Case Report

Effect of a multimodality Ayurveda treatment in a case of Visphota kushta

I.V. Aiswarya, K. Parameswaran Namboothiri, P.V. Anandaraman*

Department of Panchakarma, Amrita School of Ayurveda, Amritapuri, Amrita Vishwa Vidyapeetham, India

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A B S T R A C T

Visphota kushta (blistering skin disease) is characterized by transparent blisters with thin skin covering. Management of Visphota Kushta in Ayurveda is rarely reported. The case reported here showed significant regression in the condition in short span of time and could completely stop the use of anti histamines and corticosteroids. A 32 year old female, presented with complaints of blisters over both upper and lower extremities associated with edema, burning sensation, pain, severe itching and oozing since three months. The treatments were given after ascertaining the involved dosha and the samprapti (pathogenesis). The involved dosha were and Pitta (metabolic factor) and Kapha (binding factor) dosha. Pitta - kapha dosha hara line of treatment was adopted in terms of mitigating and purificatory therapy. It helped in arresting the progression of the condition and a complete healing of blisters. Photographs were taken during and after the treatment for records. The blister completely resolved and the skin was normal as before. The patient was back to her normal routine with no signs of relapse. The outcome was a combined effect of both shamana and shodhana chikitsa along with pathya sevana.

1. Introduction

Visphota kushta (blistering skin disease) is characterized by transparent blisters with thin skin covering [1]. It can be considered under the broad spectrum of vesiculobullous diseases which are characterized by vesicles and bullae. The condition varies from dermatitis to autoimmune blistering disorders. Ayurvedic management of such diseases is rarely reported. The case reported here showed significant regression in the condition in short span of time and could completely stop the use of antihistamines and corticosteroids. The scope of Ayurvedic approach to address such vesiculobullous diseases is discussed in this paper. The employed treatments were non-invasive and cost-effective, purely based on the principles of Ayurveda.

2. Case presentation

A 32-year-old female nursery teacher, presented with chief concerns of blisters over both upper and lower extremities along with oedema since 3 months. It was associated with severe burning sensation, pain, itching and oozing.

It started with a small nodular skin lesion on the ventral aspect of the left hand above the wrist. Then similar lesions appeared on either hand which increased in size day by day for which she took allopathic medication and found relief. But the condition relapsed on discontinuing the medications. Gradually blisters developed over both upper and lower extremities along with oedema. It was associated with severe burning sensation, pain, itching and oozing. The symptoms aggravated on contact with water and she was unable to do her daily chores. There was no relevant history of any past illness or relevant family history. The personal history of the patient reveals regular intake of fish, curd, and excessive intake of sour and spicy food which may have attributed to the condition. No other specific causative factor was found relevant in the present condition.

3. Clinical findings

The lesion type was vesicle and bullae with oval, dome-shaped configuration. The lesions were transparent and fluid filled with smooth texture. It was distributed over upper and lower extremities mostly in hands and foot along with swelling. Nails and mucosa were unaffected.
4. Diagnostic assessment

4.1. Investigations

Blood routine and liver function test were within the normal limits. Other skin investigations were not done due to financial constraints of the patient.

4.2. Diagnosis: Visphota kushta

Based on the manifested symptoms and clinical findings the case was diagnosed as Visphota Kushta which is characterized by transparent blisters with thin skin covering. The lesions were limited to the extremities and it helped to rule out other blistering disorders associated with systemic illnesses.

5. Therapeutic intervention

The interventions were done after ascertaining the dosha involved. The involved dosha were Pitta (metabolic factor) and Kapha (binding factor). It was elicited based on the presenting complaints like severe burning sensation, itching and the nature of the skin lesion. The mentioned causative factors also suggest the complaint like severe burning sensation, itching and the nature of (binding factor). It was elicited based on the presenting (Kapha ladies fi

The patient was advised to avoid curd, fish, black gram, brinjal, ladies finger, sour, spicy food, fried items, etc in the diet.

5.2. Second phase of management — Shodhana cikitsa

Virecana (Purgation therapy) was planned for the purification of the body. As a part of preoperative procedure pachana (carminative therapy) using kashaya dhara (pouring of medicated decoction over the body), oleation therapy (both internal and external) and sudation therapy were performed as listed in Table 2.

5.3. Ingredients of medicine

The ingredients of the medicines used are given in Table 3.

6. Follow up and outcomes

There was the arrest in the progression of blister and oedema during the first week followed by erosion and healing of blisters in the second week of outpatient level management. Following the rupture of bullae the affected area of skin started to peel off and was replaced by the normal skin without any scarring or hyper pigmentation but secondary milia formation was noticed. There was marked relief of pain, burning sensation but itching persisted. Itching reduced considerably after Triphala kashaya dhara. After virecana there was complete relief in itching and all other associated symptoms. Photographs were taken during and after the treatment for records.

7. Timeline

Timeline of the case report is shown in Table 4.

8. Result

The blister completely resolved and the skin was normal as before. The patient was back to her normal routine with no signs of relapse. The photographs taken during shamana cikitsa, after the

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**Table 1**

| Sl No. | Formulation                          | Dose                                  | Adjuvant                           | Duration       |
|--------|--------------------------------------|---------------------------------------|------------------------------------|----------------|
| 1      | Patolamooladi kashaya [2]              | 10 mL of each kashaya together twice  | 60 mL of boiled then cooled water   | 0th—14th day   |
| 2      | Guducyadi kashyum [3]                 | daily on an empty stomach             |                                    |                |
| 3      | Manibhadra gulam [4]                  | 1 tablespoon at bedtime               | --                                 | 0th—14th day   |
| 4      | Dushivishari gulkha [5] (Tablet)      | 1-0-1 tab                             | Rice washed water                  | 0th—14th day   |
| 5      | Nimbaharidrada churna [6] (Herbal Powder) | Decoction for washing the lesion     | --                                 | 0th—14th day   |
| 6      | Herbal Paste                          | External application                  | --                                 | 0th—7th day    |
| 7      | Mahatikta ghrta [7] (Medicated ghee)  | External application                  | --                                 | 0th—14th day   |

**Table 2**

| Sl No. | Procedure                                      | Formulation                          | Dose                                  | Duration       |
|--------|------------------------------------------------|--------------------------------------|---------------------------------------|----------------|
| 1      | Kashaya dhara (Pouring of medicated decoction  | Triphala kashaya [8]                | Aprox. 5L/day                         | 0th—4th day    |
| 2      | Snehapana (Internal administration of medicated ghee in increasing dose) | Tikta kghra [9] (Medicated ghee) | Starting with 30 mL on the first day and increased up to 140 mL on the fifth day (final day) | 5th—9th day |
| 3      | Abhyanga (Whole body oil massage) and steam fomentation | Eladi kera [10] (Medicated oil) | 120 mL/day                            | 10th—12th day  |
| 4      | Virecana (Purgation therapy)                  | Manibhadra gulam (Jaggery based herbal preparation) | 60 g with hot water                   | 12th day       |
Table 3

| Sl No. | Formulation                        | Ingredients                                      |
|--------|------------------------------------|--------------------------------------------------|
| 1      | Patolamooladi kashaya              | 1. Trichosanthes dioica Roxb.                    |
|        | (Decoction prepared out of herbs)  | 2. Emblica officinalis Gaertn.                   |
|        |                                    | 3. Terminalia chebula Retz.                     |
|        |                                    | 4. Terminalia bellerica Roxb.                    |
|        |                                    | 5. Citrullus colocynthis Schrad.                 |
|        |                                    | 6. Bacopa monnieri (Linn.) Pennell               |
|        |                                    | 7. Picrorhiza kurroo Roxey ex Benth.             |
|        |                                    | 8. Zingiber officinalis Roxb.                   |
| 2      | Gaducyadi kashayam                 | 1. Tinospora cordifolia (Willd.) Miers.          |
|        | (Decoction prepared out of herbs)  | 2. Prunus cerasoide D. Don                       |
|        |                                    | 3. Azadirachta indica A. Juss.                  |
|        |                                    | 4. Coriandrum sativum Linn.                     |
|        |                                    | 5. Pterocarpus santalinus Linn.                 |
| 3      | Manibhadra gulam                   | 1. Embelia ribes Burm.f.                         |
|        | (Jaggery based herbal preparation) | 2. Emblica officinalis Gaertn.                   |
|        |                                    | 3. Terminalia chebula Retz.                     |
|        |                                    | 4. Operculina turpethum (Linn.) Silva Manso     |
|        |                                    | 5. Jaggery                                      |
| 4      | Dashivishari gulkia                | 1. Piper longum Linn.                           |
|        | (Tablet)                           | 2. Scindapus officinalis (Roxb.) Schott         |
|        |                                    | 3. Cymbopogon martini (Roxb.) Wats              |
|        |                                    | 4. Nardostachys jatamansi DC.                   |
|        |                                    | 5. Smplocos racemose Roxb.                      |
|        |                                    | 6. Elletaria cardamomun (Linn.) Maton           |
|        |                                    | 7. Tribulus terrestris Linn.                    |
|        |                                    | 8. Oxyoenum indicum Vent.                       |
|        |                                    | 9. Valeriana wallichii DC.                      |
|        |                                    | 10. Saussurea lappa C.B.Clarke.                 |
|        |                                    | 11. Glycyrrhiza glabra Linn.                    |
|        |                                    | 12. Santalum album Linn.                        |
|        |                                    | 13. Red ochre                                   |
| 5      | Nimbaharidadi churna                | 1. Azadirachta indica A. Juss.                  |
|        | (Herbal Powder)                    | 2. Curcuma longa Linn.                          |
|        |                                    | 3. Berberis aristata DC.                        |
|        |                                    | 4. Ocimum sanctum Linn.                         |
|        |                                    | 5. Trichosanthes dioica Roxb.                   |
|        |                                    | 6. Saussurea lappa C.B.Clarke.                  |
|        |                                    | 7. Wittinana somniijera Dunal.                  |
|        |                                    | 8. Cedrus deodara (Roxb.) Loud.                 |
|        |                                    | 9. Moringa oleifera Linn.                       |
|        |                                    | 10. Brassica campestris Linn.                   |
|        |                                    | 11. Zanthoxylum armatum DC.                     |
|        |                                    | 12. Coriandrum sativum Linn.                    |
|        |                                    | 13. Chrysopogon aciculatus Trin.                |
|        |                                    | 1. Moringa oleifera Linn.                       |
|        |                                    | 2. Boerhavia diffusa Linn.                     |
|        |                                    | 3. Curcuma longa Linn.                          |
|        |                                    | 4. Acorus calamus Linn.                         |
|        |                                    | 5. Pterocarpus santalinus Linn.                 |
|        |                                    | 6. Cissampelos pareira Linn.                    |
|        |                                    | 7. Hemidesmus indicus (Linn.) (R.) Br.          |
|        |                                    | 8. Aristochilica indica Linn.                   |
| 6      | Herbal Paste                       | 1. Azadirachta indica A. Juss.                  |
|        |                                    | 2. Curcuma longa Linn.                          |
|        |                                    | 3. Berberis aristata DC.                        |
|        |                                    | 4. Ocimum sanctum Linn.                         |
|        |                                    | 5. Trichosanthes dioica Roxb.                   |
|        |                                    | 1. Acorus calamus Linn.                         |
|        |                                    | 2. Cinnamomum zeylanicum DC.                    |
|        |                                    | 4. Pueraria tuberosa Linn.                      |
|        |                                    | 5. Hydnocarpus laurifolia (Dennst.) Steum.      |
|        |                                    | 6. Cyperus rotundus Linn.                       |
|        |                                    | 7. Andrographis paniculata (Burm.f.) Wallach ex Nees. |
|        |                                    | 11. Holarrhena antidysenterica (Roth.) A. DC.   |
|        |                                    | 12. Piper longum Linn.                          |
|        |                                    | 13. Ghee                                        |
| 7      | Mahatikaka ghrita                  | 1. Elettaria cardamomun (Linn.) Maton           |
|        | (Medicated ghee)                   | 2. Hydnocarpus laurifolia (Dennst.) Steum.      |
|        |                                    | 3. Saussurea lappa C.B.Clarke.                  |
|        |                                    | 4. Callicarpa macrophylla Vahl,etc              |
|        |                                    | 5. Oil of Cocos nucifera Linn.                  |

Table 3 (continued)

| Sl No. | Formulation                        | Ingredients                                      |
|--------|------------------------------------|--------------------------------------------------|
| 8      | Triphala kashaya                   | 1. Trichosanthes dioica Roxb.                    |
|        | (Decoction prepared out of herbs)  | 2. Emblica officinalis GAERTN.                   |
|        |                                    | 3. Terminalia chebula RETZ. & WILLD.             |
| 9      | Tiktaka ghata                       | 1. Trichosanthes dioica Roxb.                    |
|        | (Medicated ghee)                    | 2. Azadirachta indica A. Juss.                  |
|        |                                    | 3. Picrorhiza kurroo Roxey ex Benth.             |
|        |                                    | 4. Berberis aristata DC.                        |
|        |                                    | 5. Cissampelos pareira Linn.                    |
|        |                                    | 6. Alhagi pseudalhagi (Bieb.) Desv.             |
|        |                                    | 7. Pumaria indica Pugsley                      |
|        |                                    | 8. Gentiana kurroo Roxey.                       |
|        |                                    | 9. Cyperus rotundus Linn.                       |
|        |                                    | 10. Andrographis paniculata (Burm.f.) Wallach ex Nees. |
|        |                                    | 11. Holarrhena antidysenterica (Roth.) A. DC.   |
|        |                                    | 12. Piper longum Linn.                          |
|        |                                    | 13. Ghee                                        |
| 10     | Eladi kera                          | 1. Elettaria cardamomun (Linn.) Maton           |
|        | (Medicated oil)                     | 2. Hydnocarpus laurifolia (Dennst.) Steum.      |
|        |                                    | 3. Saussurea lappa C.B.Clarke.                  |
|        |                                    | 4. Callicarpa macrophylla Vahl,etc              |
|        |                                    | 5. Oil of Cocos nucifera Linn.                  |

shamana cikitsa and after the shodhana cikitsa are shown in Figs. 1–9. Follow up after a year reveals no signs of relapse.

9. Discussion

The main causative factors in the manifestation of the pathology of Visphota kushta are pitta and kapha dosha associated with dhatu’s like rasa and rakta. As mentioned in viruddhahara (incompatible food), regular intake of fish and curd becomes the cause of the manifestation of skin eruptions. Patient’s diet especially sour and spicy food also contributed to this and caused the vitiation of above-mentioned dosha resulting in the presentation of Visphota kushta (pitta kapha dosha predominant kushta) [11] with blisters and other associated symptoms in the skin. Based on the dosha involved, Pitta kapha hara (pitta and kapha dosha pacifying) line of treatment was adopted in terms of shasana and shodhana cikitsa.

In the shamana chikitsa, both internal and external medications were included. The internal medicines helped in mrudu shodhana (mild purification) as well as helped in srotoshodhana (clearing the channels). The decoctions given were pitta kapha hara in nature and had a mild laxative as well as anti-inflammatory property. Trichosanthes dioica is known to have an anti ulcerous effect and proved useful in skin disorders [12]. Cucurbitacin B present in T. dioica has been shown to have antimicrobial and anti-inflammatory activity [13,14]. Potential medicinal properties of Tinospora cordifolia reported by scientific research include antipyretic [15], anti-inflammatory [16], antioxidant, anti-allergic, anti-liproitic, hepato-protective and immuno-modulatory [17]. The ideal management of pitta dosha is virecana. This could be achieved on a daily basis by use of Mambhadra gulam that was indicated in conditions of skin. Dushivishu the toxins that get accumulated in due course of time and on exposure to some triggering factors, exhibits its symptoms including skin manifestations. The dietary
habits of the patient, which are mentioned earlier like regular intake of fish and curd, etc, are considered as incompatible food and in due course of time, the toxins might have accumulated in the body acting as dushivisha. Dushivishari tablet is known for its antitoxic property and is reported to be beneficial in skin disorders.

The herbs given for external application like Curcuma longa [18], Azadirachta indica [19] were anti-inflammatory and mainly helped in the erosion of blisters which might have decreased the chance of wound progression by relieving pressure. The herbal paste, which includes Hemidesmus indicus [20], Moringa oleifera [21] are anti-inflammatory and anti microbial in action, helped in reducing oedema and preventing secondary infection in the wound. The aqueous extract of Boerhavia diffusa possesses anti-inflammatory properties [22] which can be attributed to its cell membrane stabilizing effect and inhibit the lysis and release of the proinflammatory mediators. Further, local application of medicated ghee processed with sheeta virya (cold potency) and tikta rasa (bitter taste) drugs helped in reducing the burning sensation and itching. Ghee has a special quality of nirvapana [23] (mitigating burning sensation) and also prevented excess drying up of the skin tissue. It prevents fluid loss from burn wound and also lubricates the surface of wound preventing hard eschar formation. It is having vranaropana (healing) and kantivardhana (improving luster) property which helps in early healing with good pigmentation.

As a part of shodhana cikitsa purgation therapy was planned. Prior to shodhana, Triphala kashaya was used for dhara. Triphala and its individual components showed an antibacterial effect on both gram-positive and gram-negative bacteria, which suggest the ingress of active phytochemicals through both the bacterial cells

| Dates      | Events                                                                 | Intervention                                                                 |
|------------|------------------------------------------------------------------------|------------------------------------------------------------------------------|
| 10 Mar 2017| Initial presentation: Small nodular skin lesion on the ventral aspect of the left hand above the wrist. Similar lesions appeared on either hand which increased in size | Took allopathic treatment and found temporary relief.                           |
| 12 May 2017| Condition relapsed on stopping allopathic medications.                 | Consulted traditional ayurveda practitioner and took medicines but did not get any relief. |
| 17 May 2017| Current Illness: Blisters over both upper and lower extremities associated with pain, burning sensation, severe itching and oozing | Shamana cikitsa using internal and external medications along with strict diet restriction |
| 24 May 2017| Follow up 1: Blisters dried up and crust formation noticed in hand, peeling off of skin, few blisters on leg present. Burning sensation and pain reduced, itching persists | Continued same internal and external medications                               |
| 31 May 2017| Follow up 2: Secondary milia present on both hands, crust formation and peeling off of skin on legs, itching persists | Continued same internal and external medications                               |
| 24 Jun 2017| Follow up 3: Secondary milia present on both hands, itching persists, pain in both legs | Hospitalization for Shodhana (purgation therapy)                               |
| 10 Jul 2017| Follow up 4: Complete relief in itching and leg pain. No signs of any skin lesion in the body. | Resolved completely, back to normal routine.                                   |
| 10 May 2018| Follow up 5 (Telephonic conversation): No signs of relapse.             | —                                                                            |

Fig. 1. During shamana cikitsa.  
Fig. 2. After shamana cikitsa.
The immuno-modulatory property of *Triphala* could be attributed to flavonoids, alkaloids, tannins, saponins, glycosides and phenolic compounds [24].

For the purpose of *snehapana*, *Tiktaka ghrta* was chosen, it is pitta hara (pacifying pitta dosha) in nature and indicated in skin diseases. It was suggested that the drugs present in the ghee may have some affinity towards the target organ [25]. *Snehapana* by virtue of its *dosha utkleshana* (increasing the dosha) separates toxins accumulated in the patient’s body. The separated morbid dosha are eliminated by *virecana*. It helped in the removal of viti-ated dosha out of the body along with toxins at cellular level. Even though avara *shuddhi* (minimal purification) was attained, there was a remarkable improvement in the patient. It is advised to perform repeated purification in minimal quantities in skin disorders to protect *prana* (life) as an excess elimination of dosha can aggravate *vata dosha* (factor responsible for neurological and cognitive responses in the body) and may further deteriorate the strength of the patient [26].
Throughout the *shodhana* procedures, the patient was advised to follow strict diet restrictions. Following wholesome food and regimens is also vital especially in conditions of skin. The diet restriction like avoiding curd, black gram, sour, spicy items was aimed to prevent further increase in kapha and pitta dosha. Moreover, curd and fish are considered as *abhishyandi* (secretive) and can cause *srotorodha* (obstruction to the channels). Incompatible and unwholesome food habits can further aggravate condition [27].

The outcome was a combined effect of both *shamana* and *shodhana* *chikitsa* along with *pathya sevana*.

10. Conclusion

In this diagnosed case of *Visphota kushta*, based on the *samprapti* (pathogenesis), *pitta-kapha kara* line of treatment was adopted. Both internal and external purification along with wholesome diet was found effective in doing the *samprapti vighatana* (breaking the *samprapti*). The patient showed a good response in short span of time and could completely stop the use of antihistamines and corticosteroids. The adopted treatment modalities helped in arresting the progression of the condition and complete healing of blisters. All other associated signs and symptoms resolved completely. Follow up after a year also revealed no signs of relapse.

Informed consent

Written informed consent was obtained from the patient for publication of this case report and accompanying images.

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