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Management of *Sheet-Pitta* through *Vaman* Followed by *Shaman* Therapy- A Case Report

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ABSTRACT-

Urticaria is a common disease characterized by pale red rashes and severe itching caused by allergic reaction. Urticaria can be correlated with the disease *Sheetpitta* mentioned in our ayurvedic classics. *Sheet-pitta* is *Tridoshaja vyadhi* having predominance of *Vata dosha. Rasa* and *Rakta* are main *dushyas* in *Sheet-pitta*.

18 years old male presented with complaints of *sarvang kandu* (itching), *mandalotpatti* (wheal formation), *Raga* in both the limbs and back; on and off since two months. *Kandu, mandalotpatti* aggravating more during evening hours and on exposure to cold climate, diagnosed as *Sheet-pitta*. Its management is successfully done by following principles of *Shodhana* and *Shamana*. Initially *Deepana* and *Pachana Chikista* has given to the patient then *Snehapana* with *Panchtiktaghrita* followed by *Vamana* was done. Thereafter *Shamana* therapy was given to the patient. The follow up was done for a month, during he has no any episode of *Sheet-pitta*. The results of the treatment were encouraging and there were no side effects during the therapy.

Keywords: Sheet-pitta, urticaria, Vamana.

AIM:

To assess the efficacy of Vamana followed by Shaman therapy in the management of Sheet-pitta with special reference to urticaria.

INTRODUCTION:

Sheet-pitta is a *tridoshaj vikara* manifested to skin commonly in December to March. Pathogenesis of this *Sheet-pitta* is because of *hetusevana, vatadi dosha* got *prakopa* and in turn lead to the vitiation of *pitta-dosha* and *raktadushti* then spreading to extremities and leading to rashes¹. The same has been described in the modern symptomatology of urticaria most often has an unknown, non-specific etiology but can be related to medications, foods and similar vascular stimulating agents. Urticaria is a vascular reaction of skin marked by transient appearance of smooth, slightly elevated papules or wheals². Urticaria is frequently caused by allergic reactions: however, there are many non-allergic causes also -For example, most cases of urticaria lasting less than six weeks (acute urticaria), are the result of an allergic trigger.

With special reference to Ayurvedic classics urticaria correlated with *Sheet-pitta* can be treated by traditional approach so keeping in view basis principle of Ayurvedic management, a case of *Sheet-pitta* treated and successfully relieved from *lakshanas*. Treatment of *Sheeta-pitta* mentioned in *Yogratnakar, Chakradatta* and *Bhaishyajya Ratnavali*. It includes *Katu taila abhyanga, swedan* by *koshna jal, Vamana, Virechana* and *Shamana chikitsa³.In Sheet-pitta, vatadushti* is characterized by dryness, pain aggravating factors likes exposure to cold climate, similarly *Pittadushti* is characterized by presence of symptoms like burning sensation; presence of itching indicate

*Kaphadushti*⁴ considering this the predominance of *Kapha, Vamana* was a followed by other medication plans. *Vamana* means the forcible expulsion of undigested *pitta* and *kapha* through oral route by the way of inducing vomiting⁵.

Case Report

This case report of 18 years old male patient, who had complained of *Sarvang kandu, Raktavarniya manadalotptti, Raga* in both limbs and back on and off since two months. The had consulted allopathy physician but could not get complete relief, therefore, the patient approached for Ayurvedic treatment. He had neither history of DM, HTN, Asthama, any other illness nor nay surgical history. Personal history revealed non vegetarian diet (fish, meat), irregular meal timings, exposure to cold (Air conditioner) climate, less appetite, constipation, *aruchi, adhman*, normal sleep.

Treatment schedule

Table 1-Method of drug administration -

Sr No	Procedure	Duration	Medication	
1	Deepana -Pachana -	5days	1.Arogyavardhini vati- 500mg Vyanodane	
	Anulomana	2. Sanjivani Vati- 500 mg Vyanodane 3.Gandharvharitaki choorna 5 mg Ratrau		
2	Snehapana	7 days	Panchtiktagrita started with 30 ml; on 7th day 210 ml is given by increasing 3th	
	each day which achieved		each day which achieved Samyak Snigdha lakshana	
3	Vishranti dina 1 day Sarvangya snehana swedana- Bhas		Sarvangya snehana swedana- Bhashpasweda	
			Abhishyandi ahar- Dadhi odana	
4	Vamana Akanthapan-Dugdhpan,		Akanthapan-Dugdhpan,	
			Vamandravya-Madanphalphant (100ml)	
			Vamanopagadravya -Lavanodak	
			After completion of Vamana- Nirdosh varti Dhumpana and Gandush	
5	Sansarjan krama	5 days	Peyavilepadi krama	
6	Shamana Chikista	7 days	1.Haridrakhanda -5 gm Vyanodane	
			2.Mahamanjishthadi kwatha-20ml Vyanodane	
			3.Gandhak rasayana -250mg Vyanodane	

OBSERVATIONS AND RESULTS

The patient was assessed for Kandu (itching), varna (discoloration), manadalotpatti (wheal formation) and frequency of attacks Grading was done as follows

- A) Kandu (itching)
 - 1. O- no itching
 - 2. 1- itching only during night
 - 3. 2- itching one to four time during the day
 - 4. 3- itching disturbing normal daily activities

B) Varna (Discoloration)

- 1. 0-No discolored rashes
- 2. 1- pinkish discolored rashes
- 3. 2-light red discolored rashes
- 4. 3-Dark red discolored rashes

C) Manadalopatti (wheal formation)

- 1. 0- No
- 2. 1-both hands and legs
- 3. 2-hands, legs and trunk region
- 4. 3-whole body

D)Frequency of attacks

- 1. 0-No
- 2. 1-Alternate week
- 3. 2-twice weekly
- 4. 3- every two to three days

Assessment was done in the patient as follows-

Table 2- Assessment Score-

Sr No	Parameter	Before treatment	After treatment
1	Kandu	Grade -1	Grade-0
2	Varna	Grade- 2	Grade-0
3	Manadalotpatti	Grade-2	Grade-0
4	Frequency of attacks	Grade-3	Grade-0

DISCUSSION

According to Madhavnidana, prakupita vata and kapha (pradushta kaph-maruta) due to sheetmaruta samparshanadi nidana in association with pitta (pitten saha sambhooya) spreads internally and externally (Bahiranta visarpataha) and results in manifestation of Sheet-pitta⁶. Our treatment planed acting as follows

- 1. Tridoshamaka
- 2. Purifies rasa-rakta dhatus
- 3. Helps in boosting immune system as autoimmune plays an important role in pathogenesis

Initially *deepan-pachana* treatment was given for *aama pachana*⁷ then *snehapana* was done as a *poorva karma* of *Vamana*⁸. *Snehapana* work at a level of *Sukshma Srotasa* also it shifts the *doshas* from *Shakhas* to *koshtha* so that they can be easily removed from the body. *Panchatiktaghrita* was a chosen for *snehapana* as all its constituents -*Nimba* (Azadirachta Indica), *Patola* (Trichosunthus dioica) *Kantakari* (solanumsuranttense) *Guduchi* (terminalia cordifolia) and *Vasa* (adhathoda vasica) are *Tiktarasapradhan dravyas*⁹. *Tikta rasa* is *vishaghna* (antiallergic action), *Kandughn*(pacifies itching) , *Kushthaghn*(removes skin disorders) and purifies *twatcha* (skin) and *rakta* (blood). Studies have proven antiinflammatory activity of *panchatikta ghrita*, Thus it will also check inflammatory reaction on the skin due to vitiated *doshas* and *dhatus*.

Vamana karma seems that *Shodhana* drugs (*Madanphala*) because of there *vyavayi guna* escape the normal digestion by *Jatharangi*, reaches to the minute channels of the body start acting immediately. Sukshma guna helps to reaches them upto two expelled out lastly by *prabhava*¹⁰. As *Madanaphala* is best among all *Vamak* drugs¹¹, it is used in this case. *Vamak* drug eliminates the *doshas* out by the oral route. *Vamanopaga dravya* helps to *vaman dravya*. Hence therapy will be easily removed the deranged *doshas* from the body. After *Vamana karma sansarjankrama* has been given according to *madhyama shuddhi* i.e.5days for maintainance of *agni*¹². *Shamana* therapy was given to subside the remaining *doshas*. Drugs selected were *haridrakhanda,mahamanjishthadi kwatha, Gandhak rasayana* which are all *Raktashodhak, tvakprasadak* and immuno modulators.

Conclusion

Sheet-pitta or urticaria is common skin disorder which is cause due to disturbance in the equilibrium of Vata, Pitta, Kapha and Rakta. In this case study shodhana karma followed by shamana therapy has a role in manifestation of Sheet-pitta with special reference to Urticaria.

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