



Research Article

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ROLE OF LEECH THERAPY IN VICHARCHIKA WITH SPECIAL REFERENCE TO PALMO-PLANTAR PSORIASIS (PPP): CASE STUDY

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ABSTRACT

In present era, Skin diseases run very chronic and the recurrence rate is very high. As per Ayurveda, Skin Diseases can be directly homologous to *Rakta Pradoshaja Vikara*. *Vicharchika* is one among them as it categorized under *Khushra Khusth Roga* & *Kshudra Roga*. *Vicharchika*, in Ayurvedic text is a disease predominance of *Rakta Dosha*. It can be correlated with Palmo-Plantar Psoriasis in modern point of view. It is characterized by thickened, scaly skin with hyper pigmentation. A 24-year male came to OPD of Department of Panchakarma, Rishikul campus, Haridwar with chief complaints of cracking & hyper pigmentation of skin of bilateral palms, with thickening of skin for 4 years. Nature of complain was on & off. Initially, he was advised *Nimba Kwath Prakshalan* for 15 days but the condition didn't get any improvement. So, he was advised for *Shodhan* therapy for locally vitiated *Doshas* i.e Leech therapy 3 sittings with gap of 15 days. After 45 days, complete remission of *Vicharchika* was observed. From this clinical case, we can come to the conclusion that Leech therapy is very safe and effective therapy for *Rakta Pradoshaja Vikara*.

Key Words: *Rakta Pradoshaja Vikara*, Leech Therapy, *Vicharchika***INTRODUCTION**

Ayurveda is the unique science with traditional system of medicine. *Ayurveda* aims to sustain the health of healthy volunteers and to treat/ manage the diseased¹. Palmo-plantar psoriasis is a chronic skin disease which mainly affects palms and soles. Lesions are well defined, erythematous, plaque. Sometimes, the involvement is diffuse. When the massive silvery white or yellowish scales which in contrast to the lesions get spread to other parts of the body, they become difficult to remove². Especially Palmo-Plantar psoriasis is painful fissures and bleeding which are more common. Palmo-Plantar psoriasis (PPP) accounts for 3-4% of all psoriasis cases, produces significant functional and social disability³. In conditions like these Tumor Growth Factor α and type II interferon γ mediators causes rapid proliferation and maturation of epidermal cells due to increase in the proliferating cell compartment (Basal and suprabasal epidermis) this process then followed by process of keratinization and cornification which manifests as shortened basal cells and epidermal cell cycle. This process of Keratinization and cornification completed in 1.5 days as compare to its normal cell cycle which is of 28-30 days. There is also faster maturation and shedding of epidermal cells in 4 days (normal, 26-28 days)⁴ Palmo-Plantar psoriasis can be correlated with *Vicharchika*, is one of the types of the *Kushthroga* (~skin disorder)⁵. It is included in *Ksudrakushtha* with *Pitta Dosha* involvement⁶ and it is characterized by *Rajyo-ati kandu-artirujah, sarukksha gatreshu Vicharchikayam*⁷.

CASE PRESENTATION

A 24-year-old male patient came to Panchakarma OPD of Rishikul Campus, Uttarakhand Ayurved University, Haridwar

(10.05.2017) with the complaints of, cracking & hyper pigmentation of skin of bilateral palms, with thickening of skin for 4 years (2013). Patient also has been suffering with sleeplessness, constipation, physical and psychological stress. Patient was diagnosed case of Palmo-Plantar Psoriasis (PPP) since 2013 and was on allopathic medicines but didn't get sustain relief. The skin was scaly, itchy, and slightly reddish with hardening. The lesions of both palms and soles were gradually progressive and the onset was insidious. At the time of examination, patient had severe itching and scaling on bilateral palms. The lesions were bilaterally symmetrical and over the palms plaques mainly present central palm (Figure 1). The disease was symptomatic causing severe irritation, itching, pain. Psoriasis was not present at other sites except palms. Web spaces were involved and sparing of skin over creases of palms is noted. Hyper pigmentation was observed on bilateral palms. The condition was progressive and due to that patient was anxious.

Diagnosis, Assessment and Treatment

Patient was diagnosed case of 'Palmo-plantar psoriasis' and according to *Ayurveda*, on the basis of signs and symptoms diagnosis of '*Vicharchika*' is made.

Table 1: Advised Treatment Protocol

Name of procedure	Site	Duration	Visit
Leech Therapy	Bilateral palm	1 hour	Ist Visit
Leech Therapy	Bilateral palm	Do	IInd Visit
Leech Therapy	Bilateral palm	Do	IIIrd Visit

Table 2: Pre and Post Treatment Observation

S.No	Lakshana (sign & symptoms)	Before Treatment	After Leech Therapy	After Treatment
1	Scaling of Skin	+++	++	-
2	Erthyematous	+++	+	-
3	Hardening of Skin	+++	++	+
4	Disturbed Sleep	+	-	-
5	Pain	+++	++	-



Figure 1: Before Treatment



Figure 2: Ist day After Therapy



Figure 3: On 15th Day



Figure 4: On 30th Day



Figure 5: On 45th Day

DISCUSSION

Patient was diagnosed as *Vicharchika*. As the chronicity of the disease of the patient was very high, and he was advised for undergoing Leech Therapy as a part of *Shodhana Karma*. So, Leech Therapy was selected and then started palliative treatment to avoid the recurrence of the disease.

As per Classical Text, *Vicharchika* is the disease caused due to vitiation of *Pitta Dosha*, *Acharya Sushruta* has mentioned the indications of Leech in *Rakta Doshaja* Disorders where the condition of skin disease is impassable⁸. Hence, in the present case *Leech* Therapy as a curative and *Shodhana* Therapy was used. Prior to Leech Therapy, Local fomentation through *Nadi Swedana* was applied to the affected part of the bilateral palms, then as quoted in *Sushruta Samhita* about Leech Therapy, emesis was done of leeches through *Turmeric* and a gentle prick was done (*Shastra pada*) on the affected part, that made easy for leech to stick⁹.

After sucking blood for about 1 hour, leech lost its grip with sprinkling of turmeric, the amount of sucked blood in the procedure varies from 10 ml to 15 ml per sitting. After *Shodhana* Therapy, patient was advised to take *Arogyvardhani Vati* 2 tablets (250 mg approx.) twice a day for 1 month.

CONCLUSION

After analysis of data and facts, we can say that the Leech Therapy as a part of *Shodhana* Therapy, best acts on case study of plantar palmar psoriasis (~*Vicharchika*) and gives permanent relief to the patient. There were no adverse effects found during the *Ayurvedic* medication.

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