

CASE REPORT

Case Report on Ayurvedic Management of Urticaria W.S.R to Sheet Pitta

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ABSTRACT

Background: Urticaria is a skin disorder characterized by hives with or without angioedema that affects people on a regular basis for at least 6 weeks. The two *doshas* mainly afflicted by this ailment are *Vata* and *Kapha*. When paired with Pitta, they cause skin redness, swelling, and itching. Urticaria is a vascular reaction that causes a broad eruption of pale skin. The symptoms of urticaria are identical to those of *Koth*, *Udarda*, and *Sheetapitta* (urticaria). One of the symptoms stated by our Acharyas when the body is exposed to unwholesome diet and lifestyle is skin disease.

Main Observations: We report that a case of urticaria in a 39-year-old female patient had been complaining of acute itching and rashes all over her body.

Result: Ayurvedic remedies were used to treat the patient for 2 months. It was successful in reducing itching and rashes. This case study demonstrates the efficacy of Ayurvedic treatment for Urticaria.

Conclusions: The study reached the conclusion that ayurvedic therapy was significantly effective in the treatment of urticaria.

1. INTRODUCTION

Urticaria (hives or nettle rash) is a rash that is red, elevated, and itchy and is caused by vasodilation, increased blood flow, and increased vascular permeability.^[1] Wheals range in size from a few millimeters to hand-sized lesions, and they may be single or multiple. Wheals and angioedema can occur together, but either can happen on its own.^[2] Urticaria is predicted to affect 0.5–5% of the general population.^[3] The issue is likely to recur. Hives are a typical reaction to an infection or an allergy, such as medicine, insect stings, or food.^[4] It is also conceivable that the cause is psychological anguish or vibration. There are a variety of pharmacological and non-pharmacological therapies available, but none of them are universally recognized.^[5] Patients seeking long-term healing from a variety of allergy problems seek the advice of an Ayurvedic physician. *Sheeta pitta*, *Udarda*, and *Kotha* are diseases mentioned in Ayurvedic texts that can be linked to urticaria and other allergic conditions. These three conditions are commonly used synonymously and they are characterized by extreme itching and red colored rash on skin.^[6] The present study is about a patient

who sought Ayurvedic treatment for Urticaria. For the publication of this case study, the patient's written informed consent was obtained.

2. CASE PRESENTATION

A 39-year-old woman with a medium build presented to the Agada Tantra outpatient department (OPD) of the institute with complaints of acute itching with a six-month history that affected her entire body, particularly her soles, hands, and cheeks. She also complained of acidity, indigestion, and sleeplessness as an outcome of the itching. Due to extreme scratching, the patient was unable to perform her daily activities. Itching is worst at night and in the early hours of the morning. Since the past 6 months, the condition has been progressively deteriorating, with an insidious onset. The patient took allopathic advice and care, but did not experience long-term relief. Atrophy, urticaria, or any other related disease has never struck anyone in the household. At the time of diagnosis, patient had extreme pruritis on palms, legs, head, and face. The lesions were pink to red in color and were present all over the body, especially on the face and both upper and lower limbs; they were large (more than one centimeter in diameter), transient, had a pale center, and lasted <24 h. No family member has suffered with atopy or urticaria or any other relevant

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disease. Heat, cold, sunlight, or pressure did not cause urticaria. The patient's condition was progressive, recurrent, and causing anxiety.

2.1. Personal History

Table 2.

2.2. Laboratory Investigations

Hb – 11.4 mg%, ESR – 14 mm/h, and total cholesterol – 210 mg/dL. Patient was diagnosed with urticaria.

2.3. Systemic Examination

On examination, patient was conscious and oriented to time, place, and person. Assessment of CNS, CVS system, respiratory system, and musculoskeletal system of patient was found within normal limits. No clinical abnormality was detected on per abdominal examination.

2.4. Eight Types of Examination

Table 2.

2.5. Pathogenesis

- Digestion of food: highly unpredictable
- Site of Origen: GIT
- Body channels: channels carrying the nutritional essence, channels carrying the blood
- Localization: skin
- Site of pathogenesis: External.

3. OBSERVATION

The urticarial score [Table 3] was used to make observations as well as Ayurveda symptoms listed in the classical text. The patient had some symptoms that improved after treatment.

4. RESULTS

There were four evaluation periods in this case study, and the outcome was determined based on them. The first evaluation was completed before treatment, the second evaluation was completed 15 days after treatment, the third evaluation was conducted 30 days after medication completion, and the final examination was completed after a 60-day follow-up period. Following the completion of the medicinal treatment, the patient's signs and symptoms improved significantly.

Personal history of patient mention in Table 1.

Skin allergy (urticarial) scoring criteria mention in Table 3.

Treatment details mention in Table 4.

5. DISCUSSION

Under the umbrella of “*Kushtha*,” (skin disease), Ayurveda clarifies all skin ailments (skin diseases). Aside from that, several allergy disorders are described separately because they are not covered by *Kushtha*, such as *Sheetapitta*, *Udarda*, and *Kotha*. *Sheetapitta*, *Kdarda*, and *Kotha* are three urticaria and angioedema kinds that have identical symptomatology.^[6] The concepts of easily assimilate in the human body without causing any harm or difficulty and intolerance of an unfavorable substance are used in Ayurveda to describe allergic symptoms. *Sheetapitta*, *Udarda*, and *Kotha* are three diseases that are all diagnosed in the same way

but have slightly different symptoms and causes. *Udarada* is a *Kapha*-dominant illness, while *Sheetapitta* is a *Vata*-dominant disorder.^[12] The present case was identified as a “*Udarda*” case, and treatment was planned appropriately. The pathogenesis of this ailment required the use of decrease digestion and improperly processed food juices formed at end of digestion in stomach. Proper *Agni* and irregular eating habits caused the formation of ama, which further vitiated the *Tridosha* and generated blocked body channels through obstruction and moving in wrong direction. The medicines were selected with this in mind. Scaling and irritation had almost disappeared after 2 months of treatment, and new lesions had stopped completely developing. The patient was instructed to continue with the same medication for the next 2 months, in addition to *Tiktaka ghrita* and *Haridra khandam*. He visited again after 2 months of baseline treatment.

5.1. Outcomes

As a primary outcome, the amalgamation of vitiated doshas with weak and susceptible tissues, which began in GIT, became localization in skin and gave rise to the symptoms.

5.2. Secondary Outcome

Other signs and symptoms, such as indigestion and insomnia, were reduced by about 70%.

5.3. Strengths and Limitations of the Study

Disappearance of all the symptoms along with declination of urticarial scoring criteria score to zero was noticed. He was further advised to continue the medication for the next 1 month and there is no reoccurrence.

5.4. Interpretation and Implications in the Context of the Totality of Evidence

The treatment concept should be improved digestion, balances all three elements, purifier body channels, and improve strength.

5.5. Controversies Raised by this Study

No controversies and no adverse effect found during this study.

5.6. Future Research Directions

In the present study shows, *Lavanan bhaskara churna*, *Trikatu churn*, *Haridra khanda*, *Amritadi Kashaya*, and *Tiktaka ghrita* show significant results but a single trial cannot be able to develop a universal management protocol.

6. CONCLUSION

The ayurvedic diagnosis of urticaria is given in this case for chronic idiopathic urticaria. A careful food plan, as well as internal drugs and lifestyle adjustments, is required to prevent recurrences and achieve long-term relief. The study's findings cannot be applied to the general population; more long-term follow-up studies with a large sample size are needed to confirm the aforementioned statements.

7. DECLARATION OF PATIENT CONSENT

The authors certify to having obtained all required patient consent papers. The patient(s) has/have provided their agreement in the form for their images and other clinical information to be published in the

journal. The patients are aware that their names and initials will not be published, and that while every effort will be taken to keep their identities hidden, anonymity cannot be guaranteed.

8. ACKNOWLEDGMENTS

Nil.

9. AUTHORS' CONTRIBUTIONS

All the authors contributed equally in design and execution of the article.

10. FUNDING

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11. ETHICAL APPROVALS

This study not required ethical clearance as it is review study.

12. CONFLICTS OF INTEREST

Nil.

13. DATA AVAILABILITY

This is an original manuscript and all data are available for only review purposes from principal investigators.

14. PUBLISHERS NOTE

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Table 1: Personal history of patient

| Diet | Vegetarian |
|------------------|--------------------------|
| Micturition | 6–7 times/day, 1–2/night |
| Appetite | Poor |
| Sleep | Disturb |
| Bowel habit | Irregular |
| Menstrual cycle- | regular (5/28 days) |
| Addiction | Nil |

Table 2: Eight types of examination of patient

| | |
|--------|--------------------------------------|
| Pulse | 67/min, regular, normal in character |
| Stool | Constipation |
| Urine | frequency-normal |
| Tongue | Clear |
| Speech | Clear |
| Touch | Normal |
| Eyes | Normal |
| Built | Medium |

Table 3: Skin allergy (urticarial) scoring criteria

| S. No | Score | Wheals | Pruritus |
|-------|-------|---|---|
| 1. | 0 | None | None |
| 2. | 1 | Mild (<20 wheals/24 h) | Mild (present but not troublesome) |
| 3. | 2 | Moderate (20–50 wheals) | Troublesome but does not interfere with sleep |
| 4. | 3 | Intense (>50 wheals/24h or large confluent areas of wheals) | Severe pruritus, which is sufficiently troublesome to interfere with normal daily activity or sleep |

Table 4: Treatment details

| Complaints | Drugs | Days | Principle |
|---|---|---------|--|
| Acidity Indigestion | <i>Trikatu churn</i> ^[7] -3 g BD <i>Lavanan bhaskara churna</i> ^[8] -3 g BD | 05 days | Improve digestion |
| Severe itching, appearance of skin rashes | <i>Amritadi Kashaya</i> ^[9] -20 mL BD <i>Haridra khanda</i> ^[10] -3–6 g BD | 05 days | Reduce allergy by improving immunity |
| Same as above | Stopped <i>Kashayam</i> Start <i>Tiktaka ghrita</i> ^[11] - 1 tsp at morning in empty stomach. <i>Haridra khanda</i> -3–6 gm BD | 03 days | <i>Kapha pittahara</i> |
| Almost symptoms free | Continue <i>Tiktaka ghrita</i> and <i>Haridra khandam</i> | 1 month | Improve immunity Prevent recurrence |