



An Ayurvedic management of *Sheetapitta* in a child – A Case study

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1]Abstract:

Introduction:

In Ayurvedic text *Sheetapitta* is described as a skin disorder characterized by inflamed lesion like *varati damstravath shootha* [erythema due to wasp sting] may be associated with *kandu* [Itching], *Toda* [pricking type of pain] , *Daha* [burning sensation] , *chardi* [vomiting] or *Jwara*[Fever]. *Sheetapitta* is a *tridoshaja vyadhi* with *Vata & pitta* predominance. Due to similarity in sign & symptom *Sheetapitta* can be co-related to Urticaria. Nowadays due to change in lifestyle intake of excess of incompatible & junk food by children has increased the prevalence of Urticaria in pediatric age group

Methodology:

In the present case study, a 6yrs old girl suffering from *Sheetapitta* [Chronic urticaria] since 1 ½ yr has been effectively treated by *Ayurvedic* medicines

Results:

Patient showed an excellent result after *Ayurvedic* treatment.

Discussion:

After diagnosis of urticaria 1 ½ yr. back patient was under allopathic treatment but there was not much result but reoccurrence & severity of the condition increased, So they consulted our hospital for *Ayurvedic* treatment initially only *Samana -aushadis & pathya* was advised which showed improvement, Later *Nitya virechana & Naimittika Rasayana* was advised which gave an excellent results.

Key words:

Sheetapitta, Chronic Urticaria, *Shamana aushadis*, *Nitya virechana & Naimittika Rasayana*

2] Introduction:

Sheetapitta is one of the *Twak vikra* [Skin disease] explained in *Ayurveda*. *Sheetapitta* composed of two words *Sheeta* & *pitta* which are having opposite qualities the condition occurs due to dominance of *sheeta guna* over *pradusta pitta dosha*. Due to the similarity in the clinical features the *Sheetapitta* is correlated with Urticaria

Ayurvedic View:

Sheetapitta is a *vatapradhana tridoshaja twak vikara* with the involvement of *Dushya Rasa & Rakta*. *Udarda-Sheetapitta* has almost similar symptomatology and causative factors as Urticaria. These two are usually used as synonyms of each other having a common symptom of itchy red rashes on skin on almost all over the body. Various conditions like *Asatmyaahara*, *Virudhahara* and *Dushivisha* are common etiological factors for these diseases which can be correlated with allergic conditions. *Madhavakara* described *Sheetapitta* and *Udarda* as synonyms of each other, but then he quoted *Vata* dominancy in *Sheetapitta* and *Kapha* dominancy in *Udarda*. [1]. But *kotha* is a similar condition which is caused due to *Ayoga of shodhana*[2]

Nidana [Causative factors]:

1] *Aaharaja Nidana: Atilavana* , *Amla* , *Katu* , *Kshara rasa Sevana* *Viruddha ahara*

Guru snigdha bhojana , *Abhishandhi aahara* & *Vishayukta Annapana* etc.

2] *Viharaja Nidana: Sheetamaruta samsparsha* , *Anya-vastra aahushana dharana*, *Keetadhamsha*,

Bahya krimi , *Chardi vega Dharana* , *Atidivaswapna* etc.

3] *Chikitsa Mitya Yoga: Ayoga of Vamana & Virechna*.

Lakshana [Clinical features] [3] :

It is characterized by *lakshanas* like *Varatee damstravathshootha* [wheals], *Kandu* [Itching] , *Jwara* [fever] , *vidhaha* [burning] , *chardi* [vomiting] & *Toda* [pain] etc.

Samprapti [Etiopathogenesis] :

Due to the above mentioned *Nidanas Vata & Kapha* gets *prakopa* [*Pradusta vata & kapha*] & gets combine with *Dusta pitta* which spreads internally & externally [*Bahir Antah visarpha*] & result in *sheetapitta* [4]

Chikitsa [Treatment]:

In *Ayurveda Sheetapitta chikitsa* can be categorized into 3 phases based on predominance of *Dosha*. In *Alpadosha* [mild] *Langhana*, *Madhyama dosha* [moderate] *Langhana & Pachana* & in *Prabhuta dosha* *Shodana* is recommended [5]. *Shamana Chikitsa* also has a very good effect on *sheetapitta* but *Shodhana* provides better & permanent management for *sheetapitta* In *Shodhana chikitsa* specially *Vamana*, *Virechana* & *Raktamokshana* is the ideal treatment for this condition & very effective since it radically eliminates vitiated dosha from the body Therefore the re-occurrence rate of the diseases can be avoided[6-8]

Modern View:

Urticaria is commonly known as hives, wheals, welts, and nettle rash. It usually occurs due to an allergic reaction triggered by food, seasonal or external factors, or medication [9]. In today's changing lifestyles, polluted environments, food habits, etc., have become the major triggering factors for the manifestation of diseases.

Urticaria is a dermatological condition characterized by itchy wheals that suddenly appear on any portion of the skin or mucous membranes some time also associated with burning sensation & pain . Individual lesions typically last a few minutes to a few hours and then subside without leaving any trace [10].

Urticaria is divided into two categories based on how long it lasts: (a) Acute Urticaria (less than six weeks) and (b) Chronic Urticaria (lasting longer than six weeks). Chronic Urticaria can be inducible or spontaneous. Both types of people can coexist [11].

2]Case Report:

• **Name of the patient:** ABC

Age / Gender: 6yrs / Female.

Address : Suttur , Mysore Karnataka

Religion: Hindu

Informant: Mother

• **Chief complaints:**

A female patient of age 6yrs visited the OPD of *Kaumarabhritya*, JSS Ayurveda Hospital Lalitadripura Mysore on 5/7/2023 with the following complaints

Irregular reddish patches with sever itching all over the body [on & off] since 1 ½ yr, associated with burning sensation.

• **History of Presenting illness:**

According to patients mother the child was apparently healthy 1½ yr ago, One day suddenly she[mother] started noticing red patches associated with itching sensation after intake of food from outside & for the same they consulted the pediatrician & was diagnosed as “Urticaria ” & advised to take Syrup Levocetizine 5ml [OD] for 5 days & Advised to take the same medication if there is further episodes. After that whenever the child takes food from outside & some seasonal variation would end up in similar episodes, gradually severity & the reoccurrence increased on & off, for the same they consulted a Dermatologist they advised to check Serum IgE levels to check whether it is Immune mediated urticaria or not as the results were negative they advised to take Syrup Fexofenadin 5ml [BD] for a week which kept the condition under control. But since last 1 month the severity of attack increased & reoccurrence rate has been increased for 3-4 episodes per week with sever itching & burning sensation & affecting the day to day activity. With above mentioned complaint patient came to our hospital for ayurvedic management.

Table 1 : **History of patient**

Sl No	Parameters	Details of the patient
1	Past history	Nothing Significant to mention
2	Family history	Nothing Significant
3	Personal History	<ul style="list-style-type: none"> Appetite – Variable [Sometimes Good & sometimes loss of appetite] –[<i>Vishamagni</i>] Diet - Vegetarian [Less intake of water , & more junk food , chocolate's , Ice-cream & less intake of

	Vegetables & fruits].
	<ul style="list-style-type: none"> • Bowel – Irregular & Hard Bowel movements [once in 2-3 days]. • Micturition : Normal [5-6 times /day] • Sleep : Disturbed [during episodes due to itching]

Table 2: **Anthropometry**

Weight	22kg
Height	115 cm
BMI	16.6 kg/m ² [Healthy weight]



Table 3: **Vitals**

Heart rate	82/min
Respiratory rate	20 /min
Temperature	98.2 *F
Spo2	99%

Table 4 : **Local examination of Lesion**

Sl No	Parameters	Findings
1	Site of Lesion	All over the body
2	Distribution of lesion	Asymmetrical
3	Character of lesion	Erythematous [Elevated Red lesion]
4	Itching	Present [Sever in Night & Early morning]
5	Burning	Present [More in the evening & Night]
6	Discharge	Absent

7	Temperature	Slightly raised at the site of lesion
8	Edema	Lesion surface elevated

Table 5 : *Astavidha pariksha*

<i>Nadi</i>	<i>Pitta -kapha predominant</i>
<i>Mala</i>	<i>Asamyak [Hard stools]</i>
<i>Mutra</i>	<i>Samyak</i>
<i>Jihwa</i>	<i>Lipta [Saamayukta]</i>
<i>Shabda</i>	<i>Prakrita</i>
<i>Sparsha</i>	<i>Ushna [raised temperature over lesion]</i>
<i>Drik</i>	<i>Samyak</i>
<i>Akriti</i>	<i>Madhyama</i>

Table 6 : *Samprapti Ghataka*

<i>Dosha</i>	<i>Kapha -vata</i>
<i>Dushya</i>	<i>Rasa & Rakta</i>
<i>Srotas</i>	<i>Rasavaha & Raktavaha</i>
<i>Udbhava sthana</i>	<i>Aamashaya</i>
<i>Vyakta sthana</i>	<i>Twak</i>
<i>Agni</i>	<i>Vishamagni</i>
<i>Srotodusti</i>	<i>Sanga & Vimargagamana</i>
<i>Roga marga</i>	<i>Bhahya</i>
<i>Sadhya-asadhyata</i>	<i>Sadhya</i>

Diagnoses : Sheeta-pitta [Chronic Urticaria]

Table 7 : Urticaria assessment Score 7 [UAS7] is used [12]

Score	Wheals	Pruritus
0	None	None
1	Mild [<20 wheals in 24 hrs.]	Mild [present but not annoying or troublesome]
2	Moderate [20-50 wheals in 24hrs]	Moderate [troublesome but does not interfere with normal daily activity or sleep]
3	Intense [>50 wheals in 24 hrs or Large confluent area of wheal	Intense [severe pruritis , which is sufficiently troublesome to interfere with normal daily activity or sleep]

Assessment Score of Patient : Score 3

Table 8 : The assessment of severity of disease was assessed by the parameters given below

Sl No	Parameter	Grade 0	Grade 1	Grade 2	Grade 3
1	<i>Kandu</i> (itching)	No itching	Mild itching during the appearance of rashes	Moderate itching one to four times during the day	Intense itching disturbing normal daily activities
2	<i>Varna</i> (discoloration)	No discolored rashes	Slightly pinkish discoloration	Red colored rashes	Dark red colored rashes
3	<i>Mandalotpatti</i> (wheal formation)	No lesion	Lesion on both hands and legs	Lesion on Hands, legs & trunk region	Lesion all over the body
4	Frequency of Attack	Nil	10 -15 days once	Weekly twice	More than 2-3 times per week

Table 9 :Therapeutic Intervention

Visits	Medication	Dosage	Anupana	Duration of treatment	Outcome
1 st visit	<ul style="list-style-type: none"> <i>Haridra khanda</i> <i>Shodak syrup</i> <i>Rajanyadi Kashya syrup</i> <i>Nalpamaradi Kera tailam</i> 	<ul style="list-style-type: none"> ½ tsp BD Before food 5ml [BD] After food 5ml TID Before food External Application 	<ul style="list-style-type: none"> Lukewarm water 10 ml <i>Sarvanga Ahyanga</i> 	<ul style="list-style-type: none"> For 1 week Along with this pathya was advised For 1 month 	
2 nd Visit	<ul style="list-style-type: none"> <i>Haridra Khanda</i> <i>Shodak Syrup</i> <i>Nimamruta Eranda taila</i> 	<ul style="list-style-type: none"> ½ tsp BD Before food 5ml BD After food 1tsp at Bedtime 	<ul style="list-style-type: none"> With Honey 1tsp With lukewarm water 10 ml With lukewarm water ½ glass 	For 1 week	<ul style="list-style-type: none"> Appetite increased UAS7 reduced from 3-2 Burning sensation completely reduced
3 rd visit	<ul style="list-style-type: none"> <i>Haridra Khanda</i> <i>Immunocin syrup</i> <i>Nimamruta Eranda taila</i> 	<ul style="list-style-type: none"> ½ tsp BD Before food 0-0-10 ml at night Weekly 	<ul style="list-style-type: none"> With Honey 1tsp With 10 ml of lukewarm water With lukewarm 	For 15 days	<ul style="list-style-type: none"> USA Score reduced to 1 Sleep Quality improved Bowel movements Became

		once 5ml at Bed time	water		Regular with Normal consistency
4 th Visit	<ul style="list-style-type: none"> <i>Gandaka Rasayana</i> <i>Nalpamaradi taila</i> 	1-0-0 External Application	Lukewarm water <i>Sarvanga Abhyanga</i>	21 days	<ul style="list-style-type: none"> USA7 - O <i>Twak sara lakshans</i> was seen

Note : There is no attack till day

Table 10: **Observations**

Sl No	Parameters	Before treatment	After treatment
1	Uricatria Assessment Scale 7	Score 3	Score 0
2	<i>Kandu</i> [Itching]	Grade 3	Grade 0
3	<i>Varna</i> [discoloration of lesion]	Grade 3	Grade 0
4	<i>Mandalotpatti</i> [Wheals]	Grade 3	Grade 0
5	Frequency of attack	Grade 3	Grade 0

Results:

By above observation it clearly convey that the ayurvedic treatment has given an remarkable results in the management of Sheetapitta in child without reoccurrence till day .

Discussion :

Sheetapitta is a *Tridoshaja Vyadhi*. According to *Nidaan Sevana* (etiological factors in this case)- Junk food, excess intake of chocolates, ice-cream & Seasonal variation there is a vitiation of *Kapha* and *Vata dosha*, which then spreads throughout the body, both externally and internally, & gets combine with *Pitta* [*Pradustapitta*]. The *Tridoshas* spreading internally cause *Dushti* (pathogenesis) of *Rasa* and *Rakta Dhatus*. Then *Rasavaha* and *Raktavaha Sroto Dushti* occurs causing symptoms such as *Varatidamstavat Sotha* (elevated red rashes) and *Kandu* (itching) caused by *Kapha*, *Toda* (pain) by *Vata*, and *Daha* (burning sensation) caused by *pitta* when they reach *Twaka* (sensitized skin) leads to a *vikara* called *Sheetapitta*.

So treatment in this case was planned based on *Samprapti* & *Dosha* predominance as there was *prabhutadosha* along with *Vishamagni* & *Aama lakshans* – initially *Agnideepana* & *pachana* along with other *Shamana Aushadis* was used along with *Strict pathya* in the first visit. *Rajanyadi churns* syrup was advised for *Deepana* – *pachana* and *vatanulomana* action & it is indicated in *Ajirna* & *twak vikara* [13] *Haridra khanda* is classical formulation which has its direct indication in *Sheetapitta chikitsa* & clinically it is known for its anti-allergic action [14] *Shodhak* syrup is polyherbal patent medication a blend of *Mahamanjistadi Kashaya* & *Panchanima churna* [Aqueous extracts] in the form of syrup which has *Rasa* & *Rakta shodhaka* action & is widely used in the *twak vikaras*. *Nalpamaradi Kera taila* is a classical preparation from *Sahasrayoga* which is externally applied in different *twak vikara*.

In the second visit *Shodhana* was planned has in children classical *shodhana* is contra-indicated *Nitya Virechana* [*Snigdha*] was advised with *Nimamruta Eranda taila* , it is used in *kusta chikitsa* the free radicals which are present in the body is the triggering factor for the condition should be eliminated & there by reoccurrence of the condition can be avoided.

In 3rd visit Immunocin syrup was added, It is an ayurvedic patent medicine which strengthens the immune system & protects the body from various disease & infections.

At last in 4th visit the Gandaka Rasayana was advised for 21 days as a *Naimittika Rasayana* to strengthen the Rasa & Rakta Dhatu they may the Leena Dosha also can be neutralized & leads to *Apunarbhava* of a *vyadhi*

Conclusion:

Sheetpitta is commonly encountered disease in today's daily life. In this diagnosed case of *sheetpitta Ayurvedic* line of treatment was adopted along with wholesome diet regimen. The patient showed a good response in short span of time.

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