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## Effect of *Virechana Karma* in a case of chronic Idiopathic Urticaria (*Aamjanya pittaj vikara*): A clinical study

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#### Abstract

The most prevalent worldwide and the freight of the disease continues to increase rapidly is Urticaria. Hereby, Urticaria condition is been correlated with *Aamjanya Vikara* (Rasa, Rakta and *Pitta* Vitiation). The present case study is of a 30yr old male patient of chronic Idiopathic Urticaria - severe generalized itching, hives and rashes all over the body since a year. The patient had no significant relief with conventional antihistaminic therapies. The patient was clinically assessed and was managed with *Panchakarma* i.e., *Virechana* (Therapeutic Purgation) and *Shamana Chikitsa* (Internal medication). *Virechana* (Therapeutic Purgative) it

is one of the *Panchakarma* (detoxification of the body) used for vitiation of *Pitta doshas* in the body. *Shitapitta, Udarda, Kotha, Amajanya kandu* (Skin related disorders) are conditions wherein itching, rashes, hives are seen all over the body. The patient was asked to monitor his signs and symptoms accordingly daily for a week. Dietary modification and yoga was been prescribed to the individual to enhance the quality of life. With *Virechana* (Therapeutic Purgation) therapy there was tremendous decrease in the itching, hives and other symptoms.

Keywords: Virechana, Chronic Idiopathic Urticaria, Aamjanya vikara, Rasa, Rakta and Pittaj Vikara

#### Introduction

*Ayurveda* can safely be applied to heal many difficult conditions <sup>[1]</sup>. *Ayurveda* isn't just high lightens on prevention of diseases indeed also encourages the maintenance of wellbeing of one life through by right dietary regimen, Yoga (Exercises), *Rasayana* (Rejuvenation). Chronic idiopathic Urticaria is a condition wherein about 20% of people get hives, itchy red or skin-coloured welts also known as Urticaria. They're often caused by an allergic reaction to a food or drug. Usually, they go away quickly. For a small number of people, though, hives come back again and again, with no known cause. When new outbreaks happen almost every day for 6 weeks or more, it's called chronic idiopathic Urticaria (CIU) <sup>[2]</sup>.

One percent or less of people have it. It's most common in people between the ages of 20 and 40. With CIU, a single outbreak usually lasts no more than 24 hours after that, new hives form.

In this condition there will be presence of red, raised itchy skin rash that sometimes are triggered by allergens. It produces allergic reaction known as wheels or netter rash. When allergic reactions appear in the body there will be the release of proteins called histamines. The blood vessels and capillaries ooze out that fluid and this get accumulates in skin and causes rash and itching. Chronic Urticaria may start as an autoimmune response but the causative factor is still unclear. They are usually pink or red with an oval rounded shaped usually occurs as patch seen frequently on face, extremities including arms, hands, fingers, legs, feet and toes. An unknown type of antibody made by immune system to protect the body from bacteria, virus, and allergens. It is found normally in small amount in blood but higher amount can be sign that the body overreacts to allergens and can lead to allergic reaction <sup>[3]</sup>.

*Shitapitta* or Kotha is the disease which occurs on a skin which causes *Shotha*, red patches or rash and itching. Vitiation of *Vatkapha doshas* with *Pitta* vitiation causes *Shitapitta* disease <sup>[4]</sup>. The condition is mainly caused due to improper dietary regimen, no proper sleep timing. Irrespective of the intake of Junk food, bakery products, Fermented food leading to accumulation of *Aamjanya* vikruti (*Pitta* vitiation) in the body and causing symptoms like itching. Rashes, indigestion, etc. Etiology (Nidan) *Pitta* vitiation will cause *Shotha* (Inflammation), *Kandu* (itching), *Sthod* (elevation), *Vidaha* (burning

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sensation), *Jwar* (fever), *Chhardi* (vomiting) etc <sup>[5]</sup>. There is no such specific treatment available in Allopath except Antihistamines prescription that has to be taken regularly but it causes sedating effect and lack of consciousness to the individual. The investigations carried out in this condition are CBC, ESR, C-Reactive proteins (CRP) and IgE. The importance of *Panchakarma* therapy i.e., by the treatment of *Shamana* (Internal medication) *Langhana* and *Pachana*, (Therapeutic enhancement of digestive capacity) the disease may reoccur but if *Shodhana* therapy (detoxification) is done then disease will not reoccur <sup>[6]</sup>. *Virechana Karma* (Therapeutic Purgation) is one of the Panchakarma defined for the vitiation of the pitta doshas in the body <sup>[7]</sup>.

In this Chronic Idiopathic Urticaria i.e., *Aamjanya Pittaj* vikara and for the increased level of IgE, Virechana (Therapeutic Purgation) treatment gives magnificent result.

#### **Case Study**

Name of Patient- ABC Age- 31year Sex- Male First Date of visit- 28/1/2023

#### **Present Complaint with duration**

- 1. Itching all over the body since one year (on and off).
- 2. Rashes and hives seen (sometimes).
- 3. constipation since 8 months (on and off).
- 4. Insomnia since 5 months.
- 5. Loss of Appetite since 3 month.

#### **Past Medical History**

Patient was non responsive to Anti histamine therapy since a year of treatment. The Past medical history of the patient was suggestive of chronic idiopathic Urticaria (Aamjanya Pittaj vikara).

#### **Family History**

No such chronic family history was noticed.

#### **Clinical Findings**

 
 Table 1: Astavidha Pariksha (eight-fold examination) according to Ayurveda parameters

| Examination                    | Observation                            |  |
|--------------------------------|--|--|
| Nadi (Pulse)                   | Vaat- pitta dominant sarpagati (Pulse  |  |
|                                | rate- 78/min)                          |  |
| Mala (Excreta)                 | Not constipated                        |  |
| Mutra (Urine)                  | Avilamutrata (Turbidity) No burning or |  |
|                                | itching present                        |  |
| Jivha (Tongue)                 | Saam Drava (Coated)                    |  |
| Shabda (Voice or Sound)        | Samanya (Normal)                       |  |
| Sparsha (Tactile)              | Ushna (Warm)                           |  |
| Drika (Eyes and Eyesight)      | Samanya (No long or short sightedness) |  |
| Akruti (Physical constitution) | Samanya (Normal)                       |  |

The patient was found to be Vatapitta prakruti (constitution)

#### Investigation

CBC (Complete Blood Count), Sr. IgE (Serum Immunoglobulin E), CrP (C- Reactive Protein) was done before and after the treatment.

Table 2: Investigation

| Investigation | Before treatment      | After treatment    |
|---------------|-----------------------|--------------------|
| 1. CBC        | 15.2 g/dL (29/1/2023) | 16 g/dL (2/3/2023) |
| ESR           | 30                    | 12                 |
| Eosinophil    | 20                    | 8                  |
| 2. Sr. IgE    | 3382.00 IU/ml         | 1063.8 IU/ml       |
|               | (29/1/2023)           | (2/3/2023)         |
| 3. CrP        | 8 mg/L (29/1/2023)    | 6 mg/L (2/3/2023)  |

#### **Therapeutic Intervention**

The primary focus of *Ayurveda* is a personalized approach to *Aamjanya Pittaj vikara* on the basis of *vaya* (age of the patient), degree of *Dosha* vitiation, duration of illness, *bala-Vyadhi and rugna bala* (the severity of the disease and strength of the patient).

**Preparatory procedure:** Deepana Pachana Karma (Therapeutic enhancement of Digestive capacity) was given for 3 days with *Hingwashtaka churna* (Powder formulation to improve digestion). It was followed by *Snehapana* (therapeutic administration of unctuous formulation like ghee, oil) with *Panchatikta Ghrtha* (a medicated ghee preparation used in management of skin diseases) until the signs of oleation were observed. The signs of oleation were sticky bowel with the presence of ghee, soft and oily skin, aversion to ghee, nausea and tiredness.

**Procedure:** After the signs of oleation observed the individual was administered with *Virechana karma* (Therapeutic purgation).

The signs and symptoms of the patient started to reduce after the 3<sup>rd</sup> day of *Snehapana* and got completely subsided after *Virechana karma*. The patient was asked to monitor his signs and symptoms for a week.

**Post procedure:** *Sansarjana krama* (Dietary regimen after therapeutic purgation) for 5 days was followed by the patient.

#### Shamana Chikitsa (Internal Medication)

- 1. Aarogyavardhini vati 2 B.D. with Lukewarm water after meal.
- 2. *Kaishor Guggul* 2 B.D. with Lukewarm water after meal.
- 3. A combination of *Triphala churna* and *Avipattikar churna* 1 teaspoon twice a day with ½ cup lukewarm water after meal.
- 4. *Manjisthadi Kwatha* 30ml twice a day with equal amount of lukewarm water after meal.

#### Discussion

Chronic idiopathic urticaria due to its non-responsive nature towards the Anti-histamines *Virechana karma* (therapeutic purgative) was administered after *Snehapana* (oleation) with *Panchatikta ghruta* and after that proper dietary regimen was advised to the patient. *Arogyavardhini Vati* was administered that contains *Katuki* (*Picrorhiza kurrooa* Royle) which helps in maintaining mild laxation during the treatment <sup>[8]</sup>. *Kaishore Guggulu* a combination of various

*Tikta- Kashaya* (Bitter and astringent taste) drug was administered to help suppression of vitiated *Kapha- Pitta Dosha* in the body <sup>[9]</sup>. *Ayurveda* advices frequent purificatory procedures to avert the recurrence of chronic skin maladies <sup>[10]</sup>. So *Sadhyovirechana* was scheduled with combination of *Triphala churna* <sup>[11]</sup> and *Avipathikar churna* which has *Trivrutta* (Operculina turpethum (L.) Silva Manso) as the main ingredient. The combination is adviced in the treatment of *Visarpa* (a type of skin disease) for purgation in all skin diseases <sup>[12]</sup>.

*Avipattikar churna* a combinational drug containing *trivruttha* helps in purgation, thereby maintaining normal functioning of digestive and excretory system. It neutralizes the acid secretion in the gastrointestinal tract and promotes the production of digestive enzymes which aid in the absorption of nutrients and is useful in indigestion <sup>[13]</sup>.

*Manjistadi kwatha* indicated for *Rakta* involvement and reddish discolouration. By virtue of the ingredients, combination of various *Tikta-kashaya* (bitter and astringent taste) formulation that prevents further *Pitta-Kapha dosha* aggravation<sup>[14]</sup>.

At present, the patient is under continuous observation and internal medication. The quality of life of the patient, his day-to-day regimen and dietary regimen has significantly improved.

There was complete absence of adverse effect reported during the treatment and no exacerbation of the symptoms or any new signs and symptoms developed during the course of treatment. Thereby, with the virtue of severity of disease as well as patient, prognosis, non-responsiveness of Anti histamines the conventional therapy can be established.

#### Result

In this case, CBC, IgE and CrP were the investigation done to rule out the Allergen as a diagnostic tool. Report almost showed normal parameters after *Virechana karma* (Therapeutic purgative) along with oral administration of the *Arogyavardhini Vati, Kaishore guggulu,* combination of *Triphala* and *Avipattikara churna, Manjishtadi Kwatha.* Symptoms like itching, rashes, hives were comparatively reduced during the *Snehapana* and completely subsided after *Virechana.* 

#### Conclusion

*Panchakarma* Procedure especially *Virechana karma* (Therapeutic purgative) with proper dietary regimen and day to day regimen is very effective in the treatment of Chronic Idiopathic urticaria, *Ayurveda Aamjanya Pittaj vikar*. Both *Shodhana* and *Shamana Chikitsa* prevents the reoccurrence of the disease. No any increased or new symptoms were observed during the procedure. Hence, the treatment is safe to be carried out with proper observation of the Severity of disease and strength of patient. Further studies with large sample size are recommended.

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