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CASE REPORT OPEN ACCESS

# PALMOPLANTAR KERATODERMA- AN AYURVEDA APPROACH PRASHANTH JAIN<sup>1\*</sup>, RAMYASHREE A S<sup>2</sup>, GEETHA B. MARKANDE<sup>3</sup>

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## **ABSTRACT:**

Skin diseases are a major health problem affecting a high proportion of the population in India. Palmoplantar keratoderma is one of the common disorders of keratinization, it is characterized by a diffuse or focal thickening of the stratum corneum of the palms and soles. All the skin diseases in Ayurveda are broadly classified under the umbrella of *Kushta*. *Vipadika* is one among the *Kshudra kushta*, characterized by *Sphutana*(Cracking) and *Teevra Vedana* (severe pain) in *Pani-pada* (either in palms or soles or in both). In the present case-report a patient c/o cracked and dry lessions over both the palms and feet associated with severe itching since 10 months, was treated with *Avipattikara choorna*, *guggulu tiktaka gritha*, Atrisor cream, *Kaishora guggulu* and *Gandhaka rasayana* respectively. After treatment for 3 months there was complete remission in the symptoms and there is no recurrence till date. From the current case report, it can be inferred that Palmoplantar keratoderma can be successfully treated with the appropriate Ayurveda medications.

Keywords- Vipadika, Palmoplantar keratoderma, Kshudra kushta

#### **INTRODUCTION**

Skin is the largest sense organ and it is made up of several different types of cells and its main purpose is to protect the inside of the body from the environment. The skin also plays a role in Immunologic surveillance, sensory perception, control of insensible fluid loss, and homeostasis in general. Diseases of the skin not only affects the patient physically but also disturbs mental and social health of the patient [1].

Palmoplantar Keratodermas are a diverse group of Dermatological conditions characterised by the thickening of palms and soles because of excessive keratinization[2] . They have been classified as either hereditary or acquired and are distinguished from each other on the basis of mode of inheritance, presence transgrediens (defined as contiguous extension of hyperkeratosis beyond the palmar and/or plantar skin), co-morbidities with symptoms and extent of epidermal involvement, namely diffuse, focal and punctat [3].

In Ayurveda almost all the skin disorders are explained under *kushta* and classified as *Mahakushta* and *Kshudra kushta*, *vipadika* is one among them. Different *acharyas* have given different presentations of signs & symptoms of *vipadika*. Acc to *Ashtanga hridaya*, *Panipadasphutana* (cracks over palms and soles), *teevra vedana* (Intense pain), *manda kandu* (mild itching) and *saraga pidaka* (red coloured macules) are the symptoms of *vipadika* [4].

Acharya charaka mentions cracks and severe pain are the symptoms of *vipadika*<sup>[5]</sup>.

Itching, burning sensation and pain is present especially on *pada* are the symptoms of *vipadika* according to *Acharva Sushrutha* <sup>[6]</sup>.

Commonly elicited *nidanas* for the development of *kushta* are consumption of *virudha ahara*, *drava snigdh*,, *guru bhojana*, intake of food in *ajeerna avastha*, *diwaswapna* and *mithyopachara* of *panchakarmas* etc. All the 3 doshas gets vitiated in a person who indulges in these kind of practices and the vitiated *doshas* further causes vitiation of *twak* (skin) , *raktha*, *mamsa* and *lasika* and ends up in manifestation of *kushta*.

In this attempt, a patient presenting with symptoms of Acquired Palmoplantar Keratoderma was managed with Ayurvedic principles.

#### **CASE REPORT:**

#### **Chief complaint:**

A 63 year old female attended general OPD, Alva's Ayurveda medical college and hospital, Vidyagiri, Moodubidire with the complaints of cracked and dry lessions over both the palms and feet, pain in the foot since 10 months. Associated with severe itching in both the soles and palms since 2 months also c/o constipation since 2 months.

#### **History of present illness:**

A female patient aged 63 years, was a agricultural worker, she was apparently normal 10 months back. As she was a farmhand, she noticed craking in both the heels and palms due

to the h/o contact with the herbs and crops in the field.

Gradually after few days she noticed dry lesions in both the palms and feet and developed itching, for which she didn't go for medical assistance. She used to apply coconut oil and saline soaks for the same and the symptoms subsided, she continued her work. but thereafter further worsening of symptoms on exposure to fields.

Then she consulted folklore practitioner, Folklore medications were not known. Even after a month of medications there was no relief found and the dry lesions was present all the time in both the palms and on the dorsal region of foot, gradually she started noticing increased thickness of the skin over both the soles and developed severe itching and pain. Then she approached an Allopathy hospital, there they prescribed topical ointments and oral medications, but the condition doesn't subside. Later she developed constipation, itching and pain got increased in the affected region since 2 months. From the last one week condition got aggravated, so she consulted our hospital for further management.

#### Integumentary system examination:

#### Tvak Pareeksha - assessment of skin:

#### On Inspection

Varna/colour- Shyava / blackish

Size - 2-5mm

Shape- Round uniform thickening of palms and soles.

# Location, distribution and arrangement of lesions

Location- Palmar and plantar region of both the palms and feet.

Distribution- symmetrical and generalized

Arrangement – grouped

Surface- is rough and dry

Margin-irregular

#### Configuration of skin lesion-

Diffuse extensive hyperkeratosis of palmar and plantar surface

#### Type of skin lesion-

#### **Primary lesions**

Vaivarnya- macule/patch Present

Sookshma pidaka- papule Present

Udvrtta pidaka-hyperkeratotic plaques

Present

Granthi/nodule- Absent

Varathi dashta samsthana shotha/ wheal-

Absent

Sphotal vesicle- Absent

Visphota/bullae- Absent

Putimamsa pidaka/ pustule- Absent

#### **Secondary lesions**

Grushta vrana/ erosion- Absent

Vrana/ulcer - Absent

Daari / fissure - Present

Sthira cipitika/crust - Absent

Shakala/ scale - Absent

Charmakhya/ lichenification - Absent

Kshaya/atrophy - Absent

Rajyo ati kandu /excoriation - Present

Vruna vasthu/scar - Absent

Neelika, mashaka / nevus - Absent

Pidakal comedo - Absent

Bahya krimi pidaka/ burrow of scabies- Absent

Sirajala/telangiectasia - Absent

#### On palpation-

Sparsha/texture- Rooksha, khara

Temperature- Normal

Sensory symptoms- Toda / pain in both the

soles

Deformity- NAD

Odour/ srava/ krimi etc - NAD

#### Nakha pareeksha

Colour - pink

Shape - Flat and concave

Lesions - Absent

Nail bed tenderness - Absent

Swelling- Absent

Redness - Absent

#### Assessment criteria-

Improvement was assessed on the basis of percentage relief observed in the presenting complaints. Grading criteria being followed in the institute was adopted to assess the effectiveness of the therapy.

# Grading criteria-

Table no.2: Grading criteria for Sphutana (Cracks)

Lakshana	Grading
No cracks	0
Cracks present in	1
pada(foot) alone	
Cracks present in	2
pani(hands) alone	
Mild cracks present in	3
both <i>pani</i> and <i>pada</i>	

Moderate cracks	4
present in both <i>pani</i> and	
pada	
Severe cracks present	5
in both <i>pani</i> and <i>pada</i>	

Table no.3- Grading criteria for Vedana (Pain)

Lakshana	Grading
No Pain	0
Pain while walking	1
Pain during rest	2
Pain after touching	3
Severe pain without	4
touching	

Table no.4: Kandu (Itching)

Lakshana	Grading
No itching	0
Mild itching	1
Moderate frequent	2
itching	
Severe itching which	3
cause irritation to the	
skin	

## **INTERVENTION**

The following (Table no. 5) treatment given for 3 months-

Table no.5: Treatment plan – Patient was treated on a OPD basis-

Drug	Dose		
Avipathikara choorna	10 gm along with		
	warm water as		
	anupana was		
	prescribed at bedtime		

Guggulu tiktaka gritha	2tsp – morning empty	
	stomach OD	
Atrisor cream	E/A for twice a day	
Kaishora guggulu <sup>9</sup>	1 tid A/F	
Gandaka rasayana-	1 tid A/F	

Table	no.6-	changes	in	clinical	symptoms
before	and a	fter treatn	nen	t	

Ass. criteria	ВТ	AT
Sphutana	5	0
(Cracks)		
Vedana (Pain)	4	0
Kandu (Itching)	3	0



**Image 1: Before Treatment** 

## **DISCUSSION**

All skin disorders are piita pradhana tridoshaja vikara with rakta being important dushya involved. So the line of treatment should be targeted to remove dushitha pitta from the body and shuddhi of rakta dhatu. Dosha dooshya assessment is key in planning the treatment protocol of any type of kushta. Patient had fissures on her palms and soles and itching due to vitiation of vata and kapha respectively. The treatment was given in accordance with predominant vitiation of these doshas.

Primarly as shamana chikitsa including Guggulutiktaka gritha, Kaishora guggulu & Gandhaka rasayana and Atrisor cream was given for external application.

Guggulu tiktaka gritha contains tikta rasa pradhana dravyas. Tikta rasa is agnidipaka

Image 2: After Treatment

and it alleviates *ama*, the *agni* helps in maintaining the normal stage of *dhatwagni*, so that the *dhathus* will be in equilibrium state [7].

As Gugguluthiktaka gritha is tiktha pradhana, kaphahara, kushtaghna and rakthaprasadaka. Tiktha rasa itself is ideal for pitta and raktha vikaras. As a shamana sneha, Guggulutikthaka gritha is a good option for vata kapha pradhana kushta especially vipadika kushta.

Kaishora guggulu is specifically indicated in Vataraktha, vrana and kushta and also it has antiallergic, antibacterial and blood purifying properties.<sup>[8]</sup>

Kushta by nature is chronic lingering disease so to counteract chronic diseases variety of Rasayana yogas explained in Ayurveda literature. Gandhaka rasayana is one such

yoga having a wide range of therapeutic properties as well as prophylactic activity and it also acts as a Rasayana [9]. It is extensively used in different diseases like Kushta, kasa, shwasa, kshaya etc. Variety of researches have proved antifungal and antimicrobial activity of the yoga. In the present case this yoga helped in alleviating itching and helped in preventing reoccurrence.

Avipattikara choorna prepared from trikatu, trijaatam, musta, vidangam, triphala, trivrut ,vida lavana & sharkara is useful in tackling ama at the level of koshta nad dhatwagni .[10]

Atrisor is a patent Ayurveda formulation manufactured by Atrimed pharma. Atrimed atrisor topical –dry skin is a unique topical product which contains *jivanti, manjishta, haridra, shwetha kutaja, kera taila , tuvaraka taila*, offering quick relief from inflammation , itching and irritation associated with dry itchy lessions <sup>[11]</sup>. It acts as- Anti-bacterial, anti – inflammatory and blood purifier.

## **Declaration of patient consent**

The authors confirm that they have acquired a patient consent form, in which the patient has granted permission for the publication of the case, including accompanying images and other clinical details, in the journal. The patient acknowledges that their name and initials will not be disclosed, and sincere attempts will be undertaken to safeguard their identity. However, complete anonymity cannot be assured.

# CONCLUSION

In the present case, kushta nidanas like viruddhahara sevana, adhyashana, ati mamsa sevana are the viprakushta hetus exposed by the patient. In this case study the patient's symptoms were assessed before and after the treatment, significant improvement was noticed in the form of reduction of thickness and dry lessions, itching and complete remission of the symptoms was found after 3 months course of Ayurvedic treatment. Therefore it can be concluded that while treating any kind of kushta, due consideration is given to dosha, dushya which can yield the positive result.

#### **REFERENCES**

- Sunitha G et al. Vipadika: A case report. J Biol Sci Opin 2018;6(3): 40-43. Available from: http://dx.doi.org/10.7897/2321-6328.06380
- Andrews' Diseases of the skin. Clinical Dermatology. In: Andrews', Editor, William D James, Drik M Elston, Timothy G Berger, 11<sup>th</sup> edition, 2010;207-10.
- Patel S, Zirwas M, English JC 3rd. Acquired palmoplantar keratoderma. Am J Clin Dermatol. 2007;8(1):1-11. doi: 10.2165/00128071-200708010-00001. PMID: 17298101. Available from:

# https://pubmed.ncbi.nlm.nih.gov/17298101/

- Brahmanand Tripathi (editor). Commentary:
   Nirmala Hindi commentary of shrimadvagbhata
   on Ashtanga Hridaya, Nidana sthana, chapter
   14, verse no 23, 2<sup>nd</sup> edition; Varanasi;
   Choulkambha Orientalia; 2012: 530
- Acharya Vidyadhar Shukla, Ravi Datta
   Tripathi(editor).Commentary: Vaidyamanorama

Hindi Commentary of Agnivesha on Charaka Samhitha of charaka, Chikitsa Sthana, chapter 7, verse no 22, Varanasi: Chaukhamba Sanskrit Prathishthan: Vol 2:184.

- Anant Ram Sharma(editor). Commentary: Sushruthavimarshini Hindi commentary on Sushrutha Samhitha of Maharshi Sushrutha, Nidana Sthana, chapter 1, verse no 5-13; Varanasi; Chaukamba Surbharati Prakashan: 496.
- Harishastri paradkar (editor). Commentary: Sarvangasundara commenatary on Ashtanga Hridaya of Vaghbhat, Chikitsa sthana, chapter 21, verse no 57, 726. 7<sup>th</sup> edition; Choukamaba Orientalia; 1982: 23.

- Lather A, Gupta V, Bansal P, Sahu M. An Ayurvedic polyherbal formulations of Kaishora guggulu a review 2011, Journal of IJPBA.28.jan.2018, 2(1), 497-503.
- Shetty P, Kedukodi P, Kamath S. et.al. Gandhaka rasayana: possible role as a modulator of fibroblast cell function in wound healing. Int J Health Sci Res. 2020; 10(6):36-45.
- Govind Das(editor) Bhaishajya Ratnavali, chapter 56, verse no 25-29, 3<sup>rd</sup> Edition Reprint, Varanasi; Chaukambha Prakashan; Varanasi; 2013: 922.
- http://onlineayurvedaworld.com/atrisor-topical-50gm-atrimed-discount-10 date 03-01--i92020 time
   14.30

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