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Ayurvedic Management of Plaque Psoriasis (Ekakushtha) with Guggulu Tiktaka Ghrita Matra Basti: A Case Series

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ABSTRACT:

Plaque psoriasis is a chronic, immune-mediated inflammatory skin disease characterised by well-defined erythematous plaques covered with silvery-white scales and a relapsing clinical course. In Ayurvedic literature, its clinical presentation closely resembles *Ekakushtha*. *Acharya Charaka* has described the cardinal features of *Ekakushtha* as *Aswedana, Mahavastu* and *Matsyashakalopama.* The present case series was undertaken to evaluate the clinical efficacy of *Guggulu Tiktaka Ghrita Matra Basti* in the management of plaque psoriasis (*Ekakushtha*). Five clinically diagnosed patients received 60 mL of *Guggulu Tiktaka Ghrita* as *Matra Basti* once daily for 14 consecutive days. No internal medication or topical application was used. Clinical response was assessed using the Psoriasis Area and Severity Index (PASI), Dermatology Life Quality Index (DLQI) and changes in itching, scaling, erythema and plaque thickness. The mean PASI score decreased from 8.80 to 0.66, representing an overall improvement of 92.50%. Complete relief was observed in itching, scaling, and erythema, while plaque thickness improved by 84.21%. The mean DLQI score improved from 17.60 to 2.00, indicating an 88.64% improvement in quality of life. No adverse events were reported during the study. The findings of this case series indicate that *Guggulu Tiktaka Ghrita Matra Basti* may be a safe and effective Ayurvedic intervention for plaque psoriasis (*Ekakushtha)*.

KEYWORDS: DLQI**,** *Ekakushtha*, *Guggulu Tiktaka Ghrita, Matra Basti,* PASI, Plaque Psoriasis.

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INTRODUCTION:

Psoriasis is a chronic inflammatory skin disease characterized by erythematous, well-demarcated plaques covered with silvery-white scales and a relapsing clinical course.[1] Plaque psoriasis is the most common clinical variant and is associated with significant impairment in physical, psychological, and social well-being. The prevalence of psoriasis in India has been reported to range between 0.44% to 2.8%.[2]

In Ayurveda, *Kushtha* is regarded as one of the *Ashta Mahagada*.[3] Because of its chronicity, recurrence, and complexity in management. Classical Ayurvedic texts classify *Kushtha* into two principal categories:[4] *Mahakushtha* and *Kshudra Kushtha.*

The clinical features of plaque psoriasis closely resemble those of *Ekakushtha*, a type of *Kshudra Kushtha*. Classical texts describe *Ekakushtha* by the features of *Aswedana, Mahavastu* and *Matsyashakalopama*.[5] The condition is considered *Tridoshaja*, with predominance of *Vata* and *Kapha Dosha*, affecting *Twak, Rakta, Mamsa* and *Lasika*.[6] Although various treatment modalities are available, recurrence remains a major concern in the long-term management of psoriasis. Ayurveda emphasizes elimination of vitiated *Doshas* and restoration of physiological balance through *Shodhana* and *Shamana Chikitsa.*

Among the *Panchakarma* procedures, *Matra Basti* is considered a safe and practical form of *Sneha Basti* that is suitable for repeated administration.[7] *Guggulu Tiktaka Ghrita* is a classical formulation indicated in the management of *Kushtha.*[8] Owing to its *Kushtaghna, Tridosha-shamaka, Rakta-prasadana* and *Rasayana* properties, it may be beneficial in the management of *Ekakushtha.* Experimental studies have also demonstrated anti-inflammatory and immunomodulatory activities of many of its ingredients, suggesting a potential role in modulating the immune dysregulation associated with psoriasis.[9] However, published clinical evidence regarding the use of *Guggulu Tiktaka Ghrita* use in plaque psoriasis is limited.

With this background, the present case series was undertaken to evaluate the clinical effect of *Guggulu Tiktaka Ghrita Matra Basti* in patients with plaque psoriasis (*Ekakushtha*).

Case history

Case 1

A 21-year-old female patient

The patient presented with a well-defined, reddish, thick plaque over with severe itching, scaling with silvery flakes, and dryness for the past 4 years.

Case 2

A 70-year-old male patient

The patient presented with erythematous, thick, scaly plaques over the dorsum of both hands, associated with itching for the past 7 years.

Case 3

A 48-year-old male patient

The patient presented with multiple well-demarcated erythematous plaques over both lower limbs with scaling, itching and plaque thickening for the past 5 years.

Case 4

A 22 -year-old female patient

The patient presented with thick plaque lesion over extensor aspect of elbow. The lesion was associated with silvery white scaling, itching, and dryness for the past 4 years.

Case 5

A 48- year-old female patient

The patient presented with hyperkeratotic erythematous plaques over palm associated with scaling, painful fissures, itching and difficulty in performing daily activities for the past 3 years.

Inclusion Criteria

- Patients between 18 and 70 years of age.
- Clinically diagnosed cases of plaque psoriasis (Ekakushtha).
- Patients willing to participate and provide written informed consent.

Exclusion Criteria

- Patients with forms of psoriasis other than plaque psoriasis (e.g. guttate, pustular, erythrodermic or inverse psoriasis).
- Patients receiving systemic corticosteroids or immunosuppressants
- Patients unwilling or unable to provide informed consent or comply with the study protocol.

Assessment Criteria

1. Subjective Assessment Criteria - Table 1
2. Objective Assessment Criteria-
   1.PASI score[10]
   2.DLQI score[11]

THERAPEUTIC INTERVENTION:

Study drug: *Guggulu Tiktaka Ghrita*

Dose: 60 mL

Route of administration: per rectum (Matra Basti)

Duration of therapy: 14 consecutive days

Treatment Procedure:

Following detailed history taking, clinical evaluation and baseline investigations, each participant received 60 mL of *Guggulu Tiktaka Ghrita* as *Matra Basti* once daily after the midday meal. The procedure was carried out in accordance with the classical principles of Ayurvedic practice while maintaining standard aseptic precautions. After administration, patients were advised to remain in a supine position for approximately 30 minutes to facilitate adequate retention of the *Basti.*

Results:

A total of five patients clinically diagnosed with plaque psoriasis *(Ekakushtha*) completed the planned treatment regimen of *Guggulu Tiktaka Ghrita Matra Basti* and were evaluated before and after therapy using the Psoriasis Area and Severity Index (PASI) score, severity of *Kandu* (itching), scaling (desquamation), erythema, plaque thickness (induration) and Dermatology Life Quality Index (DLQI).

Improvement was observed in all assessed clinical parameters following treatment with *Guggulu Tiktaka Ghrita Matra Basti*. The mean PASI score decreased from 8.80 before treatment to 0.66 after treatment, corresponding to an overall improvement of

92.50%.(table 4) The mean DLQI score was reduced from 17.60 to 2.00, indicating an 88.64% improvement in quality of life.(table 4)

Complete resolution of *Kandu*, scaling and erythema was observed in all five patients, with mean scores reducing to zero after treatment.(table 4) The mean score for plaque thickness decreased from 3.80 to 0.60, reflecting an overall improvement of 84.21%.(table 4)

Individual case analysis showed a favourable clinical response in every patient. The percentage improvement ranged from 90.00% to 100.00%. Two patients (P4 and P5) achieved complete clinical clearance with 100% improvement, while the remaining three patients also demonstrated marked improvement, with percentage relief ranging from 90.00% to 91.67%. The detailed case-wise assessment is presented in Tables 2 and 3, and the mean changes in clinical parameters are summarized in Table 4.

No adverse drug reactions, complications or treatment-related untoward events were observed during the treatment period. All patients completed the intervention satisfactorily and tolerated *Guggulu Tiktaka Ghrita Matra Basti* well.

The patient was followed up monthly for one year, during which no recurrence was observed.

Assessment Criteria: It is mentioned in the table-1.

Table-1: Subjective Assessment Criteria

Parameter	**Grade 0**	**Grade1**	**Grade 2**	**Grade 3**
Kandu(itching)	No itching	Occasional Itching	Frequent Itching	Continuous severe itching
Matsya-shakalpama (scaling)	No scaling	Mild scaling	Moderate scaling	Very severe thick scales
Raga (redness)	No redness	Slight redness	Moderate redness	Severe bright red lesions
Aswedanam	Normal skin	Mild dryness	Severe dryness	Very severe dryness with fissuring
Mandala Utsedha (plaque thickness)	Normal skin	Slight elevation	Moderate plaque	Very thick plaque

Table-2: Subjective Assessment Result:

Patient	Kandu BT	Kandu BT	Matsya-shakalpama BT	Matsya-shakalpama AT	Raga BT	Raga AT	Aswed Anam BT	Aswed Anam AT	Mandala Utsedha BT	Mandala Utsedha AT
P1	3	0	3	0	4	0	3	0	4	1
P2	3	0	3	0	4	0	2	0	4	1
P3	3	0	2	0	4	0	2	0	3	1
P4	3	0	2	0	3	0	3	0	4	0
P5	3	0	3	0	3	0	3	0	4	0

Table- 3: Objective Assessment Result

PATIENT	PASI BT	PASI AT	Desquamation (scaling) BT	Desquamation (scaling) AT	Erythema BT	Erythema AT	Induration BT	Induration AT	DLQI BT	DLQI AT	%Improvement
P1	6	0.5	4	0	4	0	4	1	18	2	91.67%
P2	9.6	0.8	4	0	4	0	4	1	16	2	91.67%
P3	20	2	3	0	4	0	3	1	20	3	90%
P4	4	0	3	0	3	0	4	0	15	1	100.00%
P5	4.4	0	4	0	3	0	4	0	19	2	100.00%

Table-4 : Mean Assessment of All Patients

Parameter	Mean BT	Mean AT	%Relief
PASI Score	8.80	0.66	92.50%
Kandu	4.00	0.00	100.00%
Scaling	3.60	0.00	100.00%
Erythema	3.60	0.00	100.00%
Plaque Thickness	3.80	0.60	84.21%
DLQI	17.60	2.00	88.64%

Table-5: Overall Therapeutic Response

Patient	Improvement Category
P1	Marked improvement
P2	Marked improvement
P3	Marked improvement
P4	Complete remission
P5	Complete remission



DISCUSSION:

In the present case series, treatment with *Guggulu Tiktaka Ghrita Matra Basti* resulted in a marked reduction in PASI score, itching, scaling, erythema, plaque thickness and DLQI. Complete clinical clearance was observed in two patients, while the remaining patients also showed substantial improvement without any adverse effects.

Probable Mode of Action of *Guggulu Tiktaka Ghrita* in Plaque Psoriasis

The therapeutic effect of *Guggulu Tiktaka Ghrita* in *Ekakushtha* can be explained through its multidimensional actions on *Dosha, Dhatu, Agni* and *Srotas*. In addition, its *Rasayana* and possible immunomodulatory properties may contribute to controlling the chronic inflammatory process associated with plaque psoriasis.

Effect on *Dosha*

Ekakushtha is a *Tridoshaja* disorder with predominance of *Vata* and *Kapha Dosha*. Most ingredients of *Guggulu Tiktaka Ghrita* possess *Tikta* and *Kashaya Rasa*, which help pacify *Kapha* and *Pitta Doshas*. Although these tastes may increase *Vata,* the *Snigdha Guna* and *Vata-shamaka* nature of *Ghrita* help maintain *Dosha* equilibrium.

In Ayurveda, *Ghrita* [12] is regarded as an ideal *Sneha Dravya* for the management of *Ekakushtha.* Its *Snigdha, Mridu, Guru* and *Sukshma Gunas* help pacify *Vata* and *Pitta,* relieve *Rukshata* and support *Dhatu Poshana*. Due to its *Yogavahi nature* and *Sanskarasya Anuvartanatva*,

Ghrita carries the properties of the drugs processed in it, thereby enhancing their therapeutic action. Its *Rasayana* effect also contributes to the maintenance of healthy skin and promotes tissue repair.

Dravyas such as *Guggulu* [13], *Kantakari(Solanum xanthocarpum)* owing to their *Ushna Veerya*, assist in alleviating *Vata* and *Kapha. Nimba(Azadirachta india), Guduchi(Tinospora cordifolia) , Patola(Trichosanthes dioica)* and *Vasa(Justicia adhatoda)* help reduce *Pitta-Kapha Dushti*. The *Kandughna* property of *Haridra(Curcuma longa)* , *Nimba* and *Guggulu* may help relieve *Kandu.* Collectively, these actions help interrupt the *Samprapti* of *Ekakushtha* and promote regression of the lesions.

The reduction in *Kandu (itching)* and *Rukshata* (dryness) noted during the course of treatment may be attributed to the *Vata-Kapha shamaka* effect of the formulation. As therapy progressed, this was accompanied by a noticeable decrease in scaling and overall severity of the lesions.

Effect on *Dhatu*

The principal *Dushya* involved in *Ekakushtha* are *Twak, Rakta, Mamsa* and *Lasika*. The *Tikta Rasa*-predominant drugs support the normal integrity of *Twak* and *Mamsa Dhatu*, while *Kashaya Rasa* facilitates tissue healing and restoration. *Manjistha(Rubia cordifolia)[14] and Patola(Trichosanthes dioica)[15]* possess *Rakta-shodhaka* and *Rakta-prasadana* properties, which may improve the quality of *Rakta Dhatu*. The formulation also assists in *Kleda* and *Lasika Shodhana*, thereby reducing scaling and improving the condition of the affected skin. Being a *Ghrita*-based preparation, it nourishes the *Dhatu* and minimizes *Dhatu Kshaya* during prolonged therapy.

The gradual improvement in plaque thickness and scaling observed in the present cases may indicate restoration of the normal state of the affected *Dhatus*. The *Rakta-prasadana* and *Dhatu-poshaka* properties of the formulation might have contributed to improved skin health and regression of the lesions.

Effect on *Agni*

According to Ayurveda, *Mandagni* and *Ama* play a significant role in the pathogenesis of *Kushtha. Guggulu Tiktaka Ghrita* contains several *Deepana-Pachana Dravyas*, including *Shunthi(Zingiber officinale)[16] Chavya(Piper retrofractum)[17]* and *Ativisha(Aconitum heterophyllum)[18]* which help improve *Jatharagn*i and *Dhatvagni*. By facilitating *Ama Pachana* and restoring normal metabolic activity, the formulation may help arrest disease progression.

Effect on *Srotas*

The formulation primarily acts on *Raktavaha, Swedavaha, Rasavaha* and *Mamsavaha Srotas*. Its *Rakta-shodhana* and *Rakta-prasadana* properties help maintain the normal function of *Raktavaha Srotas,* whereas its *Ushna Veerya* assists in relieving *Srotorodha* within *Swedavaha Srotas.* Improvement in the functions of *Rasavaha* and *Mamsavaha Srotas* may enhance tissue nourishment and support healthy regeneration of the skin.

***Rasayana* and Immunomodulatory Effect**

The presence of *Guggulu(Commiphora wightii), Guduchi(Tinospora cordifolia), Pippali(Piper longum)* and *Ghrita* imparts *Rasayana, Balya* and *Vyadhikshamatva*-enhancing properties to the formulation.

Probable Modern Correlation:

Experimental studies have demonstrated anti-inflammatory and immunomodulatory activities, including inhibition of lipoxygenase activity and downregulation of pro-inflammatory cytokines such as TNF-α and IL-1β.[10] These effects may contribute to the regulation of the abnormal immune response associated with plaque psoriasis and support clinical improvement.

The favourable clinical outcomes observed in this case series, including marked reduction in PASI score and improvement in associated symptoms, may therefore be explained by the combined *Kushtaghna, Tridosha-shamaka, Deepana-Pachana, Rakta-prasadana, Rasayana* and immunomodulatory actions of *Guggulu Tiktaka Ghrita Matra Basti.*

The present study has certain limitations, including a small sample size, absence of a control group, and short follow-up period. Therefore, larger randomized controlled clinical trials with longer follow-up are required to further establish the efficacy and safety of *Guggulu Tiktaka Ghrita Matra Basti* in the management of plaque psoriasis.

CONCLUSION:

The present case series suggests that *Guggulu Tiktaka Ghrita Matra Basti* was associated with favourable clinical outcomes in patients with *Ekakushtha* (plaque psoriasis). Improvement was observed in PASI score and in the major clinical features, including erythema, scaling, induration and itching, along with better quality of life.

The therapy was well tolerated during the study period, and no major adverse events were observed. However, as the findings are based on a small number of patients without a control group, they should be interpreted with caution. Future research involving larger sample sizes, randomized controlled trials and longer follow-up is required to validate these preliminary observations and further establish the therapeutic role of *Guggulu Tiktaka Ghrita Matra Basti* in the management of *Ekakushtha.*

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Consent of patient:

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