



Research Article

A COMPARATIVE CLINICAL STUDY OF HARITKYADI CHURNA VIRECHAN AND JIVANTYADI LEPAM IN THE MANAGEMENT OF KITIBHA KUSTHA (PSORIASIS)

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Article info

Article History:

Received: 27-06-2022

Revised: 05-07-2022

Accepted: 19-07-2022

KEYWORDS:

Psoriasis, *Twacha*, *Kitibha Kustha*, Haritkyadi Churna, Jivantyadi lepam,

ABSTRACT

Patients with skin conditions frequently endure physical, emotional, and socioeconomic forms of social embarrassment. Up to 3.5% of the global total and 0.44%-2.8% of Indians suffer with the unpleasant dermatological disorder psoriasis. It is a widespread, chronic, non-infectious skin condition that can affect either sexes and affect any age, with incidence rates ranging from childhood to age one. It is characterized by well-defined, slightly elevated, dry, erythematous macules with silvery scales and a characteristic extensor distribution. In contrast to other dermatological disorders, psoriasis manifests as systemic symptoms like arthritis. The prevalence is highest in the third and fourth decades of life, when patients become unable of doing daily tasks. For some patients, social humiliation is a significant factor which leads to an increase in suicidal ideation. To raise public awareness, the 29th October has been designated as World Psoriasis Day. The Ayurvedic term for skin is "*Charma*" or "*Twacha*." *Twacha* is derived from the word *Dhatu-twacha samvarne*, which means body covering. The broad categories of *Kustha* have been used to discuss all skin conditions in Ayurveda. There are two types of *Kustha* in Ayurveda. *Mahakustha* and *Kshudra Kustha*. *Kitibha kustha* belongs to *Kshudra kustha*.

INTRODUCTION

The skin is a large organ of the human body that covers a two-meter square surface area and serves as a major interface between man and his surroundings. According to Ayurveda, it is one of the five '*Jnanendriyas*' responsible for touch perception. The body's first line of defense against harmful environmental elements like physical, chemical, and biological assaults is the skin. Relapses and spontaneous remissions are brought on by changes in external stimuli and the body's innate capacity to deal with them. These elements work together to produce a particular response pattern, which causes discrete skin lesions in different body regions.

Impairment, discomfort, or ugliness can all lead to human misery. All three of these are involved in skin diseases. Dermatological issues are common in India, and this has long been known. The dermatological issues were discussed as *Kustha* in the famous Ayurvedic texts *Charak Samhita*, *Sushruta Samhita*, and *Astanga Hridaya*. There are two types of *kustha* in Ayurveda. *Mahakustha* and *Kshudra Kustha*. *Kitibha kustha* belongs to *Kshudra kustha*. The *Lakshanas* of *Kitibha kustha* includes *Shyabakrishnavarna*, *Ksharasparsa*, *Kandu*, *Ghantvam* and *Srava*.^[1] From these clinical features *Kitibha Kustha* can be correlated with the disease psoriasis in contemporary medicine.

Finding a Psoriasis therapy that is both secure and efficient is therefore vital, and Ayurveda can help. *Shodhana*, *Shamana*, and *Nidana parivarjana*, the three fundamental treatment tenets, are how Ayurveda's special therapeutic approach achieves lasting effects and improves patients' quality of life.^[2] The ailment that is treated with *Shodhana* will never come back, however the disease that is treated with

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<https://doi.org/10.47070/ijapr.v10i8.2490>

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Shamana therapy may come back over time, in accordance with *Acharya Charaka*. Additionally, using *Shamana* medications after finishing the recommended course of *Shodhana* offers additional relief and helps in the total eradication of disorders.

Panchakarma, which uses specialized methods and a variety of drugs, is promoted by Ayurveda as a successful and secure treatment for persistent derma issues. Due to its preventative, promotive, prophylactic, and rejuvenate qualities as well as the fact that it offers a radical cure, *Panchakarma* is a particularly special therapeutic technique that functions as a *Shodhana* therapy.

People all over the world have been drawn to Ayurveda's *Panchakarma* therapy because it is a one-of-a-kind treatment for a variety of chronic, auto immune, hormonal, degenerative, and other disorders for which other treatments have failed.

AIMS AND OBJECTIVES

- To assess the effect of "Virechan Karma" *Shodhana Karma* in the management of *Kitibha Kustha*.
- To assess the effect of "Jivantyadi Lepam" External medicine in the management of *Kitibha Kustha*.
- To study the comparative efficacy of *Virechan* and *Lepa* in the management of *Kitibha Kustha* (Psoriasis).

MATERIALS AND METHODS

Selection of Patients & Criteria for Diagnosis

40 clinically diagnosed patients of *Kitibha Kustha* (Psoriasis), willing to be part in study and follow up were selected on the basis of medical history sheet i.e., according to *Trividha*, *Ashtavidha*, *Dashavidha Pariksha* and necessary investigation from OPD/IPD of P.G. Department of *Panchakarma* in DSRRAU, Jodhpur. They have been given selected treatment in accordance with the inclusion and

Procedure Protocol

Group A:

Procedure	Drug and Dose	Duration
<i>Virechan Karma</i>	<i>Deepana, Pachana</i>	<i>Panchkola churna</i> 3G BD
	<i>Snehapana</i>	<i>Go ghrita</i> in <i>Aarohana matra</i>
	<i>Abhyanga</i> followed by <i>Bashpa sweda</i>	<i>Tila taila</i>
	<i>Virechana</i>	<i>Haritkyadi churna</i> (80ml)
	<i>Samsarjana krama</i>	Depending on <i>Koshta shuddhi</i>
		3-7 days

Group B:

Procedure	Drug & dose	Duration
<i>Lepan karma</i>	<i>Jivantyadi lepam</i>	Local application once in day for one month

exclusion criteria. The diagnostic criteria focused mainly on the classical signs and symptoms of *Kitibha Kustha* (psoriasis) and PASI Score (Psoriasis Area & Severity Index) for calculating the appropriate involvement of the skin lesions. Further, basic hematological investigations were carried out to exclude any other pathology.

Inclusion Criteria

- Diagnosed and confirmed cases of *Kitibha kustha* (psoriasis), on the basis of the sign & symptoms.
- Patients between the age group of 18-60 years of either sex.
- Clinically fit for *Shodhana karma*.

Exclusion Criteria

- Patients below 18 years and above 60 years of age
 - Malignancy or patient going through treatment.
- Pregnant and lactating woman.
- Clinically unfit for *Shodhana*.
- Patient having cardiac disease, renal disease and endocrine disorder will exclude from study to avoid overlapping of symptomology.

Investigations

(1) ESR, (2) TLC, (3) Blood sugar (fasting/post prandial), (4) Hb%

Grouping

Total 40 patients of *Kitibha Kustha* (psoriasis) were registered. Patients were randomly categorized into two groups by Simple Random Sampling method. Viz. Group A and Group B.

Group A: 20 Patients were administered with *Virechan karma* with *Haritkyadi churna*.

Group B: 20 Patients were administered with external application of *Jivantyadi lepam*.

Criteria for Withdrawal

Patients were informed to withdraw from the clinical trial himself/herself, or during clinical study, if any serious condition developed/symptoms that required emergency management.

Assessment Criteria

Following parameters were adopted for assessing any change observed during and after the treatment-

Subjective Criteria

Rukshata/dryness (Lesions are dry rough)

No line on scrubbing with nail	0
Faint line on scrubbing with nail	1
Rukshata causing <i>Kandu</i>	2
Rukshata leading to crack formation	3

Srava (lesions are exudative in nature)

No <i>Srava</i>	0
Mild <i>Srava</i>	1
Moderate <i>Srava</i>	2
Severe <i>Srava</i>	3

Shyava (Blackish discoloration)

Normal	0
Faint or near to normal	1
No blenching+blue color	2
Blue color+ subcutaneous	3

Parusham (Hard in nature (crack))

Normal	0
Mild hard to touch	1
Moderate hard to touch	2
Severe hard to touch	3

PASI Score

PASI = Total Head + Total Arms + Total Trunk + Total Legs

Interpretation: Minimum Score=0; Maximum Score=72

Severity of each variable will range from; these criteria will be assessed and scored as follows-

0	Normal
1	Mild
2	Moderate
3	Severe

OBSERVATIONS

The current study showed that relative preponderance of the incidence of psoriasis is in 2nd to 4th decade of life of *Vata- Kaphaja Prakriti* males and Hindu dominated families, socioeconomic status middle class, married persons were found to suffer more, runs chronic course, maximum number of trial patients were private sector, more in vegetarian subjects and no significant family history, maximum affected urban population having higher secondary education group suffered mostly from disease. Subjects addicted to tea, tobacco and alcohol which are pathologic risk factor for Psoriasis, *Chinta* (stress) found in maximum patients who lead to depression-psychological stress as being a key exacerbation or trigger of psoriasis. Several etiological factors as described in Ayurveda and modern medicine for initiation of *Kitibha Kustha* (psoriasis) were found to be responsible as precipitating factors in current clinical study.

RESULTS**Table 5: Showing effect of therapeutic trial on clinical symptomatology in 40 patients of *Kitibha Kustha* (Psoriasis) based on intra group comparison (Wilcoxon matched pairs signed rank test)**

Variable	Group	Mean		Diff.	SD±	SE±	P	% Change	S
		BT	AT						
<i>Rukshata</i>	A	2.10	0.80	1.30	0.70	0.16	0.000074	61.90	Sig
	B	1.95	1.00	0.95	0.73	0.16	0.000013	48.72	Sig
<i>Srava</i>	A	1.85	0.90	0.95	0.64	0.14	0.000080	51.35	Sig
	B	2.10	1.10	1.00	0.55	0.12	0.000020	47.62	Sig
<i>Shayva</i>	A	2.15	1.00	1.15	0.46	0.10	0.000094	53.49	Sig
	B	2.00	1.00	1.00	0.73	0.16	0.000020	50.00	Sig
<i>Parusham</i>	A	2.00	0.90	1.10	0.64	0.14	0.000079	55.00	Sig
	B	2.15	1.10	1.05	0.79	0.18	0.000012	48.84	Sig
PASI Score	A	22.77	9.27	13.50	1.65	0.37	0.000079	59.31	Sig
	B	21.39	10.40	10.99	1.42	0.32	0.000012	51.38	Sig

Table 6: Showing effect of therapeutic trial on Laboratory parameters in patients of *Kitibha Kustha* (Psoriasis) based on intra group comparison (Pair t-test)

Variable	Group		Mean	SD	SE	t-Value	P-Value	% Effect	Result
Hb%	A	BT	12.97	0.99	0.22	2.209	0.040	2.85	Sig
		AT	12.60	1.28	0.29				
	B	BT	12.41	0.93	0.21	0.952	0.353	0.44	NS
		AT	12.35	0.94	0.21				
ESR	A	BT	19.10	6.37	1.42	4.466	0.000	6.81	Sig
		AT	17.80	6.68	1.49				
	B	BT	17.55	2.16	0.48	0.661	0.516	1.71	NS
		AT	17.25	2.31	0.52				
BSL	A	BT	108.56	12.01	2.69	5.447	0.000	5.19	Sig
		AT	102.93	12.40	2.77				
	B	BT	97.21	7.92	1.77	2.741	0.013	4.74	Sig
		AT	92.60	11.03	2.47				
TLC	A	BT	8207.10	1611.42	360.32	0.699	0.493	0.58	NS
		AT	8159.50	1632.86	365.12				
	B	BT	7560.00	1549.62	346.51	-1.728	0.100	-1.63	NS
		AT	7683.50	1523.61	340.69				

Table 7: Showing effect of therapeutic trial on clinical symptomatology in 40 patients of *Kitibha Kustha* (Psoriasis) based on inter group comparison- Mann-Whitney test

S.No.	Variable	MW- U	P value	Results
1.	PASI score	159.000	0.0025	S
2.	<i>Rukshatsa</i>	133.500	0.0001	S
3.	<i>Srava</i>	190.500	0.0070	S
4.	<i>Shyava</i>	171.500	0.0029	S
5.	<i>Parusham</i>	189.000	0.0065	S

Table 8: Showing effect of therapeutic trial on Laboratory parameters in patients of Kitibha Kustha (Psoriasis) based on inter group comparison (Unpaired t Test)

Variable	Group	N	Mean	SD	SE	t-Value	P-Value	Result
HB	Group A	20	0.37	0.75	0.17	1.778	0.083	NS
	Group B	20	0.06	0.26	0.06			
TLC	Group A	20	47.60	304.73	68.14	1.733	0.091	NS
	Group B	20	-123.50	319.66	71.48			
ESR	Group A	20	1.30	1.30	0.29	1.855	0.071	NS
	Group B	20	0.30	2.03	0.45			
BSL	Group A	20	5.63	4.62	1.03	.520	0.606	NS
	Group B	20	4.61	7.51	1.68			

Table 9: Table is showing the % Relief of Subjective parameters in the Group A & B

S.no.	Variable	Relief in percentage	
		Group A	Group B
1.	PASI score	59.31	51.38
2.	Rukshatsa	61.90	48.72
3.	Srava	51.35	47.62
4.	Shyava	53.49	50
5.	Parusham	55	48.84
	Average	56.21%	49.31%

Table 10: Table is showing the % Relief of Objective parameters in the Group A & B

S.No	Variable	% Relief	
		Group A	Group B
1.	Hb%	2.85	0.44
2.	ESR	6.81	1.71
3.	BSL	5.19	4.74
4.	TLC	0.58	1.63

Improvement in Kitibha Kustha (Psoriasis)



DISCUSSION**Discussion on Clinical Study**

The patients suffering from skin disease *Kitibha Kustha* (Psoriasis) attending the O.P.D./I.P.D. section of P.G. Department of Panchakarma, DSRRAU, Jodhpur (Raj.), were randomly selected who fulfilling the inclusion and exclusion criteria of study. Total 40 patients were registered for the present trial and completed the therapy. The drug for trial *Haritkyadi Churna* are selected from *Charaka Samhita Chikitsa Sthan* -contents of the *Haritkyadi Churna* are *Haritaki, Amalaki, Vacha, Vayvidang, Haridra, Pipali, Sonth, Saindhav* in equal proportion for Group A *Shodhan (Virechan Karma)* and for Group B *Jivantyadi lepam* are selected from *Astang Hridrum* contents are *Jivanti, Manjistha, Daruharidra, Kamplilak, Ark Kshir, Sasyk, Sarjarasa* and *Madhuchista*.

Intra Group Comparison

Comparison between Group A & B for Subjective parameters, Group A & Group B both showed statistically significant result in *Rukshata, Srava, Shyava, Parusham*, and PASI Score. Comparison between Group A & B for Objective parameters: In patients of Group A showed statistically Significant result in HB%, ESR, Blood Sugar (Fasting), not Significant result in TLC and in patients of Group B showed statistically Significant result in Blood Sugar (Fasting), Not Significant result in HB%, ESR, TLC.

Inter Group Comparison

Comparison between Group A & B for Subjective parameters, Group A & Group B both showed statistically significant result in *Rukshata, Srava, Shyava, Parusham*, and PASI Score. Comparison

between Group A & B for Objective parameters: No significant difference between Group A and Group B.

CONCLUSION

According to the results of the current study, environmental changes and stress play a big influence in the development of the disease. Psoriasis incidence peaks in the second to fourth decade of life and affects more men than women. Psychological factors are crucial in the development of the condition. Due to chronic nature disease, it needs intense treatment like *Shodhana Karma* so that body gets purified. Result revealed that symptomatically 56.21% relief was observed in Group A while 49.31% relief was observed in Group B, Comparing the symptomatic improvement in groups it was found that average percentage of relief was higher in Group A (*Virechan Karma*). Therefore, it can be concluded that *Shodhana (Virechan Karma)* by *Haritkyadi Churna & Jivantyadi Lepam* administration are effective in management of *Kitibha Kustha* (psoriasis) as these are safe, cost effective and free from any side effects.

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Cite this article as:

Gourishankar Rajpurohit, Gyan Prakash Sharma, Mahesh Kumar Sharma, Anita, Meenakshi Sharma. A Comparative Clinical Study of Haritkyadi Churna Virechan & Jivantyadi Lepam in the Management of Kitibha Kustha (psoriasis). *International Journal of Ayurveda and Pharma Research*. 2022;10(8):48-53.

<https://doi.org/10.47070/ijapr.v10i8.2490>

Source of support: Nil, Conflict of interest: None Declared

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