikitsa* was adopted, resulting in significant improvement in clinical features.


#### INTRODUCTION

Eczema is a common, chronic inflammatory skin disease characterized by pruritis and repeated relapse. The world wide prevalence of eczema ranges from 15%-20%, 60%of the cases appears in the first year of life, majority within 5 years and the remaining manifest by 30 years of age.<sup>[1]</sup> Eczema can be classified into two broad groups, exogenous and endogenous eczema depending upon whether the causative factors are external or internal. In acute eczema there is erythema, oedema, vesiculation, oozing and crusting whereas in subacute phase there is erythematous hyperpigmented plaque with scaling and crusting. In chronic phase there is lichenification (a combination of thickening, hyperpigmentation and prominent skin markings). Most subacute and chronic eczema are perpetuated by itch-scratch-itch cycle <sup>[2]</sup>.

*Vicharchika* (eczema) is one among the *Kshudra Kushta*<sup>[3]</sup> (minor skin disorder). It is characterized by skin manifestation having the clinical features of *Kandu* (itching sensation), *Pidika* (papule) *Shyava Varna* (blackish brown discoloration) and *Bahusrava* (excessive exudation)<sup>[4]</sup>, which can be correlated to eczema according to contemporary science. *Vicharchika* is of 4 types according to clinical features opined by different *Acharyas*- *Charakokta sravi vicharchika*<sup>[5]</sup>, *Sushrutokta shushka vicharchika*<sup>[6]</sup>, *Bhelokta jeerna vicharchika*<sup>[7]</sup> and *Kashyapokta aganthuja vicharchika*<sup>[8]</sup>. *Vicharchika* is *Rakta Pradoshaja Vikara* being involved of three *Dosha* with dominance of *Kapha*. The treatment principle adopted here is *Srotho shodhana (Rakta shodhana)* and *Dosha shamana* i.e., *Pitta-kapha shamana chikitsa* which helps reducing *Shotha* and *Srava*.

#### Case report

A 35 years, male patient came to Kayachikitsa Outpatient Department of Sri Dharmasthala Manjunatheshwara (SDM) Ayurveda Hospital, Hassan, with complaints of diffuse hyperpigmented skin lesions all over the body (bilateral upper and lower

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limbs, abdomen, back, face and scalp) associated with (a/w) severe itching, burning sensation and serous discharge since 2 months. 5 years ago he noticed the abrupt onset of small vesicles over the extensor surface of his left hand and the forearm a/w scaling and mild itching for which he consulted nearby physician and was prescribed medications for 1 month. Complaints got relieved. A few months later, he gradually began to develop vesicles over his right and left hands and legs, with intermittent mild itching which was on and off. Since two months lesions began to spread across his body, face, and scalp, causing severe itching and serous discharge, it started disturbing his work, day to day activities and sleep. Hence, he approached SDM hospital.

**Associated Complaints:** Burning sensation in chest region, repeated sour belching and disturbed sleep due to itching

**Comorbidities:** No diabetes mellitus/hypertension, other major medical and surgical history.

**Family History:** No significant history

**Treatment History**

- Tab Betnesol 1-0-1 AF
- Tab Teczine 0-0-1 AF
- Sper lotion E/A
- Clonate lotion E/A

**Vaiyaktika vrittanta**

- Appetite - reduced
- Diet - mixed (non-veg 5 days/week, curd daily night)
- Bowels - 1/day
- Sleep - disturbed
- Micturition - 5-6 times /day
- Habits - nil

**General Examination**

- Built: } Moderate
- Nourishment }

- Pallor
  - Icterus
  - Cyanosis
  - Lymphadenopathy
- } absent

**Astasthan pareeksha**

- Nadi - Kaphaja
- Mutra - Prakrutha (5-6 times/day, 1 time at night)
- Mala - Prakrutha (once per day)
- Shabda - Prakrita
- Jihwa - Lipta
- Sparsha- Rooksha
- Drik - Prakruta

**Systemic Examination**

- Central nervous system: Conscious, Oriented to time, place, person
- Respiratory system- Symmetrical chest, no added sound.
- Cardio vascular examination- S1 and S2 heard, no murmur.
- Gastro intestinal system- Soft abdomen, no tenderness and organomegaly was found.

**Integumentary system**

- Type of Lesions - Papule, vesicle and scale
- Symmetry- Asymmetrical
- Distribution- Face, upper limb, lower limb, abdomen, flanks
- Shape- Irregular
- Colour- Greyish black
- Surface - Rough
- Discharge -Present (serous)

**Laboratory parameters**

- Hb: 14.2 gm%
- E.S.R: 20 mm/hr
- Eosinophils: 6%
- AEC: 625 cells/cmm.

**Table 1: Gradation of Clinical features of Vicharchika<sup>[9]</sup>**

| Clinical features        | Gradation  | Score |
|--------------------------|--|-------|
| <i>Kandu</i> (Itching)   | • No itching                                     | 0     |
|                          | • Itching present rarely                         | 1     |
|                          | • Itching disturbing patients attention          | 2     |
|                          | • Severe itching disturbing patients sleep       | 3     |
| <i>Srava</i> (Discharge) | • No <i>Srava</i>                                | 0     |
|                          | • Occasional                                     | 1     |
|                          | • <i>Srava</i> after itching                     | 2     |
|                          | • Mild <i>Srava</i> after itching                | 3     |
| <i>Pidaka</i> (Papules)  | • Profuse <i>Srava</i> making clothes wet        | 4     |
|                          | • Absent   | 0     |
|                          | • 1-2 <i>Pidaka</i> in one affected part         | 1     |
|                          | • 3-4 <i>Pidaka</i> in one affected part         | 2     |
|                          | • More than 4 <i>Pidaka</i> in one affected part | 3     |

|  |   |                  |
|--|---|------------------|
| <i>Shyavata/Vaivarnyata</i><br>(Discoloration) | <ul style="list-style-type: none"> <li>• Normal skin colour</li> <li>• Brownish red discoloration</li> <li>• Blackish red discoloration</li> <li>• Blackish discoloration</li> </ul>  | 0<br>1<br>2<br>3 |
| <i>Rookshata</i> (Dryness)                     | <ul style="list-style-type: none"> <li>• No dryness</li> <li>• Dryness with rough skin</li> <li>• Dryness with scaling</li> <li>• Dryness with cracking</li> </ul>  | 0<br>1<br>2<br>3 |
| <i>Daha</i> (Burning Sensation)                | <ul style="list-style-type: none"> <li>• Absence of burning sensation in affected part</li> <li>• Rarely burning sensation in affected part</li> <li>• Continues burning sensation in affected part</li> <li>• Disturbing patients sleep</li> </ul> | 0<br>1<br>2<br>3 |

**5D scale for assessment of pruritis**

**1. Duration: During the last 2 weeks, how many hours a day have you been itching?**

|             |               |                |                |         |
|-------------|---------------|----------------|----------------|---------|
| > 6hrs /day | 6-12 hrs /day | 12-18 hrs /day | 18-23 hrs /day | All day |
|-------------|---------------|----------------|----------------|---------|

**2. Degree: Please rate the intensity of your itching over the past 2 weeks**

|             |      |          |        |            |
|-------------|------|----------|--------|------------|
| Not present | Mild | Moderate | Severe | Unbearable |
|-------------|------|----------|--------|------------|

**3. Direction: Over the past 2 weeks has your itching gotten better or worse compared to previous month?**

|                     |                                |                                      |           |               |
|---------------------|--------------------------------|--------------------------------------|-----------|---------------|
| Completely resolved | Much better, but still present | Little bit better, but still present | Unchanged | Getting worse |
|---------------------|--------------------------------|--------------------------------------|-----------|---------------|

**4. Disability: Rate the impact of your itching on the following activities over the last 2 weeks**

|                   |                             |                                    |                                    |   |   |
|-------------------|-----------------------------|------------------------------------|------------------------------------|---|---|
| Sleep             | Never affects sleep         | Occasionally delays falling asleep | Frequently delays falling asleep   | Delays falling asleep and occasionally wakes me up at night | Delays falling asleep and frequently wakes me up at night |
| Leisure/Social    | Never affects this activity | Rarely affects this activity       | Occasionally affects this activity | Frequently affects this activity                            | Always affects this activity                              |
| Housework/Errands | Never affects this activity | Rarely affects this activity       | Occasionally affects this activity | Frequently affects this activity                            | Always affects this activity                              |
| Work/School       | Never affects this activity | Rarely affects this activity       | Occasionally affects this activity | Frequently affects this activity                            | Always affects this activity                              |

**5. Distribution: Mark whether itching has been present in the following parts of your body over the last 2 weeks. If a body part is not listed, choose the one that is closest anatomically**

|                     |  |
|---------------------|--|
| Head / scalp        | Soles  |
| Face                | Palms  |
| Chest               | Tops of hands/fingers  |
| Abdomen             | Forearms   |
| Back                | Upper arm  |
| Buttocks            | Points of contact w/ clothing<br>(e.g., waist band, undergarment ) |
| Thighs              |  |
| Lower legs          |  |
| Tops of feet / toes |  |

NOTE\*: Total score (n)= 25, 9-11 for mild pruritus, 12-17 for moderate pruritus, 18-21 for severe pruritus and ≥ 22 for very

**Diagnosis: Sravi Vicharchika (Wet eczema)**

- *Kandu* (Itching sensation)
- *Pidika* (Papule)
- *Shyava Varna* (Blackish brown discoloration)
- *Bahusrava* (Excessive exudation)

**MATERIALS AND METHODS****Therapeutic Intervention**

Patient was admitted and given *Shamana oushadi* along with *Panchakarma (Shodhana)* therapy.

Total Duration of treatment -10 days IP (in patients department) treatment

**Table 2: Treatment protocol (*Panchakarma* and *Shamana* treatment)**

| Date                     | Treatment  | Purpose/Mode of action  | Observation   |
|--------------------------|--|---|---|
| 23/09/2023               | <i>Parisheka</i> with <i>Panchavalkala sheeta Kashaya</i>  | <i>Pitta hara</i>   | After the procedure, there was mild relief in <i>Kandu</i> and <i>Daha</i>                                |
| 24/09/2023               | <i>Sadhyovirechana</i> with <i>Avipattikara churna</i> 25gm + honey  | <i>Pittahara, Kosta Shuddhi, Srotho Shuddhi</i>   | No. of Vegas -8<br>Repeated sour belching reduced<br>Burning sensation in chest region reduced            |
| 25/09/2023               | <i>Ganji</i> + Boiled veg<br><i>Siravyadha</i> to bilateral upper limb   | <i>Samsarjana krama. Rakta shodhana</i>   | Serous discharge reduced by 10%   |
| 26/09/2023 to 28/9/2023  | <i>Triphala churna</i> 5gm -0- 5gm AF<br><i>Mahamanjistadi Kashaya</i> 20ml -0-20ml AF<br><i>Ganji</i> diet<br><i>Trakrapana</i> 1l /day   | <i>Nitya virechana Rakta prasadna Pathya Rookshana</i>  | Itching and serous discharge reduced by 25%   |
| 27/09/2023 to 28/09/2023 | <i>Dooshivishari gulika</i> 1-1-1 BF (Before food)<br><i>Aragwadadi Kashaya</i> 15ml-0-15 ml AF<br><i>Gandhak rasayana</i> D S 1-1-1 AF  | <i>Kandughna, Kaphahara, Vranaropaka, Rakta shodhaka, Kustahara</i>                                 | Itching and serous discharge reduced by 50%<br>Sleep improved   |
| 30/09/2023 To 4/10/2023  | <i>Dooshivishari gulika</i> 1-1-1 BF (Before food)<br><i>Triphala churna</i> 5gm -0- 5gm AF (After food)<br><i>Mahamanjistadi Kashaya</i> 20ml -0-20ml AF<br><i>Aragwadadi Kashaya</i> 15ml-0-15 ml AF<br><i>Gandhak rasayana</i> D S 1-1-1 AF<br><i>Sar parisheka</i> with <i>siddhartaka snana churna</i><br>Diet food<br><i>Siravyadha</i><br>D Sora lotion E/A | <i>Kandughna, Kaphahara, Vranaropaka, Rakta shodhaka, Kustahara Twak doshahara Pathya Kledahara</i> | Patient feels tightness over the skin lesion<br>Itching reduced by 70%<br>Serous discharge reduced by 90% |

**Assessment**

Assessment was done before treatment (BT-0<sup>th</sup> day) and after treatment (AT-10<sup>th</sup> day)

Assessments – subjective and objective criteria, EASI score, 5D Pruritis scale

**Table 3: Showing changes in Clinical features Before and After Treatment**

| S.No | Clinical features                           | Score on 0 <sup>th</sup> day (BT) | Score on 10 <sup>th</sup> day (AT) |
|------|---|-----------------------------------|------------------------------------|
| 1.   | <i>Kandu</i> (Itching)                      | 3                                 | 1                                  |
| 2.   | <i>Srava</i> (Discharge)                    | 3                                 | 0                                  |
| 3.   | <i>Pidaka</i> (Papules)                     | 3                                 | 0                                  |
| 4.   | <i>Shyavata/Vaivarnyata</i> (Discoloration) | 3                                 | 1                                  |
| 5.   | <i>Rookshata</i> (Dryness)                  | 1                                 | 0                                  |
| 6.   | <i>Daha</i> (Burning Sensation)             | 2                                 | 0                                  |



**ESAI Score-** Before Treatment-39.8

After Treatment- 30.8

**5D Pruritis scale-** Before Treatment -Sever (Score 22 out of 25)

After Treatment -Mild (Score 10 out of 25)

**OBSERVATION**

**Figure 1: Pictures showing before treatment**



**RESULT**

There was significant improvement the clinical features of *Kandu*, *Pidika*, *Shyava Varna*, *Bahusrava* after 10days of treatment

**DISSCUSION**

In Ayurveda all skin diseases are categorized under *Kushtha*. *Vicharchika* is one among *Kshudra Kustas* where the signs and clinical features are correlated to eczema. It is the *Vyadhi* of *Raktavahastrotas*, having *Sampraptighataka* of *Pitta* and *Kapha Dosha* along with *Vata* association *Twak*, *Lasika*, *Rakta* and *Mamsa* as *Dushya*. Acharya Charaka has highlighted the role of *Panchakarma* therapy by stating that the disease treated by *Shodhana* will never reoccur, whereas the treatment with *Shamana* therapy may reoccur in due course of time. Among the *Shodhana Virechana Karma* is opted as vitiated *Dosha* is mainly *Pitta* predominance. In the present study *Shodhana*, *Shamana* and *Bahirparimarjan Chikitsa* was adopted to the patient.

*Panchavalkala kwatha sheeta parisheka* is the decoction of the bark of *Vata (Ficus bengalensis Linn.)*, *Udumbara (Ficus glomerata)*, *Ashwatha (Ficus*

*religiosa)*, *Plaksha (Ficus lacor)* and *Parisha (Thespesia)*. These have predominantly *Kashaya rasa* (astringent taste), *Sheeta veerya*. By the action of *Rasa*, it acts as *Stambhaka* (arresting) and *Grahi* (that which holds) thus reduces the *Srava* (discharge) and does *Ropana* (healing), *Shodhana* (purifying). It also does *Rakta shodhana* (blood purification) by the action of its *Rasa* and *Veerya*.

*Panchavalkala* is considered to be a good *Shothahara* (reduces swelling).<sup>[10]</sup> All the five drugs of *Panchavalkala* are proved to have anti inflammatory, analgesic, antimicrobial, and wound healing properties.<sup>[11-16]</sup>

*Sadhya virechna* is useful in *Pitta* dominant disorders along with *Kapha Sansrista Dosha* and *Pitta Sthanagata Kapha*.<sup>[17]</sup> It pacifies vitiated *Pitta Dosha* and also help in eliminating vitiated *Kapha Dosha*, corrects *Dushitha Rakta Dhatu*, causes *Valanulomana*, *Srotoshodhana*, thus reducing burning sensation, itching, serous discharge.

*Siravedha* is also type of *Raktamokshana*, if *Dosha dushti* is present in all over the body, *Siravedha*

is indicated. *Vicharchika* is a *Raktha Pradoshaja Vyadhi*. Hence *Siravyadha* helps in expelling out the *Dushta Raktha* and *Pitta* (*Ashraya ashrayi bhava*) from the body.<sup>[18]</sup>

*Sheeta, Swadhu Takra* added with *Trikatu* was given daily to pacify *Pita -kapha*.<sup>[19]</sup>

*Triphala* is *Tridoshaja shamaka*, it was used as *Nitya virechaka* here. In excessively accumulated *Dosha, nitya virechana* advised. <sup>[20]</sup> When vitiated *Doshas* does *Dushana* of *Mamsa* and *Medha dhatu*. *Nitya Virechana* is advised <sup>[21]</sup> as it does *Sroto mukha vishodhana*.

*Mahamanjishtadi kwatha* it has *Kapha- pitta shamaka, Shothahara, Raktashodhaka, Kushtagnha, Varnya*, and has *Rasayana* properties<sup>[22]</sup>. By virtue of ingredients it is a *Tikta-kashaya* (bitter and astringent taste) does *Raktha shodhana* and further prevents *Kapha dosha* aggravation.

*Dooshivishari Gulika*<sup>[23]</sup> was administered for *Shesha Dosha Harana*. It is one of the *Vishaghna* (neutralize toxins) formulation which has *Pitta-Kaphaghna, Vishghana* and *Raktaprasadaka* (blood purifier) properties.<sup>[24]</sup>

*Gandhaka Rasayana* is good for skin as it balances *Tridosha* reduces itching and discharge from lesion and is also nourishing in nature because of its *Rasayana* property.

*Sidarataka Snana Choorna*<sup>[25]</sup> is *Tikta Kashaya Rasa Pradhana*. It possesses *Sheeta Virya* and *Vata Kaphahara* properties. *Sidarataka Snana Choorna* Yoga is *Varnahara, Kandughna* and *Twakdoshahara*.

## CONCLUSION

*Sravi Vicharchika* (eczema) is relapsing disease. In this case *Tridosha hara* and *Rakta prasadana* was adopted. Treatments such as *Parisheka* (shower sprinkling), *Sadyovirechana* (purgation therapy), *Siravyadha* (bloodletting) and *Shamana Aushadhis* (oral medications) found to be effective in the management of *Sravi vicharchika* (eczema).

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