Role of Parisheka and Shamaushadhis in Vicharchika: A Case Report

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Abstract

A 45-year-old male patient came to the Panchakarma OPD, KLE Ayurveda Hospital, Belgaum with complaints of rashes and discoloration of the skin in both the feet since 6 years. The case was diagnosed as "Vicharchika". Shamanaushadi with Kaishora Guggulu, Arogyavardhini Vati and Rasna Erandadi Kashaya were advised along with Parisheka.

The complaints reduced after 2 follow-ups after a period 75 days. No complications were reported after the procedure.

Keywords: Arogyavardhini vati; Kaishora guggulu; Parisheka; Rasna Erandadi Kashaya; Vicharcika.

Introduction

Case report

A 45 year old male presented with the complaints of rashes and discoloration of the skin in both the feet since 6 years, associated with severe itching sensation, watery discharge followed by crusting and easy fatigability. The patient had no history of diabetes mellitus, hypertension, fall, or any other major illness.

On examination a wound was present on the lateral aspect of the right leg, around 5 cms superior to the ankle joint (approximately 15 cms \times 5 cms), and another on medial aspect of left leg, on the ankle joint and extending 10 cms superiorly (approximately 10 cms \times 5 cms). There was thick serous discharge, edema and areas with crusting over the wound. There was tenderness over the wound with

surrounding indurations. There were dry and scaly lesions all around the wounds associated with severe itching.

Image 1: Wound on Right foot



Image 2: Wound on Left foot



The patient was advised with the following medications on his first visit for 15 days.

In the mean time, the patient was advised

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S. No	Shamanaushadhi	Dosage	Timing	Anupana	Aushadi Sevana Kala
1	Tab. Kaishora Guggulu	1 tablets of 3gm	tid	Ushna jala	After food
2	Tab. Arogyavardhini	1 tablet of 500mg	tid	Ushna jala	After food
3	Rasna-Erandadi kashaya	15 ml	tid	Ushna jala	After food

to undergo Parisheka with Triphala Kashaya himself in home once a day for 15 minutes.

1st Follow – up

The patient revisited after 15 days for first follow – up. The wound was healthy and healing, the edema and discharge were absent. Mild itching persisted.

Image 3: Wound on Right foot



Image 4: Wound on Left foot



The following medicines were advised during 1st follow up for 1 month.

In the mean time, the patient was advised to undergo Parisheka with Triphala kashaya + Manjishtadi kashaya himself once a day for 15 minutes.

Follow-up 2:

The patient revisited after 1 month for second follow – up. Wounds on both the lower extremities healed. Eczematous changed improved, leaving few scaly lesions with normal pigmentation.

The following medicines were advised during

Image 5: Wound on Right foot



Image 6: Wound on Left foot



Table 2: Showing the medicines advised during 1st follow up for 1 month

S. No	Shamanaushadhi	Dosage	Timing	Anupana	Aushadi Sevana Kala
1	Tab. Kaishora Guggulu	1 tablets of 3 gm	tid	Ushna jala	After food
2	Tab. Arogyavardhini	1 tablet of 500 mg	tid	Ushna jala	After food
3	Rasnaerandadi kashaya + Manjishtadi kashaya	15 ml	tid	Ushna jala	After food

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1	Tab. Kaishora Guggulu	1 tablets of 3gm	tid	Ushna jala	After food
2	Tab. Arogyavard hini	1 tablet of 500mg	tid	Ushna jala	After food
3	Rasnaerandadi kashaya + Manjishtadi kashaya	15 m l	tid	Ushna jala	After food

Table 3: Showing medicines advised during 2nd follow-up for 1 month

2nd follow-up for 1 month.

In the mean time, the patient was advised to undergo Parisheka with Panchavalkala kashaya himself once a day for 15 minutes.

3rd Follow – up

The patient revisited Panchakarma OPD after 1 month for 3rd follow-up. Wounds on both the lower extremities healed. Eczematous changed improved, leaving few scaly lesions with hyperpigmentation.

Discussion

Vicharchika: Vicharchika is a skin ailment wherein Pidaka [eruptions] over the skin

Image 7



Image 8



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appear with dark pigmentation (Shyava), Kandu [itching] and with a Srava [profuse discharge.][1] Pidika are formed when the vitiated Pitta when gets accumulated in Twacha and Rakta and creates inflammation and redness.[2] Shyava is due to vitiated Vata. Kandu is produced by the vitiated Kapha dosha. The vitiated Pitta and Kapha produce Srava. Indu in his Shashilekha commentary defines the condition as 'Jalaprayah' which means the nature of the discharge resembles to that of water.[3] "Rukshata" (dryness) is also one of the symptoms found in Vicharchika [Sushruta] which is the cardinal symptom of Vata. We could also find Raji (Rekha - Linings) in the present case which is caused by vitiated Vata. The patient also had Ruja (pain or irritation) due to chronic nature of the disease, which is again the cardinal symptom of Vata. Vrana created due to scratching is caused due to vitiated Pitta. Vicharchika is a Tridoshaja Vyadhi with the dominance of Kapha[4,5] and Pitta.[6] From the above versions, it is clear that Vicharchika is a Tridoshaja Vyadhi. The physician has to decide dominant Dosha in a particular patient of Vicharchika so the treatment is to be carried out according to the predominance of Doshas. The predominately vitiated Dosha should be first alleviated other subordinate Dosha successively. In the present case, we could find the dominant Dosha as Vata along with Pitta and Kapha successively.

Though Shodhana has been told as the first line of treatment, the patient was not convincible for the Shodhana line of management in the present case. Hence it was planned to manage the present case with Shamanaushadhis and Parisheka which can be done the patient himself at home.

Tab Kaishora Guggulu[7] and Arogyavardhini Vati[8] were advised throughout the course.

Kaishora Guggulu has Guggulu, Gudoochi,

and Triphala as the chief ingredients. Guggulu is one extraordinary drug that possesses Anabhishyandhi and Sroto Shuhdhikaraka actions. It is the best drug that can be administered in this condition, as it is proved that it has an optimistic outcome in negating the incriminatory action of the morbid Kapha Dosha. Guduchi is the drug of choice in Vatarakta. It acts as Vyadhipratyneeka and is a magnificent Rasayana and Pittashamaka. Triphala is well known for its Rookshana and Kaphahara properties. All the other ingredients of the yogas also work in the same pattern.

The main ingredient of Tab. Arogyavardhini is Katuka (22 parts) with Eranda, Guggulu and Shilajatu. Katuki is considered as Tikta in rasa, Laghu and Ruksha in Guna, Shita in Veerya, Katu in Vipaka and pacifies Kapha and Pitta Dosha. It is the choice of drug in Medodosha, Kushta and Pittaja vikara.

Rasnaerandadi kashaya: The main ingredients are Rasna, Eranda, Bala, Sahachara, Shatavari, Vasa, Amruta, Devadaru, Ativisha, Musta, Kokilaksha, Shati and Shunthi. It is the choice of drug in Vatarakta, Raktaja shopha and Vataja shula (Sahasrayoga, Kashayaprakarana: 428).[9]

Manjishtadi Kashaya: Manjishtadi Kashaya was added during 1st and 2nd follow-up. Manjishta is used in Visha, Shleshma shotha, Rakta dosha, Visarpa, Vrana and Prameha.[10] Due to its wound healing property and Rakta dosha hara, it was added in successive line of management.

Parisheka: Parisheka is one of the best Vatapitta-kapha hara.[11] It can also be practiced by the patient himself in the management of Vruna. Hence Parisheka was advised with Triphala Kashaya, Manjishtadi kashaya and Panchavalkala kashaya which all have Vruna ropana and Kapha, Pitta nashaka properties.

Conclusion

This case highlights the effect of Parisheka and Shamanaushadis in Vicharchika.

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