



## A SINGLE CASE STUDY TO EVALUATE THE EFFECT OF VAMANA KARMA AND PRACCHANA KARMA IN THE MANAGEMENT OF SWITRA

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**Abstract :** Switra Is A Disease Where White Patches Appear On The Body. All The Skin Diseases Comes Under Kusta Roga In Ayurveda. It Is Caused By Vitiation Of Tridosha. It Can Be Co-Related To Vitiligo. It Is An Autoimmune Disease. Vitiligo Is An Acquired Condition Affecting 2% Of The Population Worldwide. The Prevalance Rate Of Vitiligo Ranges From 0.6-2.28%. The Greater Prevalence Of This Condition Is Seen In Female And 50% Onset In Children. Acharya Charaka While Mentioning The Types Of Switra, Says If Doshas Located In Rakta , It Is Red Colour, If In Mamsa Its Coppery Colour And If It Is Located In Medas It Is White Colour. Here Am Presenting A Single Case Of 38yrs Old Female Who Came To Opd With C/O White Patches Over Sides Of Foot Since A Year.Treatment Given Was Vamana Karma Followed By Pracchana Karma Followed By Samanaoushadhis.

**Keyword:** Switra, Vamana Karma, Pracchana Karma

### I. INTRODUCTION

The word Shwitra has its root in the Sanskrit word Shweta, which means white patch<sup>1</sup>. So Shwitra is a disease where white patches appear on the body. In Ayurveda all skin disease comes under Kushta Roga<sup>2,3</sup> and Shwitra is one of them. Shwitra is mention in Kushta Roga Chikitsa where white patches appear on the whole body or a local region. Kustha is included in Ashta Maha Gada in Ayurveda<sup>4</sup>. Skin covers all over the body as covering, Bhrajaka Pitta is placed in skin which is responsible for Chhaya and Prabha of skin. Any impairment of Bhrajaka Pitta and Vata Dosha can cause skin disease like Shwitra. Just like Kushta It is caused due to Vitiation of Tridosha and Dhatus like, Rasa, Rakta, Mamsa and Meda. The main cause for the disease is believed to be Purva Janma Krita Paapa Phala<sup>5,6</sup>. In modern medical science, the characteristics of Shwitra are similar to vitiligo. Vitiligo is a condition, in which the skin colour turn white due to the loss of melanocytes cells that produce pigment melanin responsible for colour of skin or it can be said as hypopigmentation of skin. It affects both sexes equally. Vitiligo comes under a cosmetic disfigurement of skin and 1% of total world population affected by it<sup>7</sup>. Due to lack of scientific appraisal and confusion of Vitiligo with Leprosy all make it a social embarrassment. Basic treatment of vitiligo in modern medical science is tropical creams contain corticosteroids, some type of radiations, skin grafting and medical tattooing etc. which is economic burden to the patient.

#### Case Report

A Female patient of 38yrs old residing in Ballari came to Panchakarma OPD of TGAMC&H, Ballari on 13<sup>th</sup> June 2021 presenting with whitish discolouration or patches over the left foot since 2yrs.

#### History Of Present Illness

**Patient** was apparently normal 2 yrs ago, gradually developed whitish discolouration over the left foot without itching or any discharge. Later the size of the lesion was increasing and hence approached our hospital for further management.

#### Past History

No history of above skin complaints before 3 years.

No history of HTN/ DM/ Thyroid disorder.

#### Family History

Nothing significant.

#### Personal History

Bowel :regular bowel

Bladder: 3-4 times/day

Sleep- sound

Diet: Non veg & veg.

Occupation: House wife

Habit: tea/coffee thrice a day

**Menstrual History**

Regular 3-4 days/28 days.

**General Examination**

Pallor- present

Icterus-absent

Cyanosis- absent

Clubbing- absent

Lymph node- not palpable

Oedema- absent

BP- 120/80 mm of Hg

Pulse78/min.

**Ashta Sthana Pariksha:**

Nadi: 78 bpm

Mala: abaddha koshta

Mutra: 3-4 times /day

Jihwa- alpaliptata

Shabda- Prakruta

Sparsha- Twak Shuklata over left foot

Drik- prakruta

Akrti- madhyama

**Local Examination**

- 1) Site of lesion - (Pidakasthana) Left foot
- 2) Distribution - (Vyāpti)-Asymmetrical
- 3) Character of lesion - (Pidaka Lakshanas) : no of lesions-4-5; Size- 1-2cm, Colour- white, Arrangement- multiple
- 4) Itching – absent
- 5) Discharge- absent
- 6) Superficial Sensation on lesion – Pain- absent; Swelling- absent

**Treatment**

<b>Deepana-Pacana</b>	Agnitundi vati	3days
<b>Snehapana</b>	Tiktaka Grita	5days
<b>Vishrama kala</b>	Abhyanga with manjistadi taila followed by baspa sweda	1 day
<b>Vamana Karma</b>	Kutaja yoga	1 day
<b>Pracchana Karma</b>	Needle Followed by avalgujadi lepa	3 sitting with a gap of 15 days

**Assessment after Treatment****Size-** Reduced in size**No. of patches-** Reduced to 1**Colour of patch-** became pinkish**Repigmentation-** Hyperpigmented margins.**Discussion**

Agni tundi vati<sup>8</sup>- it has Kaphaghna , Vataghna and Ama Doshanashaka properties. And thus does Agnideepana.

Snehapana with Maha Tiktaka ghrita<sup>9</sup>- As this Ghrita is Tiktapradhana , Kaphahara and it is indicated in kushtavikara. Adding saindhalavana to it pacifies Vatadosha also. And adding shunthichurna to it helps in pacifying Kapha Dosha also. Ghrita lubricates and Softens the Dosha, improves Digestive power, regulates bowel, improves the strength and complexion.

Abhyanga- Abhyanga with Manjisthadi Taila does Vata Shamaka, Kandughna and Rukshaghna.

Vamana karma- with Kutaja yoga is best kustagna and does sharira shodhana.

Prachanna karma- it stimulates the melanocytes and helps in its migration.

Avalgujadi lepa- It contains Psoralen which on exposure to the sun results in re-pigmentation of patches by melanin synthesis. Psoralen is an active component which is used topically as well as systemically in the treatment of vitiligo.

**Conclusion**

Shwitra is a disease having high impact on the body and mind. Ayurvedic treatment for this Skin disease have given a blissful life by improving the immune system as well as boosting the level of confidence in the individual. Shodhana therapy helps to remove the root cause of the disease and prevents the disease from its reoccurrence by eliminating aggravated Doshas in the body relieving the no of lesions, size of the lesions, bringing back the skin colour into normalcy and the oral medicines also played a vital role in alleviating the symptoms and worked as Immune booster. Patient found significant relief and thus this treatment protocol can be used for management of Shwitra.

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