

Research Article

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AYURVEDIC MANAGEMENT OF SWITRA WITH SPECIAL REFERENCE TO VITILIGO: A CASE REPORT

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ABSTRACT

Skin is the best indicator of general health. According to Ayurveda skin is one of the essential sense organ. As skin covers the whole body, bhrajaka pitta should be maintained in a proper state, an imbalance in vata and bhrajaka pitta may cause skin diseases. Switra is considered as one of the varieties of kushta in Ayurvedic classics, caused due to vitiation of tridosha and dhatus like rasa, rakta, mamsa and medas. Switra (vitiligo) is a hypopigmentation dermatological disorder involving mind and body. Vitiligo is an auto-immune disease against melanocyte characterised by depigmentation or hypo-pigmented patches. Treatment available in contemporary medicine has its own limitations and side effects. Main line of treatment for switra in Ayurveda is Shodhana (purification) and Shamanoushadis (pacification). Aim of this study to evaluate the role of Ayurvedic management of switra. A patient approached to OPD of SDM college of Ayurveda Hospital with chief complaints of whitish patches on back and thighs was treated with shodhana (purification) and few shamanaushadhi's (internal medication). A remarkable improvement in the condition was observed in a span of two month.

Keywords: Switra, Vitiligo, Shodana, Skin, Kushta

INTRODUCTION

The skin is the largest and visible organ of the human body. Hence any blemish on the skin visibly affects the person's physical and mental well-being. Vitiligo have major impact on quality of life of patients, many of vitiligo patients feel distressed and stigmatized by their condition. Vitiligo is the pigmentary disorder of unknown cause it is characterised by depigmented or hypo-pigmented patches that result from absence or reduction in melanocyte. The most accepted theory for pathogenesis of vitiligo is autoimmune hypothesis¹. Leukoderma term used for vitiligo in non-medical literature is different from vitiligo. The term leukoderma is applied to depigmented patches of known causes e.g. burns, contact with chemicals like phenols or following an inflammatory skin disease.² About 1-2% of general population has vitiligo. It is less common in children and the elderly, both sexes are affected equally, family history of vitiligo is present in only about 25% of cases.3

Vitiligo can be correlated with *Switra* in Ayurveda. The disease *Switra* was reported in ancient literature. Several references are found in the Vedas. The word *Switra* has its root in the Sanskrit word *Shweta*, which means white patch⁴. Reference of *Switra* is found in the important classical texts of Ayurveda such as Charaka Samhita, Sushruta Samhita, Astanga Hridaya etc. Clearly mention the treatment of *Switra* along with its classification and prognosis. Most of them use *Switra* and *Kilasa* as synonyms. Medieval authors like Madhava, Bhavamishra, Sarangadhara and Chakradatta also enumerated certain additional information regarding *Switra*. References to

this disease are available in Agni Purana, GurudaPurana and Mahabharata also⁵.

References to vitiligo are available in other traditions also. It is said that, by the touch of Jesus Christ, the vitiligo of a Palestinian was cured. It is mentioned in Persian history, that vitiligo was known in the period of Aushooryans in 2200 B.C. ^{6,7}

In Ayurveda, all skin diseases come under *Kusta*. Acharya Charaka dealt with *Switra* after deeply explaining the *Kusta Chikitsa*. According to Kashyapa Samhita, *Switra* is, '*ShwetaBhavaMicchantiSwitram*', This means reflection of white colour.⁸ Susruta called the disease as *Kilasa* instead of *Switra*.⁹ '*Twagatm Eva Aparisravi*', This means there is only involvement of skin and is *Aparisravi* i.e. non-exudative. Acharya Charaka has mentioned various causes out of which *Virudhaaaharsevan*, *Papkarma* are important one. ¹⁰ *Switra* causes the vitiation of *Tridoshas* and *dhatus* like *rasa*, *rakta*, *mamsa* and *meda dhatu*. ¹¹

Because of social stigma it carries, treatment of this benign condition is important. Treatment for vitiligo in conventional medicine includes topical steroids, systemic steroids, topical PUVA, systemic PUVA, sometimes surgically grafting also done. PUVA therapy is having side effects like phototoxicity, hyperpigmentation, solar elastosis, cataract and squamous cell carcinoma in white skin individuals. UVB phototherapy is a safer alternative to PUVA therapy but is relatively expensive. ¹² Main line of treatment for *switra* in Ayurveda is *snehana* i.e., made to drink medicated fats first, then administration of

sodhana (purificatory therapies) and anointing body and exposure to sunlight 13.

MATERIALS AND METHODS

Present study was carried out in accordance with ethical principles by following International Conference of Harmonization – Good Clinical Practices Guidelines [ICHGCP] in Sri Dharmasthala Manjunatheshwara Ayurveda College And Hospital, Hassan.

Case Report: A 15 years young female patient presented with small whitish discolouration and mild itching on back and thighs since 7months

History of present illness

Patient was apparently healthy before 7months, gradually she developed with small white patches on back and which got aggravated day by day with increase in size on back and spread to thighs with mild itching.

Psychological history

Patient had more stress 3months back due to exam tension. Size of white patches increased day by day from 3 months.

Personal History

Dietary habits revealed the use of mixed dietary habits, with 4-5 glasses of water per day and consumption of tea twice daily; regular use of curd and oily junk food items. Behavioural Pattern (*Vihara*) sedentary lifestyle; Bowel habits were regular with hard stools sometimes with blood, sleep was sound; micturition was normal.

Menstrual history: Patient had regular menstrual periods with duration of bleeding for 4-5 days with an interval of 30days and the flow within normal limits.

Family history: no one in the family have similar signs and symptoms

General examination

Built: Moderate, Tongue: Clear, Pulse Rate: 78/Min, BP: 110/70mm of Hg, Respiration Rate: 18/Min, Temp: A febrile.

Physical examination

Dasavidha pariksha: Prakriti - Vata, Kapha, Satmya - Madhyama, Vikriti - Kaphavata, Aharashakti - Madhyama, Sara - Madhyama, Vyayama Shakti - Avara, Samhanana - Madhyama, Vaya -yavana, Satva - Madhyama, Pramana - 4.8 Feet

Systemic: CNS: Normal; C.V.S: S1, S2 clear; RS: Normal

Local Examination

- 1) **Site of lesion -** (*PidakaSthãna*) back and thighs
- 2) **Distribution (***Vyãpti***)-**Asymmetrical
- 3) Character of lesion (*PidakaLakshanas*) -Size: 4-6cm, Color: white, Arrangement: grouped
- 4) **Itching -** Present; Severity: mild
- 5) **Inflammation** Absent
- 6) Discharge Absent
- 7) Superficial Sensation on lesion -Pain: absent; Swelling: absent

DIAGNOSIS: Based on the clinical features and examination case is diagnosed as switra (vitiligo).

TREATMENT PLAN

First line of treatment *Deepana* and *pachana* followed by *snehapana* and *vireechana*; *Shamanoushadi* after *panchkarma*

Table 1: First Line of Treatment (Deepana and Pachana)

Day	Medication	Diet
1 st day	Panchakolaphanta Bilwadigutika 2-0-2 Switraharachurna with go mutra	Mudgaamlakayusha- 8am Kichidi -1pm, 8pm
2 nd day	Panchakolaphanta Bilwadigutika 2-0-2 Switraharachurna with go mutra	Mudgaamlakayusha- 8am Kichidi -1pm, 8pm

Table 2: Second Line of Treatment (Panchakarma)

Day	Medication	Diet
3 rd day	Panchatiktagugglughrita- 30 ml	Ganji
4 th day	Panchatiktagugglughrita- 60ml	Ganji
5 th day	Panchatiktagugglughrita -100ml	Ganji
6 th day	Panchatiktagugglughrita- 140ml	Ganji
7 th -8 th day	Abhyanga with marichaditaila and bashpasweda	Rice with rasam

Table 3: Shamanoushadi After Panchkarma (Discharge medication)

Medicine	Dose	Duration
Pigmento tablets	1 TID	15days
Manibaraguda	1tsp with hot water at bed time	15days
Asanadikashya	2tsp TID	15days
Krimikutararas	1TID	15days

External Applications

Switrahara churna with Go-mutra before bath early morning.



Figure 1: Before Treatment



Figure 2: After Treatment

RESULTS AND DISCUSSION

As per the treatment schedule for the patient, she has taken medication and *snehapana* on the day of *vireechana* patient got her menstrual cycle which is 8days prior to her regular menstrual cycle. Then patient is advised to discharge with the discharge medicine, which she is advised to take after her period and asked to follow diet by avoiding curds, non-veg, masala etc food items. After the follow up for 2months there is a drastic change of white patches on back and thighs reduction, reduction in itching with normal stools and no blood in stools.

In *switra* as main line of treatment *snehana*, *Panchatiktaguggulu ghrita* been chosen based on signs and symptoms, as this *ghrita* is *tikta pradhana*, *kaphahara* and it is indicated in *kushta vikara*¹⁴. *Ghrita* given will be acting as *shamana* and *shodana* as per given dosage.

Arogyavardhini Vati mainly acts on digestive system. If digestion becomes poor, it leads to various diseases in the body. Poor digestion may cause malabsorption and production of more toxins in the body, which ultimately cause several disorders. Constipation is a major root of many diseases in the body. Arogyavardhini Vati improves digestion and corrects metabolic activities in the body. It also cures constipation and prevents diseases 15.

Bilwadigutika have property of antimicrobial and de-worming property which helps to remove toxins from the body and it is used in psychological condition as in switra psychological problem plays a major role for spread of the disease Bilwadigutika helps to control psychological problems.

Krimikutararas has de-worming action due to which it acts against intestinal worms due to its anti-oxidant property it detoxify the body¹⁶. Pigmento tablet possessing antipyretic, anti-inflammatory and analgesic activity due to *bakuchi*, protecting biological membrane against oxidative stress, inhibit the growth of bacteria, clearing the airways, stimulate the cell mediated immune mechanisms ¹⁷.

External application of *switrahara churna* which consists of *oudumbara twak* and *bakuchi*, *Bakuchi* content increases the rate of synthesis and amount of melanin and hence encouraging skin to recover from a vitiligious state. Exposure to sunlight early in morning which contains ultraviolet rays and with external application of *bakuchi* leading for promoting the growth of melanocyte migration and stimulates proliferation. Even it is not enough in proliferation of melanocyte but also prevents the autoimmune activity disease ¹⁸.

Even though *Panchakarma* treatment is stopped prior before completion *vireechana* procedure as patient got menstrual cycle, there was a good result observed by giving *nityavireechana* with *manibadraguda*. Thus by giving *vireechana* daily by eliminating of toxins from body, by regular practicing of taking healthy food habits reducing intake of fry food items, with plenty of water, reducing stress and regular external application of *switrahara churna* early morning and expose to sunlight for 5-10minutes daily showed a good result in patient.

CONCLUSION

Beauty and attraction of individual depends upon skins health including physical and psychological health. The colour of skin plays very important role in the society. Vitiligo is an important skin disease having major impact on quality of life of patients; many of them feel distressed and stigmatized by their condition. Based on symptoms it can be correlated with switra. Ayurvedic management give a blissful life by improving the immune system of the individual. Purificatory measure help to remove the root cause of the disease. It is important to recognize and deal with psychological components of this disease to improve their quality of life. Though a single case study may not be sufficient enough to prove significance of any treatment but it gives us an idea for the line of treatment to be adopted in such cases and helps to formulate a protocol for large sample studies.

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