

Role of *Virechana karma* in paediatric patient of *Sheetapitta* (Urticaria) - A Case Study

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Abstract:

Sheetapitta that is Urticaria is one of the most common allergic skin diseases described in Ayurveda. The symptoms of *Sheetapitta* like *Mandal*(circular rashes), *Shotha* (Swelling), *Kandu* (itching), *Toda* (pain), *Chardi* (vomiting), *Jwara* (fever) and *Daha* (burning sensation) that makes the individual annoyed and irritated. Many of antihistaminic agents show the instant relief in symptoms but frequent relapse occurs. *Panchakarma* provides better and permanent management for *Sheetapitta*. For treatment of such peculiar condition, a clinical evaluation by *Virechana* with *Avipattikara Churna* was done. Here we reported a chronic case of *Sheetapitta*, presented with red rashes all over the body with pain, burning sensation; swelling and itching on the whole body aggravating more during evening hours and on exposure to cold climate since 18 months. A female patient of 8 years old consulted to OPD with above complaints This case was managed with *Virechana karma* and rashes were almost disappear within 6 days of *Virechana*. This case concluded that for chronic condition of skin disorder *Panchkarma* is the best therapy for eliminations of vitiated *Doshas*.

Key words: Ayurveda, *Sheetapitta*, Urticaria, *Virechana*.

Introduction

Urticaria is type 1 hypersensitivity reaction which is manifested because of allergens. Urticaria is also known as hives, wheals, welts or nettle rash. It is a raised, itchy rash that appears on the skin. It may appear on one part of the body or be spread across large areas. The rash is usually very itchy and ranges in size from a few millimeters to the size of a hand. Although the affected area may change in appearance within 24 hours, the rash usually settles within a few days. ^[1] Epidemiology of Urticaria is increasing nowadays due to industrialization and

agriculture. Urticaria is classified into two types according to its duration.

- Acute urticaria (less than 6 weeks duration, and often gone within hours to days)
- Chronic urticaria (more than 6 weeks duration, with daily or episodic wheals)

Chronic urticaria may be spontaneous or inducible. Both types may coexist. ^[2]

Urticaria is considered as a major problem with respect to its etiology, investigation, and management. Treatment failure rate is extremely high in the management of skin diseases in primary care settings. Urticaria

is the fourth most prevalent allergic disease which occurs due to the release of histamine, bradykinin, kallikrein, and other vasoactive substances from mast cells and basophils in the superficial dermis. It is truly not one disease, but a reaction pattern of the skin involving the upper dermis, representing localized edema and marked by the development of wheals. Acute Urticaria is more common in young patients while chronic type is in middle-aged women. Antihistamines, corticosteroids, and leukotriene antagonists can provide temporary symptomatic relief.^[3]

According to Ayurveda literature, sheetapitta manifests due to exposure to *Asatyama Ahara Vihara* and contact with different poisonous materials (allergens)^[4] symptoms of allergic skin reaction is mentioned as *Kotha* in Vrihatrayi later on it is developed as the separate disease under the title *Sheetapitta-Udarda-Kotha* by Madhavakara. *Vata* and *Kapha* are two "*Doshas*", which are primarily disturbed by this disease. In the combination with *Pitta*, they create redness, swelling, and itching of the skin.

Pathogenesis of sheetapitta is because of etiological factor *Vata Dosha* got prakopa and in turn leads to the vitiation of *Pitta Dosha* and *Rakta Dushti*, further spreading to extremities and leading to the manifestation of wheals (maculopapular rash), the sheetapitta.^[5-6] The role of *Vata Dosha* in the manifestation was done by the presence of symptoms like dryness, pain and aggravating factors like exposure to the cold climate. Similarly, the role of

pitta in the manifestation was done by the presence of symptoms like burning sensation and presence of itching indicates involvement of *Kapha* in the manifestation.

For the skin related problems like *Sheetapitta* i.e. urticaria, both the *Shodhana* (removing *Doshas* from the body by means of relevant *Panchakarma*) and the *Shamana* (subsiding *Doshas* in situ with appropriate internal medicine) treatment are mentioned in Ayurvedic classics.^[7] The *Shodhana* is having very laborious treatment procedure; moreover, these *Shodhana* procedures are only indicated in patients having *Uttama mamsa bala*. But in *Bahudoshaawastha* (chronic condition) of any disease *Shodhana* therapy gives better results and chances of recurrence of disease are minimized. Therefore the *Virechana* is planned for the treatment of urticaria.

Case Study:

A female child of 8 years of age consult OPD of kaumarbhritya with complaints of red rashes whole over the body with pain, burning sensation, swelling and itching on the whole body since 18 months. The parents of patient reported that the symptoms aggravating more during evening hours and on exposure to cold climate. Patient took allopathic treatment (Tab. Allegra 30 mg twice daily) for 18 months but no relief found. Not any significant past history found. Patient was delivered by LSCS due to oligohydramnios with birth weight 2.5kg and cried soon after birth. Proper immunization has been taken up to age as

per schedule. In personal history only disturbed sleep (1-2 h/day, 3-4 h/night) was noted by parents.

On examination, the lesions were reddish in color (hairs of the affected site being normal) Maculo-papular in nature, spreading on the face, upper limb and lower limbs, chest and back with irregular shape and asymmetrical distribution (Fig-1). Lesions had an irregular margin with no discharge and exudation with intact sensation perception over the site. The size varied in linear measurement from 2 to 6cm. So the patient was diagnosed with subjective parameters described in Ayurvedic texts which include *VaratiDamshasanshanashotha*, *Kandu*, *Toda*, *Chhardi*, *Jwara* and *Vidaha*. The gradation used for subjective and objective parameters were as follows.

VaratiDamshaSamsthanaShotha

- 0: Absent
- 1: Locally scattered (in the specific area).
- 2: Moderately scattered (Present on some part of the body)
- 3: Severely scattered (Present all over the body)

Kandu

- 0: Absent
- 1: Mild *Kandu* (Occasional *Kandu*)
- 2: Moderate *Kandu* (*Kandu* disturbing normal activity)
- 3: Severe *Kandu* (*Kandu*, disturbing normal activity, and sleep)

Toda

- 0: Absent
- 1: Mild *Toda* (Occasional *Toda*)
- 2: Moderate *Toda* (*Toda*, disturbing normal activity)
- 3: Severe *Toda* (*Toda*, disturbing normal activity, and sleep)

Vidaha

- 0: Absent
- 1: Mild *Vidaha* (Occasional *Vidaha*)
- 2: Moderate *Vidaha* (*Vidaha*, disturbing normal activity)
- 3: Severe *Vidaha* (*Vidaha*, disturbing normal activity, and sleep)

Jwara

- 0: Absent (Normal body temperature)
- 1: Mild *Jwara* (*Jwara* up to 100⁰f)
- 2: Moderate *Jwara* (*Jwara* 100⁰f - 102⁰f)
- 3: Severe *Jwara* (*Jwara* more than 102⁰f)

Chhardi

- 0: Absent
- 1: Mild *Chhardi* (Occasionally)
- 2: Moderate *Chhardi* (1 to 2 times a day)
- 3: Severe *Chhardi* (more than 2 times a day)

Treatment protocol:

Firstly child and her family have been counseled and explained about *Virechana* and got admitted to IPD of Kaumarbhritya department. *Virechana karma* as per classics has been done [Table-1]. *Samsarjana Karma* was obtained as per *Shuddhi*.

Images:**Fig-1: Before treatment (Gradation Score: 15)****Fig-2: After treatment (Gradation Score: 4)****Table-1: Method of Drug Administration for Virechana Karma**

Treatment	Drug used	Dose	Anupana	Duration
<i>Deepana-Pachana</i>	Chitrakadi vati	1 Tab TDS	Luck warm water	3 days
<i>Snehapana</i>	<i>Goghrita</i>	<i>Vardhamana matra</i>	Luck warm water	5 days
<i>SarvangaAbhyanga-Bashpa Swedana</i>	Bala oil for Abhyanga	Q.S.	-	3 Days
<i>Virechana Karma</i>	<i>Avipattikar churna</i>	30gm	<i>Sukhoshnajala</i> Anupana	1 Day
	Draksha Aragvadha Kashaya	150ml		
<i>Samsarjana Krama</i>	As per Classics	-	-	5 Days

Table-2: Assessment score:

Parameter	B.T	A.T	Diff. (B.T-A.T)	% Improvement
<i>VaratiDamshaSamsthanaShotha</i>	3	1	2	66.66%
<i>Kandu</i>	3	1	2	66.66%
<i>Toda</i>	3	1	2	66.66%
<i>Vidaha</i>	3	1	2	66.66%
<i>Jwara</i>	2	0	2	100%
<i>Chardi</i>	1	0	1	100%
Total	15	4	11	73.33%

Result and Discussion:

An assessment was done after *Virechana* and after 15 days of follow-up by adopting gradation [Table-2].

Sheetpitta as per Ayurvedic science is a *Tridoshaja Vyadhi*. Initially, after *Nidaan sevana* (etiological factors) vitiation of *Kapha* and *Vata* takes place then they start to spread out in the whole body both externally and internally by mixing with *Pitta*. The *Tridoshas* travelling internally causes *Dushti* (pathogenesis) of *Rasa* and *Rakta Dhatus* after that *Rasa vaha* and *Rakta vaha Sroto dushti* occurs these on reaching to *Vigna Twaka* (sensitized skin) produce symptoms like *Toda*, *Daha*, *Kandu*, etc. Initially, *Snehana* therapy was done as it is mainly *Vatashaamaka* (*Sheetpitta* is also a *Vata pradhana tridoshaja vyadhi*) and also it works at the level of *Sukshmasrotasa* (microchannels) by cleansing the microchannels also it shifts the *Doshas* from *Shakhas*.

Considering this, the predominance of *Rakta*, *Pitta*, *Vata dosha Virechana* (purgation) was followed. [8-9] *Chitrakadi Vati* was given to correct the *Agni* for first 3 days. Burning sensation increased with

new red lesion developed, pain and itching started in starting. After *Deepana Pachana*, *Goghrita* was used for *Snehapana* (Internal oleation) in gradual increasing dose starting with 30 ml. On a 5th day expected the level of *Snigdha* was achieved, then *Sarvanga Abhyanga* with *Bala Taila* and *Bashpa Swedana* given for 3 days and then *Virechana* was planned with *Avipattikar churna* as purgative, 30 grams and 150 ml of *Draksha Aragvadha Kashaya* as *Anupana* (adjuvant to the main drug). Total 16 *Vegas* were counted and *Madhyama shuddhi* was achieved.

Patient discharged on next day and advised to follow *Samsarjana krama* as per *Madhyama shuddhi* i.e. *Peya* at the evening on the day of *Virechana* and on the next morning then *Vilsepi*, *Mudga Yusha* and *Krishara* was given for two *Annakala* consecutively for 5 days. The patient was asked to follow up after 7 days. The patient got complete remission in *Jwara* and *chardi* and 66.66% relief found in *VaratiDamshasanshanashotha*, *Kandu*, *Toda*, and *Vidaha* after follow up (Fig-2).

Conclusion:

As *Sheetpitta* is mainly due to vitiation of Vata and Pitta Dosha and Virechana pacifies Vata Pitta dosha. Hence in this study Virechana Karma has shown significant results.

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