



Case Study

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AYURVEDIC MANAGEMENT OF VISARPA WITH SPECIAL REFERENCE TO HERPES ZOSTER: A CASE STUDY

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ABSTRACT

All ages, from neonates to elderly persons, suffer from skin disorders. Though skin lesions are visible, they have cosmetic importance also. The pathophysiology and management of skin disorders are explained in Ayurved Samhitas as Raktavaha srotasa dushtijanya vikara and its chikitsa. Among them, 'Visarpa' is one of the most typical acute skin disorders. It is explained in detail apart from 'Kushta' vyadhi in all the Ayurvedic Samhitas. According to Ayurveda, visarpansheel (spreading), sukshma pidaka (tiny rash) with shoola (pain), kandu (itching), and daah (burning) are present in Visarpa. The signs and symptoms of Visarpa are correlated with a modern skin disorder called Herpes zoster. Herpes zoster is an actively transmitting viral disease causing localized painful skin rashes, blisters, and burning sensations. A case of 23 years old male who came with complaints of shirogurav (heaviness of head) and jwarprachiti (mild fever), angamarda (body ache), visarpansheel sukshma pidaka with kandu, daah for two days. The patient was treated with raktamokshan by jalauka and shaman chikitsa. He was advised for pathyakar aahar (dietary modification) and vihar (lifestyle modification). He got relief within seven days.

Keywords: Visarp, Herpes Zoster, Raktadushtijanya vikar, Raktmokshana, Shaman.

INTRODUCTION

The skin is the boundary between an organism and its environment. Its principal function is that of protection. There are several skin diseases whose cause is unknown but may prove to be due to filterable viruses. Currently, the aetiology of vesicular diseases like herpes simplex, herpes zoster, variola, varicella, hand foot mouth disease and tumours, warts and molluscum contagiosum are known to be so produced¹.

According to Ayurveda, skin is one of the 'Adhithana of Gyanendriyas' described in Ayurvedic texts.² In Ayurved Samhitas, the raktavahastrotasa dushtijanya vikara (disorders) are explained³. Among these vikaras, some are related to Twacha (skin). Chikitsa sutra (management) of raktavahasrotodushti vikar is also explained in Samhitas. Based on Dosha's predominance, there are seven types of Visarpa, as per Charaka acharya.

According to Ayurveda Aashu- anunnata shopha, visarpansheel sukshma pidaka with Vedana, Daha, Jwara, Nature of Sphotas /Pidika (vesicles) are so specific that it is described as Agnidagdhavat⁴ (with intense burning sensation).

So active management is needed in such conditions. Virechana, raktamokshana, i.e., shodhan chikitsa and Shaman chikitsa, are explained in Ayurved Samhitas for raktadushijanya vikara⁵.

Herpes Zoster is an actively transmitting viral disease. Herpes zoster (shingles) is an outbreak of vesicles preceded by pain and enlargement of neighbouring lymph glands in the distribution of a sensory nerve on one side of the body associated with inflammatory changes in the corresponding poster root ganglion⁶. The disease usually lasts about two weeks, and recovery is complete. The possibility of intractable neuralgia following zoster in older adults should be remembered⁷.

The case described was managed well with Ayurvedic medications, pathyakar aahar and vihar.

Aims: To study the effect of Aam pachan and raktamokshan by Jalaukavacharan (Bloodletting) in the management of Visarpa.

Objectives: To study the effect of Aam pachan in the management of Visarpa and to study the effect of raktamokshan by Jalaukavacharan in the management of Visarpa.

DISEASE REVIEW

Ayurvedic Aspect

Visarpa is a severe disorder spreading to various body parts very quickly. Parisarpa means disorder spreads all over the body, which is the characteristic feature of Visarpa.

- 1) Vyakhya (Definition) - sarvataha parisarpanaat Visarpa⁸.
- 2) Hetu (Causes) - Lavan, katu, amla ushnaadi sevan, chhardivega pratighaatat, sharatkaal prabhaavat shonitdushti
- 3) Saptako dooshyasangrah (causative factors) - shonit, lasika, twacha, mansa, vaat, pitta, kapha
- 4) Purvaroop (Prodromal symptoms) - shirashool, jwara, aalasya
- 5) Roop (signs & symptoms) - Aashu- anunnatashopha, Sphotas /Pidaka - Agnidagdhatvat, Visarpansheel, Vedana, Daha, Jwara
- 6) Prakaar (Types) - According to dosha – 7, Ek doshaj - 3, dwidoshaj - 3, sannipaataj -1
According to sthana – 2, abhyantar, bahya

Modern Aspect

The term Herpes is derived from the Greek meaning “to creep”. The human herpes simplex virus consists of –

1. herpes simplex virus type 1 (HSV-1)
2. herpes simplex virus type 2 (HSV-2).

The virus causes various mucocutaneous infections and produces both primary and recurrent infections. Transmission of HSV infection most frequently occurs through close contact with a person who is shedding the virus at the peripheral site, a mucosal surface, in genital or oral secretions⁹.

The word “shingles” is derived from the Latin “singu-lus”, a girdle that refers to the segmental arrangement of the eruption. Zoster affects 20% of the general population during their lifetime, especially the elderly. More than two-thirds of the reported cases occur in individuals over 50 years of age, and less than 10% occur in those under the age of 20.

Herpes Zoster is an active transmitting viral disease causing localized painful skin rashes, blisters with a burning sensation

The first symptoms are usually pain, and paraesthesia preceding the eruption for several days and varies from external itching, tingling, burning or lancinating pain. The rashes are nearly always unilateral. It begins as closely grouped macula, and papules, which rapidly become vesicular in 12-24 hours and then pustules in 2-3 days as a part of complication in the case of herpes zoster.¹⁰

Case study

A case of 23 years old male.

Day of consultation – 4/05/2022

Consent was taken before participation in the study.

Pradhan ruja (Chief complaints)

Visarpansheel sukshma raktavarni Pidaka dakshintha (right side) on prushta (scapular region), ura (chest) manya (neck), kapol, karnpaschaat (posterior) pradesh with kandu, shool, sparshasahatwa (tenderness), Daah.
Karnpaschaat Pradeshi - vrana, alpa kathin (hard) shoph (swelling) with sparshasahatwa

Anushangik ruja (Related symptoms)

Shirogaurav, jwarprachiti

angamarda, agnimandya (anorexia)

Nidra alpata, khandit (disturbed sleep) Since three days

Present History: 6 hours travelling by bus at noon five days before the onset of symptoms. Aatapsevana (sunlight exposure)

Past History: Recurrently suffered from Upper respiratory tract infection since childhood. He used to take Allopathy/Ayurvedic medicines since then for Upper respiratory tract infections.

Family History: Not significant.

Personal History

Diet - Mixed, very spicy, junk food one week before the onset of symptoms.

Sleep – Disturbed 2-3 days after the onset of symptoms.

Habits - Tea 2-3 times a day.

Parikshana (Examination)

Prakruti - Vaat pittaj

Ashtavidha Parikshan

Nadi: 86 /min

Mala: Vibandha, for 2-3 days

Mutra: 4-5 times a day

Jivha: Saam (coated)

Shabda: Aatur

sparsha: Alpa ushna

Drik: Vyakul

Aakriti: Madhyam

Sthanik (Local) Examination

Pidaka - in clusters, reddish, shiny blisters, wound posterior to the right ear, with slough formation

Palpation – posterior to right ear - lymph node was found swollen, painful and tender.

Systemic Examination

Temperature: 99⁰ F

Weight: 77Kg

BP: 110/80 mmHg

RS – AEBE clear B/L

CVS – S1- S2 heard, no added sounds

CNS – conscious, well-oriented, superficial reflexes, normal

GIT – P/A – soft, non-tender

Samprapti Ghatak (Pathophysiological Factors)

Dosha – Pitta, Rakta, Kapha, Vata

Dushya – Rasa, Rakta, Mamsa, Twak, Lasika, Sweda

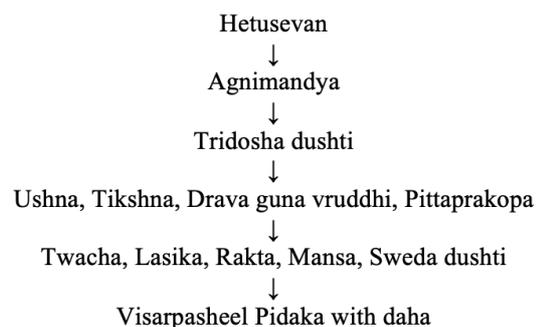
Agni – Mand

Dushta Srotasa- Praanvaha, Annvaha, Udakvaha, Rasaavaha, Raktavaha, Swedavaha, Mamsavaha, Purishvaha, Manovaha

Srotodushti lakshana – Sanga, Paschat Vimarga-gaman

Vyaktasthana – Ura, manya, kapol, Prushtha and karna paschat pradesh

Samprapti (Pathophysiology of Disease)



Vyadhivinishchaya (Diagnosis) – Visarpa (Herpes zoster)

Chikitsa (Treatment)

Abhyantar - Shaman

Mahasudarshan ghan vati 2-2 with ushnodaka given during kapha and vyankal

Sukshma triphala ghan vati 2-2 with ushnodaka given during kapha and vyankal

Kamdudha vati 2-2 with jal given during pittakal

Chandan, Musta, Ushir Siddha jalpan given during Trishnavega kal

Shodhan – Sthanik - Raktamokshan – Jalaukavcharan

Bahiparimarjan (External) chikitsa

Lepa - Chandan with jal paste lepa 2-3 times

Snana - Siddha jal snan - chandan, triphala ,musta, usheer, nimb Pratisaaran (application) - Chandanbala lakshadi tail at lepa sthana for dryness if necessary

Pathyaaphya - Laghu pathyakar aahar (moong, old rice, wheat /jwar roti) given during Kshudhavega kal. Laja, black raisins 10-20.

Apathya (dietary and lifestyle restriction) - lavan katu amla ushnaadi sevan, Oily substances, non-veg, egg, fermented food, tea and coffee, night awakening (Ratrijagaran), divaswap (daytime sleeping)

OBSERVATIONS AND RESULTS

On 1st day

Symptoms seen- Dakshin karna paschaat pradeshi granthivat shoph, Shwet 2-3 pidaka with kandu and daah. Vrana (wound) at karna paschat Pradesh (due to itching at night.), Shirogaurav, Jwar prachiti.

Treatment is given - Mahasudarshan ghan vati 2-2 with ushnodaka given during kapha and vyankal.

The basic chikitsa for raktadushtijanya vikara are Virechana, Raktamokshana and Shaman. According to this Mrudu langhan was given.

Assessing Kshudhavega, laghu pathyakar aahar was given.

On the 2nd day

Symptoms seen - Karn paschaat pradeshi granthivat shoph with sparshasahatva (In the morning), Visarpansheel Shweta (whitish), snigdha (shiny), painful pidaka at manya, ura, prushta, kapol, karna paschat pradeshi with daah, kandu. Vrana (wound) at karna paschat Pradesh, Jwar prachiti and khandit nidra, Shirogaurav.

Treatment is given - Sukshma triphala ghan vati 2-2 with ushnodaka given during kapha and vyankal. Mahasudarshan ghan vati 2-2 with ushnodaka given during kapha and vyankal.

After two days of treatment and pathya, the symptoms of Shirogaurav, Kandu and Jwar were relieved. Malanuloman was observed.

On the 3rd day

Symptoms seen - visarpansheel (spreading) painful pidaka, daah, aaraktavarn vrana Sparshasahatwa, Shirshool, Sharir Shoola (right side), Mukhapak.

Treatment is given - Sthanik (local) raktamokshana by jalauka.

After raktamokshana, it was observed that Daha, Shoola, and Sparshasahatwa around Vrana subsided rapidly.

Abhyantar chikitsa given as Sukshma triphala ghan vati 2-2 with ushnodaka given during kapha and vyankal, Kamdudha vati 2-2 with jal given during pittakal, Chandan, Musta, Ushir siddha jalpan given during trishnavega kal.

On the 5th day

Symptoms seen - visarpansheel (spreading) painful pidaka, daah, aaraktavarn vrana, Sparshasahatwa, Shirshool, Mukhapak.

It was observed that the patient got relief from Shir shool, daah, sparshasahatva, spreading of pidaka, Karn paschaat shoph, pain subsided. Granulation observed at vran.

Treatment given - Mahasudarshan ghan vati was discontinued, and treatment continued with Kamdudha vati 2-2 with jal given in pittakal, Sukshma triphala 2-2 with ushnodak given in vyankal. Chandan, Musta, Ushir siddha jalpan given in trushnavega kal. Bahirparimarjan chikitsa (on location) - Pidaka Sthani Chandan lepa was applied 2-3 times a day.

On the 7th day

It was observed that, the spreading of pidaka stopped, Pidaka changed into shyav varna. Daah, shool of pidaka subsided.

Treatment given - Then the dose of internal medicine was reduced as Sukshmatriphala vati 1-1, Kamdudha vati 1-1, Siddha jal snan with chandan, triphala, musta, usheer, nimb churna, Laghu pathyakar aahar, with regular water, was advised. After feeling dryness at lepa sthana, it was advised to apply Chandanbala lakshadi tail on that site.

On the 10th day

It is observed that the patient got more relief from all symptoms. The patient was advised to come for a follow-up after 15 days.

Treatment given - Only Siddha jal snan was continued for Grishma ritu. Effects of therapy (Subjective and objective assessment) showed excellent results.

DISCUSSION

The patient was treated on an OPD basis. Visarpa is a Bahudoshaj Vyadhi. Along with three, Dosha's Rakta is also a main supporting factor of vitiation. The vitiated dosha causing the Visarpa were in kaphasthana (ura, manya, shir etc.). But due to Grishma ritu and pitta pradhanya, only mrudu langhana was given for agnivaradhana. Virechana, raktamokshana and shaman chikitsa are the basic principles of chikitsa explained in Ayurved Samhitas for raktadushtijanya vikara.

So Raktamokshana was advised as it purifies the vitiated Raktadosha. Following raktamokshan, daha, shoola sparshasahatwa, shoph and vrana were relieved rapidly.

In shaman chikitsa, Mahasudarshan ghan vati of Jwara adhikar was given as its ingredients are tikta rasa and aampachak. Due to aampachan, patients got relief from jwar, shirogaurav, kandu, and malavibandha.

Before Jalaukavacharan



Jalaukavacharan



After Jalaukavacharan



Sukshma triphaal vati – aampaachak, kledaghna, tridosh shamak
Kamdudha vati – Pittashamak, jwaraghna, daahshamak
Siddha jal pan - Chandan, Usheera, Musta have Pittashamak
property due to Sheeta veerya and that reduced perspiration.

The affected part of the body is applied with a paste of Chandan lepa, which has the property of sheet veerya and ruksha guna. Dravyas of siddhajalsnan have the property of reducing kleda. Shaman chikitsa like lepa and Siddha jal snan, Kamuadha vati was given according to signs and symptoms of Visarpa. The rash was initially erythematous before blisters formation, which increased in size over several days. Characteristically the inflammation remained in one dermatome and was unilateral. It may take up to 3-4 weeks to resolve. But according to the above ayurvedic management, the patient got relief within seven days from the start of treatment.

CONCLUSION

In the case stated above, all signs and symptoms like Visarpansheel Sukshma raktavarni Pidaka with kandu, shool, sparshasahatwa, Daah, and vrana are markedly diminished in seven days. The treatment of Visarpa raktmokshan by Jalauka (Shodhan chikitsa) & Aam pachan (Shaman chikitsa) is

significantly effective, followed by a proper pathya-apathya regimen.

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