

Case Report



Ayurvedic approach to managing *Kitibha Kushta* (Guttate Psoriasis): A case study

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ABSTRACT:

Introduction: In Ayurveda, *Kitibha Kushta*, a kind of *Kshudra Kushta*, is comparable to Guttate Psoriasis in contemporary dermatology. It represents a chronic skin condition caused by *Tridosha* vitiation. Standard treatments are generally of little utility, whereas Ayurvedic treatment seeks to re-establish *Dosha* balance, *Agni* correction, and *Dhatu* purification for long-term control.

Clinical Findings : A 36 year-old female visited OPD of KLE Shri BMK Ayurveda hospital OPD no 03 on 6th May 2025, complaints of *tvak vaivarnya*, which was *mahavastu* over *urdhwa shaaka*, *adha shaka*, *keshamoola* and *udara*. These symptoms were gradual in onset later associated with *kandu*, *raaga* and *kina khara sparsha* distributed all over body. The patient received *snehapana* with *panchatiktaka guggulu ghrita* followed by *Virechana* with *trivrut leha* and *Shamanoushadhi* for *Rakta pradoshaja vikara* and *Vata kapha Shamana*.

Intervention: Ayurvedic treatment included *Deepana-Pachana* (strengthening of the stomach), *Snehapana* (oleation), *Virechana* (purging), and *Shamana Chikitsa* (palliative treatment). **Outcome:** Clinical parameters were graded on a standard gradation scale pre and post-treatment. *Madhyama Shuddhi* was experienced by the patient during *Virechana* and enhanced psychological well-being. **Conclusion:** This case reflects the efficacy of Ayurvedic management in chronic dermatoses. The combination of *Shodhana* and *Shamana* was behind long-term relief due to removal of the cause by *dosha* pacification, *Agni* improvement, and *Dhatu* cleansing. It was tolerated well and produced a remarkable clinical improvement in *Kitibha Kushta*.

KEYWORDS: *Kitibha kushta*, *Snehapana*, *Veerechana*, *Shaman*, *Case report*.

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1. INTRODUCTION

Significant numbers of dermatological disorders have been described under *Kushta*. The word *Kushta* means “*Kushnati sarvam vapuhu iti Kushta*” - Kushta destroys twak, disfigures the body, or makes one's skin appear shameful or unattractive. [1] According to *Acharya Charaka*, it is classified among the *Ashta Mahagada*, indicating its intricacy and treatment difficulties. *Kushta* is categorized into two types: *Kshudra Kushta* (minor skin diseases) and *Maha Kushta* (major skin diseases), encompassing a wide range of dermatological conditions. [2] *Kitibha Kushta*, a type of *Kshudra Kushta*, is characterized by symptoms such as rough texture (*Kharasparsha*), dark discoloration (*Shyava*), dry lesions (*Rukshapidika*), itching (*Kandu*), and scaling (*Kina*). [3] According to Ayurveda, the human body is fundamentally composed of **Dosha, Dhatu, and Mala**. Any imbalance or disturbance (*Dusti*) in these components leads to disease (*Vikara*). When the **Doshas become vitiated and localize in the skin**, they cause discoloration and other skin changes, resulting in a condition known as ***Kushtha*** (a broad term for skin disorders). [4] *Kitibha Kushtha* is described by *Acharya Charaka* as a type of ***Raktapradoshaja Vikara*** (disorder arising from vitiated blood), primarily caused by the aggravation of ***Vata and Kapha Doshas***. Its characteristic symptoms include ***Shyava Varna*** (dark brown or blackish skin discoloration), ***Kina Khara Sparsha*** (rough texture to the touch), ***Parushata*** (dryness), ***Ruksha Pidika*** (dry, rough skin eruptions), and ***Kandu*** (itching). [5] In Ayurveda, the skin is known as ***‘Twacha’*** or ***‘Charma’***. The word *Twacha* comes from

the root *Twach Samvarne*, which means “The covering or protective layer of the body” Ayurvedic literature classifies all skin disorders under the broad category of ***Kushta***. As stated in the *Amarakosa*, *Kushta* not only damages the skin but can also progressively affect other parts of the body. [6]

2. CASE REPORT:

After visiting the outpatient department of KLE Shri B M K Ayurveda Hospital, a 36-year-old woman who had appeared normal for the previous 20 years developed *tvak vikara*, which was *mahavastu over Urdhwa shaakha, Adha shaakha, Keshamoola*, and *udara*. The onset of these symptoms was gradual, and they were later linked to the body's distribution of *Kandu, Raaga* and *Kina Khara sparshata*. She's a low-income housewife who later received allopathic treatment, which included topical steroids, antibiotics, and antihistamines. She came to our hospital, however, because there was little to no relief. She did not have a history of hypertension or diabetes mellitus. For ten years, she had a history of Portal hypertension.

Personal History: Diet: There was too much Guru *Ahara* (heavy food), *Dadhi* (curd), *Mamsa Sevana* (meat), *Viruddha Ahara* (incompatible food), *Amla, Katu, Tikta ahara sevana, Chinta* and *Shoka*.

Clinical Findings: Because of her current condition, the patient displayed severe depression. Circular skin lesions with silvery scale-like patches were found on the scalp, hands, abdomen, trunk, and upper and lower limbs during a local examination. These lesions were scaly, dry, round, and rough, and they were accompanied by severe itching and blood discharge. The

candle grease sign and Koebner's phenomenon were both positive, and the distribution of the lesions was symmetrical.

Diagnostic assessment- Based on the clinical findings, diagnosis was established as Guttate Psoriasis as per modern science and lakshana like *Shyava Varna, Kina Khara Sparsha* etc., the case was diagnosed as *Kitibha Khushta*.

3. INTERVENTION & TIMELINE

Table 2: Line of treatment: Deepana Pachana Shodana & Shamana

06-05-2025 to 07-05-2025	<i>Chitrakadi Vati</i> <i>Agnitundi vati</i>	1-1-1 b/food
08-05-2025 to 11-05-2025	<i>Snehapana</i> with <i>Panchatiktaguggulu Ghrita</i> [7] DAY 01– 30ml ; DAY 02 – 60ml ; DAY 03 – 100ml ; DAY 04 – 120ml	<i>Ganji</i> when felt hungry, Night - <i>Kichadi</i>
12-05-2025	<i>Sarvanga Abhyanga</i> with <i>Karanja</i> [8] and <i>Nimba taila</i> followed by <i>Bashpa sweda</i> .	Diet: Morning and Afternoon - Rava idli / rice rasam ; Night : Dal kichadi
13-05-2025	<i>Sarvanga Abhyanga</i> with <i>Karanja</i> and <i>Nimba taila</i> followed by <i>Bashpa sweda</i> .	Diet: Morning and Afternoon - Rava idli / rice rasam ; Night : Dal kichadi
14-05-2025	<i>Sarvanga Abhyanga</i> with <i>Karanja</i> and <i>Nimba taila</i> followed by <i>Bashpa sweda</i> .; <i>Virechana</i> with <i>Trivruth leha</i> – 30g and <i>Avipattikara choorna</i> 10gm & 5days <i>samsarjana krama</i> advised	Taken <i>Ganji</i> once felt hungry.
<i>Shamanoushadi</i>		
Medicine	Dose	Duration
<i>Maha manjisthadi Kashaya</i> [9]	15ml -15ml-15ml After food	60 days
<i>Cap Grab</i> [10]	1-1-1 After food	30 days
<i>Tab Kaishora guggul</i> [11]	2-2-2 After food	60 days
<i>Gandarva hastadi erandataila</i> [12]	0-0-15ml at night	15 days
777 oil [13]	External application	30 days
<i>Cap Psorakot</i> [14]	1-0-1 After food	30 days

The patient experienced **16 Vegas** during *Virechana Karma*, indicating a *Madhyama Shuddhi* (moderate purification). Following the procedure, a **five-day**

Table 1: Laboratory Investigations:

S No	Investigations	Before Treatment	After Treatment
1.	Hb	9.9gm%	12.2
2.	TC	11,900/cu mm	6,400
3.	ESR	100mm/hr	30mm/hr
4.	CRP	8.3%	6.4%

Samsarjana Karma regimen was prescribed, with **two Annakalas** (meals) per day. The *Samsarjana Karma* protocol included a progressive dietary regimen

consisting of ***Peya*** (thin gruel), ***Vilepi*** (thick gruel), ***Yusha*** (light soup), and ***Krushara*** (soft rice preparation)

over five days, which was thoroughly explained to the patient.

Table 3: Assessment of Clinical Features Based on Gradation System

S. No	Parameter	Before Treatment	After Treatment
1. Shyava – Discolouration of skin	Mild Brownish Discolouration	+	+
	Moderate Brownish discolouration	++	
	Severe Brownish Discolouration	+++	
2. Twak rookshata – Dryness of skin	Faint line seen by scrubbing with nail	+	++
	Tingling with words written by nail on skin	++	
	Severe <i>Rukshata</i> leading to <i>Kandu</i> and crack formation	+++	
3. Parushatwam – Hardness of skin	Mild hardness of lesion	+	+
	Moderate hardness of lesion	++	
	Very thick lesions	+++	
4. Kinakara Sparsha – Roughness of skin	Mild rough lesions on touch	+	+
	Moderate rough lesions on touch	++	
	Severe rough lesions on touch with scaling	+++	
5. Kandu - Itching	Mild / occasional localized itching which is tolerable	+	+
	Moderate itching	++	
	Very severe itching disturbing sleep	+++	

4. FOLLOW UP AND OUTCOMES: The Patient was instructed for follow up on a regular basis after Virechana and the changes were evaluated. There was a significant improvement in symptoms such as dryness of

the skin, roughness of the skin, discolouration and pruritus. Patient can now move around freely without any discomfort and join social gathering

Figure- 01



Figure- 01: Images of before and after treatment

5. DISCUSSION:

The Utilization of *Ayurvedic* treatment used in this instance started with *Deepana-Pachana* to digest *Ama* and spark *Jatharagni*. This was followed by *Snehapana* with *Panchatikta Guggulu Ghrita*. After undergoing *Virechana Karma*, the patient experienced *Madhyama Shuddhi*, which enabled *Dosha Nirharana* through *Adhogati* and systemic cleansing. After treatment, there was a noticeable clinical improvement, as shown by figure 01 and decrease in all symptoms from Grade 3 to Grade 1.

Action of Virechana [15]: Due to their strength, the Virechana Dravyas with Ushna, Tikshna, Sukshma, Vyavayi (pervading), and Vikasi qualities quickly enter the Dhamanis and pass through the Sthula and Sukshma Strotasas before reaching the Hridaya. The accumulated Dosha Sanghata is liquefied by their Agneya Guna. Due to previous Snehana Karma, the liquefied Doshas are disintegrated (Chhinna-Bhinna) and do not stick to the channels, just as honey does not stick to an oil-coated vessel. These broken-down Doshas travel through the tiny Strotasas, heading for the Koshtha before arriving at the Amashaya.

Kaishora guggulu: *Vata and kapha are suppressed by Kaishore Guggulu, which is ruled by Tikta and Kashaya Rasa with Laghu, Ruksha Guna, and Ushna Virya. Through its Lekhana-Shoshana action, it performs Srotoshodhana, digests Ama, reduces Kleda, strengthens Agni, and supports Deepana, Pachana, and Dosha Vilayana.*

777 oil: The anti-inflammatory and antimicrobial properties of Sweta Kutaja [*Wrightia tinctoria*] and

Narikela Tailam [*Cocos nucifera*] are mainly indicated in Visarpa and Kustha Roga.

Gandharvahastadi Eranda Taila: *Gandharvahastadi Eranda Taila, with Snigdha, Sukshma, Teekshna Guna and Ushna Veerya, acts as Srotoshodhaka, Deepana, Vatanulomaka, and Malashodhaka, effective in Vata-Kaphaja Kustha due to its Sookshma Srotogami nature.*

Cap. Psora Kot: The anti-inflammatory and anti-microbial properties of Cap Psorakot is a patent formulation by Kottakal Ayurveda, include Pata, Karutohini, Guduchi, Chandana, Patola, and Madhusrava. These properties aid in reducing inflammation in psoriasis.

Action of Panchatikta guggulu ghrita : It primarily acts on **Kleda, Meda, Lasika, Rakta, Pitta,** and **Kapha**, there by aiding in the pacification of vitiated **Doshas** and restoring the balance of **Dhatus**. This formulation effectively alleviates symptoms such as **Rukshata** (dryness) and **Daha** (burning sensation). It possesses actions like **Deepana** (enhancing digestive fire), **Pachana** (digestive), **Srotoshodhaka** (channel cleansing), **Raktashodhaka** (blood purifier), **Raktaprasadaka** (blood nourisher), **Kushtaghna** (alleviator of skin diseases), **Kandughna** (anti-pruritic), and **Varnya** (enhancer of complexion). Due to the **lipophilic nature of Ghrita**, it facilitates the deep penetration of active constituents to the **cellular level**, delivering them to the **mitochondria** and **nuclear membranes**. Thus, it supports the maintenance of **normal skin texture** and promotes skin health at the molecular level.

Maha manjistadi Kashaya: *Maha Manjishtadi Kashayam* is a popular *Ayurvedic* medication. This formulation helps with the natural purification of blood, which makes it useful for skin-related problems. It is primarily used to treat a variety of skin disorders.

6. CONCLUSION:

The present case was treated with *Shodhana* and *Shamana* for a period of 60 days, which demonstrated significant efficacy. No adverse events were observed during the treatment course. The remedy successfully purified *Rakta* and *Mamsa Dhatus*, eliminating *Ama* and rectifying *Agni*, thereby providing relief from Grade 3 to Grade 1. Further research and exploration of Ayurvedic interventions in *Kitibha Kushta* can contribute to evidence-based practices, policy formulation, and the development of treatment protocols.

Declaration of Patient Consent – The authors confirm that they have acquired a patient consent form, in which the patient or caregiver has granted permission for the publication of the case, including accompanying images and other clinical details, in the journal. The patient or caregiver 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.

Patient perspective - The patient was initially anxious after being diagnosed with *Kitibha kusta*, worried about skin complexion, lesions, Itching sensation throughout the body As treatment progressed and skin complexion improved. She expressed relief and satisfaction with the outcome.

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