



AYURVEDIC MANAGEMENT OF VAIPADIKA -A CASE STUDY

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Abstract-All skin diseases in *ayurveda* have been considered under the headings of *kushta*.The prevalence of the skin diseases is about 15% all over the world. Palmoplantar psoriasis (PPP) that accounts for 3 - 4% of all psoriasis cases produces significant functional and social disability^[1].*vipadika* is one of the types of *kshudrakushta* which involves *vata -kapha dosha* predominance^[2]

According to *charaka* it is distinguished by *pani-padasputana and tivra Vedana* ^[3].*vipadika* can be corelated to palmoplantar psoriasis, Palma-plantar keratoderma, Palmo-plantar dermatophytosis conditions according to modern science which is long lasting autoimmune disease characterised by red ,itchy and scaly patches of the palms and soles , there are multiple painful fissures and bleeding also..

IndexTerms - *Vipadika*, Psoriasis,*Pinda taila* ,*kushta*

INTRODUCTION

Skin is one of the *gyanendriya* which responsible for *Sparsha gyana* or touch sensation.*Vipadika* one of the types of *kshudrakushta* corelated to palmo plantar psoriasis.

In India prevalence of psoriasis ranges from 0.44% to 2.8%^[4]. Palmo plantar is 2nd most common amongst the other type of psoriasis^[5]. It has caused by a combination of genetic and environmental factors. The most common genetic factor associated with palmer plantar psoriasis includes the human leukocyte antigen(HLA).Skin conditions has high reoccurrence rate even with long term treatment, Therefore *shodhanachikitsa virechana* ,which aids in removing the vitiated *doshas* from the body to prevent the reoccurrence of the disease.

Case History:A 57 years old female patient came to OPD with chief complaints of blackish discolouration and cracks in bilateral palms and soles associated with itching and dryness since 2 years.

Past history of Illness:No history of Diabetes, Hypertension or any metabolic disorders.

History of present illness:

The patient was apparently normal 2 years back with gradual onset of blackish discolouration and cracks in bilateral palms and soles associated with itching and dryness for which she started taking allopathic medicines from General Practitioners and Dermatologist and she got symptomatic relief for some days. Her symptoms worsened since 1 month so he came to Agada OPD of Sri DharmasthalaManjunatheshwara College of Ayurveda and Hospital, Hassan.

Personal History*Prakriti: Vata-kaphaja**Ahara: Mixed**Vyasana: Tea 2 times a day**Nidra: Disturbed due to itching**Mala: Prakruta**Mutra: 5-6 times/ day***Examination (Asta-Vidha Pareeksha):***Nadi: 80 bpm**Mala: Prakruta**Mutra: 5-6 times/day**Jihwa: Lipta**Shabda: Prakruta**Sparsha: Anushna-Sheeta**Drik: Prakruta**Akriti: Madhyama***Dashavidha pareeksha***Prakruti: Vata pitta**Vikruti: Rasa Rakta**Saara :Asthi**Samhanana: Madhyama**Satva: Madhyama**Satmya: Madhura, katu**Aharashakti: Madhyama**Vyayama shakti: Madhyama**Agni shakthi: Madhyama**Vaya: Madhyama***Local examination****Inspection**

- **Location** -B/L soles, B/L palms
- **Colour**-Blackish discolouration

Palpation

- **Temperature**-Felt
- **Texture of lesion**-Rough and scaly

Tests

- **Auspitz sign**-Positive
- **Distribution of lesion**-Symmetrical

On admission

12/04/2024

SL NO	TREATMENT
1	<i>Deepana and pachana with Amahara Kashaya 50ml TID</i>
2	<i>Snehapana with Panchatiktaghrita with pinch of shuntichurna 30ml,60ml,90ml</i>

- *Snehapana with panchatiktaghrita for 3 days*
- *1st day-30ml,2nd day-60ml,3rd day-90ml and Sneha shuddilakshanas are seen.*
- *Diet - Sips of shunti jala,Peya (Ganji)*

16/04/2024

SL NO	TREATMENT
1	<i>Sarvanga abhyanga with pinda taila and bhaspasweda for 2 days</i>
2	<i>Kusmolin ointment for E/A</i>

18/04/2024

SL NO	TREATMENT
1	<i>Virechana with Nimbamritadi Eranda taila</i>

- *Virechana with nimbamritadi eranda taila*
- *Vegas 20*
- *Pravara shuddi* observed.

Advised on discharge

1) *Kusmolin* ointment for External application

BEFORE TREATMENT



AFTER TREATMENT



OBSERVATION AND RESULT

SL NO	OBSERVATION	BEFORE TREATMENT	AFTER TREATMENT
1	Itching	++	-
2	Dryness	++	+
3	Blackish discolouration	+	-

DISCUSSION

In Ayurvedic Classics, the specific *Nidana* for *Vipadika* is not mentioned. So the etiology of *Kushta* is considered as the etiology of *Vipadika*. The *Nidana parivarjana* is the first line of treatment.

Shodhana and *shamana* and *chikitsa* are selected based on *dosha* predominance. *Pinda taila* can be used externally as an effective medicine in managing *vipdika* [6]. *Amahara Kashaya* is *ama hara* and *vatanulomana,panchatikta ghrta* has 6 ingredients majority are having *laghu,ruksha guna* and *kapha pittahara ,raktaprasadana* property[7].

CONCLUSION

Vipadika is *vatakaphaja kushtaroga,rookshata guna* of *vata* causes severe dryness which leads to the formation of cracks.*kandu* is caused by *kapha dosha, daha* due to *pitta dosha*.The *dharana* of *mamsa* and *twak* leads to *raktasrava* and *sputana*.

There was good improvement in the signs and symptoms of itching, roughness and cracks in both palms and soles.This case study shows that *vipadika* can be managed by ayurvedic treatment.*virechana* as *shodhana* therapy and *shamanaaushadis* are effective in treating *vipadika*.

REFERENCES

1. Nicki R. Colladge, et. al.; Davidson's Principles and practice of Medicine; Elsevier Health – UK, 1237; 22.
2. Acharya vidyadharShukla,prof.RaviduttaTripathi,charaka Samhita vol 2(chikitsastanachp 8/9,10),Varanasi chauhamba Sanskrit pratisthathan 2012;182
3. Acharya vidyadharShukla,prof.RaviduttaTripathi,charaka Samhita vol 2(chikitsastanachp 8/22),Varanasi chauhamba Sanskrit pratisthathan 2012;184
4. www.ijdvl.com/article.asp?issn-0378-6323,year 2010.6,7,8.Y.P.Manjal (editor in chief),API textbook of medicine ,edition ,2015;1;678
5. Bedi T.R. Psoriasis in north india geographical variations.Dermatologica,1977;155:310-314
6. Adhikari RV, Bhurke RP. "EFFECT OF PINDA TAILA ON VIPADIKA (PALMO-PLANTAR PSORIASIS)"-A CASE STUDY.
7. Govindadas 'Bhaishajyaratnavali' edited by LalchnadrajaiVaidya;MotilalBanarasidas publication,7th edition ,kushtachikitsa ,page no 1283-84

