Management of Vipadika through Shodhana and Shamana: A Case Study

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ABSTRACT

Kushta is considered as one among the Ashta Mahagadas in classics. Vipadika Kushta is mentioned as one among the eleven Kshudra kushta, with the predominance of Vata Kapha dosha

Vipadika is characterized by Sphutanam (cracking) either in palms or soles or in both with Teevra Vedana1. Vata due to its khara and ruksha guna causes symptoms like Sphutana (cracks) and Teevra Vedana (severe pain). Kapha by its snigdha and guru guna causes Kandu (severe itching) and thickness of the skin. Vipadika is correlated with palmoplantar psoriasis which is a chronic skin disease mainly affects palms and sole region.

In present case report a patient with complaint of dryness, scaling, itching and cracking of both soles associated with pain since 2 years, was treated with Shodana (Virechana) and Shamana Aushadhi's, has shown a significant result. Shodhana helps remove the root cause of the disease and prevents recurrence.

KEYWORDS: Vipadika, Kushta, Pani pada sputana, Tivra vedana, Shodhana, psoriasis

How to cite this paper: M. Kavita | Rajesh Sugur | Khandade Manisha Naganath "Management of Vipadika through Shodhana and Shamana: A Case

Study" Published in International Journal of Trend in Scientific Research and Development (ijtsrd), ISSN: 2456-6470, Volume-9 | Issue-2, April 2025, pp.302-307,



URL:

www.ijtsrd.com/papers/ijtsrd76326.pdf

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INTRODUCTION

Ayurveda includes all the skin disorders under the broad name Kushta. There are 18 types of Kushta described in Ayurveda Samhitas. Out of which 11 are Kshudra Kushta and 7 mahakusta. Vipadika is one among the kshudra kusta.

In samhitas we don't find a particular nidana mentioned for vipadika, but as it is one among the kshudra kustha, the general nidana of kustha can be considered. nidanas like viruddhahara sevana, apathya ahara and vihara, manasika bhavas, santarpanottha vikara, as a sankramika roga and indulging in sinful acts.

Different Acharyas have given different presentations signs and symptoms of Vipadika. According to Sushtruta Acharya, Itching, burning sensation and pain is present especially on Pada (sole) are the symptoms of Vipadika². Pani-pada sphutana and teevra vedana are the roopa mentioned by Acharya

Charaka³, but Vagbhata along with these has mentioned other symptoms like alpa kandu, raga, pidaka in the symptms of vipadika⁴.

Vipadika is correlated with palmo-plantar psoriasis, in which deep painful, symmetrical cracks on palm and soles, partially or completely dry, red, and thickened often with fissures are formed. Acharya Sushruta, the fourth skin layer is called Tamara. Its dushti occurs in vipadika and Acharya Charka also says fourth skin layers involved in kushtha. In modern science, epidermal thickens, and blood vessels in the dermis widen.

The reported prevalence of Psoriasis in countries ranges between 0.09% and 11.4% making psoriasis a serious global problem.

The patients of Vipadika have a greater negative impact on their personal and social life they have

extreme difficulties in daily activities, self-care challenges, and mobility.

In the present case report a patient with complaint of dryness, scaling, itching and cracking of both soles associated with pain since 2 years. Patient was treated with Virechana karma and This has shown a significant result.

Case Report

A 50 years old female patient was admitted at Taranath Government Ayurvedic Medical college and Hospital Ballari on 07/9/2022 in Panchakarma Dept. bearing IPD No.13288/3844 Reported with dryness, scaling, itching and cracking of both soles associated with pain since 2 years

> Chief complaint: Dryness, scaling, itching and cracking of both the soles since 2 years.

History of present illness: The patient was normal 2 years back. Gradually developed symptoms like dryness, scaling, itching and cracking in both soles associated with pain since 2 years gradually pain increased with itching sensation in the soles. The condition worsens during winter season where even bleeding from cracked regions is seen. Pain is said to be so severe such that the patient cannot walk. Patient took treatment from contemporary and other allied medicines for 2 years, but recurrence was seen on stopping of medication. In the last 3 months she is not under any medication and was admitted here for better relief.

Past History

K/c/o T2 DM on medication since 1 year K/c/o HTN on medication since 8 months

Treatment history

Previously patient was locally applied clobetasol ointment.

Family history

Not significant.

Menstrual and Obstetric History

Married, G2 P2A0L2D0 Menopause 5 years back

ON EXAMINATION

Personal history

> Appetite: Moderate

> Bowel: Previously -irregular, two days once, since a year- regular, once/day

> Micturition: Micturition was normal with frequency of 4 to 5 times in day & 1-2 times at night.

> Sleep: Sound > Food: Mixed diet

General examination

➤ Appearance: Normal ➤ Built: Moderate

Nourishment: Moderate

Pallor: Absent > Icterus: Absent Oedema: Absent Cyanosis: Absent

Vital data

➤ Pulse: 80 /Min ➤ BP: 120/90 MmHg

Respiratory Rate: 18/Min

➤ Weight: 64kg

Skin examination

> Site - both soles

➤ Distribution- Symmetrical (both soles)

> Dryness, itching and cracking of both the soles is seen and blackish discolouration on both soles.

> surface was rough, dry and margin was irregular.

Dasha vidha pareeksha

Patient had Vata Kaphja prakriti with Madhyama Sara, Madhyama Samhanana (Moderate built). Pramana was having Madhyama, patient having no allergy to any food & drug (Madhyama Satmya), Madhyama Vyayama Shakti, Aahara Shakti Madhyama.

Astavidha pareeksha

Nadi: 84/min, Regular, Hamsa Gati Nadi

Mala: baddha Mala Pravritti (once in 2 days)

Mutra: 4-5 times in day & 1-2 times in night

Jihva: liptata present

Drika:Prakrita

Sabda: Prakrita

Sparsh: Ruksha

Aakruti: Madhyama

Nidana Panchaka

Nidana: In samhitas we don't find a particular nidana mentioned for vipadika, but as it is one among the kshudra kustha, the general nidana of kustha can be considered Katu, Snighdha, Guru, Abhishyandi Ahara, mala vegadharana, divaswapna,

Poorva-Roopa: parushya, kharatva, kandu as purvarupa of vipadika,

Due to various nidanas there is mainly vata vriddhi followed by kapha, parushyata or kharata may occur even before the manifestation of cracks and also due to excessive dryness, there will be a tendency for itching so these can be considered as the purvaroopa of vipadika

Roopa: cracks in the sole are due to the vitiated vata dosha, which causes rukshata of the twak and

produces pain. There is a mild itching sensation which is due to vitiated kapha dosha.

SAMPRAPTI: The involvement of the dosha in the samprapti can be assessed by the laxanas exhibited. The laxanas mentioned by Charakacharya are pani, pada sphutana, teevra vedana which shows that there is vitiation of vata dosa and kapha. Dosha dushya sammurchana at twak, rakta and mamsa. sthana samshraya in pada leads to vipadika.

Acharya Bhavamishra has explained the samprapti elaborately as the prakupita doshas do dushana of twak, mamsa dhatu and take sthana samshraya at pada pradesha and produce sphutana in pada

Samprapti Ghatak

Dosha: Vata-Kapha dominant

Dushya: Rasa (Twaka), Rakta, Mamsa, Lasika

Adhisthan: Twaka

Srotas: Rasavaha, Raktavaha, Mamsavaha

Srotodushti Prakar: Sanga, Vimarga-gamana

Agni: Vishamagni

Udbhavsthana: Aamashaya-samutattha

Rogamarga: Bahya

Vyadhi Swabhav: Chirkari

Sadhya-asadhyatva: sukhasadhya

Vyadhi Swabhav: chirakari

Differential Diagnosis as per Ayurveda Vipadika and padadari

Vipadika (Palmo-Plantar Psoriasis) can be differentiate from Padadari as per Doshik dominance, symptom, cause and affected areas. Vipadika caused by Vata-Kapha where Padadari is due to only Vata. Ruja (pain), Srava (discharge), Kandu (itching) are seen in Vipadika where only Ruja (pain) seen in Padadari. Both hands and feet are affected in Vipadika where only the foot is affected by Padadari.

Vipadika and Vaipadika

Vipadika is a Vata Nanatmaja Roga whereas Vaipadika is a Kshudra Kushta.

Vipadika is a vata vyadhi of nanatmaja type when it presents with purely vata predominant symptoms, caused by only vata vitiation, caused by exposure to vata aggravating factors with cracks and fissures manifesting only in the pada i.e. feet associated with mild to moderate pain and would respond to vata vyadhi chikitsa.

Vaipadika is a kshudra kushta when it presents with vata and kapha symptoms, caused by dual vitiation of both vata kapha doshas, caused by exposure to etiological factors of kushta or vata-kapha aggravating factors, with cracks and fissures manifesting in both pani - hands and pada - feet associated with severe pain and would typically respond to kushta chikitsa.

Treatment given

- 1. Classical Virechana
- 2. Shamananga snehapana with panchatitka ghrita
- 3. Shamana oushadhi

Virechana karma:

Depana pachana: Chitrakadi vati 2 tid B.F for 3 days

Snehapana: Panchatiktaka guggulu Ghrita in arohana krama for 5 days

No. of days	Dose	Time of administration	Time of digestion
1	20	7:40am	2pm
2	40	7:30 am	2:30pm
3	60	7:45 am	3pm
4	80	7:45 am	3pm
5	100	7:40 am	4pm

Sneha Jiryamana Lakshanas	Day-1	Day-2	Day-3	Day-4	Day-5
Siroruja				+	+
Bhrama				+	
Nisthiva					+
Murcha				+	+
Sada	+	+	+	+	+
Arati					
Klama		+	+		+
Trishna	+	+	+	+	+

International Journal of Trend in Scientific Research and Development @ www.ijtsrd.com eISSN: 2456-6470

Sneha Siddhi lakshana	Day-1	Day-2	Day-3	Day-4	Day-5
Vataanulomana			+	+	+
Agnidipti				+	+
Varchasnighata			+	+	+
Mardhavata					+
Snighadanghata				+	+
Glani					
Laghavam anganan					
Adastasnehadasrshana				+	+
Snehaudvega					+

Vishramakala: for 3 days

Sarvanga Abhanga with Marichyadi taila.

Baspa sweda

PRADANA KARMA-VIRECHANA KARMA:

Virechana yoga name: Trivrut lehya Matra: 80gm Sevanakala: 8:30 am BP- 120/80mmHg pulse: 72bpm

Total vega: 14 vegas

_	Suddhi prakara	Madhyama
7	Vegiki	14
	Antiki	Kapha anta

Samsarjana krama for 5 days

Shamananga Snehapana: with panchatiktaka guggulu ghrita for 30days

Shamana oushadhi (internal medication)

Medicine	Dose	Duration
Kaisora guggulu	125 mg Twice daily after food	/ 15days
Gandhaka rasayana	Twice daily, after food	15days
Khadira arista	10ml twice a day, after food	15days

Assessment criteria Subjective criteria

Symptoms	Grade 0	Grade 1	Grade 2	Grade 3
Scaling	Absent	Mild	Moderate	Severe
Itching	Absent	Mild	Moderate	Severe
Fissure	Absent	Mild	Moderate	Severe
Pain	Absent	Mild	Moderate	Severe

RESULTS

S.no	Clinical features	Before Treatment	After Treatment
1	Scaling	3	1
2	Itching	2	0
3	Fissure	3	1
4	Pain	3	0



Fig 1. Before Treatment



Fig 2. After Treatment

DISCUSSION

Kushta is Tridoshajanya vikara, Udbhava sthana (origin) of Kushta is Amashaya. Initially Doshas are getting lodged in Twak (Skin) & Shakhas (Extremities). Then Doshas gets lodges in deeper Dhatus (dushya).

By nature, Kushta is difficult to cure disease, so it is called 'Dushchikitsya' but by the application of shodhana therapy, cure of the diseases becomes easier due to removal of the root cause, hence shodhana has great importance in Bahudosha avastha.

Among the shodhana, virechana karma is planned as the accumulation of doshas predominantly seen in adhobhaga. virechana karma is one of the prime purificatory procedures, which will act on Tridhosha⁵ Mainly on pitta pradhana vyadhi and has got specific action on vata and kapha also,

Deepana and Pachana drugs should be taken before to snehapana to aid with Ama pachana. For the Snehapana, Panchatikta ghrita was taken. The ingredients of Panchatikta Ghrita include Nimba⁶,Patola⁷,vyaghri⁸, Guduchi⁹,vasa¹⁰, haritaki¹¹,vibhitaki¹²,amalaka¹³,ghee and guggulu etc most of are kushtaghna and raktaprasadaka properties¹⁴ The drugs possess Ushna, Tikshna, Vyavayi, Vikashi, Katu, Tikta rasatmaka and Katu vipaka. It was observed that the action of drugs was mainly due to properties of these drugs which have Deepan, Pachana, Amapachaka, Strotoshodhaka,

Raktaprasadan, Raktashodhaka, Kandughna, Kushthaghna and Varnya. So panchatikta ghrita¹⁵ is best in skin disease

(Ghrita has lipophilic action which helps to carry drugs to the target organs, it enters to its cellular level and it maintains the normal texture of skin).

The blockage in Srotas is removed by Sarvanga Abhayanga and Swedana, which further brings the vitiated Dosha from Shakha to Kostha

For the purpose of Sarvanga Abhyanga or Bahyasnehana (external oleation) the Marichyaditaila is used. The most of Dravyas of Marichyaditaila are having properties like Katu, Tikta, Kashaya Rasa and Ushna Virya which does the Shamana of Kapha and Vata Dosha. Its Snighdha Guna reduces the Rukshatva, Kharatva and Parushata. It has properties like Raktashodhana, Kushtaghna and Kandughna.

Shamana sneha should be administered when the doshas are in paripakwa avastha, "paripakweshu dosheshu sarpihi panam yathaamrutam". Ashtang Sangraha and Hridayam advised mrudu or laghu bhojan prior night of shamana snehapana. Because his previous food should digest completely and should feel hunger (bubhukshita) and it is administered without food(ananna). Hemadri states that Shamana Snehana normalizes the aggravated dosha without expelling and disturbing the normal dosha. For this patient after virechana karma, 1 month shamanaga snehapana with pancha tikta guggulu ghrita about 20 ml administered followed by shamanoushadi are given for 15days.

CONCLUSION

This report shows that ayurvedic intervention is effective in vipadika treatment by doing samprapti vighatana.

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