

## Vipadika (Palmoplantar Psoriasis): A Case Study

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### Abstract

The skin is the body's largest organ (20 square feet), and it plays an important role in both physical and mental health. Kushta is a comprehensive term used in Ayurveda to describe all skin ailments (Skin Diseases). The Ayurvedic Samhitas include 18 different types of skin disorders<sup>1</sup>. One of them is Vipadika (Palmoplantar psoriasis). Palmoplantar psoriasis is a chronic variant of psoriasis that characteristically affects the skin of the palms and soles and produces significant functional disability. It features hyperkeratotic, pustular, or mixed morphologies. The exact cause of palmoplantar pustulosis is unknown. However, palmoplantar psoriasis is caused by a combination of genetic and environmental factors. The most common genetic factor associated with palmoplantar psoriasis includes the human leukocyte antigen (HLA) Cw6. There may also be possible linkages to variations in the CARD14 gene and genes in the IL-19 subfamily in palmoplantar pustulosis. Environmental triggers include smoking, irritants, friction, and manual or repetitive trauma. Paradoxically, anti-tumor necrosis factor-alpha agents have been shown to induce palmoplantar eruptions A case of 44yr old female patient who presented features of Vipadika like scaling of Foot skin, Erythematous lesion, itching etc. was treated with the help of shamana and shodhana.

**Keywords:** Vipadika, palmoplantar psoriasis, shaman chikitsa, shodhana chikitsa

### Introduction

The word psoriasis is derive from greek 'psora' means 'itching'. Psoriasis is a chronic inflammatory disease of the skin in which epidermal cells are produced at a rate that is about six to nine times faster than normal. Vipadika is correlated with palmar-plantar psoriasis which is a chronic skin disease mainly affects palms and sole region. Palmo plantar psoriasis is caused by a combination of genetic and environmental factors. The most common genetic factor associated with palmar plantar psoriasis includes the human leukocyte antigen (HLA) Cw6. On physical exam, thick hyperkeratosis plaques, sterile pustules, or a mixture of morphologies may be seen in palmo plantar psoriasis. Hyperkeratosis plaques are the most common subtype. Symmetrically distributed lesions are common, as well as erythema, fissuring, and scaling<sup>[2]</sup>. The indications and symptoms of Vipadika have been presented differently by different Acharyas. Panipadspatana (Cracks across palms and soles), Tivra Vedana (severe Pain), Manda Kandu (Mild Itching), and Sarag Pidika (Red-colored Macule) are the symptoms of Vipadika, according to Ashtang hridaya<sup>[3]</sup>.

### AIM and Objectives

1. To demonstrate the clinical aspects of Vipadika
2. To assess Vipadika treatment in Ayurveda

### Material and Method

**Case Report:** A 44-year female patient came to OPD of our hospital on 30/06/2021 with the complaints of cracks on both palms and soles with burning sensation, bleeding from cracks and pain.

### Dashvidh Pariksha

1. Nadi (Pulse) 88/min
2. Mala (Stool) Constipated-3-4 in a week
3. Mutra (Urine) Normal
4. Jivha (Tongue) Coated
5. Shabda (Speech) Normal
6. Sparsha (Skin) Ruksh (Dry)
7. Dreek (Eyes) Normal
8. Akrti (Built) Madhyam (Medium)
9. Agni (Digestion) Visham (Irregular)
10. Bala (Power) Madhyam (Medium)

### Ashtavidh Pariksha

1. Nadi (Pulse) 80/min
2. Mala (Stool) Niram
3. Mutra (Urine) Niram
4. Jivha (Tongue) Saam
5. Shabda (Speech) Spasht
6. Sparsha (Touch) Anushnasheet
7. Drika (Eye) Pallor+
8. Akriti (Built) Madhyam

### Skin Examination

Site-dorsum of foot or sole, Distribution-Symmetrical (both soles), Dryness, itching and cracking of both the soles is seen (pada sphutana) which is painful bleeding from the cracked region is seen, in and around the fingers cracking is seen, Surface-is rough and dry, margin-Irregular

### Laboratory Examination

Hb%-12.6gm%, ESR-20mm/hr, Total WBC count 8,700cells/mm, Serum creatinine-0.6 mg

## Subjective Criteria for Assessment of Therapy

Table 1: Subjective Criteria

Vedana (Pain)	Kandu (Itching)	Ragam (Redness)
0-No Vedana	0-No itching	Present/Absent
1-After pressing	1-1 to 2 times in day	Ragam (Redness)
2-Only by touching	2-Frequently itching	
3-Without touching	3-Which disturbs the sleep and other	

Table 2: Table shows treatment result

Before treatment	After treatment
Pain-3	Pain-1
Itching-2	Itching-0
Redness-present	Redness-absent

### Before Treatment-Day 1



Fig 1

Fig 2

Fig 1&2: Before Treatment

### During Treatment-Day 15



Fig 3

Fig 4

Fig 3&4: During Treatment

### After Treatment-Day 30



Fig 5

Fig 6

Fig 5&6: After Treatment

Table 3: Table shows Like of Treatment Given to patient

Pachana	Shaman Chikitsa	Shodhana
Ampachaka kadha	1. Arogyavardhini vati(2-0-2) 2. Mahamanjishthadi Kadha (10ml-0-10ml) 3. Vidangarishta (10ml-0-10ml) 4. Gandarva Haritaki churna (0-0-1gm) with kosha jala	1. Virechana-snehapanarthatiktak ghrutpan 2. Virechak kalpa-Trivrit avleha [4] 3. Raktamokshana-Jalaukavcharana

### Jalaukavacharana

Although the body has four Doshas, according to Acharya Sushruta<sup>5</sup>. When Rakta dhatu (Blood) is ejected from the body, it is accompanied by vitiated Pitta (Bile). Raktmokshan (Bloodletting) causes Prasad manas (normalisation of physiology of manas or full body with senses) and prevents Rakta) rogas (skin doshas) from forming. Pittaj symptoms respond better to Jalaukavacharana (Leech treatment). This patient's linked symptom was Daha (Burning).

### Observation and Results

The result was observed after each follow-up of 15 days and pre and post-treatment after analyzed the subjective and objective criteria of the Patient. After the complete treatment for 30 DAYS, the condition of the patient after each follow up is a shown in above figures

### Discussion

As a cosmetic purpose, many skin diseases have their unique importance, but in this case, along with the cosmetic involvement patient had difficulty in daily activity due to severe pain in both the soles. She was unable to walk properly and had insomnia due to pain and nocturnal itching. She had taken medicine from allopathy and homeopathy but still didn't get the result so, she came to OPD for Ayurvedic treatment. This case of Vipadika, treated with Arogyavardhini vati (2-0-2) Mahamanjishthadi kadha (10ml-0 10ml) Vidangarishta (10ml-0-10ml) Gandarva haritaki churna (0-0-1gm) Virechana with trivrit avleha Raktamokshana-jalaukavcharana, Amasul tail+kapila churna (anubhuta yoga) for local application.

### Conclusion

Skin diseases are very hard to treat and line of treatment is not fixed in each patient so this study can be taken as the primary protocol to treat the patients of Vipadika as it shows good result in cracks, burning sensation, pain, and itching and gets complete relief within 30 days with no side effect. Also, this can be used in other skin diseases having the same symptoms.

### References

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