

AYURVEDIC TREATMENT APPROACHES FOR SHVITRA (VITILIGO): A CASE
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ABSTRACT

Shvitra is a type of kushtha roga (skin disorder) also known as Kilasa. In modern science, it correlates with Vitiligo which is a type of chronic skin disorder causes hypopigmentation of the skin. Shvitra is a condition in which tridosha and tvak, rakta, mamsa and meda are affected. Though it is tridoshaja vikara, it should be treated according to dosha predominant with the principle of treatment involving shodhana (elimination), shamana (palliative), nidana-parivarjana (removal of the causes) and pathya sevana. A 5 years old male patient presented to the outpatient department with white discoloration of the skin on the back and right foot for the last three years. He has taken homeopathic treatment but found no cure. So treatment plan was designed for the patient was treated with Ayurvedic oral medications including, Swayambhuva Guggulu, Syrup lukoskin, Arogya vardhni vati and local application of lukoskin ointment on affected areas of the skin. The restitution of skin colour was determined to be successful with the course of the treatment plan.

KEYWORDS: *Shvitra, viruddha ahara*, vitiligo, pigmentation, bakuchi, prashamana chikitsa.

INTRODUCTION

Kushtha roga^[1] (skin disorders) are characterized by deformity or discoloration of the skin, are broadly described in classical Ayurveda texts. All the Kushtha roga are tridoshaja vikara.^[2] There are 7 maha-kushtha and 11 kshudra kushtha are mentioned according to their dosha predominance.^[3] Shvitra is also called Kilasa classified into 3 types according to dhatu dushti.^[4]

Vitiligo is a chronic disorder which is defined as an acquired cutaneous achromia characterized by milky white cutaneous macules of various sizes and shapes that tends to enlarge peripherally in course of time. The worldwide incidence of vitiligo (leukoderma) is around 0.1–2% and in India it is about 0.5–2.5%.^[5] An analysis of 26 studies from around the world reported the prevalence of vitiligo in up to 2.16% of children.^[6] Vitiligo usually presents itself in childhood or in young adults, approximately half to one third of them develop this condition by 20 years of age and around 25% of them develop before 10 years with a mean age of onset varying between 4 and 5 years.^[7] It spares no age, sex, or race. Many etiological hypothesis have been put forward to explain vitiligo, among which the most compelling one is a combination of genetic and immunologic factors, which interact with each other resulting in an autoimmune melanocyte destruction.

In Ayurveda, vitiligo is correlated with Shvitra. Acharya Charak has told Shvitra is caused by viruddha ahara sevana and papakarma.^[8] Shvitra is caused by vitiation of all the three doshas i.e. vata, pitta and kapha. Shvitra is rakta-pradoshaja vikara and tvakagata roga.^[9] In the case of Shvitra, bhrajaka pitta gets imbalanced and causes depigmentation of skin. Ayurvedic medicine is the best option for balancing of bhrajaka pitta and samavastha of all three dosha.

Childhood vitiligo often causes psychosocial trauma and long lasting effect on the self-esteem of the affected children and their parents, hence an adequate treatment is essential.

MATERIAL AND METHODS

Patient information

A 5-year-old male child presented with complains of white patchy discoloration over back and on right foot for past 3 years. There is no associated complains such as itching or burning sensation over the lesion. There is no history of *Shvitra* in father, mother and other family members. Patient had no history of blood transfusion or drug allergy. He has history of consumption of homeopathic medication for 6 months with no apparent improvement. Hence, he has presented to the OPD no. 25 of (*Kaumarabhritya / Balrog opd*), SSH, IMS, BHU.

Clinical findings**Table 1: General Examination of the patient.**

Weight	19.3 kg
Pulse	90 beats/min
BP	90/70 mm hg
Aahara	Mixed (non-veg once in a week)
Vihara	<i>Divaswapna</i>
Appetite	Decreased
Bowel	1-2 times/day
Micturition	5-6 times/day
Sleep	Sound

Table 2: Systemic examination.

Respiratory System Examination	No added sounds, Trachea Centrally placed
Cardiovascular System Examination	S1 S2 heard normal
Per/Abdomen Examination	Soft, non-tender, no organomegaly

Table 3: Dashavidha Rogi Pareeksha.

<i>Prakriti</i>	<i>Kapha pitta</i>
<i>Vikriti</i>	<i>Pitta pradhana tridosha</i>
<i>Dushya</i>	<i>Rasa rakta mamsa</i>
<i>Sara</i>	<i>Asthisara</i>
<i>Samghanana</i>	<i>Madhyam</i>
<i>Satva</i>	<i>Madhyam</i>
<i>Ahara Shakti</i>	<i>Madhyam</i>
<i>Jarana Shakti</i>	<i>Madhyam</i>
<i>Vyayam Shakti</i>	<i>Madhyam</i>
<i>Satmya</i>	<i>Madhyam</i>
<i>Vaya</i>	<i>Balyavastha</i>
<i>Pramana</i>	<i>Madhyam</i>

back and on right foot measured as L x B 5 x 3 cm and 2 x 1.5 cm. Thus the patient diagnosed as a case of *Shvitra*.

Timeline and therapeutic interventions**The patient was advised**

For External application- Lukoskin ointment (AIMIL PHARMACEUTICALS) 3.5 FTU

Method of application - Apply the ointment from the pigmented area to the non-pigmented area i.e. from outside to inside. Expose the area after application of the ointment to the sun either before 11 a.m. or after 3 p.m., starting from 6 minutes with an increment period of 2-3 minutes per week till it reaches 30 minutes of exposure time.

Diagnostic assessment

The patient was observed under sunlight and seen white patchy discoloration without itching or discharge over

Table 4: Oral medicines given to the patient.

Drug	Dose	Timings
<i>Swayambhuva Guggulu (DHOOTPAPESHWAR)</i>	1 tab	12hourly with lukewarm water
<i>Drop lukoskin (AIMIL PHARMACEUTICALS)</i>	0.5ml	12hourly
<i>Aarogyavardhini vati</i>	1 tab	12hourly with lukewarm water

Pathya – light and wholesome food, old cereals, *mudga*, *patola*, and leafy vegetables.

Apathya –Avoid acidic (sour) foods, citrus fruit (viz. Lemon, apple, mango, grapes, tomato, amla, pickles, chilli, curd, lassi, whey, fine flour (maida), non-veg diet and fast foods, beverages and cold drinks.

Follow-up and outcomes: Patient was regularly followed up after interval of 1 month for next 6 months. The restoration of skin pigmentation was gradual. After one and half month of sun exposure, a brownish patch started spreading to surrounding areas. After six months of the follow up, normalization of skin colour on affected area continued, and changes in patches were very significant. There were no side effects during the whole treatment, and no new patch has been noticed during the follow-up of 6 months.

RESULTS AND OBSERVATION

Ayurveda medicines of the treatment plan showed a beneficial effect in white discoloration of skin. After usage of prescribed medications, hypopigmentation of skin slowly started to reduce and normal skin tone developed in 3 month and medicines were further continued for another 3 months.

Figures of affected area of the body before and after treatment

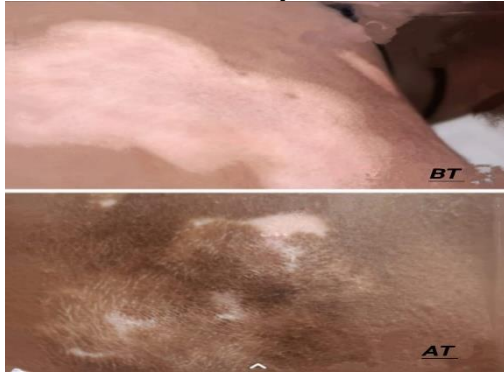


Fig. 1. Back of the patient.

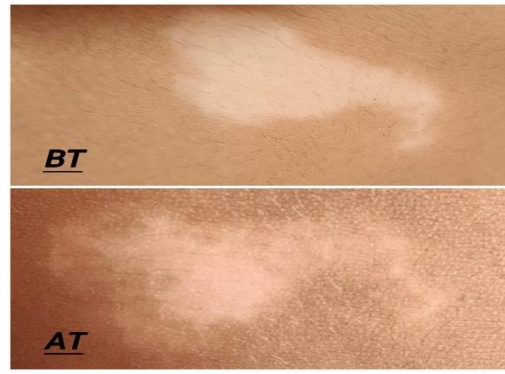


Fig. 2. Right foot of the patient.

DISCUSSION

Swayambhuva Guggulu^[10] – It's a combination of 21 herbo-mineral drugs indicated for management of *Kushtha*, *Shvitra* like skin disorders. Bakuchi, Karanja, Guduchi, Nimba, and Haridra are among the ingredients that lower vitiated rakta dosha, which is the primary cause of Kushtha (skin problems). Suvarnamakshika, Kutaja, Nagarmotha, and Shilajatu are all potent pittashamaks that also aid in lowering vitiated rakta dosha. Gomootra vishesh shodhit guggulu, in conjunction with Shilajatu, improves efficiency, lowers free radical activity, and prevents oxidative stress and damage. Psoralen, isopsoralen, bakuchiol, psoralidin, bakuchalcone, bavachinin, flavones, volatile oils, and lipids are the primary constituents of *Psoralea corylifolia*, also known as bakuchi. Because of their melanogenic effect, these substances are used to treat vitiligo.^[11]

Lukoskin Ointment is a research product of the Defence Research and Development Organisation (DRDO) that is curated using 7 potent herbs.^[12] It is helpful in the management of skin conditions and in promoting melanin synthesis. This ointment is enriched with *Bal Jodi*, *Bakuchi*, *Vish Naag*, *Arka*, *Kapikacchu*, *Kumari*, *Chameli Tail*, *Til Tail*, as active ingredients. The ointment has seven herbal ingredients having properties such as skin photo-sensitiser, antiblister, anti-irritation, anti-septic, wound healing and copper supplementing properties. *Bakuchi* oil is present in Lukoskin ointment. The bioactive compound "Psoralen" in this has an ability to stimulate the development of melanin and is used to treat leucoderma.^[13] Its use in the management of Vitiligo is recommended in the Ayurveda texts, so it is also known as *shvitraghni*. The drug appears to have a purely local action with a specific effect on the arterioles of the sub capillary plexuses, which gets dilated so that the plasma is increased in this area. The skin becomes red and the melanoblasts (pigment-forming cells) are stimulated. The photo conjunction involves thymine dimer adducts on the opposite strands of DNA. Psoralen^[14] has been found to intercalate into DNA, where they form mono-and di-adducts in the presence of long wavelength ultraviolet light and thus are used in the treatment of hypo-pigmented lesions of the skin, such as Leucoderma. In *Shvitra*, vitiated *doshas* attack the skin

of body and produce white discoloration. Oral medication works as *raktashodhak* and they control vitiated *doshas* and activate metabolic process. It Reduces irritation and formation of patches, Activates melanin synthesis, Boosts the immune system and Exerts photosensitisation.

Arogya vardhni vati: The main ingredients of the *Arogyavardhini Vati* are *katuki*, *tamra bhasma* (incinerated copper), *guggulu*, and *triphala*, which have the qualities of *lekhana* (weight reduction), *dipana* (enhancing digestion and metabolic function), and *medadoshahara* (correcting lipid breakdown and transportation). On the other hand, *lasuna* (garlic) has the qualities of *avarana-hara* (removal of blockage in microchannels) and *rasayana*.^[15]

Lucoskin syrup^[16]: The constituents of this oral medication including *Naag*, *Bakuchi*, *Krishna Tulsi*, *Mandookparni*, and *Kanuach*—all aid in the production of melanin, enhance blister healing, modulate immune, replenish antioxidants, and lessen stress.

Sadhya - asadhyata of *Shvitra*^[17] – If the lesions are thin, pale coloured and is not present for a long time it should consider as curable. Whereas, when lesions fuse to each other, body hairs becomes red and the disease is more than one year old it become incurable.

CONCLUSION

The disease like *Shvitra* has a lot of impact on a person's activities and outgoings in day to day life due to its cosmetic value. Vitiligo is not contagious or life-threatening but this auto-immune condition can be life-altering. *Shvitra* is *kricchrasadhya vyadhi* so it is difficult to cure but we can control that type of disease through *nidana parivarjana* and *pathya sevana* along with balanced implications of *shodhana* (purification) and *prashamana* (lenitive) *chikitsa*. No adverse effect was observed during or after treatment. In contrast to the child who was affected by *Shvitra*, the patient felt great satisfaction and a sense of confidence. As a result of the positive outcomes, careful application of the same approach can be used in *Shvitra* cases in future.

DECLARATION OF PATIENT CONSENT: Authors certify that they have obtained a patient consent form, where the caregiver has given her consent for reporting the case along with the images and other clinical information in the journal. The caregiver understands that her name and initials will not be published and due efforts will be made to conceal her identity, but anonymity cannot be guaranteed.

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