

कण्डू' प्रतिषेध-- रक्तमोक्षण(सिराव्यध)

Preventive Psoriasis through Blood-Letting

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Abstract—कण्डू - निरुक्ती - कण्डू खर्जुंश्च कण्डूया, रोगविशेष || ^{1,2} - **Itching**
Kandu is a पूर्वरूप (Prodromal sign) of kushtha roga &
described as Sankramaka Vyadhi.^{3,4}

Psoriasis – Itching, It is chronic disorder characterized
by erythematous plaques and silvery scales.

प्रतिषेध - Prevention - It is mentioned in surgical disorders.⁵

Raktamokshan - Therapeutic bloodletting which purifies
D dimer and WBC.⁶

Siravyadha - Main Panchakarma in surgical disorder⁷
and considered as Ardchakitsa.⁸

The study findings suggest that recognizing Kandu with
timely Siravyadha therapy and Internal medications,
Nidanpariwarjan can prevent psoriasis.

Index Terms—Psoriasis, कण्डू, प्रतिषेध, Raktmokshan,
Siravyadha

I. INTRODUCTION

In today's life skin disease have become a major hazard for Mental health more than physical as it disturbs the cosmetic harmony.

Psoriasis is a deadly incapacitating disease which makes a patient mentally handicapped and socially wrecked & in modern medicine it is often related to "skin asthma" but is not mentioned in classical Ayurvedic texts. It is progress through various stages and may later involve joints in form of Psoriatic arthritis. Psoriasis is not described as separate disease entity in classical Ayurvedic texts; however, its clinical features can be correlated with *Kushta* and *Kshudra Kushta*.⁹

Kandu (Itching) is important *Poorvaroop* of skin diseases and main lakshan of kapha dosha. which helps in diagnostic psoriasis in its prodromal stage. Also kandu considered as kapha Pradhana twakdosha. This disease is difficult to treat because of chronicity seasonal variation relapse and side effect of modern drugs used.

The site of disease is skin and which is seat of *Kapha* and *Pita Doshas* with *Twak* and *Rakta dhatu*¹⁰.

So this Case was treated mainly with *Shodhan Chikitsa* (*Panchakarma – Vaman, Raktamokshan, Basti, Swedan*) and *Shaman Chikitsa* (कण्डूघ्न, कुष्ठघ्न गण)¹¹ and *Chyavanprash* 10 mg¹² along with ऋतुचर्या.

II. CASE HISTORY

In this case study a female patient of 49 years old age who was developed small skin lesions over B/L lower limb and back region, with severe itching (कण्डू), erythema and

Patient was taken allopathic treatment but discontinued after 1 year as there was no relief. Psoriatic lesions progressed through various stages and later involve joints, caused psoriatic arthritis. Then patient visited Niramayam Ayurved (Patanjali) Hospital, they diagnosed psoriatic arthritis and gave Ayurvedic medicine and lep (लेप), yoga physiotherapy but there also no relief.

So visited OPD of Shalya-Tantra and came in contact with DR.Reacha Deo. Before starting the treatment investigations done.

Investigations:

CBC – Normal
 LFT – Normal
 KFT – Normal
 Skin clipping test – NAD

III. TREATMENT

The patient was treated with holistic approach including the Panchakarma, Raktamokshana & Pathyapathya as mentioned in table-1. the panchkarma procedures have been done following standard guidelines of Poorvakarma, Pradhankarma And Paschyat Karma (Sansarjan Karma). Before Panchakarma, Deepan and Pachan has been done with Chitrakadi Vati 250 mg tab(two tabs two times a day).Abhyantar Snehana was done with Triphala Ghrita. Atapsevan, Sarvanga Swedana was done by Bashpa Peti Swed (wooden steam box) as per Rugna Bala.

Vaman is followed by Sansarjan Krama as mentioned in table-2.

Table 1: Treatment Protocol

According to Rutucharya	Procedure ¹³	Medicine used
Vasant	Vaman	With Madana phala & Yastimadhu Fant
Grishma	Agnikarma	With Panchdhatu shalakra
Pravrut	Basti	With Dashmula sneha Basti and Niruh basti for 7 days alternate anuvasan and niruh.
Sharad	Raktmokshan 1. Siravyadha Jalaukavcharan	1.20ml Blood at a time by Sira vyadh with 24G ScalpVein (for 3 times at an interval of 30 days)
Rasayan	Chavanprash	10gm two times a day for 30 days (Every six month)

Table 2: Sansarjan Krama after vaman

Day	Morning (1 st Annakala)	Evening (2 nd Annakala)
1	-----	Peya
2	Vilepi	Akrutyush
3	Krutyush	Mansrasa
4	Normal & lite diet	Normal diet

The following Pathya and Apathya were advised during the treatment period.

Pathya

1. Turmeric milk at night 1 glass for 30 days.
2. Hot water steam HS for 15 days.
3. Use of mask and sanitizer.

Apathya

1. Avoid heavy diet
2. Ratrijagaran and Diwaswap
3. Avoid stress

IV. RESULT

The result was assessed based on improvement in the subjective parameters of the patient. Patient was called for follow up per month, it is observed that patient got relief from *Kandu* (itching). Psoriatic patches became faint, and the patient regained appetite. Mentally, the patient felt more confident than before and normal sensation of touch returned. She did not report any form of adverse effects or discomfort during *Panchakarma* therapy. *Rakta Dhatu* and *Pitta Dosha* are predominant in psoriasis. After *Raktamokshana*, the secretion of natural steroids is stimulated, and thereby the body's strength to fight allergic diseases miraculously. Overall, the treatment showed good results. Yet treatment is going on.

V. DISCUSSION

Health as per *Ayurvedic* text is quoted as "one who have equilibrium in *Dosha*, normalcy in Agni, equilibrium in *Dhatu*, *Mala* and other physiological activities, delighted Atma, Mansa, Indriya is considered as healthy (*Swastha*).

To attain this equilibrium and normalcy in the body *Samsodhan* Karma has been explained to detoxify the morbid *Doshas* out of the body.

For such disorders *Raktamokshan* is the line of treatment to expel out the vitiated *Rakta* and *Pitta* henceforth breaking the *Samprapti* (pathophysiology) of the disease.

Raktamokshan Karma - *Siravyadha* on every purnima. and *Jalaukavcharan* repeat after every 15 days was followed by Proper *Rutucharya* and *Rasayan Sevan* which is very much indicated in *Samskritha Avastha* of *Vata* and *Kapha Dosha* and is main *Pitta Dosha*. *Raktamokshan* pacifying the morbid *Pitta* and help *Bhrajak Pitta* to carry out its function normally hence helping the skin lesions to heal.

VI. CONCLUSION

The complete course of Treatment including *Raktamokshana* Followed by Proper *Rutucharya* and *Rasayan sevan* etc. Are very safe and effective methods in management of psoriasis. And it is helpful in preventing the reoccurrence of the disease. *Shodhan* was done as per Ayurvedic text by properly following the *Poorva Karma* and *Paschyat Karma* (*Samsarjan Karma*). This case study reviles the effect of repeated *Shodhan Karma* in psoriasis.

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