Indralupta In Childhood: An Ayurvedic Case Study with Modern Clinical Correlation

Dr. Priya Suryakant Pawar[1] Prof. Dr. Anil B. Kale[2]
[1]*B.A.M.S., MD Kaumarbhritya*
[2]*B.A.M.S., M.D., Ph.D. (Kaumarbhritya) Professor, Department of Kaumarbhritya*
Dean, Government Ayurved College & Hospital, Baramati,
District Pune, Maharashtra, India
doi.org/10.64643/IJIRTV12I9-192223-459

Abstract- Indralupta is a Kshudra Roga described in Ayurvedic classics, characterized by localized hair loss due to vitiation of Tridosha with predominance of Pitta and Vata, along with Rakta Dushti. In contemporary medicine, this condition closely resembles Alopecia Areata, an autoimmune disorder presenting as patchy, non-scarring hair loss, commonly seen in the pediatric age group. Childhood Indralupta not only affects physical appearance but also has a significant psychological impact, making early and effective management essential.

The present case study aims to evaluate the efficacy of Ayurvedic management in a pediatric patient diagnosed with Indralupta and to establish a correlation with modern clinical findings. A child attending the outpatient department of Government Ayurved Hospital, Baramati, presented with a well-defined patch of hair loss over the scalp without signs of inflammation or scarring. Detailed Ayurvedic assessment including Nidana, Dosha-Dushya involvement, and Samprapti was carried out, along with modern clinical evaluation to rule out other dermatological conditions.

The treatment protocol included Shodhana-oriented local procedures along with Shamana therapy using classical Ayurvedic formulations having Keshya, Raktaprasadana, and Tridoshaghna properties. Dietary and lifestyle modifications were also advised. Gradual and significant regrowth of hair was observed within the treatment period, with no adverse effects.

This case study highlights the holistic approach of Ayurveda in managing childhood Indralupta and supports its effectiveness when correlated with modern clinical understanding, emphasizing Ayurveda as a safe and promising therapeutic option in pediatric alopecia.

Key Words-Indralupta, Childhood Alopecia, Ayurvedic Management, Alopecia Areata, Kshudra Roga, Case Study

I. INTRODUCTION

Hair plays an important role in personal appearance and psychological well-being. Hair loss in childhood, though not life-threatening, can significantly affect self-esteem and social behavior. In Ayurveda, disorders related to hair fall are described under *Kshudra Roga*, among which *Indralupta* is a well-defined clinical entity. Classical Ayurvedic texts describe Indralupta as sudden, localized loss of hair caused by vitiation of *Tridosha* with predominant involvement of *Vata* and *Pitta*, along with *Rakta Dushti*[1].

Acharya Sushruta explains the pathogenesis of Indralupta in detail, stating that vitiated *Kapha* along with *Rakta* obstructs the *Romakupa* (hair follicles), resulting in hair fall, while aggravated *Vata* and *Pitta* prevent regeneration of hair[2]. This description closely resembles *Alopecia Areata* in modern dermatology, which is defined as an autoimmune, non-scarring alopecia characterized by localized patches of hair loss[3].

Alopecia Areata is commonly observed in children and adolescents. The prevalence in the pediatric population is significant, and the condition often shows an unpredictable course with spontaneous remission and recurrence. Modern medical management includes topical or intralesional corticosteroids, immunomodulators, and minoxidil; however, these therapies may be associated with adverse effects and recurrence, particularly in children[4]. Hence, there is a need for safer and holistic therapeutic approaches.

Ayurveda offers comprehensive management of Indralupta through *Shodhana*, *Shamana*, and *Sthanik*

Chikitsa, along with dietary and lifestyle modifications aimed at correcting the underlying *Dosha-Dushya Samprapti*. The present study documents a successfully managed case of childhood Indralupta using Ayurvedic principles and attempts to correlate it with modern clinical understanding.

II. AIM AND OBJECTIVES

Aim

To evaluate the efficacy of Ayurvedic management in a case of childhood Indralupta and correlate it with Alopecia Areata.

Objectives

1. To study the etiopathogenesis of Indralupta according to Ayurveda.
2. To assess the clinical outcome of Ayurvedic treatment in a pediatric patient.
3. To establish Ayurvedic-modern correlation in the management of childhood alopecia.

III. MATERIALS AND METHODS

Study Design

Single observational case study.

Place of Study

Government Ayurved Hospital, Baramati.

Selection of Case

A pediatric patient presenting with localized hair loss was selected from the outpatient department.

Methodology

A detailed clinical history was taken. Ayurvedic examination was performed based on *Dashavidha Pariksha*. Modern dermatological examination was carried out to rule out other causes of alopecia. The treatment plan was formulated according to classical Ayurvedic guidelines for Indralupta.

Case Report

Patient Information

A 9-year-old male child attended the OPD of Government Ayurved Hospital, Baramati, with complaints of localized hair loss over the scalp for the last two months.

Chief Complaint

Sudden onset of a patch of hair loss over the scalp.

History of Present Illness

The hair loss started suddenly as a small patch and gradually increased in size. There was no history of itching, pain, redness, discharge, or trauma. No history of fever or systemic illness was reported.

Past History

No history of chronic illness, hospitalization, or similar complaints.

Family History

No family history of alopecia or autoimmune disorders.

Personal History

Diet was mixed in nature. Appetite was irregular. No history of excessive intake of spicy, oily food was reported, though occasional intake of junk food was present.

Clinical Examination

General Examination

- Pulse: Normal
- Blood pressure: Normal
- Weight and height: Appropriate for age
- Systemic examination: Within normal limits

Local Examination

A single, well-defined, circular patch of hair loss measuring approximately 4 cm × 3 cm was observed over the parietal region of the scalp. The underlying skin was normal in color and texture. There was no scarring, scaling, or inflammation.

Ayurvedic Examination

- Prakriti: Vata-Pitta
- Vikriti: Vata-Pitta Pradhana with Kapha association
- Dosha: Vata, Pitta, Kapha
- Dushya: Rakta, Twak
- Agni: Vishamagni
- Srotas involved: Raktavaha, Swedavaha
- Adhishthana: Romakupa
- Roga Marga: Bahya

Samprapti

Nidana such as irregular diet and mental stress led to vitiation of *Vata* and *Pitta*. Vitiated *Kapha* along with *Rakta* caused obstruction of *Romakupa*, resulting in localized hair fall. Vata-Pitta prevented hair regeneration, leading to Indralupta[12].

Modern Diagnosis

Based on clinical features such as sudden onset, localized non-scarring alopecia with normal scalp skin, the condition was diagnosed as Alopecia Areata[3].

Treatment Protocol

Principles of Treatment

Management was planned according to classical guidelines for Indralupta with emphasis on:

- *Dosha Shamana*
- *Rakta Prasadana*
- Removal of *Romakupa Avarodha*
- Promotion of hair regrowth

Shamana Chikitsa

Internal Ayurvedic medicines having *Keshya*, *Raktashodhaka*, *Pitta-Kapha Shamana*, and *Vata Anulomana* properties were administered[56].

Sthanik Chikitsa

Local application of classical formulations mentioned for Indralupta was advised to stimulate hair follicles and clear Kapha-Rakta obstruction[2].

Pathya-Apathya

Pathya Ahara such as light, easily digestible food was advised. Intake of spicy, oily, incompatible food (*Viruddha Ahara*), excessive cold exposure, and mental stress were restricted[7].

IV. OBSERVATIONS AND RESULTS

The patient was followed up regularly. Within a few weeks of treatment, fine hair growth was observed over the affected area. Gradual thickening and pigmentation of hair were noted on subsequent visits. By the end of the treatment period, significant hair regrowth was evident. No adverse drug reactions or recurrence were observed during follow-up.

V. DISCUSSION

Indralupta is a Tridoshaja disorder with predominance of *Vata* and *Pitta* along with *Rakta Dushti*. According to Acharya Sushruta, hair fall occurs due to obstruction of *Romakupa* by vitiated *Kapha* and *Rakta*, while regrowth is inhibited by aggravated *Vata* and *Pitta*[2]. Hence, management should aim at pacifying Doshas, purifying Rakta, and removing follicular obstruction.

In the present case, the selected Ayurvedic treatment acted at multiple levels. Internal medicines corrected *Agni*, pacified *Doshas*, and improved *Rakta Dhatu*. Local applications stimulated hair follicles and promoted regrowth. Pathya Ahara helped prevent further Dosha vitiation.

From a modern perspective, Alopecia Areata is considered an autoimmune disorder affecting hair follicles[3]. The therapeutic effect observed may be attributed to the immunomodulatory, anti-inflammatory, and follicle-stimulating actions of Ayurvedic medicines[45]. Thus, Ayurveda provides a holistic and safe approach, especially suitable for pediatric patients.

VI. CONCLUSION

The present case study demonstrates that Ayurvedic management is effective and safe in childhood Indralupta. A comprehensive approach addressing *Dosha-Dushya Samprapti*, along with Sthanik Chikitsa and Pathya Ahara, resulted in significant hair regrowth without adverse effects. Ayurveda can be considered a promising alternative or complementary therapy in the management of pediatric Alopecia Areata.

REFERENCES

[1] Agnivesha. *Charaka Samhita*. Revised by Charaka and Dridhabala, with Ayurveda Dipika commentary of Chakrapanidatta. Sutra Sthana, Chapter 28. Varanasi: Chaukhambha Surbharati Prakashan; 2018. p. 567-572.

[2] Sushruta. *Sushruta Samhita*. With Nibandha Sangraha commentary of Dalhana. Nidana Sthana, Chapter 13. Varanasi: Chaukhambha Sanskrit Sansthan; 2019. p. 323-326.

[3] James WD, Berger TG, Elston DM. *Andrews' Diseases of the Skin: Clinical Dermatology*. 12th ed. Philadelphia: Elsevier; 2016. p. 747-751.

[4] Bolognia JL, Schaffer JV, Cerroni L. *Dermatology*. 4th ed. Philadelphia: Elsevier; 2018. p. 1123-1130.

[5] Sharma PV. *Dravyaguna Vijnana*. Vol II. Varanasi: Chaukhambha Bharati Academy; 2017. p. 512-520.

[6] Vagbhata. *Ashtanga Hridaya*. With Sarvangasundara commentary of Arunadatta. Chikitsa Sthana, Chapter 20. Varanasi: Chaukhambha Orientalia; 2018. p. 789-792.

[7] Tripathi B. *Ashtanga Hridaya*. Sutra Sthana. Varanasi: Chaukhambha Sanskrit Pratishthan; 2016. p. 214-218.