



## SUCCESSFUL MANAGEMENT OF GENERALISED PUSTULAR PSORIASIS WITH AYURVEDA SHAMAN CHIKITSA: A CASE REPORT

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### ABSTRACT:

Generalized pustular psoriasis (GPP) is an extreme form of rare psoriasis type, characterized by episodes of macroscopic, sterile pustules. It mostly occurs in adults, with female preponderance, and peak incidence between 40 – 59 years of age, though paediatric cases are also reported. It is also often associated with multisystem involvement and presentations like polyarthritis, metabolic syndromes. We report a case of generalised pustular psoriasis suffering since more than one year, treated successfully with Ayurvedic oral and topical medicines only. To the best of our knowledge this is the first case report of pustular psoriasis managed with shaman chikitsa. The patient is totally symptom free and leading a healthy life without any recurrence, till date.

**Key words:** Ekustha, Kshudrakustha, Psoriasis, pustular, GPP, management, Ayurveda.

### INTRODUCTION

Psoriasis is one of the common skin diseases known to affect 2% of the population. It is chronic inflammatory dermatosis. The lesions are characterised by brownish- red papules and plaques which are sharply demarcated and are covered with fine, silvery white scales. Pustular Psoriasis is one of its type which is very rare and constitutes of less than 5% of Psoriasis cases, in which small white and yellow coloured blistered occur on the body, filled with pus called pustules but are not infected.<sup>1</sup> More common is a localised form of pustular psoriasis which primarily affects the palm and sole. Here we report a case of pustular psoriasis having involvement of whole body [generalised pustular psoriasis, (GPP)] and treated with Ayurvedic medicines. GPP is an extreme form of rare psoriasis type, characterized by episodes of macroscopic, sterile pustules. It mostly occurs in adults, with female preponderance, and peak incidence between 40 – 59 years of age, though paediatric cases are also reported. It is also often associated with multisystem involvement and presentations like polyarthritis, metabolic syndromes.<sup>2</sup>

#### Background of Patient History:

A 31-year-old male presented to the outpatient department with numerous reddish-white and yellowish pustular blisters, surrounded by red coloured margins all over the body, and accompanied by severe itching, burning, and pain, persisting for one year. Despite previous treatments, including conventional medicine, the symptoms worsened, leading the patient to seek Ayurvedic care. His medical history revealed no joint pain, chronic illness, or medication use prior to psoriasis treatment. No family history of psoriasis was reported.

#### Clinical Findings / Detailed Patient Description

History of present illness revealed he was asymptomatic 3 years before, when he observed a red coloured itchy lesion over his palm. When it didn't heal, he took medicine from nearby conventional medical clinician but didn't get any relief and the lesion started increasing gradually extending to involve the hands and the legs also. He consulted many clinicians and hospitals regarding this problem, where it was initially diagnosed as fungal

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infection and treated accordingly. But he didn't get any relief and the symptoms kept on increasing with small reddish white- and yellow-coloured blisters formed all over body one year before. The lesions were dense and associated with severe itching, burning and pain in the lesions. They were associated with pus discharge on pressing the lesions. Scaling was present on the lesions of palm and sole. Patient also suffered from frequent, on and off, mild grade fever, which was recovered with medication. Finally, he was diagnosed as a case of pustular psoriasis and given conventional treatment according to modern medicines. However, patient did not get relief and approached AIIA OPD for Ayurveda treatment. His appetite was reduced, bowel was constipated and sleep disturbed.

#### RATIONALE FOR DIAGNOSIS:

The diagnosis of the patient was made on clinical signs and symptoms as presented in tables 1 and 2.

**Table 1: Diagnosis of Eka kushtha based on clinical features of the patient**

Sign and symptoms according to Charak	Findings
<i>Aswedanam</i> (Absence of sweating)	Present on effected area
<i>Mahavastu</i> (having large area of involvement)	Lesions are wide spread all over the body.
<i>Matsyashakalopamam</i> (having fish like scales)	Scaling presents on all lesions over sole and palm

**Table 2: Diagnosis of Pustular Psoriasis based on clinical features of the patient**

Clinical features of Pustular Psoriasis	Clinical Features present in the patient.
Small sterile pustules on red base.	Present
Swinging pyrexia	Present
Primarily effects sole and palm	Present

Thus, the patient was diagnosed as a case of Ekakushtha (pustular psoriasis), based on clinical symptomatology and treatment was planned accordingly.

#### INTERVENTION

Treatment was tailored based on Ayurvedic principles and the patient's dosha dushya prakurti. Treatment given: Patient was admitted in the IPD of AIIA, New Delhi and treatment was given as follows in shown in table 3.

**Table 3: Treatment administered to the patient along with dosage and Anupana**

S. No.	Drug	Dosage & Anupana	Time of administration
1.	Chandrakala Rasa	250 mg with decoction empty stomach	BD
2.	Mahasudarsanghan Vati	500 mg with luke warm water 2 hours after meals	TDS
3.	Decoction made from- Manjistha ( <i>Rubia cordifolia</i> ) – 4 gm Giloy ( <i>Tinospora cordifolia</i> ) – 4 gm Pittapapada ( <i>Fumaria indica</i> ) – 4 gm Nagarmotha ( <i>Cyperus Rotundus</i> ) - 4 gm Ushir ( <i>Vetiveria zizanioides</i> ) – 4 gm [Boiled in 200 ml of water till 50 ml]	50 ml empty stomach	BD
4.	Jeevantyadi Yamak and Shata dhauta Ghrita	L/A in sufficient amounts on affected areas at night	

This medicine was continued for five days, when patient complained of burning sensation in the lesions during the day. Then the following medicines were added (Table 4).

**Table 4: Showing the medications added to the patient after 5 days**

S. No.	Drug	Dosage & Anupana	Time of administration
1.	Mahatiktaka Ghrita	10 ml with warm milk	BD
2.	Panchatikta Ghrita Guggullu	250 mg with warm milk	BD
3.	Mulethi Churna with Ghrita	L/A during day	

After 23 days the patient was evaluated and discharged with the advice to continue the same treatment for another one month and revisit. On his last visit to AIIA Shatdhauta ghrita was removed and the following new medicines were added –

- Ushirasav 10 ml BD with water after meals

- Pathyadi kwath 15 ml BD empty stomach

- Punarnavadi kwath 5 gm BD was added to the decoction made of drugs mentioned previously at number 3.

This treatment was continued for further 5 months and stopped with last follow up of 02 months. Pathya Diet plan was advised to the patient which included freshly prepared, bland, light food and avoidance of day sleep.

#### **OBSERVATION AND RESULT:**







It was observed that the patient started responding to the treatment and improvement was seen soon after the treatment. After 1 week of treatment symptoms reduced by about 50%. The symptoms resolved further and were totally absent at the end of 23 days treatment, the patient was observed to be completely cured, so the patient was discharged (Table 4, Table 5, Figure 1 - 10). However, some scars were still not completely cleared; therefore, the patient was advised to continue the same treatment for another one month. The scars had started decreasing but had not completely disappeared so the treatment was continued for further 5 months (203 days) and then stopped. The patient has remained without any treatment till date on a normal diet and lifestyle with no recurrence of any symptom or any other complaint.


**Table 4: Clinically assessment of sign and symptoms before and after treatment**

Clinical features	Before treatment	After treatment (7 days)	After treatment (14 days)	After treatment (23 days)	After treatment (53 days)	After treatment (203 days)
Size of the blisters	+++	++	+	+	-	-
Scar mark	-	-	-	++	+	-
Area occupied by the blisters	+++	++	+	-	-	-
Itching	+++	+	-	-	-	-
Burning	+++	++	+	-	-	-
Pain	+++	+	-	-	-	-
Scaling	++	+	-	-	-	-
Pus discharge	++	+	-	-	-	-
Fever	+	-	-	-	-	-

Gradations for severity of symptoms: Severe (+++), Moderate (++), Mild (+), None/Absent (-) & for size or area of lesions: Large (+++), Medium (++), Small (+), Absent (-)

**Table 5: Showing the clinical relief in the lesions before and after the administered treatment**

Body Part affected	Before Treatment	After 23 days of Treatment	Status
<p>Figure 1: Pustular lesions on Face BT</p>			<p>Figure 2: Few lesions remaining on face AT showing Significant Improvement</p>
<p>Figure 3: Pustular lesions on Left Hand BT</p>			<p>Figure 4: the lesions cleared on Left Hand AT showing Significant Improvement</p>
<p>Figure 5: Pustular lesions on Right Hand BT</p>			<p>Figure 6: Cleared lesions on Right Hand AT showing Significant Improvement</p>

<p>Figure 7: Pustular lesions on Left Sole BT</p>			<p>Figure 8: Pustular lesions on Left Sole AT showing Significant Improvement</p>
<p>Figure 9: Pustular lesions on Right Sole BT</p>			<p>Figure 10: Pustular lesions on Right Sole AT showing Significant Improvement</p>

**DISCUSSION:**

The term "skin diseases" refers to all varieties of skin conditions, majority of which are included under the umbrella of Kushtha roga in Ayurveda. Being difficult to treat Acharya Charak has also mentioned it in Ashtamahagad.<sup>3</sup> Previous studies have associated psoriasis to Mandala kushtha, Ekakushtha, Kitibha Kushtha, and Sidhma Kushtha. Ekakushtha is described under kshudra kushtha, having the clinical features, "Aswedanam Mahavastu Matsyasakaloupam".<sup>4</sup>

Treatment Rationale: Since Kushta is primarily a rakta dushti janya roga, rakta prasadana is a crucial component to any treatment plan. Further, symptoms like burning, pus formation, erythema and fever exhibit vitiation of pitta dosha, so the medicine like pittapapda, and punarnavashtaka kwath having the properties of tikta rasa, katu vipaka, shita virya were given.<sup>5</sup> Mahasudrshana ghana vati was also added as pitta shamaka for getting faster relief. These ayurvedic medicines balanced the pitta dosha.<sup>6</sup> Manjistha was used as it is predominantly kapha pitta hara, varnya and is the best drug for rakta prasadana.<sup>7</sup> Giloy<sup>8</sup> is Tridoshahara with Madhura paka, ushna veerya, while Ushira is Madhura, tikta in Rasa, heeta veerya, katu vipaka and Kapha- pitta shamaka, while Nagarmotha is Katu, tikta, Kashaya rasa and Vata- pitta shamaka.<sup>9</sup>

Itching is mainly because of vitiation of Kapha Dosha, which was mitigated by the usage of Manjishtha, pittapapda, Ushira and giloya. Mahatiktaka Ghrita was administered because of its pitta and Vata shamaka, kushthaghna and kandughna action to alleviate the symptoms of burning, scaling and pain.<sup>10</sup> Panchatiktaka ghrita guggulu was administered for its properties of kleda and vikrita meda upashoshan and vrana shodhana effect.<sup>11</sup>

Chandrakala Ras is a well-known potent drug with pitta and kapha shamaka properties used widely in the treatment of skin diseases.<sup>12</sup> Jivantyadi yamak<sup>13</sup> and Madhuyasti Choorna<sup>14</sup> with Ghrita for local application was given to help in reducing the symptoms like burning as they are cold (shita) in their nature. The disease namely pustular psoriasis is associated with rakta dhatu so manjistha and giloy were given for rakta shodhaka properties.

These medicines were prescribed to the patient based on examination done based on ayurvedic principles and the patient responded very well. All the symptoms disappeared except some scars of the lesions at 23 days, when patient was discharged and was advised to continue treatment for another one month more and the patient was observed to be completely cured with no recurrence at the end of 2 months. Further 5 months treatment was continued for the complete resolution of disease pathogenesis. The patient has been followed telephonically till date and is not reported with any recurrence, adverse events or any other complaint, till date. However, any

further observations, if occur, would be suitably dealt with and if necessary, would be reported for the benefits of readers.

### CONCLUSION -

Psoriasis being a skin disease upholds a high cosmetic value among population and its relevance with Kushtha roga can be concluded from Ayurvedic texts along with Chikitsa. From this case report it appears that Ayurveda oral and topical medications are very beneficial in the management of pustular psoriasis without any adverse events.

### Patients Review

The patient was quite relieved with the treatment, had improved self-confidence and had not observed any recurrence till date. The treatment also increased his confidence in the Ayurveda system of Medicine.

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