



A CASE STUDY- AYURVEDIC MANAGEMENT OF EK KUSTHA

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ABSTRACT

Eka-Kushtha is a type of Kshudra Kushtha described in Ayurvedic Classics, which is mainly Vata-Kapha predominant. The classical symptoms of Eka-Kushtha can be compared with Plaque Psoriasis due to its maximum resemblance. Psoriasis is a long-lasting auto-immune disease, more stress sensitive than any other skin disease, and is rarely life-threatening but can affect a person's self-image. 4-5 % of the total world population have Psoriasis and its prevalence in India ranges from 0.44 to 2.8%. In modern medical science, Psoriasis can be treated with PUVA, corticosteroids, antihistamines, etc. But these therapies give serious side effects and still remains challenging. Hence the need for time to find out safe and effective treatment for Psoriasis and here Ayurveda plays an important role. The unique treatment modality of Ayurveda provides long-lasting results and a better life for patients. Various treatment forms of Shodhana and Shamana Chikitsa mentioned in classical texts for Kushtha are very effective.

INTRODUCTION

Ayurveda categorises all skin disorders under the shade of *Kushtha*, in other word it tends to be recorded as 'Ayurvedic dermatology'. There are Seven, Eleven, Eighteen, and Infinite (*Aparisankhyey*) types of *Kushthas*. Among 18 varieties of *Kushthas*, 7 are *Mahakushtha* and 11 are *Kshudra Kushtha*. *Eka-Kushtha* is one of the *Kshudra Kushtha* which is mainly *Vata-Kapha predominant*,^[1] described in Ayurvedic texts with symptoms^[1] *Aswedanam* (anhidrosis/ lack of sweating), *Mahavastu* (broad-based), *Matsyashakalopamam* (looks like the scales of a fish), *Krishna Aruna Varna* (blackish reddish discoloration of the skin)^[2], *Mahashrayam*.^[3] *Visarpa* is the cause of *Eka-kushtha* and it is constantly spreading in the body and some discharge, pain, *Krimi* are present in the lesion.^[4] The signs and symptoms of *Eka-kushtha* are similar to that of Plaque Psoriasis. Psoriasis is one of the most common skin disorders seen in day-to-day life. Plaque Psoriasis is a lifelong autoimmune disorder characterized by sharply defined erythematous squamous lesions, covered by dry, brittle, silvery, or greyish white, loosely adherent micaceous scales. These scales vary in size from pinpoint to large plaques.^[5] The exact aetiology is unknown, but it is likely that psoriasis is a T- Lymphocyte driven disorder and has genetic components and other components like stress, excessive alcohol consumption, smoking different types of pollution, improper diet, use of various cosmetics, chemicals all these factors aggravate psoriasis.

It is characterized by remission and relapses. The prevalence rate of psoriasis is 0.44- 2.8% in India.^[6] Treatment is concerned with control rather than cure. It includes topical agents (Dithranol, tar, Calcipotriol, tazarotene, and corticosteroids), UVB, PUVA therapy, and systemic immunosuppressive/ immunomodulating agents.^[6] But Ayurvedic treatment provides long-lasting results and a better life for patients through its three basic principles of treatment i.e. *Shodhana* (Purification), *Shamana* (Pacifying treatment), and *Nidanaparivarjana* (avoidance of causative factors).^[7]

*Nidana Panchaka**Nidana- Virudhha Aahara and Vihara Sevana, Dadhi Sevana, Ati Katu and Amla Rasa Sevana.**Purvarupa - Kandu**Rupa - Aswedana, Mahavastu and Matsyashakalopama.**Upashaya* – External application of *Narikela Taila*.*Anupashaya* – Exposure to too cold and hot weather.*Samprapti - Nidana Sevana**Tridosha Prakopa**Dosha- Dushya Samurchana (Sapthako Dravya**Sangraha –Tridosha, Twacha,**Rakta, Mamsa and Lasika)**Khavaigunyata in Twacha*

Lakshanas like Aswedana, Mahavastu and Matsyashakalopama appeared in Twacha of Sarvashareera.

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Ekakushta

Samprapti Ghatakas

Dosha – Vat Kafaj.

Dushya - Rasa, Rakta, Mamsa, Ambu.

Srotas- Rasavaha, Raktavaha, Mamsavaha, Ambuvaha.

Srotodushti- Sangha

Udbhavasthana- Amashaya

Vyakta Sthana- Sarvashareera

Sadhyaasadyata – Kashta Sadya

CASE REPORT

ATURA PARICHAYA

Patient name – Nikhil Thakur.

Age – 22 Years.

Sex – Male.

Religion – Hindu.

Occupation – Student.

Address – Village Bhatta P O Jalpher Tehsil Joginder Nagar Distt Mandi Himachal Pradesh

PRADHANA VEDANA

Reddish Scaly Skin lesion over the Lower limb Since 2 years.

Severe dryness Since 2 years.

Itching Since 2 years.

VEDANA VRUTTANTA

A 22 year- old male patient came to our OPD with a complaint of Erythematous Skin lesion over the Extensor part of Lower limb Since 2 years. Lesion is gradual in onset and progressive in nature. Boundary of lesion is well demarcated. Patient also complaints of Itching since 2 years. Itching is so severe that it affects daily activities of the patient. Severe Dryness is present at the site of skin lesion. With all these complaints patient came to OPD.

POORVA VYADHI VRUTTANTA

No History of T2DM, Hypertension and Hypo/Hyperthyroidism.

No relevant skin disease in past.

KUTUMBH VRITANTA

No significant history was found.

VYAKTIKA VRUTTANTA

Food habit: Mixed diet (Non-veg–Weekly twice)

Sleep: Disturbed due to itching.

Management

Shodhan Chikitsa

SNO	DAYS	Shodhan Chikitsa	Drug	Dose
1	1 - 3	Deepan and Pachan	Chitrakadi vati	2 TID with warm water
2	4 - 8	Snehpan	Panchtikta ghruta	80 ml in Arohan matra.
3	9 - 11	Swedan & Abhyanga	Sarwang vasp swedan & Til taila abhyanga	-

Bowel: Constipated

Micturition: 5-6 times/day, 1 time/night

GENERAL EXAMINATION

General condition – fair.

Pallor – Absent.

Oedema- Absent.

Cynosis- Absent.

Icterus – Absent.

Clubbing – Absent.

Lymphadenopathy – Absent.

Weight – 52 Kg.

Height – 5.4 feet.

BMI – 17.2.

BP – 114/92 mm of hg.

Pulse – 78/min.

Respiratory rate – 19/min.

Temp – 98.6 F

Ashta Sthana Pariksha

Nadi	Pittaja (78bpm)
Mala	Vibandha
Mutra	Prakrita
Jihwa	Ishat Liptata
Shabda	Prakrita
Sparsha	Anushna Sheetha
Druk	Prakrita
Akriti	Madhyama

Dashavidha Pariksha

Prakruti	Vata-Pitta
Vikriti	Tridosha+Rakta
Sara	Madhyama
Samhanana	Pravara
Pramana	Madhyama
Satwa	Madhyama
Satmya	Shadrasa
Aharashakti	Madhyama
Vyayamashakti	Pravara
Vaya	Madhyama

Systemic Examination

Respiratory System: Normal Vesicular Breath Sound heard.

Cardiovascular System: S1 S2 heard. No added sound heard.

Central Nervous System: Patient is conscious and oriented to time, place and person.

Gastro – Intestinal Tract: Soft and Non –Tender

Integumentary System Examination

Onset - Gradual

Duration – 2 years

Course – Progressive.

Site – Extensor part of lower limbs,

Shape – Irregular scaly reddish patch.

Uniformity – Generalized Plaques.

Boundary – Well - demarcated.

Lesions - Plaques.

4	12	Virechan	Trivrut avleha	50 gm
5	13 - 15	Sansarjan kram	Payadi sansarjan krama	-

Shamanoushadhi	Dose
Tab Pancha Tikta Gruta Guggulu	2 BD with warm water
Syp Khadirarista	30 ml BD with equal amount of water.
Psorolin- b ointment	Twice daily
Tiphala Churna	At bed time with water.

RESULT

SIGNS & SYMPTOMS	BEFORE TREATMENT	AFTER TREATMENT
Erythematous Skin lesion	Present	Absent
Severe dryness	Present	Absent
Itching	Present	Absent

Before treatment



After treatment



DISCUSSION

Pancha Tikta Gruta Guggulu

It is indicated in *Sandhi asthi majjagata kustha* explained in *Baishajya Ratnavali* as it contains *Patha*, *Vayavidanga*, *Devadaru*, *Gajapippali*, *Sarja Kshra*, *Yavaksahra*, *Shudha Guggulu*.

Psorolin- b ointment

This ointment contains of *Kutaja* as works as anti- fungal, *Durva* works as anti -microbial and has wound healing property.

Khadirarista

It contain *Madhura tikshna oushadis* it is directly mentioned in *Kushta Rogadikara* in *Bhaishajya ratnavali*. It acts as antibacterial, and eliminates blood toxins and microorganisms from the body.

REFERENCES

1. Agnivesha, Charaka, Charaka Samhita revised by Dridhabala, Chikitsa Sthana Kushtha Chikitsa Adhyaya 7/21, Chaukamba bharti academy, Varanasi, reprint, 2017; 253.
2. Sushruta, Sushruta Samhita of Shastri Ambikadatta, edited with Ayurveda tattva Sandipika, Nidana Sthana 5/10, Chaukambha Sanskrit Sansthan, Varanasi, Edition reprint, 2013; 321.
3. Murthy Srikantha K.R, Vagbhata's Astanga Hridayam, Nidana Sthana Kushtha-Svittra-Krimi-

- Nidana* 14/20, Chowkhamba Krishnadas Academy, Varanasi, Edition 5th, Reprint, 2003; 139.
4. *Vrddha Jivaka, Kasyapa Samhita* revised by Vatsya, *Chikitsasthana Kushtha chikitsa adhyaya, Chaukhambha Sanskrit Sansthan*, Varanasi, edition 10th reprint, 2005; 119, 115.
 5. Virendra N. Sehgal, Jaypee textbook of clinical dermatology, Psoriasis chapter 30, edition 5th; 134, 135, 137.
 6. Harrison's Principles of internal medicine, edition 16th, 1; 291, 297.
 7. *Agnivesha, Charaka, Charaka Samhita* revised by *Dridhabala, Vimana Sthana Rogbhishagjitiya Vimana Adhyaya* 7/30, Chaukamba bharti academy, Varanasi, reprint, 2017; 734.