



# Effect of Raktamokshna using Ghati Yantra (Cupping), Panchamuli Laghu Draksha Kashaya and Wilandawennadi Lepa in Vicarcika (Eczema) – A Case Study

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### ABSTRACT:

In Ayurveda, Vicarcika is described under Kshudra Kushtha. Kandu (itching), Shyava Pidaka (blackish-brown eruptions), Bahu Srava (copious exudation). Rajyo (cracks), Ruja (severe pain) and Ruksha (roughness) are the clinical features of Vicarcika. It can be correlated with eczema causing dry, itchy skin and rashes of the skin. Charaka describes Raktamokshna as one of the therapeutic measures in treatment of Kushtha Roga. Panchamuli Laghu Draksha Kashaya and Wilandawennadi Lepa are used to treat patients suffering from Vicarcika at Ayurveda teaching hospital, Borella with effective results. So far, no known scientific study has been conducted to evaluate the effect of these treatments. A 68year female with a two-month history of Vicarcika (eczema) was treated with this treatment regimen for a period of 24 days. This patient had occasional pain, itching, eruptions, roughness, cracks and copious exudation in both lower limbs. The response to the treatment was recorded and therapeutic effects were evaluated through symptomatic relief. After completion of entire treatment, it was observed that the symptoms such as Srava (copious exudation) and Ruja (pain) were relieved by 75% and other symptoms were partially relived. It is concluded that Rakthamokshna using Ghati Yantra (cupping), Panchamuli Laghu Draksha Kashaya and Wilandawennadi Lepa are beneficial in treatment of *Vicarcika* (eczema)

**KEYWORDS**: Eczema, Ghati Yantra, Panchamuli Laghu Draksha Kashaya, Rakthamokshna, Vicarcika, Wilandawennadi Lepa

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### INTRODUCTION:

Vicarcika is a type of Kshudra Kushtha. According to Charaka Samhita and Madhava Nidana, [1,2] clinical features of Vicarcika are Kandu (itching), Shyava Pidaka (blackishbrown eruptions) and Bahu Srava (copious exudation). Sushruta mentions that Rajyo (cracks), Ati Kandu (excessive itching), Ruja (severe pain) and Ruksha (roughness) are present in Vicarcika. [3] Charaka describes that Kapha Dosha is vitiated in Vicarcika [4] and Sushruta mentions that Pitta Dosha is vitiated. [5]

*Vicarcika* can be corelated with eczema. Clinical features of eczema are itching, red inflamed skin, dry sensitive skin, rough, leathery or scaly patches in skin, oozing or crusting and occasionally, blisters.<sup>[6]</sup>

Charaka describes Raktamokshna as one of the therapeutic measures in treatment of Kushta, [7] According to Vangasena Samhita, patients suffering from Kushta, who are having profuse impurities in blood, should undergo Raktamokshna (bloodletting therapy) after Snigdha Karma (oleation therapy).[8] Sushruta Samhita mentions to conduct Snehana and Swedana before Raktamokshana. [9] Sirinivasa Acharya mentions that Ghati Yantravarana, a small pot earthen be used can Raktamokshna.[10] Therefore, it was decided to conduct Raktamokshna after Snehana and Swedana using Ghati Yantra in this study. Panchamuli Laghu Draksha Kashaya and Wilandawennadi Lepa are used to treat patients suffering from Kushta Roga at Avurveda Teaching Hospital, Borella with effective results. So far, no known scientific study has been conducted evaluate these effects. Hence the present study was undertaken.

### **CASE STUDY:**

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A 68-year female with a two-month history of *Vicarcika* (eczema) with complaints of *Kandu* (itching), *Ruja* (pain), *Pidaka* (eruption), *Srava* (copious exudation), *Rukshatha* (roughness) and *Rajyo* (cracks), was selected from Ayurveda teaching hospital, Borella, Sri Lanka and thoroughly examined. Severity of the symptoms before and after treatment was recorded using the specially prepared grading scale given below.

**Grading Scale** 

1. Kandu (itching)

Nil	0	No itching
Mild	1	Occasional itching
Moderate	2	Intermittent itching
Severe	3	Often feel itching
Very Severe	e 4	Always itching

### 2. *Pidaka* (eruptions)

Nil	0	No	No eruption				
Mild	1	Ма	cule (N	cule (Non palpable			
area of altered colour)							
Modera	ite 2		Papu	le (Pal	pable		
elevated small area of skin (<0.5cm)							
Severe		3	Nodule (Solid				
palpable lesion with the skin (> 0.5cm)							
Very se	evere	4		Pustu	ıle (a		
circums	scribed,	elevated	lesion	filled	with		
puruler	nt fluid)						

### 3. Colour of *Pidaka* (colour of eruptions)

Nil	0	Normal skin colour
Mild	1	Light brown
Moderate	2	Brownish Red
Severe	3	Blackish Red
Verv Severe	4	Black '

### 4. Srava (copious exudation)

Nil	0	No discharge
Mild	1	Moisture on the
skin lesio	on: feels only	when touch that rea



Moderate 2 Moisture on the skin lesion can be seen Severe 3 Weeping from the skin after itching Very Severe 4 Profuse weeping

5.Ruja (pain)

Nil 0 No Pain

making clothes wet

Mild 1 Feels pain occasionally Moderate 2 Feels pain intermittently Severe 3 Often feels pain Very Severe 4 Always feeling pain

6. *Rukshatha* (roughness)

Nil0No roughnessMild1Slight roughnessModerate2Mild roughnessSevere3Moderate roughnessVery Severe4Severe roughness

7. Rajyo (cracks)

Nil 0 No cracks

Mild 1 Cracks can be seen but cannot be felt with fingers

Moderate 2 Cracks can be seen and can be felt with fingers

Severe 3 Crack lines are deeper but within epidermis

Very Severe 4 Cracks spreading up to dermis

### **Procedure of treatment:**

Selected patient was treated for a period of 24 days. Before conducting Raktamokshna, patient was subjected to *Purvakarma* as prescribed in Vangasena Samhita.<sup>[8]</sup> Further, *Snehana* was performed using *Ghrutapana* in progressive doses, and *Swedana* in the form of *Parisheka Sweda*.

Day1 to Day6: *Snehana* was carried out by administering ghee in progressive doses. Day7: *Sweda Karma* was performed with *Parisheka Sweda* using hot water. Day8 to

Day10: Raktamokshna was carried out using Ghati Yantra (cupping). Day11 to Day24: 120ml of Panchamuli Laghu Draksha Kashaya was administered orally and 50gm of Wilandawennadi Lepa was applied externally once a day at 9.30 a.m. Before applying Wilandawennadi Lepa, affected areas was cleaned with medicated water. This medicated water was prepared by boiling 60gm of the entire plant of Leucas biflora (Sinhala name: Wilandawenna) with 1920 ml of water and reducing it to 240ml. Patient was further advised to avoid use of soap or body scrubs.

## Method of preparation of *Panchamuli* Laghu Draksha Kashaya

Panchamuli Laghu Draksha Kashaya was prepared according to the method practiced at Avurveda Teaching hospital, Borella, Sri Lanka. 6gm each of entire plants of Alysicarpus vaginalis ((Sinhala name: Aswenna) and Aerva lanata ((Sinhala name: Polpala), roots of Solonum indicum ((Sinhala name: Elabatu), Solanum xanthocarpum ((Sinhala name: Katuwelbatu), Tribulus ((Sinhala terrestris name: Gokatu). Cissampelos pareira ((Sinhala name: Diyamitta), Picrorhiza kurroa ((Sinhala name: Katukarosana), stems of Tinospora cordifolia ((Sinhala name: Rasakinda), dried fruits of *Vitis viniferra* ((Sinhala name: *Midi*) and Phyllanthas emblica ((Sinhala name: Nelli) were cut into small pieces and mixed. 1920ml of water was added to mixture and boiled down to 240ml.

# Method of preparation of Wilandawennadi Lepa

Entire fresh plants of *Leucas biflora* (Sinhala name: *Wilandawenna*) were ground into a fine paste. Then 50gm of this paste was mixed with 15ml of coconut oil.



### Procedure of Rakthamokshna

Before performing Raktamokshana. Complete blood count, bleeding time, clotting time and Fasting blood sugar level were measured. According to Vangasena Samhita and Sushruta Samhita. Purvakarma (Snehana and Swedana) was carried out.[8,9] performed Snehana was by administration of ghee (Ghrutapana) in progressive doses for a period of six consequent days till Samyak Snigdha Lakshana were present. Then on Seventh day, Sweda Karma was performed with hot water, in the form of Parisheka Sweda Pradhana Karma, Rakthamokshna performed using Ghati Yantra (cupping). Rakthamokshna was conducted around 9.00

a.m for three consequent days. The patient was made to lie down on the bed. Then the site of bloodletting was cleaned and 7-10 pricks were given with the help of Number 18 sterile needle which led to pinpoint bleeding. The Ghati Yantra was cleaned with surgical spirit and wiped, and it was quickly placed on the bleeding points. It was kept in the same position till the oozing of blood stops and clots. After removing *Ghati* Yantra, the area was cleaned with sterile gauze and Seethodaka oil, a Sri Lankan traditional oil was applied to the site. The patient was made to rest and light diet was given. Patient was advised to avoid wetting this area for 24 hour (Figure 1).

**Table 1: Reduction of symptoms during treatment:** 

Parameters	BT	AT							
		After Snehapana		After Swedana		After Raktamokshna		After entire treatment	
	Grade	Grade	% of Relief	Grade	% of Relief	Grade	% of Relief	Grade	% of Relief
Kandu (itching)	4	4	0%	3	25%	2	50%	2	50%
Pidaka (eruption)	4	4	0%	3	25%	2	50%	2	50%
Srava (copious exudation)	3	3	0%	3	0%	2	33.33%	0	100%
Ruja (pain)	4	3	25%	3	25%	3	25%	1	75%
Rukshatha (roughness)	3	3	0%	2	33.33%	2	33.33%	1	66.67%
Rajyo (cracks)	1	0	100%	-	-	-	-	-	-



### **Clinical images**



1-Pricking the blood letting point



2- Appling Ghatiyantra



3- Ghati Yantra placed on bleeding points



4- Collecting the oozing blood to Ghati Yantra



5-After removing Ghati Yantra



6-Applied the Seethodaka oil

Figure 1: Procedure of Rakthamokshna



### **Before Treatment**





### **After Treatment**





Figure-2: Reduction of symptoms

### **RESULT:**

After Snehapana, none of the symptoms showed any reduction but Rajyo (cracks) was completely relieved and Ruja (pain) was reduced by 25%. After Sweda Karma, Kandu (itching), Pidaka (eruptions) were reduced by 25% and Rukshatha (roughness) was reduced by 33.33%. After Rakthamokshna, Kandu (itching), Pidaka (eruptions) were reduced by 50% and Srava (copious exudation) were reduced by completion 33.33%. After of entire treatment, Srava (copious exudation) and Rajyo (cracks) were completely relieved, Ruja (pain) reduced by 75%, Rukshatha (roughness) by 66.67%, Kandu (itching) and Pidaka (eruptions) were reduced by 50% (Table 1 and Figure 2).

### **DISCUSSION:**

According to Sushrutha Samhitha, vitiation of *Pitta Dosha* [5] is responsible for occurrence of Vicarcika and according to Charaka Samhitha. Kapha Dosha responsible for occurrence of Vicarcika. [4] Authentic Avurveda texts describe Raktamokshna as one of the therapeutic measures for treatment of Kushtha Roga. [7] Vitiated Pitta Dosha in the body can be eliminated through Raktamokshna. Hence Raktamokshna is effective in treatment of Vicarcika.

Ingredients of Panchamuli Laghu Draksha Kashaya possess Madhura Rasa, Thikta Rasa, Kashaya Rasa, Ruksha Guna, Sheeta Veerya and Madhura Vipaka. Therefore, it pacifies vitiated Pitta Dosha. As these ingredients possess Katu Rasa, Tikta Rasa, Kashaya Rasa, Laghu Guna, Theekshna Guna,



Ruksha Guna, Ushna Veerya and Katu Vipaka, this decoction helps to pacify vitiated Kapha Dosha. [11]

Antioxidant, anti-inflammatory, antiallergic, anthelmintic, immune regulating, antibacterial, and antimicrobial properties of ingredients of *Panchamuli Laghu Draksha Kashaya* are scientifically proven. [12-21] Due to these properties, *Panchamuli Laghu Draksha Kashaya* is beneficial in treatment of *Vicarcika*.

Ayurvedic pharmacodyanamic properties such as *Rasa*, *Guna*, *Veerya* and *Vipaka* of *Leucas biflora* are not found in authentic Ayurvedic texts. But in Matara district, people use this plant to treat dermatitis as a herbal wash and as an external application. Coconut possess *Madhura Rasa*, *Guru Guna*, *Snigdha Guna*, *Sheetha Veerya* and *Madhura Vipaka*.[11] Due to these properties, Coconut oil is beneficial for pacifying vitiated *Pitta Dosha* and helps to reduce *Vicarchika*.

Research papers on scientifically proven bioactivities of *Leucas biflora* (*Wilandawenna*) are not found. Antioxidant, anti-inflammatory, antifungal and antimicrobial properties of coconut oil are scientifically proven. [22] Due to these properties *Wilandawennadi Lepa* is beneficial in treatment of *Vicarchika*.

### **CONCLUSION:**

Based on this single case study, it can be concluded that *Raktamokshna* using *Ghati Yantra* (cupping), oral administration of *Panchamuli Laghu Draksha Kashaya* and external application of *Wilandawennadi Lepa* are beneficial in treatment of *Vicarcika* (eczema).

### LIMITATION OF STUDY:

This is a single case study and this research should be carried out with larger sample which will make results more acceptable

### **PATIENT CONSENT:**

The patient gave the informed consent for reporting of the case study in the journal.

### **REFERENCES:**

- 1. Sharma, PV, Charaka Samhitha, Chikithsasthana 7/26-2, Chaukhambha Orientalia, Varanasi, India, 1986, pp127
- Murthy, KRS, Madhava Nidanam (RogaVinischaya) 49/ 23-1, Chaukhambha Orientalia, Varanasi, India, 1986, pp161
- 3. Singhal, GD, Singh, LM and Singh, KP, Diagnostic considerations in ancient Indian surgery (Based on Nidanasthana of Sushruta Samhita) 5/13-1, Singhal Publications, Allahabad, India, 1972, pp 84-85
- 4. Sharma, PV, Charaka Samhitha, Chikithsasthana 7/30-2, Chaukhambha Orientalia, Varanasi, India, 1986, pp127-128
- 5. Singhal, GD, Singh, LM and Singh, KP, Diagnostic considerations in ancient Indian surgery (Based on Nidanasthana of Sushruta Samhita) 5/16, Singhal Publications, Allahabad, India,1972,p-86
- 6. Kumar and Clark, Clinical medicine, Chapter 20, W.B. Saunders, Robert Stevenson House, 1-3Baxter's place, Leith Walk, Edinbergh, EH1 3AF, UK, 4<sup>th</sup> edition, 1998, pp1160
- 7. Sharma, PV, Charaka Samhitha, Chikithsasthana 7/39-42, Chaukhambha Orientalia, Varanasi, India, 1986, pp128
- 8. Saxena, N, Vangasena Samhita or Cikitsasara Samgraha of Vangasena (Vol 11), Kushta (leprosy and skin diseases) 60/48, Chowkhamba Sanskrit Series office, Varanasi, India, 2014, pp 735
- 9. Singhal, GD and Guru, LV, Anatomical and Obbstetric considerations in ancient Indian surgery (Based on Shariraasthana of Sushruta Samhita) 8/6, Singhal Publications, Allahabad, India, 1973, pp 174



- 10. Sirinivasa Acharya, G, Panchakarma illustrated, Chaukhambha Sanskrit Pratishthan, Delhi, India, 2006, pp 439
- 11. Sharma PV, Dravyaguna Vijnana, Chaukambha Bharati Academy, Varanasin, Twelfth Edition1991; pp 658, 282, 280, 632, 626, 441, 761, 133, 758,117
- 12. Nandhu MR, Abhirami VA, Sukanya S, John J P, Helen PAM, Phytochemical Analysis & Antioxidant Activity of Leaf Extracts of Alysicarpus vaginalis, Journal of Emerging Technologies and Innovative Research 2018;5(6):615-621
- 13. Rajesh R, Chitra K, Paarakh PM, Aerva lanata Linn) Juss. Ex Schult An overview, Indian Journal of Natural Prodducts & Resources 2011; 2(1): 5-9
- 14. Sharma V, Hem K, Seth A, Maurya S K, Solanum indicum Linn.: An ethnopharmacological, phytochemical and pharmacological review, Current Research Journal of Pharmaceutical & Allied Sciences, 2017; 1 (2): 1-9
- 15. Fathima T, Joghee S, Akaash M, Solanum xanthocarpum: A review, International Journal of Pharmacognosy and Chinese Medicine 2019; 3(3): 1-7
- 16. A comprehensive overview of Gokshura (Tribulus terrestris Linn.), Journal of Ayurveda and Integrated Medical Sciences 2019; 4(6):205-211
- 17. Singh A, Duggal S, Singh J, Katekhaye S, An inside preview of Ethnopharmacology of *Cissampelos pareira* Linn, International Research Journal of Biological Technology 2010; 1 (1): 114-120
- 18. Kanagarla, NSSAV, Kuppast IJ, Veerashekar T, Reddy CL, A review on benefits and uses of *Vitis vinifera* (Grape), Research & Reviews in BioSciences 2013; 7(5): 175-180

- 19. Khan M, Haque MS, Chowdhury SI, Review of Medicinal use of the unique plant *Tinospora Cordifolia*: evidence from the traditional medicine and recent research, Asian Journal of Medical and Biological Research 2016; 2 (4), 508-512
- 20. Hasan, R, Islam N, Islam R, Phytochemistry, Pharmacological activities and traditional uses of *Emblica officinalis*: A review International Current Pharmaceutical Journal 2016; 5(2): 14-21
- 21. Masood M, Arshad M, Qureshi R, Sabir S, Amjad MS, Qureshi H, Tahir Z, *Picrorhiza kurroa*: An ethnopharmacologically important plant species of Himalayan region, Pure and Applied Biology 2015; 4(3): 407-417
- 22. Lima EBC, Sousa CNS, Meneses LN, Ximenes NC, Junior MAS, Vasconcelos GS, Lima NBC, Patrocinio MCA, Macedo D, Vasconcelos SMM, Cocos nucifera (L.) (Arecaceae): A phytochemical and pharmacological review, Brazilian Journal of Medical and Biological Research 2015; 48(11): 953-964

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