



AYURVEDIC MANAGEMENT OF SCLERODERMA AND DERMATOMYOSITIS – A CASE STUDY

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ABSTRACT

Ayurveda, regarded as an ancient system of medicine in India, has a long-standing legacy, that aims at promoting health, prevention & management of diseases. Ayurveda adopts a holistic approach in treating various diseases, by giving due importance to the concept of *Susadhya*, *Krichrasadya*, *Yapya* and *Anupakrama* nature of the diseases that may play a crucial role in the curability of a *Sadhya Vyadhi* and also in the management of *Asadhya Vyadhi*. Although there are many *Asadhya* diseases, wherein, often the cause of the disease remains obscure and the curability of the disease is either uncertain or not possible, Ayurveda can contribute even in the treatment of such diseases, especially, in the aspects of improving the quality of life and alleviating the intensity as well as multitude of signs and symptoms, thereby providing a significant relief, in addition to being safer approach devoid of any untoward complications when adopted judiciously. Localized Scleroderma and Dermatomyositis are two such rare and *Asadhya* diseases with autoimmune pathology, which can occasionally overlap with each other. They often involve multiple systems of the body, primarily skin and joints. Their estimated prevalence is fewer than 1 million cases per year in India. It is more common in women than in men and in the age group of 20 to 50 years. There are many tools available for diagnosis of Scleroderma and dermatomyositis, but the lack of safe and satisfactory management in the contemporary science of medicine, makes it the need of the hour to develop an ayurvedic approach for treatment of Scleroderma and Dermatomyositis. The present study, throws light on Ayurvedic *Panchakarma* approach in such conditions, where a 20 years old female subject, diagnosed with localized scleroderma and dermatomyositis presented the complaints of tightness as well as hardness of skin over hands, legs, around lips, chest region along with blackish discoloration of lips, fingers, toes, multiple joints pain and swelling, who had got no significant relief inspite of taking various medications for the same, from the contemporary field of medicine, was successfully managed through ayurvedic *Panchakarma* therapy. The main objective of ayurvedic *Panchakarma* therapy, along with the support of medications of contemporary field of medicine, in such conditions was to evacuate the excessive accumulation of morbid *doshas*, as well as restoring the optimum functioning of *Agni*, clearing the obstruction developed in *Srotas*, maintaining the homeostasis of *Dhatus* and improving the quality of life by decreasing the multitude and intensity of signs and symptoms.

KEYWORDS: Scleroderma, Dermatomyositis, Ayurveda, Panchakarma, Agnilepa, Dhanyamladhara, Virechana Karma.

INTRODUCTION

Scleroderma, an autoimmune disorder, is marked by significant damage to the vascular system, tissue fibrosis, and the buildup of collagen in the skin. The term 'scleroderma' originates from the Greek words 'sclero,' meaning hard, and 'derma,' meaning skin. This disease involves the hardening of skin and connective tissue,

occurring either locally or throughout the body. Scleroderma has been classified into two types on the basis of its occurrence i.e localized and systemic. Localized scleroderma is limited to skin and muscular levels which known as morphea and linear type. If it affects larger area of skin and organs, then it is known as Systemic.^[1]

Dermatomyositis is a rare inflammatory disease that can affect the skin and muscle tissue, which often involves muscle weakness, skin rash and other systemic symptoms. Both Scleroderma and dermatomyositis are diseases of autoimmune origin, and as per ayurvedic understanding, the spectrum of autoimmune diseases can be viewed under the headings of *Amavisha* as well as the pathogenesis of the disease can be viewed under the *Samprapti* of *Amavata*. The main objective of Ayurvedic *Panchakarma* therapy, in such conditions is *Amapachana*, *Agnideepana*, *Bahya* and *Abhyantara Shodhana*, ensuring *Srothoshodhana*, *Dhatusamyata* thereby improving the quality of life in terms of reducing the multitude and intensity of signs and symptoms. Similar treatment approach has been adopted in the present study.

CASE REPORT

A 20-year-old female patient presented with chief complaints of tightness as well as hardness of skin over hands, legs, around lips, chest region along with blackish discoloration of lips, fingers, and toes, multiple joints pain and swelling since 2 months.

History of present illness:

A 20-year-old female patient was apparently healthy 2 months back. All the above-mentioned complaints started since 2 months which were progressive in nature due to which the patient had consulted many Dermatologists and was evaluated and was diagnosed as a case of scleroderma and dermatomyositis for which she was prescribed many topical as well as oral medications but as she failed to find any significant relief in symptoms, she had approached Panchakarma OPD of Sri Kalabyraveswaramy Ayurvedic Medical College, Hospital and Research Centre Bengaluru, for further management.

Past history: Patient was not a known case of Diabetes Mellitus/Hypertension/Hypothyroidism.

Family history: All the family members are said to be healthy. No history of consanguineous marriage in the family.

Personal history – Diet- Mixed; Appetite- Decreased; Bladder- 4-5times /day, 1-2times/ night, pale yellow; Bowel- 1-2times /day regular, semisolid; Habits- Nil.

General Examination: Appearance – Normal, Built – Moderate, Pallor – mild present, Icterus – absent, Cyanosis – absent, Clubbing – absent, Lymphadenopathy – absent, Edema – absent, BP – 120/70 mmHg, Pulse – 72/ min, regular, Temp – 97.2 F.

Systemic Examination: CVS – S1, S2 heard, no abnormality detected in cardiovascular system, RS – NVBS heard Bilaterally, P/A-Soft, non - tender, CNS - No abnormality detected.

Dashavidha Pareeksha

Prakruti: Pitta-Vata

Vikruti: Madhyama

- a) **Hetu:** Abhisandi Ahara (pizza, Burger, curd at night time), Viruddha Anna
- b) **Dosha:** Vata, Kapha
- c) **Dushya:** Rasa, Raktha, Mamsa, Meda, Asthi, Snayu
- d) **Prakruti:** Ashukari
- e) **Desha:** Sadharana
- f) **Kala:** Sharada
- g) **Bala:** Madhyama
- h) **Linga:** tightness as well as hardness of skin over hands, legs, around lips, chest region along with blackish discoloration of lips, fingers, and toes, multiple joints pain and swelling

Sara: Madhyama

Samhanana: Madhyama

Pramana: Madhyama

Satmya: Vyamishra - Madhyama

Satva: Madhyama

Aharashakthi: Abhyavaharana Shakti: Avara
Jarana Shakti: Avara

Vyayamashakthi: Madhyama

Vaya: **Madhyama – Vriddhi**

Integumentary examination: Examination of skin

Inspection

Area of skin affected - Bilateral Hands, legs, Chest region and around the lips.

Colour - Blackish discoloration.

Character – Rough and tight

Distribution - Symmetrical

Superficial sensation on skin – Intact

Nails and hairs – Normal

On Palpation:

Surface – Rough

Tenderness – Grade I - mild tenderness on palpation, To elicit over joints.

Temperature – 97.2 F

Hematological Reports

Hemoglobin	10.4gm%.
Total WBC Count	6820cells/cumm.
Differential Count	N- 64.5%, L- 27%, E- 2.3%, M- 5.9 %, B- 0.3 %.
RA factor	5 IU/ml
ESR	25 mm/hr
CRP	6.2 mg/L
Anti-nuclear antibody test (ANA test)	Positive 4 + clumpy nuclear pattern.
Pm-Scl 100	Equivocal, 9 U/ml.

Other hematological parameters were normal, 2D Echo findings normal, CT Scan of thorax normal, renal parameters and blood sugar levels are within normal limits.

Therapeutic Intervention

The line of treatment of autoimmune disease encompasses, *Trividha Chikitsa* of *Ayurveda* - *Daivavyapashraya*, *Yuktivyapashraya*, and *Satwavajaya*.

The patient was educated about the significance of *Daivavyapashraya Chikitsa* and was advised to regularly visit temples and do chanting of *Mantras*. Meanwhile, *Satwavajaya Chikitsa* was also given due importance in the form of psycho counselling done at regular interval in order to boost up the patient mental strength. Along with the due importance given to both *Daivavyapashraya Chikitsa* and *Satwavajaya Chikitsa*, the following set of *Yuktivyapashraya Chikitsa* was adopted.

TREATMENT PLAN

Days	Treatment
Day -1 to Day -7	<ul style="list-style-type: none"> Dhanyamladhara performed all over body below the neck. Sarvanga Agnichikitsa Lepa was applied excluding face and neck <p><u>Orally:</u></p> <ul style="list-style-type: none"> Shunti Choorna in dosage of 5 gm with one glass hot water thrice a day daily for 7 days consume after food.
Day - 8 to Day - 10	<p>Snehapana with Panchatiktaka Guggulu Ghrita along with Ushnajala Anupana</p> <p>1st day - 30 ml was given</p> <p>2nd day - 70 ml was given based on Agni</p> <p>3rd day - 110 ml was given based on Agni</p> <p>Samyaka Snigdha Lakshanas were achieved on the 3rd day of Snehapana.</p>
Day - 11 to Day - 13	<p>Vishrama Kala:</p> <ul style="list-style-type: none"> Shiro Abhyanga with Eladi Taila and Sarvanga Abhyanga with Pinda Taila was done. Sarvanga Parisheka with Siddhartaka Snana Churna Siddha Kwatha Ahara - Kapha Avrudhikara Ahara in the form of Rice gruel and Pomegranate juice was advised.
Day 14	<p>On the day of Virechana Karma,</p> <ul style="list-style-type: none"> Shiro Abhyanga with Eladi Taila and Sarvanga Abhyanga with Pinda Taila was done. Sarvanga Pariseka with Siddhartaka Snana Churna Siddha Kwatha. Virechana Aushadhi was administered with Nimbamritadi Eranda Taila in the dosage of 100ml along with 200 ml of Sukhoushna Ksheera as a Sahapana, Ushnajala as Anupana. Total no. of Vegas – 05 [Avara veigiki shuddi] with <i>Kaphanta</i> was observed. Samyak virechana laxanas were observed.
Day - 14 to Day -16	As there was Avara Shudhi attained Samsarjana Krama was Advised for 3days.

RESULT

The course of *Virechana Karma* with the *poorvakarma* of *Bahya* and *Abhyantara Pachana Chikitsas*, showed significant improvement in Softness and glow of the skin, significant improvement in reduction of joint pain and swelling, good improvement in blackish discoloration over hand, legs and around lips. A very good effect in pigmentation of skin. No progress of symptoms was seen during the course of the treatment and on follow up where the patient was satisfied with above *Ayurvedic Panchakarma* treatments.

DISCUSSION

Localized Scleroderma and Dermatomyositis are multi-system disorders of unknown etiology affecting skin and joints. The pathology of both the conditions involve autoimmune reactions that takes place in the body. As per *Ayurveda*, the immune cells do not attack body cells accidentally, but to defend against harmful metabolites termed as *Ama*. *Ama* gets formed at the level of *Jatharagni* and *Dhathwagni* and produces many pathological events inside the body thereby causing various Auto-immune disorders. *Shodhana Roopi Langhana* should be adopted in conditions of *Bahudosha Avastha*^[2] with *Ama*. Hence, *Virechana Karma* has been

emphasized in this condition with appropriate *Bahya* and *Abhyantara Pachana* as *Poorvakarma*.

Agnichikista Lepa- is a very popular modality of *Bahirparimarjana Chikitsa* derived from folklore practice where in the drugs such as *Tulasi*, *Lashuna*, *Sarshapa*, *Maricha*, *Lavanga* that are having *Ushna*, *Tikshna Guna*, *Ushna Veerya*, *Deepana*, *Pachana*, *Pramathikarma* and *Vatakaphahara* action helps in disseminating the *Ama*, relieving the obstruction of *Srotas*, helps in optimizing the function of *Agni* there by helps in exerting a kind of disease modifying effect by virtue of *Samprapti Vighatana*.

Dhanyamla^[3] is a product of *Sandhana Kalpana* where in medicated fermented liquid is made out of certain cereals and few medicinal herbs that has Property of *Deepana*, *Dahanashana* effect.^[4] **Dhanyaamladhara** is a modality of *Bahirparimarjana Chikitsa* where in *Sukhoushna Dhanyamala* is poured all over the body at the distance of 12 *Angulas* which exert a kind of *Rukshana*, *Pachana*, *Srotosodhana* effect. As per the reference of *Shivadas Sena*, *Dhanyaamladhara* helps by exerting *Shakhagata Vataharatvam* effect, *Kukshigatavatakaratvam* effect, *Bahirpittaharatvam* effect and *Antapittakaravam*^[5] effect which is suggestive of its effect in mobilizing the morbid *Vata* and *Pitta* from *Shakha* to *Koshta*.

Acharya Sushruta explains, *Tiryak Dhamanis* having their opening in the *Lomakupa*. *Dravyas* when applied over the skin, it gets absorbed through these openings and undergoes *Pachana* by *Brajakapitta*, located in the *Twacha*. It is this *Brajakapitta* that takes up and metabolizes the drug administered through external application in the form of *Abhyanga*, *Parisheka*, *Avagaha* and *Alepa*.^[6]

Shunti Choorna exerts *Pachana* effect which is required to relieve the *Ama* thus augmenting status of *Agni*^[7] thereby forms the *Poorvakarma* of *Virechana Karma*.

Bahya Pachana in the form of *Dhanyamla Dhara* followed by *Agnichikitsa Lepa* and *Abhyantara Pachana* in the form of *Shunti Choorna* facilitate the easy elimination of morbid *Doshas* due to their effect of *Paktavyam* and *Dhatubhyam pruthaktvam*^[8] fulfilling the role of *Poorvakarma*.

Shodhanaga Snehapana was given with **Panchtikta Guggulu Ghritam** that consists of kind of *Dravyas* which are predominantly *Tiktarasa Pradhana*, *Ushna Veerya Pradhana* that help in *Utkleshana* of the *Doshas*, regulating the functioning of *Vata*, imparting *Mardhavata* of *Shareera*, dismantling the *Malasanga*, specifically acting at the level of *Twaka* and *Asthi Vikara*.^[9]

Shiro Abhyanga done with the *Ekadi Keram* and *Sarvanga Abhyanga* with the *Pinda Taila* during

Vishrama Kala exert Specific effect at the level of *Twaka*, *Rakta*, *Mamsa*^[10] as well as help in mobilizing *doshas* from *Shakha* to *Koshta*.

Virechana Karma - is a very important modality of treatment for evacuating the excessive aggravated *Doshas* in large quantum. The very effect of *Virechana Karma* in terms of *Srotovishudhi* effect, *Indriyaprasadana* effect, *Agnideepti*^[11] effect, helps in this condition.

Nimbamritadi Eranda Taila was opted as *Virechana dravya* as generally *Sneha Virechana Yoga* is *Mrudu* in nature. It is a *Sukha Virechaka* drug and it has excellent *Vatashamaka*, *Shothahara* activity which is helpful in elimination of bio-toxins from the body.^[12]

Localized Scleroderma and Dermatomyositis being an autoimmune metabolic disorders with *Jatharagni* and *Dhathwagni Mandyatha*, *Virechana Karma* helps in improving the status of *Agni* with its effect in correcting the *Pachakagni*^[13] thereby improving the body's metabolism helping in eliminating the morbid *Doshas*. *Dhatu Upachaya Lakshanas* can be achieved by the *Dhatu Sthiratvam* attribute of *Virechana Phala*^[14] which is integral in maintaining the homeostasis of the body which is otherwise disturbed in this case. *Virechana Karma* helps in flushing out the *Amadosha* from the body, where the immune system can be rejuvenised with the elimination of accumulated toxic metabolites and free radicles helping in alleviating the intensity and magnitude of the signs and symptoms.

CONCLUSION

The spectrum of autoimmune diseases can be viewed under the umbrella of *Amavisha* with reference to *Amavata* due to which a special protocol was postulated which has been adopted in this study. The present study encourages similar Ayurvedic interventions, and gives a ray of hope in developing an approach in such kind of incurable diseases such as Scleroderma and Dermatomyositis. The study suggests that *Panchakarma* interventions could provide a supportive role in managing autoimmune diseases like Scleroderma and Dermatomyositis. *Panchakarma* occupied a major role in the domain of multidisciplinary approach in order to handle such cases successfully.

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