Ayurvedic Insights into Managing Vicharchika (Weeping Eczema): A Case Study of a Holistic Healing Journey

¹Dr. Langote Govind Bhanudasrao, ²Dr. Shrikant Vithal Pawar

¹Associate Professor & HOD, Dept. of Panchkarma, Ramrao Patil Ayurved college Purna. ²Associate Professor, Dept. of Panchkarma, Sau Shantadevi Ved Prakash Patil Ayurvedic College Hatta, Basmath, Dist Hingoli.

Abstract-Vicharchika, classified under Kshudra Kustha in Ayurvedic literature, is a skin ailment driven by Dosha imbalance, primarily Kapha dominance. In modern medical terms, it aligns closely with weeping eczema, a form of dermatitis involving inflamed and oozing skin. This clinical case highlights the Ayurvedic treatment of a 42-year-old female patient with chronic weeping eczema, presenting with symptoms such as erythema, itching, swelling, blistering, fluid discharge, and occasional bleeding.Following a comprehensive Ayurvedic protocol, the treatment included herbal medications (Aushadhi), dietary corrections (Pathya), and daily routine modifications (Vihara) aimed at Dosha equilibrium. Over a period of three months, she was administered classical interventions like Prachchhana Karma (bloodletting therapy), alongside internal medications such as Mahamanjishtadi Kwatha, Sarivadyasava, Nimbadi Guggulu, Panchatikta Ghrita Guggulu, and Haridra Khanda. Follow-up photographs supported the clinical recovery. Minimal recurrence was noted during the post-treatment observation period. This case underscores the promising role of Ayurveda in treating chronic skin disorders through natural and individualized approaches.

Keywords- *Dushyas, Vicharchika. Kshudra Kustha, Prachchhana,* herbal medications.

INTRODUCTION

In Ayurveda, *Vicharchika* falls under the category of *Kshudra Kustha*,¹ referring to localized and less severe skin disorders. It is caused by an imbalance in the three Doshas, with a dominant Kapha involvement, and affects several body tissues *(Dushyas)*, such as *Twak* (skin), *Rasa* (plasma), *Rakta* (blood), and *Mamsa* (muscle).² Skin conditions of this nature are also known to spread via contact in many cases.

Weeping eczema, from a modern dermatological perspective, is a chronic condition marked by vesicles that ooze fluid and then crust over. It often appears on the extremities and is accompanied by symptoms such as itching, swelling, flaking, and at times, bleeding³. In Ayurveda text *Kandu* (itching), *Pidika* (pustules), *Bahusrava* (excessive oozing), *Shyavata* (skin discoloration), *Raji* (skin lining or thickening), *Rukshata* (dryness), and *Ruja* (pain). Hetu i.e *Agnimandya*. Chronic dermatitis (more than 1 yr) reveals hyperkeratosis, epidermal acanthosis and a predominantly peri-vascular mononuclear cell infiltration.⁴

This case study reflects the classical Ayurvedic approach to managing Vicharchika, where the emphasis was placed on cleansing therapies, internal medicines, and lifestyle corrections. The patient showed progressive healing, evident through photographic documentation over three months, and the outcome remained stable during follow-up.

CASE REPORT

Patient Profile:

A 42-year-old female, diagnosed with weeping eczema by a modern dermatologist, approached Ayurvedic consultation due to repeated flare-ups of her skin condition. She presented with itchy, red, swollen lesions primarily located on the lower legs near the ankle joints. Additional symptoms included fluid-filled vesicles, skin peeling, fluid exudation, and occasional minor bleeding. The condition had persisted intermittently for nearly four years, with the latest aggravation occurring around three months prior.

General Examination:

- The patient was alert and stable with normal vital signs.
- She reported reduced appetite, irregular digestion, and sleep disturbances.
- Physically, she was moderately built and nutritionally balanced with no systemic complaints.

Local Examination:

- The affected area showed multiple vesicular eruptions and ulcerations with purulent discharge on the left leg.
- There was no known familial or genetic history of similar skin conditions.
- She had no significant past history of major illness or surgery, other than the ongoing skin issue.

TREATMENT STRATEGY AND IMPLEMENTATION (UPDATED MEDICATIONS)

Diagnosis and Clinical Insight:

The patient, a 42-year-old female, exhibited clinical features of *Vicharchika*, including chronic vesicles, itching, rashes and oozing, predominantly on the dorsal ankle region of the left leg. Based on Ayurvedic assessment, the condition showed *Kapha-Vata* predominance with underlying *Pitta* aggravation.



Therapeutic Approach:

- 1. Prachchhana Karma: A type of *Raktamokshana* (bloodletting therapy) to expel vitiated blood, reduce inflammation, and restore *doshic* balance.
- 2. Internal Medications:

S.N.	Medication	Dosage & Administration
1	Mahamanjishtadi Kadha	20 ml two times daily with 20 ml water before meal
2	Sarivadyasava	15 ml twice daily with equal water after meals
3	Nimbadi-Guggulu	2 tablets two times daily after meals with hot water

S.N.	Medication	Dosage & Administration
4	Panchatikta Ghrita Guggulu	1 tablet twice daily after meals
5		5 grams (1 tsp) twice daily with milk or lukewarm water

DISCUSSION OF MEDICATIONS

- 5. Mahamanjishtadi Kwatha
 - A classical herbal decoction with *Manjishta* (Rubia cordifolia) as its base.
 - blood-purifying, skin detoxifying effects and anti-inflammatory,.
 - Particularly effective in chronic skin diseases including eczema, acne, and psoriasis.
- 6. Sarivadyasava
 - A fermented preparation that contains *Sariva* (Hemidesmus indicus) and other cooling herbs.
 - Helps balance *Pitta* and purifies blood, promoting skin health.
 - Aids in reducing burning sensation, itching, and inflammatory conditions.
- 7. Nimbadi Guggulu
 - *Neem*, *Guggulu*, and other antiinflammatory herbs.
 - Potent against skin infections, helps dry up oozing lesions, and reduces itching.
 - Yakrut (Liver) protective.
- 8. Panchatikta Ghrita Guggulu
 - Contains bitter herbs like *Neem*, *Patola*, and *Katutumbi* in ghee base with *Guggulu*.
 - Highly effective in *Tridoshaja* skin conditions, promoting tissue healing and digestion.
 - Rejuvenates skin and clears chronic infections and inflammation.

5. Haridra Khanda

- A turmeric-based formulation blended with sugar and herbs.
- Used as an anti-allergic and mmunemodulator.
- Especially useful in *Kandu* (itching), urticaria, and chronic eczema.

CONCLUSION

This clinical case of *Vicharchika* was managed solely through classical Ayurvedic protocols, emphasizing consistent adherence to *Pathya*-

Apathya (dietary discipline) and therapeutic guidelines. Throughout the treatment period, no other systems of medicine were integrated, ensuring the outcome was purely reflective of Ayurvedic interventions.

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