
A Case Study on Palmoplantar Psoriasis: An Ayurvedic Approach

Dr. Balesh Bileyali

Professor and HOD

Department of Roga Nidana

Ashwini Ayurvedic Medical College, Tumkur- 572105, Karnataka

Corresponding Author's Email: - : drbaleshbileyali67@gmail.com

Patient name: Srinivas

Age: 42 years

Sex: Male

Occupation: shopkeeper and driver

Place: Tumkur

OPD No: 2271

Chief complaints: Maculopapular rashes on both palms and foot since 2 years

Associated complaints: Itching, pain and burning sensation

History of present illness: Pt. has been said to be apparently normal before then he developed gradually maculopapular rashes over both the palms and foot. For which he consulted physician and took the treatment and there slight improvement but again developed the same. The clinical features aggravates on taking non vegetarian food or exposure to chemicals.

History of past illness: pt is not a k/c of DM/HTN/autoimmune disorder/hypothyroidism

Family History: No one in his family has suffered from similar complaints

Personal history: Appetite – good

Bowel – Normal

Micturation – Normal

Sleep - Normal

Clinical Examination:

B.P – 130/80 mm of Hg

Pulse: 76 /min, regular

R.R: 17/min

Temperature: 97.0F

Systemic examination;

CVS – S1 S2 heard, No added sounds

R.S – AEBE, No added sounds

P/A – soft, no tenderness, no organomegaly

CNS – within normal limits

Intugemetary system –

Maculopapular rashes seen on both palms and foot

Scales- present

Discolouration – present

Symmetrical distribution – present

Tenderness – present

Clinical diagnosis – palmoplantar psoriasis

INTRODUCTION

Ayurvedic approach

Skin diseases explained in ayurveda under kusta chapter. Though according to acharya charaka totally 18 types of kusta explained but acharya himself mentions that there is innumerable number of kusta based on dosa and dushya combination. This makes us to understand and diagnose skin diseases based on

clinical features, dosa and dushya not necessarily under 18 types. So we need to understand skin diseases based on clinical features produced by dosa and dushya.

The above pt has clinical features of skin lesions- vaivarnya, krisna varna, vedana, kandu, unnati, matsya shaklopamamvat , in hasta and pada.

There is dominance of vata and kapha dosa with association of pitta dosa .rasa rakta and mamsa dhatus are involved in association with ambuvahasrotus happened in rasavaha raktavaaha and mamsavaha srotuses. Here the aggravated dosas have been travelled from kosta to shaakha followed by sthana samshraya in hasta and pada which is the seat of khavaigunyata.this is the phase of vyaktavasta .

Clinical diagnosis – Eka kusta

Treatment –

**shodana karma - virechana karma
poorvakarma**

Deepan and pachana- done by tablet chitrakadi vati 1 tid for 3 days

Pradhan karma

Patient advised to follow certain food regimen during the course.

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snehapana	Mahatiktaka ghrita
Day 1	30ml
Day 2	70ml
Day3	90ml
Day4	100ml

Snehasiddhi laxanas found after 4 days

Sarvanga abhyanga with manjistadi taila followed by sarvanga

Baspha sweda for next 3 days

Virechana karma with trivrit lehya 40gm with 50 ml milk patient passed 18 vegas

Paschat karma

Patient advised to follow certain food regimen for 5 days

Shaman chikitsa

Shamanoushadi	Dose /usage
Aragwadadi kasaya	15ml tid with warm water before food
Tablet panchtikta ghrita gugglu	1 tid
Capsule Atrisor	1 tid
Tablet r & h compound	1tid
Capsule Tiktamrit	1 tid
Atrisor cream	For external application
Siddartha soap	For external application

Results -After the treatment there is significant reduction in maculopapular rashes in both hands and feet's.

Reduced itching and pain.

Images Before treatment



Images after treatment





CONCLUSION

Exact cause of palmoplantar psoriasis is idiopathic. Eka kusta one type of kshudra kusta having dominancy of vata kapha dosha. Dosas have been travelled from shaka to kosta Virechana karma can bring back those dosas from kosta to shaka and eliminated out by viechana karma or by purgation therapy Mahatiktaka ghrita as snehana is effective as it does vata kapha shaman.

Manistadi taila alleviates vata pitta kapha and acts on raktavaha srotus Panchtikta ghrita guggulu and argwadadi kasaya acts on vata kapha and pitta dosa and also does sroto shodana of rasavaha, raktavaha and mamsavaha srotuses.

Katuki, nimba, guduchi, patola etc of cap atrisor does nityavirechaka, sroto shodaka, hence effective. Shweta kutaja is one of the ingredients of atrisor cream which is effective in psoriasis.

Swrnamakshika bhasma one of the ingredients of tablet R & h compound is effective in kusta affecting mamsa dhatu.

AUTHOR PROFILE



Dr. Balesh Bileyali
Professor and HOD
Department of Roga Nidana
Ashwini Ayurvedic Medical College,
Tumkur- 572105, Karnataka