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CASE REPORT

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Management of Vipadika (Palmoplantar Psoriasis) with Ayurveda - A Case Study

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ABSTRACT

Vipadika is explained under the context of Kshudra Kushta. The symptoms are correlated with palmoplantar psoriasis. Vatakaphadosha predominantly involved in this disease. It is characterized by Panipadasphutana and Teevravedana. Here is a case of 8 year old child with history of cracks in foot with pealing and discoloration, pain, itching and occasional bleeding since 3 years. Patient was treated with Vatakaphahara treatment with Sneha and Sweda and Veshtana Chikitsa for 1 week and Shamana Oushadis for 15 days. Patient had good relief in symptoms.

Key words: Vipadika, Palmoplantar Psoriasis, Kshudra Kushta.

INTRODUCTION

Vipadika is dermatological disorder explained under the context of Kshudra Kushta. According to Charaka, Vata and Kaphadoshas are predominant Doshas involved with symptoms like Panipada Sphutana (Cracks in palms and soles) and Teevra Vedana (severe pain), Vagbhata has also explained similarly with one more symptom as red patches over palm and sole. The symptoms of *Vipadika* are similar to palmoplantar psoriasis, which is long lasting autoimmune disease charectrised by red itching, scaly patches of the palms and soles. There are fissures and bleeding also. The treatment in modern science is not satisfactory with chances of recurrence. Steroids immunomodulators are usually preferred. present case is having a history of 3 years, diagnosed

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as palmoplantar psoriasis treated with steroids, moisturisers and multivitamins with no satisfactory results.

CASE REPORT

A 8 year girl staying in rural area near Belagavi came to OPD with complaints of cracks in both heals with pealing and blackish discoloration, pain, itching and bleeding occasionally since last 3 years.

The patient was diagnosed as plantar psoriasis and was treated with steroids, moisturizer creams and vitamins. The patient had cracks in palms also, by the above treatment the cracks of the palm have been reduced. Even then the patient was not having satisfactory result and approached for Ayurvedic treatment

On examination all the vitals were normal, Hb% was 12, on local examination - the cracks were symmetrical on both the soles, dryness, itching and cracking in both soles. Surface was rough and dry. Skin was dark colored with excessive cracks, blisters were absent, demarcation absent, keratosis absent and scaly plaques absent.

By seeing the Nidanas such as Ruksha and Vataja Ahara Vihara, came to know that - Vata Kapha Prakopa occured leading to Rasa Rakta Dushti and Sthana Samshraya in Pada leading to Sphutana of **ISSN: 2456-3110 CASE REPORT** May-June 2019

Pada and Teevra Vedana. So we planned for Vatakaphahara treatment to the patient.

Treatment

Patient was given Sukumara Ghrita 5ml early morning followed by Sarvanga Abhyanga with Murchita Tila Taila and Nadi Sweda for 7 days. After this Veshtana to the Pada was done with Nalpamarai Taila and Mahamanjishtadi Taila. Patient was discharged after 7 days with continuation of Internal Sukumara Ghrita and application of Nalpamaradi Taila and Mahamanjishtadi Taila. After 1 week during followup there was complete relief of symptoms and treatment was continued for another 15 days by adding Ksheerabala capsule 1 bid.

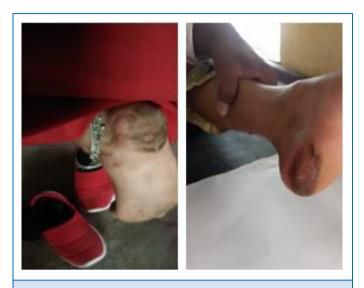
OBSERVATIONS AND RESULTS

SN	Clinical features	Before treatment	After treatment
1.	Fissures	+++	+
2.	Pain	++	No Pain
3.	Bleeding	+	No Bleeding

DISCUSSION

When we came through the case, we saw that there was no oozing or crust formation, hence excluded *Vicharhika*. In *Padadadri* only soles are involved and *Vata* is predominant *Dosha*, hence was excluded. In psoriasis, we can see red scaly plaques, hyper keratotic areas, well demarcation, painful cracking and fissuring which is absent in the case and hence excluded. So we came to the conclusion of diagnosis of *Vipadika* with *Vatakahpa* involvement and *Vatakaphahara* treatment was adopted.

Nalapamaradi Taila has antipruritic and soothing action which helps to promote healing of lesion. It is also antioxidant, which is used in many skin infections. Mahamajishtadi Taila which is used as Varnya, which might have helped the patient which had excessive discoloration of foot.



Photograph 1: 1st visit



Photograph 2: 1st follow-up



Photograph 3: At the time of discharge

ISSN: 2456-3110 CASE REPORT May-June 2019





Photograph 4: 2nd follow-up

CONCLUSION

From this study we can come to the concusion that *Vipadika* can be successfully treated *Vata-Kaphahara Chikitsa*.

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