Case Study

AN AYURVEDIC MANAGEMENT OF EKAKUSHTHA (PSORIASIS VULGARIS) THROUGH VIRECHANA KARMA (PURGATION THERAPY) AND SHAMANA CHIKITSA (PALLIATIVE THERAPY): A CASE STUDY

Govind Kumar Verma1*, Niharika Shakya2, Harish Bhakuni3, Deepti Bhakuni4, Ram Kishor Joshi5

*1Assistant Professor, Dept. of Kayachikitsa, Major S.D.Singh P.G.Ayurvedic College & Hospital, Farrukhabad, U.P, India.
2PhD Scholar, Department of Kayachikitsa, IMS, BHU, Varanasi, India.
3Assistant Professor, 5 Professor & H.O.D., P.G. Dept. of Kayachikitsa, N.I.A, Jaipur, India.
4Professor, Dept. of Kayachikitsa, Jyoti Vidyapeeth Ayurvedic University, Jaipur, India.

ABSTRACT
A 21 years old female patient had complained of silvery scaly skin lesions all over body with reddish discoloration having severe itching, burning sensation since 15 years back that got aggravated during each rainy and cold season. Examination- 1. Severe silvery scaly lesions shaded down on rubbing all over the day, 2. Characterized by sharply demarcated and erythematous papulosquamous lesions (Dry, thin, silvery-white scales), 3. Irregular, discoid and oval in shape. 3. Small areas of bleeding where the involved skin is scratched, 4. Scaly plaques on the scalp, 5. Auspitz Sign-positive, 6. Candle grease sign-Positive, 7. Gratting Test-Positive. Aims and Objectives: To prove the role & efficacy of Virechana drugs, Virechana Karma, Sansarjana Karma & Sanshamana chikitsa. Materials and Methods: 1. Dadimashataka Choorna was given 5gm twice a day with lukewarm water continuously for 3 days as Aama Dosh Pachanarthra, 2. Guggulutiktakaghritama was given 25ml, 50ml, 75ml, 100ml, 125ml, 150ml & 200ml with lukewarm water for next 7 days as Snehana Karma, 3. Bahya Snehana with Dashmoola Taila and Bahya Sarvaanga Swedana with Dashmool Kwatha were applied for next 3 days, 4. Virechana Karma was done after Samyaka Snehana & Swedana. 5. Sansarjana Karma was done after Samayaka Virechana for 7 days. Differential Diagnosis-Siddham, Mandalkushtha & Ekakushtha. Provisional Diagnosis-Ekakushtha, Final Diagnosis-Ekakushtha (Psoriasis vulgaris). Results: Significantly improvements were observed in treatment of Ekakushtha (Psoriasis vulgaris). Discussion: Deepana & Pachana chikitsa is responsible for Aama Dosh Pachanarthra. Snehana is responsible for Srotosamardawama. Swedana is responsible for Srotomargavishodhanam. Virechana is responsible for pacifying vitiated Pittaja as well as Kaphaja Dosa and Vyadhi. KEYWORDS: Ekakushtha, Psoriasis vulgaris, Virechana Karma, Purgation Therapy, Shamana Chikitsa, Palliative Therapy.

INTRODUCTION
Psoriasis is a papulosquamous disorder of the skin, characterized by sharply defined erythematous, scaly lesions. It is chronic and well known for its course of remission and exacerbation. The exact etiology is still unknown.[1] It tends to run in families and precipitated by climate, Streptococcal infections, psychological stress etc.[2] This condition is comparable with Ekakushtha in Ayurvedic system of medicine.[3] The unique treatment modality of Ayurveda provides long lasting results and a better life for patients through its three basic principles of treatment i.e., Shodhana, Shamana[4] and Nidana Parivarjana. Panchakarma (Shodhana) therapy is a unique type of treatment for various chronic, autos- immune etc. A case of Ekakushtha (Psoriasis vulgaris) discussed here. Patient successfully treated with Shodhana (Virechana karma) & Shamana Chikitsa. After course of 6 months treatment, provides significant relief in skin lesion, itching, dryness & PASI score.

The skin is one of the five Gyanendriya-adhisthana as described in Ayurvedic texts, which is responsible for Sparshagyanam or touch sensation;[5] therefore it plays a great role in physical and mental wellbeing of any individual. The unbroken skin is the nature’s dressing over the body. It acts as an effective barrier against the entry of diseases and its damage results in whole host problems. Psoriasis is common,
chronic, disfiguring, inflammatory and proliferative condition of the skin, in which both genetic and environmental influences have a critical role. The most characteristic lesions consist of red, scaly, sharply demarcated, indurated plaques, present particularly over extensor surfaces and scalp.

In Ayurvedic classics skin disorders are described under one broad term called Kushtha Roga. The classification of diseases is mainly bifurcated under two headings viz., Santarpanottha (excessive nourishing) and Apatarpanottha (nutritional deficiency), the understanding of which is very important to plan the appropriate line of treatment through Apatarpana Chikitsa and Santarpana Chikitsa, respectively. Diseases such as psoriasis presenting with Bahudosha Lakshanas are to be viewed under Santarpanottha Vikaras, the management of which is through Apatarpana Chikitsa, occupied mainly by Shodhanas such as Vamana Karma and Virechana Karma. Careful study shows that there is resemblance in symptoms of Ekakushta and psoriasis. Ekakushta can be correlated with erythematous silver scaly papule/plaque and itching which are diagnostic symptoms of psoriasis.

A 21 years old female residing in Bharatpur, Rajasthan was visited Kayachikitsa OPD of Arogyashala, National Institute of Ayurveda, Jaipur presenting with chief complaints as itching and discoloration of skin, erythematous patches of rounded to irregular shape, appearance of silvery scales guarding the patches over her trunk, both hands, both legs, chest region, abdominal region, back region, face, and forehead. Around about 15 years back, she was in healthy state, later she started with itching all over her back, abdomen, chest, head, both hands and both legs. The area affected with itching slowly got discolored and dry. Also, there was appearance of red erythematous patches guarded with scales. The patches were more pronounced over back and abdomen. Simultaneously, she was suffering from constipation, loss of appetite, physical and mental stress and disturbed sleep. She had taken treatment of allopathic medicine for years but didn’t get any relief. When she visited OPD, first of all we carried out her all routine blood investigations as Complete Blood Count, Blood Sugar Level, Liver Function Tests, Renal Function Tests and Routine and Microscopic Urine Examination to rule out any possible associated disorder. But finding of these investigations were found within normal limits. There was no significant past history of any type of addiction was found.

AIMS AND OBJECTIVES
1. To prove the role & efficacy of Virechana drugs and Virechana Karma after Aama doshataka Deepana-Pachana Chikitsa, Snehana and Swedana Karma in Ekakushtha ((Psoriasis vulgaris).
2. To prove the role and efficacy of Sanshamana chikitsa (Oral drug therapy) after Virechana Karma.
3. To prove the role of Sansarjana Karma after Virechana Karma.

MATERIALS AND METHODS
1. Dadimashtaka Choorna was given 5gm twice a day with lukewarm water continuously for 3 days as Aama Dosh Pachanartha.
2. Guggulutiktakaghritama was given 25ml, 50ml, 75ml, 100ml, 125ml, 150ml & 200ml with lukewarm water for next 7 days as Snehana Karma.
3. Bahya Snehana (External Oleation) with Dashamool Taila and Bahya Sarvaanga Swedana (External whole body) with Dashmoola Kwath were applied for next 3 days.
4. Virechana Karma was done after Samyaka Snehana & Swedana.
5. Sansarjana Karma was done after Samayaka Virechana for 7 days.

Treatment Plan: The treatment is carried out in two phases.

I. First Phase: First phase of treatment included Sanshodhana Karma (Purificatory procedure) i.e., Virechana (Process of purgation). Then strictly followed Sansarjana Karma for 7 days.

II. Second Phase: After Shodhana, second phase of treatment Shamana Chikitsa initiated in the form of oral medication and Nidana parivarjana.

As Ekakushta is chronic and relapsing in nature and also there is an involvement of Tridosha (predominance of Kapha) and Twaka, Rakta, Mansa, Lasika and Kleda. Hence, repeated Shodhana is required for treatment. Shodhana is one of the important treatments of Ayurveda which deals mainly with elimination of aggravated Doshas from body and eliminates relapsing rate of disease.

Sodhana Chikitsa- (A) Purva Karma (Early Therapy)

Deepana Pachana Chikitsa: Dadimastaka Churna: 5 gms twice a day for next 3 days with lukewarm water.

Aabhayaantara Snehana (Internal Oleation through Digestion): After 3 days of Deepana Pachana process, since 4th days Snehana (Oleation) therapy was carried out with Guggulutiktakha Ghriman with lukewarm water for next 7 days varying in amount day wise.
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Day wise

| Day | 1st day | 2nd day | 3rd day | 4th day | 5th day | 6th day | 7th day |
|-----|---------|---------|---------|---------|---------|---------|---------|
| Ghrita Matra | 25ml | 50ml | 75ml | 100ml | 125ml | 150ml | 200ml |

**Sarvanga Abhyanga And Swedana**

Sarvanga Abhyanga (Whole body massage with *Dashamoola* oil) on 8th day.

Sarvanga Swedana (Whole body fomentation with *Dashamoola Kwatha*) on 8th day, For 20-25 minutes or until profuse perspiration occurred.

The patient was advised for complete rest on this day and to eat *Laghu Supachya Aahara* in the evening like Khichadi, Daliya.

**Pradhana Karma (Main Therapy): Virechana Karma (Purgation Therapy)**

| On day of Virechana procedure | NBM (till process start) |
|-------------------------------|--------------------------|
| Abhyanga                      | Dashmoola Taila           |
| Swedana                       | Vashpa sweda              |
| Virechanopaga Kwatha          | Kutaki churna - 2gm       |
|                               | Triphala churna-5gm       |
|                               | Avipatikara Churna-10gm   |
|                               | Aaragvadha Phala majja Churna-1 phala majja |
|                               | Munnaka (Draksha)-50gm    |
| Virechaka Yoga                | Trivritaadi Avaleha-20gm Orally |
|                               | Abhayaadi Modaka-4Tab Orally |
|                               | Luke warm water-Orally    |
|                               | Munnaka (Draksha)-100gm Orally |

No. of Virechanavega (acts of purgation)-25 Major & 6 Minor Vega (After 30 min. of administration of *Virechaka yoga* orally)

**Paschata Karma (Process after Purgation Therapy): Sansarjana Karma**

3 Aaharkaala (diets) for 7 days (with *Peya, Vilepi, Akrita Yusha, Krita Yusha, Mansarasa* and *Samanyaahara*).

**Sansamana Chikitsa**

| A. Tab. Cutisora | Dose: 2 gm/day (500 mg, 2 tablets twice a day) |
|------------------|-----------------------------------------------|
| B. Tab. Kashore Guggulu | Dose: 2 gm/day (500 mg, 2 tablet twice a day) |
| C. Amalaki Rasayana | Dose: 6gm/day (3gm twice a day) |
| D. Brigaraja Churna | Dose: 4gm/day (2gm twice a day) |
| E. Psoria Oil | Dose: 20ml/day (10ml twice a day) with milk. As a Local application. |

**Duration:** 6 months.

**Aushadha Sewana Kala:** Before meal.

**Anupana:** Tila Taila/day.

Diet–Plain diet, avoidance of spicy, oily foods, fermented foods, curd, pickles.

Meditation for mental stress
Results

Before treatment

After Treatment

Effect of *samshamana chikitsa*

1. Reddish patches lightened.
2. Scaling reduced.
3. Itching at skinny lesions subsided.
4. Burning sensation at skinny lesions subsided.

Subjective Parameters

**PASI Score (Psoriasis area & Severity Index):** PASI Score was considered as both subjective & objective criteria as it covers both subjective as scaling, indurations and objective parameters as coverage area. For the calculation of score we used Online PASI Calculator Software.

**Elements**

A. Body regions as percent of body surface area
B. Extent of body region affected
C. Extent of psoriatic changes

**A. Body regions as percent of body surface area**

| Body Regions            | Code | % Body surface area |
|-------------------------|------|---------------------|
| Head                    | H    | 10                  |
| Trunk                   | T    | 20                  |
| Upper extremities       | U    | 30                  |
| Lower extremities       | L    | 40                  |
B. Extent of body region affected
Different body regions & their extend indicator were tabulated as follows.

| Percentage of body region affected | Extend indicator |
|------------------------------------|------------------|
| 0 – 5%                             | 0                |
| 5 – 25%                            | 1                |
| 25 – 45%                           | 2                |
| 45 – 55%                           | 3                |
| 55 – 75%                           | 4                |
| 75 – 95%                           | 5                |
| 95 – 100%                          | 6                |

C. Extent of psoriatic changes

| Signs                      | Scoring | Erythema          | Indurations        | Scaling          |
|----------------------------|---------|-------------------|--------------------|------------------|
| No Sign                    | 0       | No redness        | No induration      | No               |
| Minimal                    | 1       | Light Pink        | Barely palpable    | Rare             |
| Mild                       | 2       | Pink or Bright Red| Slight Elevation   | Poorly defined   |
| Moderate                   | 3       | Red               | Moderate Elevation | Defined          |
| Severe                     | 4       | Dark Red          | Marked Ridge       | Heavy            |

PASI = \[ \text{SUM}(\text{percent BSA in body region})*\text{extent Erythema in region}+\text{extent infiltration in region}+\text{extent desquamation in region})*\text{extent of body region affected} = [0.1* (Erythema head)+(infiltration head) + (desquamation head)*(extent of head affected)]+[0.2*(Erythema trunk)+(infiltration trunk)+\text{desquamation trunk}* (extent of trunk affected)]+[0.3*(Erythema upper extremities)+(infiltration upper extremities) + (desquamation upper extremities)* (extent of upper extremities affected)]+[0.4* (Erythema lower extremities) +(infiltration lower extremities) +(desquamation lower extremities)* (extent of lower extremities affected)].

Interpretation
Minimum score = 0
Maximum score = 72

Assessment of signs & symptoms were done at pre and post-trial by severity grading scale

| Aswedanam (Anhidrosis) | Score |
|------------------------|-------|
| Normal                 | 0     |
| Aswedanam present in very few lesions | 1     |
| Aswedanam present in few lesions      | 2     |
| Aswedanam present in all lesions       | 3     |
| Aswedanam in lesion and uninvolved skin | 4     |

| Mahavastu (Lesion) | Score |
|--------------------|-------|
| No lesions         | 0     |
| Lesion on partial parts of hand, leg, neck, scalp, back | 1     |
| Lesion on most parts of hand, leg, neck, scalp, back    | 2     |
| Lesion on whole parts of hand, leg, neck, scalp, back   | 3     |
| Whole body        | 4     |

| Matsyashakalpam (Scaling) | Score |
|----------------------------|-------|
| No Scaling                 | 0     |
| Mild scaling by rubbing/by itching (scaling from some lesions) | 1     |
| Moderate scaling by rubbing/by itching (from all lesions)   | 2     |
| Severe scaling by rubbing/by itching (from all lesions)     | 3     |
| Scaling without rubbing/by itching (from all lesions)       | 4     |
Criteria for assessment of overall improvement in signs and symptoms

Follow-up

| Signs/Symptoms                  | Day 0 | After 1 month | After 3 months | After 6 months |
|--------------------------------|-------|---------------|----------------|---------------|
| Aswedanam (Anhydrosis)         | 0     | 0             | 0              | 0             |
| Mahavastu (Lesion)             | 4     | 3             | 2              | 0             |
| Matsyashakalopam (Scaling)     | 4     | 3             | 2              | 0             |
| PASI score                      | 72    | 45            | 24             | 00            |

**Kandu (Itching)**

- No itching 0
- Mild itching not disturbing normal activity 1
- Occasional itching disturbing normal activity 2
- Itching present continuously & even disturbing night sleep 3
- Itching present continuously & even disturbing day & night sleep both 4

**Daha (Burning sensation)**

- No Daha 0
- Daha in any one area of Udara, Ura, Kukshi/ occasionally for more than half an hour 1
- Daha in any 2 area occurs daily for half hour to one hour 2
- Daha occurs daily in more than two areas for one hour or more 3
- Daha involving most of the areas patient may not sleep at night and does not relieve by any measure. 4
- Severe degree of Daha involving the whole body like hands, feet or Sarvanga and does not relieves by any measure. 5

**Candle grease sign**

- Absent 0
- Improvement 1
- Present 2

**Auspitz sign**

- Absent 0
- Improvement 1
- Present 2

| Signs/Symptoms                  | Day 0 | After 1 month | After 3 months | After 6 months |
|--------------------------------|-------|---------------|----------------|---------------|
| Kandu (Itching)                 | 4     | 3             | 2              | 0             |
| Daha (Burning sensation)        | 3     | 2             | 1              | 0             |
| Candle grease sign              | 2     | 1             | 1              | 0             |
| Auspitz sign                    | 2     | 1             | 1              | 0             |
| Grattage Test                   | 2     | 1             | 1              | 0             |
| Improvement in Kandu (Itching), Daha (Burning sensation), Candle grease sign, Auspitz sign, Grattage Test. |        |               |                | 100%          |

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DISCUSSION

Probable mode of action of Virechana Karma

Sanskrodhana therapy has its key strength in preventing relapse of disease. Acharya Charaka has specifically mentioned that there is a chance of recurrence of disease when treated with only Shamana Therapy (Internal medicine) but when Sansrodhana is done there is no chance of recurrence or it is reduced significantly.\(^{13}\) As recurrent relapse is the major problem for Psoriasis patients so, the Virechana Karma was proved beneficial in preventing relapse. Virechana is indicated for Pitta predominant disease.\(^{14}\) The Virechana drugs have the properties like Ushna, Teekshna, Sukshma, Vyavayi & Vikashi.\(^{15}\) Due to their Vyavayi and Vikashi properties, they get quickly circulated into large and small capillaries of the body and pervade all over the body.\(^{16}\) By virtue of their Ushna and Teeksha qualities the accumulated Doshas get liquefied and breakup into small pieces at cellular level.\(^{17}\) Because of their Vikashi Guna they detach the Mala from Dhatu. Owing to the presence of Sukshma Guna and Anupravana properties the Malas or Dosa float because already body has got Samyaka Snidhata and pass through smallest capillaries and ultimately reach to Amashaya.\(^{18}\) Detached Mala would not be obstructed even in the smallest capillaries.\(^{19}\) Perform Virechana in afternoon time i.e., at Madhyahana when the levels of Pitta are high. As per Ayurvedic point of view, process of Virechana Karma precedes Deepan Pachana which reduces the Aamadosha and increases Agni. There after medicated or pure Ghrita or Oil is given for the Snehana. Though texts clearly contraindicated the use of Ghrita, Ksheera, Taila etc. As Snehana in Kushtha but they also suggested Siddha Ghrita or Taila by Ruksha, Ushna drugs for Snehpana purpose which may be helpful in conditions like Kushtha where Kleda is aggravated. All these drugs having Rasayana property may be more beneficial in management of Kushtha. Snehana reduces the burning sensation (Daha), lubricates the body and thus reduces dryness over the scales. It also reduces the scaling (Matsyashakalopamam). Also the external application of Sneha reduces dryness and scaling, hence all these procedures reduces Vatadosha in the body. Sarvanga Sveda removes obstruction in Srotas through Srotoshodhaka process. By the procedure of Virechana, the Kapha dosha and Pitta dosha gets eliminated from the body and reduces itching. Deepana-Pachana which precedes the Virechana Karma increase metabolic activity by improving digestive system and helps to digest and excrete the metabolic waste products accumulated in tissue and system. So, Virechana Karma ultimately pacifies the basic causative factors (Doshas & Shithila Dhatu) which result into early recovery. Virechana Karma acts on microcellular level, eliminates the toxins (Vitiated Doshas) from body & helps in maintaining normal functioning of body.

Guggulu Tiktaka Ghritam\(^{20}\): It contains Ghritam, Nimb, Amrita, Vrisha, Patola, Nididhika, Patha, Vidanga, Suradaru, Gajapakulya, Yavakshara, Souvarchalya, Nagar, Nisa, Misi, Chavya, Kushtha, Tejovati, Maricha, Dipyaka, Vatsaka, Agni, Rohini, Arushkara, Vacha, Kanamula, Manjishtha, Ativisha, Visha, Yavani, Guggulu. All these drugs having Tikta Rasa, Kandughna & Kusthagna property.

According to modern research proved that Vasa having anti-ulcer property, Nimb having antimicrobial, Amrita having Immunomodulator, Anti-oxidant, Anti-inflammatory, Patola having Anti-inflammatory, Immunomodulator, Hepatoprotective and Kantakari having Antihistaminic, Anti-inflammatory and Cytotoxic action so breaks pathology. The patches of Psoriasis are dry & Scaly. The Guggulu tiktaka ghritam provides proper moisture to it resulting in slowing of rapid turnover of epithelium. As dryness reduces some sort of soothing analgesic effect is experienced by the patient. Commonly itching experienced by the psoriatic patients is due to excessive dryness of lesions so local application of Guggulu tiktaka ghritam shown beneficial results to patients. It has excellent Vatashamaka and Rakta shodhaka property and also helps in Vranashodhana, Vrinaropana, Deepana and enhancing liver function so used in various skin disorders.

Tab.Cutisora\(^{20}\): It contains Sweta Kutaja, Guduchi, Neema, Vasa, Patola, Kantakari, Chitraka, Khadira, Haridra and Kashore guggulu. These all drugs are having mostly Katu, Tikta, Kashaya rasa as well as Laghu, Ruksha Guna and Rasayana properties which act on vitiated Kapha Dosh. Ekakushtha is Kapha predominant disease so drug Tab. Cutisora works as Doshapratyanika Chikitsa. Drug like Bakuchi act as Kushthyghna i.e., Vyadhipratyanika Chikitsa and Rasayana Chikitsa. Most of the drugs have Rasayan, Tridoshaghnha, Deepana, Pachana properties while according to modern science Anti inflammatory, Immunomodulator, Anti-helminthes properties so breaks pathogenesis at various level and improve patient.

Amalaki Rasayan\(^{21}\): It is used for rejuvenation, aphrodisiac, immunomodulatory and antioxidant properties. It is beneficial for skin and hair by improving its functions and health. It prevents premature aging and nourishes the skin and hair. It mainly has antioxidant action and Vitamin C content, which fights against free radicals and reduces the
signs of ageing. This action is likely to be responsible for its rejuvenating property. It is a potent immunomodulator, which helps to improve non-specific immunity and prevents common viral and bacterial infections. It is rich in Vitamin C and bioflavonoid that exert potent antioxidant action. It is important to take Vitamin C along with flavonoids especially from the natural source for maximum absorption and usability of Vitamin C.

**Brigaraja Churna**[23]: It improves hair growth, prevents hair fall and treats premature graying of hair. It improves complexion and glow of the skin and prevents several skin diseases. It is more beneficial in chronic skin diseases including pruritus (intense itching), chronic wounds, skin ulcers, atopic dermatitis (eczema) etc. Bhringraja (Eclipta Prostrata) is helpful in Hair fall, Hair thinning, Premature graying of hair, Scalp itching, Pruritus (intense itching), Chronic Wounds, Non-healing skin ulcers, Atopic dermatitis (especially weeping eczema), Urticaria, Skin blisters and eruptions with Kapha or Vata dominating symptoms.

**Psoria Oil**: It contains *Stri Kutaja* (*Wrightia tintoria*) and Coconut oil. It is used in Psoriasis, Dandruff, Scaling and fungal skin disease. It balances the Vata and Pitta Doshas.

**CONCLUSION**

Psoriasis is a heredo-familial disease that is triggered by some local and systemic factors. There is evidence that both hormonal and immunological mechanisms are involved at a cellular level. It is concluded that, Ayurvedic line of management gives satisfactory answer as well equally beneficial for the promotion and preservation of health by removing toxic wastes, by balancing morbid humours and by correction of *Agni* (digestive fire) which gives the healthy and peaceful life to patient. Ayurvedic formulation not only controls the psoriasis but also significantly prevents its relapse. Hence it can be concluded that *Virechana Karma* & Tab. Immosor 2 Tab B.D., *Kashora guggulu* 2 tab B.D., Psoria oil as Local application & Orally in dose of 10 ml B.D., *Bringraja churna* 2gm B.D. *Amalaki Rasayana* 3gm B.D., *Mahamanjisthadi Kwatha* 40 ml B.D. as Orally and 200ml mixed in bathing water during Morning are beneficial and safe as compare to allopathic medicine.

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*Address for correspondence
Dr. Govind Kumar Verma
Assistant Professor,
Department of Kayachikitsa,
Major S.D. Singh P.G. Ayurvedic College & Hospital, Farrukhabad, U.P., India.
Email id: gv5303.gv@gmail.com