

Role of Vamana Karma Followed by Virechana Karma in Shwitra-A Case Report

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Abstract

Skin is a link between internal and external environment and is also the seat of complexion which maintains beauty and personality. All the skin diseases in Ayurveda have been discussed under the broad headings of *Kushta*. The important classical texts of Ayurveda such as *Charaka Samhita, Sushruta Samhita, Astanga Hriday* etc. clearly mention the treatment of *Shwitra* along with its classification and prognosis. Most of places *Shwitra* and *Kilasa* uses as a Synonyms can be co-related with "Vitiligo" in contemporary medicine. Vitiligo is a chronic disfiguring disease involved with systemic autoimmune process. It is characterized by constrained, idiopathic progressive, hypopigmented or white patches of skin. The effect of drug is to enhance the proliferation of melanocytes. The line of treatment of skin diseases are shodhana and shamana therapy. Vaman karma (emesis therapy) followed by virechana karma is considered as best line of management for *Shwitra*.

Keywords: Vaman karma, virechana karma, shwitra, shodhan

Introduction

The skin is one of the essential sense organ as the skin covers the whole body, Bhrajaka pitta should be maintained in a proper State of the skin [1]. The deficiency of Bharajaka Pitta is one of the causative factor of the pathological conditions. Shwitra (Vitiligo) is one of the most common skin disorder prevalent now a day [2]. The word Shwitra has its root in the Sanskrit word *Shweta*, which means white patch [3]. *Shwitra* is mention in Kushta Roga Chikitsa where white patches appear on the whole body or a local region. Kustha has been broadly classified into Mahakustha and kshudra kustha [4]. Kustha is included in Ashta Mahagada in Ayurveda [5]. Vitiligo should not be dismissed as a cosmetic or insignificant disease, as its effects can be psychologically devastating, often with a considerable burden on daily life [6]. Vitiligo is the most common depigmenting skin disorder, with an estimated prevalence of 0.5-2% of the population in both adults and children worldwide. Twenty-five percent of vitiligo patients develop the disease before the age of 10 years, almost half of patients with vitiligo develop the disease before the age of 20 years and nearly 70-80% before the age of 30 years [7]. Vitiligo is a multifactorial disorder characterized by the loss functional melanocytes. These include genetic, autoimmune responses, oxidative stress, generation of inflammatory mediators and melanocyte detachment mechanisms [8]. Genetic susceptibility is important factor in

this case. Risk factors are positive family history, sufferings from inflammatory diseases or autoimmune diseases. The Symptoms of vitiligo is more comparable with features of Shwitra roga in Ayurveda [9]. White patches on the skin are the main sign of Shwitra. Acharya Charaka has mentioned various causes out of which Virudhaaaharsevan, Papkarma are important one. Acharya Charaka has mentioned various causes out of which Virudhaaahar sevan, Papkarma are important one. Acharya Sushruta called the disease as Kilasa instead of Shwitra [10]. In modern medicine includes topical steroids, systemic steroids, topical PUVA, systemic PUVA, sometimes surgically grafting also done. PUVA therapy is having side effects like photo toxicity, hyperpigmentation, cataract and squamous cell carcinoma in white skin individuals. Classical textbooks of Ayurveda recommend the patient of Shwitra should be purified by the administration of elimination therapies. Shamanoushadha is an administration of Ayurvedic medicines to keep the vitiated dosha in a normal state, to achieve equilibrium of the Tridosha. Here effort was made for a holistic approach to find out effective role of Vamana Karma followed by Virechana karma in the management of Shwitra.

Aim and Objectives

• To study the effect of Vamana Karma followed by virechana karma in the management of *Shwitra* (Vitiligo)

• To find out the effective Ayuvedic management of *Shwitra* (Vitiligo).

Material and Methods

- Selection and Source of patient:
- For this study, patient was registered from OPD of Panchakarma department and admitted in General IPD ward of Pt. Khushilal Govt. (Auto.) Ayurveda Hospital Bhopal.
- Plan of study:
- The drugs required for Vamana Karma and Virechana karma were procured and prepared in Prakalpa of Panchkarma Theater in Pt. KLS Govt. Ayurveda Hospital Bhopal.
- Duration of study-40Days

Case Study

A 15 years old male patient came in Govt. Ayurvedic hospital Bhopal (OPD no.43466, IPD no.-38344) with chief complaints of whitish discoloration over both knee, posterior part of lower leg and palmoplantar with mild itching over there since 5 years.

History of Present Illness

Patient was said to be apparently normal 2 years back, one day he noticed a small white patches both knees and over the palmoplantar surface, as its seem to be small he neglected, later he noticed that its getting increased and spreading to other area. And gradually white patches started appearing posterior surface of right lower leg, for the complaint he took treatment from nearby allopathic hospital, but there was no improvement in the condition and thus, he came to our hospital for a better treatment.

Personal History

Dietary habits revealed that so much use of Pickils, and *Lavana*, *katu Dravya*, mixed dietary habits, excessive intake of Tea, Fish and Curd, oily and spicy food, *Viruddha Ahara*, irregular bowel habits. Sleep-disturbed.

Psychological History

The patient of Shwitra was feeling that they are separated from the society and get depressed psychologically. Patient had more stress day by day and complained of insomnia and when he was going to school suffer from a lot of inferiority complex.

Past history

No relevant past history was noted.

- i) General examination
- ii) Aahar-virudha Aahar
- iii) Vihar-diwaswapna
- iv) Icterus-absent
- v) Cynosis-absent
- vi) Clubbing-absent
- vii) BP-100/60 mmHg
- viii) Pulse-80/min

Astavidha Pareeksha

- i) Nadi-80 bpm
- ii) Mala-baddha kostha
- iii) Mutra-4-5 times per day and one time at night
- iv) Jihva-Aliptata
- v) Shabda-Prakruta
- vi) Sparsha-Anushna sheeta, twak shuklta
- vii) Drika-Prakruta
- viii) Shabda-Prakruta
- ix) Aakruti-Madhyam

Local Examination

- i) Site of lesions-both knees, palmoplantar surface and posterior lower leg
- ii) Shape-irregular
- iii) Colour-white
- iv) Itching-mild
- v) Scaling-absent
- vi) Discharge-absent
- vii) Based on the clinical symptoms and examination case is diagnosed as *Shwitra* (Vitiligo).

Investigation

The lab investigation (01/09/22) CBP-Hb 14.90gm% total WBC count-7950/cu mm Lipid profile-total cholesterol-118mg%, triglycerides 81mg%which were normal & rest, LFT-direct bilirubin 0.8mgm% SGOT-34, SGPT-30, Urea & serum creatinine were normal and HIV was negative.

- On 8th August 2022, USG (whole abdomen) was done which showed rest and normal. ECG was normal.
- On 9th August 2022, Chest x-ray (PA view) was done, which showed normal.

Treatment Regimen

Table 1: Treatment Plan

Treatment	Dose	Frequency	Duration
Deepan pachan with 1.Chitrakadi vati 2.Panchakola phanta	2 tab 10ml	q.i.d every 2 hourly	3 days 3 days
Snehpan with Panchatikta Ghrita, orally, empty stomach	Start with 40 ml in increasing dose up to 430 ml (till samyak lakshan seen)	In morning	7 days
Sarvang abhyanga with vatashamak tail and vashpa Swedan with dashmool kwatha	Q.s	In morning	1 day
Vaman karma with		In the morning	
Madanphalchurna Vacha churna Saindav Lavan Madhu (honey)	10 gm 8 gm 6 gm Q.s.	Empty stomach after abhyanga and Swedan	Patient got 6 Vega (Madhyam Shuddhi) after that-Vairachanika Dhoompana done

Samsansarjana Karma				5 days	
Gap and diet control	-	-		7 days	
Snehpan with Panchatikta Ghrita, orally, empty stomach	Start with 80 ml in increasing dose up to 400 ml (till samyak lakshan seen)	In morning	5 days		
Sarvang Abhyanga with vatashamak tail and bhashpa swedan with dashmool kwatha	Q.s	In a morning	3 days		
Virechana karma Haritaki kwath churna, trivarat kwath churna, Amaltas kwath churna, katiki kwath churna each 25 gm	Trivratadi kwatha 200 ml Nimba Amratadi castor oil 150 ml	Morning 10 o'clock	Patient got 19 Vega (madhyam shuddhi)		
Sansarjan karma	-	-	5 days		

Assessment Criteria

Gradation Pattern-Assessment was done on the changes in the subjective parameters before and after treatment. Each sign

and symptom is graded, and a numerical value is given for assessment of results. The change and relief in symptoms were observed on completion of treatment.

Table 2: Clinical assessment

S.N.	Subjective Parameters	Scoring	BT	AT
1.	Tvak shwetata (white patches)			
	Normal Pink Pinkish to whitish White	0 1 2 3	3	1
2.	Tvak Rukshta	1	<u> </u>	I
	No dryness Moderate dryness Excessive dryness Dry thikened skin	0 1 2 3	1	0
3.	Kandu (itching)			
	No Mild Moderate Severe	0 1 3 4	1	0
4.	Roma vidwansa (changes in color of ha	air)	•	•
	No Mild moderate Severe	0 1 2 3	2	0
5.	Size of patches	<u> </u>	•	•
	Less than 1 cm 1to 2 cm 2 to 3 cm More than 3 cm	0 1 2 3	3	1
6.	No of patches	L	1	I
	1 to 4 5 to 6 7 to 10 More than 10 cm	0 1 2 3	3	2

Table 3: Percentage Relief

S.N.	Symptoms	Percentage Relief
1.	Tvak Shwetata	66.6%
2.	Tvak Rukshta	100%
3.	Kandu	100%
4	Roma vidwansa	100%
5	Size of patches	66.6%
6	No.of patches	33.33%



(a): Before Treatment

(b) After Treatment

Fig 1(a) & (b): Showing the result before and after Clinical treatment



Fig 2(a) & (b): Showing the result before and after Clinical treatment

Discussion

According to Ayurveda, *Shwitra* (vitiligo) which is curable is the type which has no red hairs and, is thin, pale, newly formed, and raised upward in the middle [11]. as per the schedule, patient has taken medication and asked to follow diet by avoiding *Lavana*, *Amla*, *Tikshna Dravya*, curd, spicy food, *Divasvapna*. *Shwitra* is a *pitta Pradhana Tridoshaja Vyadhi*. Progression of this disease is rapid, so the management should be taken in proper time to arrest the pathogenesis. According to *Charaka*, the patient of *Shwitra* should undergo *Shodhana* before *Shamana* treatment [12]. At first the body should be prepared with *Pachana* and *Deepana Karma* (for *Amapachana*), *Snehana* and *Swedana Karma* (for excitation of *Doshas*), thereafter *Vamana Karma* has been performed.

Probable Mode of Action of Vamana Karma

Vamana Yoga which may comprises of Vacha Churna, Madanphala Pippali, Saindhava and Madhu may be used in skin disease, while Yashtimadhu Phanta may be used as Vamanaopaga Dravya. Bhrajaka Pitta play major role in the repigmentation of white patches. Ushna, tikshna, sara, sukshma guna and katu tikta pradhana rasa dravya should select to improve agni and helps to remove srotavarodha and sanga. By activate the Bhrajaka pitta, bring equilibrium in doshas and dhatus and ultimately breaks the chain of samprapti of Shwitra (vitiligo) effectively.

Vamana Karma is not merely a gastric lavage as done now a day to empty the content of stomach, but it is a complete management of systemic disease caused by kapha. Amashaya

particularly *urdha amashaya* is the seat of action of *kapha*. The active principle of *Vamana* drug taken orally is absorbed from the stomach into circulatory system. Where from it is circulated to all over the body. On reaching at the site of lesion (*Dosha sanghata*), which is at the cellular level, it breaks the Nexus of *Dosha* and brings back the toxic substances thus released into the stomach, wherefrom they are expelled out of the body by the action of vomiting. After *Samshodhana* (*Vamana*) *Karma* due to elimination of *Doshas* from the body, *Agni* (digestive power) becomes weak. So, to restore the strength of *Agni* and *Prana*, *Peyadi Samsarjana Karma* should be followed.

Probable Mode of Action of Virechana Karma

Acharya Sushruta described Nityavirechana for Kushtha as it is Bahudoshaj Vyadhi. After vamana karma followed by abhyantra snehpana with Panchatikta Ghrita till the attainment of symptoms of proper Snehana. Following abhyanga and Svedana the patients were treated with virechana karma by oral administration of trivritadi kwatha with Nimba Amritadi castor oil in a dose of 350 ml. Sarvanga Abhayanga and Swedana remove obstruction in Srotas and bring the vitiated Dosha from Shakha to Kostha. Virechana karma does cleansing the Kostha and brings down the morbid Dosha from body and helps to maintain the Dosha and Dhatu Samya or keep up the homeostasis and leads to the refurbish and rejuvenation of body tissues and also boost the body. This research article use of virechana kwatha with Nimba Amritadi Eranda Taila in the management of Shwitra as it helps in

correcting the basic pathogenic factors of *pitta*, *rakta*, *Agni*, *Rakta Shodhana* and pacifies *tridosha* in *Twak Vikaras*.

This virechana yoga, get absorbed and due to virya, it reaches to the Hridaya, then the dhamani and thereafter it reaches to macro and micro channels of the body. The Vyavayi Guna of drug is responsible for quick absorption. The Vikasi Guna causes softening and loosening of the bond by Dhatu saithilya karma. Due to Ushna Guna, the Dosha sanghata is liquified located in the entire body, thus doshas move towards GIT, morbid doshas reaches the stomach carried by Udana vayu, due to the predominance of prithvi and Jala Mahabhuta in virechana dravya, it starts the downward movement of doshas from Koshta and leads to the expulsion of unwanted toxin from the body.

Conclusion

As per the general principal of treatment for this disease, repeated application of *Shodana karma*, *shaman karma* as well is beneficial. The present case study shows that *Vamana Karma* followed by *virechana karma* works effectively and breaks the pathogenesis of *Shwitra* (Vitiligo). This study give an idea about the line of treatment of *Shwitra* through *Ayurveda* perspective and *Panchakarma* therapy. No side effects was reported during the treatment. This Ayurvedic modality helps to prevent the progression of disease without taken medicine for longer duration.

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