

## Secondary Preventive Management of *Kitibha Kushta* (Plaque Psoriasis) - A case study

### Case Report

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### Abstract

Levels of prevention has been a wide idea concept which includes all the aspects related to health and disease like preventive, curative, promotive and rehabilitative measures. Applicability of this concept in *Ayurveda* has elaborative understanding in a more simplified manner. Despite leading to both physical and psychological issues, the importance given to skin diseases is always the least. Changing food habits and lifestyle is being the major reason in the current era for increased prevalence of skin diseases especially in young adults. In a way to cope up with fast living culture, people are compromising with their health and well being which needs immediate attention and action. Early diagnosis and complete treatment is the basis of *Kushta Chikitsa* (treatment of skin diseases) and the same has been highlighted as a secondary preventive measure. One such case is being discussed here which is diagnosed initially and treated as per *Ayurveda chikitsa siddhanta* (Ayurvedic treatment principle), considering *Dosha* (bio-forces of body), *Agni* (metabolism), *Bala* (Strength), *Ritu* (season) etc giving complete relief and self confidence of the patient. This not only prevents the further occurrence of complications due to chronicity but also brings back the faith in *Ayurveda* treatment modalities. It is high time to make the young minds realize the importance of healthy living, which otherwise can impair the health status of the nation, dragging back its growth and development.

**Keywords:** *Kshudra Kushta*, *Plaque Psoriasis*, Secondary prevention, *Ayurveda*, *Vamana*.

### Introduction

The action taken to avoid any disruption in health and maintain the health at its highest possible level is Prevention. There are mainly four levels of prevention as primordial, primary, secondary and tertiary prevention. Primordial prevention is said to be the purest form of prevention where measures of prevention are taken much before the emergence or development of risk factors in population groups in which they have not yet appeared, which is achieved by following health promotion principles. Primary prevention is the action taken prior to the onset of disease, which removes the possibility that a disease will ever occur and this is achieved by following specific protection methods. Secondary prevention is the action which halts the progress of a disease at its incipient stage and prevents complications. This is achieved by early diagnosis and complete treatment. Tertiary prevention includes all measures available to reduce or limit impairments and disabilities, minimize suffering caused by existing

departures from good health and to promote the patient's adjustment to irremediable conditions which can be achieved by disability limitation and rehabilitation (1). *Kitibha* is listed under *Kshudra Kushtas* by *Acharya Charaka* with *Vata* and *Kapha pradhana lakshanas* like *Shyava varna* (blackish gray discoloration), *Kina-Khara sparsha* (thick lesions which feels dry and rough to touch) and *Parusha* (rough and parched) (2). The present case has been diagnosed at the early stages and successfully treated with *Ayurveda* based on secondary prevention methods.

### Aim and Objective

To study the effect of *Vamana* as secondary prevention in treating *Kitibha Kushta*.

### Demographic data

Name- abc,  
Age- 19 yrs  
Gender- female  
Address- abc

### Chief complaint

Brownish gray skin lesions on both palms associated with itching and peeling of dried top layers of skin on scratching. -Also associated with dryness and roughness over the skin lesions. All the symptoms were seen since last 3 months. Itching was also

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complained at the bilateral flank region, scalp and lower back with no discoloration since 1 month.

### History of present illness

A 19 yr old female patient came with complaints of brownish gray skin lesions on both palms associated with itching, dryness and roughness of palms from the past 3 months. The patient was said to be apparently healthy before 3 months, then gradually she started feeling itchy with dry brownish gray discolored lesions over both palms, associated with dry scales on scratching. Gradually itching started spreading to other parts of the body like bilateral flanks, scalp and lower back region without any discoloration associated. Itching and scaly discharge aggravated on eating spicy foods, Brinjal, Potatoes, at evening and night times. She consulted allopathic doctors for the above complaints and took medication but her complaints continued to be the same. So, the allopathic medication was stopped and the patient came seeking Ayurvedic management to JSS Ayurveda Hospital, Mysuru, Karnataka.

### Personal history

- Appetite- Slightly reduced
- Bowel- regular
- Sleep- Sound
- Micturition- 6 to 8 times/day
- Habits - nothing specific

### Medical History

No known h/o any other diseases. Patient was on Allopathic medications for the above complaints which were stopped and details were not known to the patient.

### General examination

No lymphadenopathy, No oedema, No icterus, No pallor.

### Vitals

BP- 110/70 mm Hg, Pulse rate- 72/ min, Respiratory rate- 16 cycles / minute

### Clinical findings

On skin examination at the palms, scalp, lower back and flank region; there was no swelling or local rise of temperature seen.

Brownish gray discoloration was seen on both palms. Thick skin lesions with scaly discharge were seen with candle grease sign positive but Auspitz sign was negative. Powdery discharge on scratching was seen on the scalp. No discoloration on scalp, lower back or flanks. Blood pressure, pulse and other systemic examination findings were within the normal range. Laboratory investigation showed decreased Hb levels (8.9 gm/dl) and elevated ESR levels (40 mm after 1 hr by Wintrobe's method).

### Diagnosis

Based on the symptoms and clinical findings, the case was diagnosed as *Kitibha Kushta* with *Shyava*

(Brownish gray discoloration), *Kina-Khara sparsha* (thick lesions which feels dry and rough to touch), *Parusha* (rough and parched) was associated with *Kandu* (Itching).

### Study Design

Single case Study.

### Material and Methods

#### Treatment prescribed

The treatment planned was *Vamana* (Shodhana- Body purification) followed by *Shamana* (Pacifying remaining doshas)(3).

For *Deepana-Pachanaartha* (correction of metabolism), *Chitrakadi vati* 1 tablet thrice daily half an hour before food and *Pippalyasava* 2tsp with 20 ml warm water after food for 7 days were given internally (Table 1).

From the eighth day, *Snehapana* (oral administration of medicated ghee) was started with *Dadimadya grita* (Medicated ghee). *Snehapana* was continued for another four days with doses of 30ml, 70ml, 100ml, 120ml and 150ml respectively during which the patient diet was only *Peya* (rice gruel) and *Khichha* (semi solid preparation with rice, green gram added with cumin and turmeric) (Table 2). On the third day of *Snehapana*, patient felt moderate headache for which warm *lepa* of *Rasna choorna* (powder of *Pluchea lanceolata* Oliver & Hiren) on forehead and 50 ml of *Shunti jala* (decoction of *Zingiber officinale* Rosc.) were given by afternoon. The next two days of *Snehapana* were also continued with 50 ml of *Shunti jala* after *Snehapana* to facilitate better digestion. *Samyak sneha siddhi lakshanas* (Proper oleation symptoms) like *Snigdha varchas* (easy defecation), *Twak snighdata* (well moisturized skin), *Agni vriddhi* (improved appetite) and *Snehodvega* (Aversion for ghee) were seen by the fifth day of *Snehapana* (120 ml). From day thirteen, *Sarvanga Abhyanga* (whole body massage with oil) was done with *Eladi taila* (Medicated oil) followed by *Bashpa sweda* (Steam bath) for one day (Table 3). Along with the therapy *Kapha Utkshleshakara Ahara* (Foods that aggravate *Kapha* dosha) like *Dadhi* with *Shaalyanna* (Curd rice), *Ikshu rasa* (Sugarcane juice), *Masha Payasa* (Sweet gruel prepared with Black gram and Jaggery), *Tila laddu* (Sweet prepared out of sesame seeds and jaggery) and other *Madhura* (sweet), *guru* (heavy to digest) *ahara* (Sweets prepared with milk and sugar) were given to the patient (4). On day fourteen, early in the morning at *Kapha Kaala* (5:00 am) after *Sarvanga Abhyanga* (whole body massage with oil) and *Bashpa sweda* (Steam bath), patient was made to consume *Akanta Paana* of *Ksheera* upto 1.8 lit (till entire stomach and Oesophagus is filled) and intake of *Vamana yoga* (medicament to emesis therapy) prepared with 8 gm of *Madanaphala Pippali choorna* (powder of *Randia Spinosa*), 6 gm of *Yashtimadhu choorna* (powder of *Glycyrrhiza glabra* Linn.), 4 gm of *Vacha choorna* (Powder of *Acorus calamus* Linn.), 2 gm of *Saindhava lavana* (Himalayan pink salt) mixed well with 50 gm of *Madhu* (honey) (5). Vitals of the patient were

continuously monitored. *Vamana Vegas* started spontaneously after 20 minutes. 2 lit of *Yashtimadhu phanta*, 2 lit of *Saindhava jala* and 0.6 lit *Ushna jala* were given to facilitate the therapy. Total number of *Vegas* (urge for emesis) were 6 and *Pittanta laxanas* were noted (Table 4). Patient was asked to wash her hand, feet and mouth with cold water and relax for a few minutes. After noting the vitals within the normal range, she was administered with *Vairechanika Dhoomapana* (purificatory medicated smoke) (6,7). Patient was comfortable and advised not to have anything till she feels good hunger. She was discharged with advice of seven days of *Samsarjana karma* (Post bio purification diet) to gradually improve digestive capacity). Further *Shamanaoushadhi* (Medicines for pacifying remaining doshas) were prescribed.

Patient was discharged with Cap. *Mahatiktaka grita*, *Arogyavardhini vati*, *Gandaka rasayana vati*, *Eladi kera taila* and 777 oil. Dose and duration of these medications are summarized in Table 6. Patient was asked to withdraw from all the foods that aggravated itching as per the history. After 15 days of follow up, there was no itching, dryness was reduced and lesions were healing well (fig 2). Patient was advised to continue the same medications for next one month (Table 6). During the second follow up, skin lesions were completely healed and there was no dryness and itching (fig 3).

**Table: 1 Deepana- Pachana**  
(To correct and improve the metabolism)

Day	Medicines	Dose
1 to 7 (19/03/2023 to 25/03/2023)	<i>Chithrakadi Vati</i>	1-1-1 before food
	<i>Pippalyasava</i>	2-2-2 tsp after food

**Table: 2 Snehapana**

Day	Medicines	Dose
8 (26/03/2023)	<i>Dadimadya grita</i>	30 ml
9 (27/03/2023)	<i>Dadimadya grita</i>	70 ml
10 (28/03/2023)	<i>Dadimadya grita</i>	100 ml
11 (29/03/2023)	<i>Dadimadya grita</i>	120 ml
12(30/03/2023)	<i>Dadimadya grita</i>	150 ml

**Table: 3 Vishrama kaala**

Day	Treatment	Medicines
13 (31/03/2023)	<i>Sarvanga Abyanga</i> (whole body massage with oil) followed by <i>Bashpa Sweda</i> (Steam bath)	<i>Eladi taila</i> (Medicated oil)

### Advice

*Pathya ahara* (Diet) during *Snehapana* (Oleation therapy) and *Samsarjana Karma* (post bio purification diet planned to gradually improve digestive capacity) was strictly monitored (8,9). After resuming back to normal diet the patient was advised to avoid Curd, Blackgram, Spicy foods, Brinjal, Potatoes, Oil fried food, refined flour, jaggery and refined sugar used

foods which could again vitiate the doshas leading to aggravation of the condition (10).

**Table 4: Vamana vega**

Day and Time	Medicines	Number of Vegas
14 (01/04/2023) 6:30 am	<i>Ksheera</i> (upto 1800 ml) followed by <i>vamana Aushadi</i>	2 ( <i>Ksheera utsarga - Kapha</i> along with Milk)
14 (01/04/2023) 6:55 am	<i>Yashtimadhu jala</i> (upto 2000 ml)	3 ( <i>Kapha</i> along with <i>Yashtimadhu jala</i> and Milk)
14 (01/04/2023) 7:15 am	<i>Saindhava jala</i> (2000 ml)	4 ( <i>Kapha</i> along with <i>Yashtimadhu jala</i> and <i>Saindhava jala</i> )
		5 ( <i>Kapha</i> and <i>Aushadha</i> along with <i>Yashtimadhu jala</i> and <i>Saindhava jala</i> )
14 (01/04/2023) 7:30 am	<i>Sukhoshna jala</i> (upto 600 ml)	6 ( <i>Pitta</i> and <i>Aushadha</i> along with <i>Yashtimadhu jala</i> and <i>Saindhava jala</i> )

**Table: 5 Samsarjana Karma**

Day	Morning	Afternoon	Night
14 (01/04/2023)	-	-	<i>Shaaali Manda</i>
15 (02/04/2023)	<i>Shaaali peya</i>	<i>Shaaali peya</i>	<i>Shaaali peya</i>
16 (03/04/2023)	<i>Vilepi</i>	<i>Vilepi</i>	<i>Vilepi</i>
17 (04/04/2023)	<i>Akrtta Mudga Yusha</i>	<i>Akrtta Mudga Yusha</i>	<i>Akrtta Mudga Yusha</i>
18 (05/04/2023)	<i>Krta Mudga Yusha</i>	<i>Krta Mudga Yusha</i>	<i>Krta Mudga Yusha</i>
19 (06/04/2023)	<i>Krta Mudga Yusha</i>	<i>Khichha</i>	<i>Khichha</i>
20 (07/04/2023)	<i>Khichha</i>	Soft rice + daal	Soft rice + daal

**Table: 6 Shamana and Rasayanoushadhi (After Shodhana)**

Day	Medicine	Dose
21 to 78 (07/04/2023 to 03/06/2023)	Cap. <i>Mahatiktaka grita</i>	2-0-0 (before food)
21 to 78 (07/04/2023 to 03/06/2023)	<i>Arogyavardhini vati</i>	1-1-1 (before food)
21 to 78 (07/04/2023 to 03/06/2023)	<i>Gandhaka Rasayana vati</i>	1-1-1 (after food)
21 to 78 (07/04/2023 to 03/06/2023)	<i>Eladi Kera Taila</i>	15 minutes before Bath for entire body
21 to 78 (07/04/2023 to 03/06/2023)	777 oil	After bath on the affected areas



## Observations

Observation was done as per gradation of clinical features or subjective parameters mentioned in Table no 7 and 8.

### Before treatment (figure 1)

Blackish gray skin lesions on both palms associated with itching and peeling off dried layers on itching. Also associated with dryness and roughness over the skin lesions. Itching was also there at the bilateral flank region, scalp and lower back with no discolouration.

**After treatment (First follow up, one month after discharge) (figure 2):** No itching, dryness was reduced and lesions were healing well.

**After treatment (Second follow up, two months after discharge) (figure 3):** Skin lesions were completely healed and there was no dryness and itching.

**Table 7: PASI grading (11)**

Characteristic of skin lesion	Before treatment	After treatment (first follow up)	After treatment (second follow up)
Erythema	0	0	0
Induration/ Thickness	2	1	0
Scaling	2	1	0

**Lesion score:** 0- none, 1- Slight, 2- Moderate, 3- Severe, 4- very severe

**Table 8: VAS pruritus grading (12)**

Before treatment	After treatment (first follow up)	After treatment (second follow up)
7 (Moderate)	0 (no itching)	0 (no itching)

**Pruritus score:** 0 = no pruritus, > 0-< 4 points = mild pruritus, ≥ 4-< 7 points = moderate pruritus, ≥ 7-< 9 points = severe pruritus, and ≥ 9 points = very severe pruritus.

## Results

Patient was completely cured from *Kitibha Kushta* with no recurrence with the follow up till one year. The normal colour and texture of the palms were restored.

**Figure 1: Before treatment**

**Figure 2: After treatment (First follow up, one month after discharge)**

**Figure 3: After treatment (Second follow up, two months after discharge)**



## Discussion

The present case was an acute condition with the history of recent onset. Patient visited the OPD during mid March in *Chaitra Maasa* (first month as per hindu calendar) which is the beginning of *Vasanta ritu* (Spring season) and her complaint of increased itching indicates dominance of *Kapha* which also compliments *Ritu anusara dosha Avastha* (Seasonal aggravation of *Kapha*) in *Vasanta ritu* (Spring season). *Vasanta ritu* ((Spring season) is regarded as *Sadharana ritu* (Moderate season with no extreme weather conditions) thus, indicated for *Kapha Shodhana* (13). Hence *Vamana* is selected as the major line of treatment in this case. For *Deepana-Pachana* (to correct the metabolism), *Chitrakadi vati* and *Pippalyasava* were advised for seven days as they do both *Ama-pachana* (proper digestion) and *Agni-deepana* (enhances digestive capacity) (14,15). *Dadimadya grita* (medicated ghee) was selected for *Snehapana* (Oleation therapy) as it is *Vata-Kaphahara* and the patient's hemoglobin content was also less (8.9 gm/dl) (16). Patient's palatability was also considered here as she was unable to take Bitter ghee preparations. As patient complained of moderate headache *Rasna choorna lepa* was applied over the forehead as it is *Ushna* (hot in potency), *Sheetahara* (removes cold that can increase pain), *Vata* and *Vedana shamaka* (relieves from pain) (17). *Shunti jala* (decoction of *Zingiber officinale* Rosc.) as it helps for *Deepana-Pachana* (proper digestion of ghee), *Vedanasthapaka* (pacifies pain)(18). *Eladi kera taila* (medicated oil) is selected for *Abhyanga* as it is *Vata-Kaphahara*, *Kandughna* (pacifies itching) and *Varnaprasadaka* (enhances and restores normal skin complexion) (19). *Madanaphala* (*Randia spinosa* Linn.) is regarded as *Shreshta* (superior) for *Vamana* (emesis therapy), hence *Madanaphala yoga* with other *Vamanopaga* dravyas (drugs that act as catalyst for emesis) like *Yashtimadhu* (*Glycyrrhiza glabra* Linn.), *Vacha* (*Acorus calamus* Linn.), *Saindhava lavana* (Himalayan pink salt) and *Madhu* (honey) was used for the therapy (20,21). There was *Pravara shuddhi* (removal of vitiated doshas) with *Samyak Shodhana Lakshanas* (Symptoms of perfect purification) (22). Patient was then advised to follow seven days of *Peyadi Samsarjana Krama* (Diet planned after body purification process in order to gradually improve digestive capacity). After resuming back to normal diet with the above explained restrictions for *Kapahakara Ahara* (foods that aggravate *Kapha*), she was advised with *Rasayana drava* (Restorative medicaments) which also acts as *Shamanaoushadhi* (pacifies any dosha from getting aggravating) (23).

Cap. *Mahatiktaka grita* is *Kandughna* (pacifies itching) and *Kushtaghna* (cures skin diseases). As it contains more amounts of *Amalaki* (*Phyllanthus emblica*), it also can be beneficial as *Rasayana* (restorative) (24). *Arogyavardhini vati* is *Tridosha shamaka* (regulates the bio forces of human body), *Kushtaghna* (cures skin diseases) and *Pathya* (gets along with body channels) (25). *Gandhaka Rasayana* is *Vata shamaka* (pacifies vata), *Kandughna* (cures itching) and *Kushtaghna* (cures skin diseases) (26).

*Eladi Kera taila* is *Vata-Kaphahara*, *Kandughna* (pacifies itching) and *Varnaprasadaka* (enhances and restores normal skin complexion) was continued (19). 777 oil is a proprietary medicine by Dr. JRK's Research and Pharmaceuticals Pvt. Ltd. It is a Siddha medicine with *Kutaja* (*Wrightia tinctoria*) and *Narikera taila* (*Oleum Cocos nucifera*) as key ingredients. This is widely used in clinical practice of *Ayurveda* to reduce itching and scaling skin lesions (27).

## Conclusion

This is a case study with novel understanding which concludes that the theoretical concept of secondary prevention in *Ayurveda* which means treating the disease in its early stage to prevent its chronicity and further complications with the right line of treatment can not only cure the disease but also prevents the recurrence and restores the health back to normalcy. Further, screening such cases and considering them for clinical trials in large groups are to be conducted at multi-centric levels which can provide evidence for standardising the treatment procedure.

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