

The Effect Of Vaman Karma And Shaman Aushadhi In Pyoderma- A Case Study

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ABSTRACT

Pyoderma means any [skin disease](#) that is [pyogenic](#) (having pus). These include superficial bacterial infections such as [impetigo](#), [impetigo contagiosa](#), [ecthyma](#), [folliculitis](#), [Bockhart's impetigo](#), [furuncle](#), [carbuncle](#), [tropical ulcer](#). [Autoimmune](#) conditions include [Pyoderma gangrenosum](#). Pyoderma affects more than 111 million children worldwide, making it one of the three most common skin disorders in children along with [scabies](#) and [tinea](#).^[1]

In Ayurveda, skin diseases are included under the heading of *Kushtha* (~ Leprosy) and *Kshudra Rog* (~ Skin diseases). In this case, type of Pyoderma may be correlated with *Shataru* (~ one type of Skin disease in Ayurveda) according to their sign and symptoms in *Ayurveda*. *Shataru* is *Tridoshaj Vyadhi* (*Vata-Pitta-Kapha*) having *Kapha-Pitta* dominance.^[2] Charak has explained *Vaman-Virechan Chikitsa* (~ Emesis-Purgation therapy) in *Kushtha Vyadhi* (~ Leprosy).^[3] Charak has explained the line of treatment according to predominance *Doshas* i.e. *Ghrutapan* (~ intake of medicated ghee) in *Vata* dominant, *Vaman* (~ Emesis) in *Kapha* dominant and *Virechan* (~ Purgation) in *Pitta* dominant *Kushtha* (~ Leprosy).^[4] In this case the effects of *Vaman Karma* (~Emesis) followed by *Shaman Chikitsa* (~Oral Medication) in *Shataru* with respect to Pyoderma were elaborate.

Methods: A Female patient of 23 years of age. She was apparently normal before 4 months, developed small skin lesion over upper, lower limb, scalp, abdomen and back of the body, associated with severe itching and pus discharge distributed all over the body, treated with *Shodhan* (Purification) and *Shaman* (Mitigation) *Chikitsa*.

Results: Skin Lesions and itching had shown dramatic improvements. Clinically encouraging results were observed on sign and symptoms.

Conclusion: *Shodhan Chikitsa* followed by *Shaman Chikitsa* is helpful in the management of Pyoderma correlated with *Kushtha*.

Keywords: Pyoderma, *Vaman karma*, *Kushtha*

INTRODUCTION

Pyoderma is a rare condition that causes large, painful sores (ulcers) to develop on skin, most often on legs and most commonly pre-tibially, often leave unpleasant cribriform scars. The exact causes of Pyoderma are unknown, but it appears to be a disorder of the immune system. People who have certain underlying conditions, such as inflammatory bowel disease or arthritis, are at higher risk of Pyoderma.^[5] There are no specific serological or histological markers, and diagnosis is predominantly clinical. The etiopathogenesis of gangrenosum poorly understood, and various topical and systemic therapies are used empirically, but no targeted or specific treatment exists.

Patients are often systemically unwell with symptoms such as fever, malaise, arthralgia, and myalgia. Lesions are usually painful and the pain can be severe. When the lesions heal the scars are often cribriform. Early diagnosis and prompt treatment reduce the risk of scars, and disfigurement may occur if the diagnosis is missed. The mainstay of treatment is long term immunosuppression, often with high doses of corticosteroids or low doses of cyclosporine.^[1]

In Ayurveda, skin diseases are included under the heading of *Kushtha* and *Kshudra Roga*. Charak has explained the line of treatment according to predominance *Doshas* i.e. *Ghrutapan* in *Vata* dominant, *Vaman* in *Kapha* dominant and *Virechan* in *Pitta* dominant *Kushtha*.^[4] In this case the effects of *Vaman Karma* followed by *Shaman Chikitsa* in *Shataru* with respect to Pyoderma were elaborate.

CASE PROFILE:

A Female patient of 23 years of age. She was apparently normal before 4 months, developed small skin lesion over upper, lower limb, scalp, abdomen and back of the body, associated with severe itching and pus discharge distributed all over the body. She got aggregations in symptoms since 8 days, so brought by her relative in our institute. Having the following complaints.

Chief complaints:

1. *Jwaraprachiti* (~ Feverish Sensation) - since 8 days
2. *Sarvanga Raktavarniya mandalotpatti* (~rounded petechiae)
3. *Sarvanga Kandu* (~Itching on whole body)
4. *Sarvangadaha* (~ burning sensation of body) - 1 month
5. *Sakashta Malapravrutti* (~difficulty in defecation), *Yonidaha* (~Vaginal burning sensation) - since 1month
6. *Daurbalyaprachiti* (~ Weakness)- since 8 days
7. *Ubhaya Padashotha* (~ Swelling on feet) - since 3-4 days
8. *Anannabhilasha* (~ Aversion of food)- 2-4 days
9. *Gilankashtata* (~ dysphagia) - 2-3 days
10. *Chhardi* (~Vomiting)- 1 day before (2 episodes)
11. *Dravamalapravrutti* (~loose motion)- 1 day before (5-6 episodes)

} - 4 months

History of present illness:

Patient having gradually increase in above symptoms since eight days, so for treatment, patient got admitted in our institute.

Past history:

H/O of Rashes all over body (since 5-6 months)

No H/O DM or HTN,

No H/o Typhoid, Malaria, Chikungunia, Dengue

No H/O Insect bite

No any major injury.

No any past surgical history.

Vaiyaktik Vrittant (Personal History):

- 1) *Ahar* (~Diet):

Ahar Praman (~quantity of diet): 2-3 Roti, 1 bowl of Bhaji, 1 bowl of rice, 1 bowl dal.

Ushahpana (~ dawn water): 2 Glass *Koshna Jala* daily

Fruits and salad: Banana, Apple, Pomegranate, Cucumber, carrot.

Junk food:

- Pickle, Papad** - Daily
- Paratha and Tea** - Daily
- Ghee and Dalada** - Regularly
- Fruit Salad, Lassi** - Daily
- Fermented Food (Idli, Wada, Dosa)** - In 2-3 in a week
- Panipuri, Samosa** - mostly daily
- Sabudana** - Twice in a week
- Potato Chips** - mostly in a week
- Chinese** - 2 times in a week

Rasapradhanya (~Dominance of taste): *Katu* (~bitter), *Madhura ras Pradhan* (~sweet).

Ahar Guna (~ properties of diet): *Tikshna* (~spicy), *Guru* (~ heavy diet), *Abhishyandi* (~ properties of retention), *Snigdha* (~oily), *Pishthanna* (~ refine carbohydrate food), *Virudhha Ahar Sevan* (~ intake of incompatible diet), *Paryushit Ahar Sevan* (~ ingestion of stale food) – *Niyamit since 4-5 years*. (Idli, Wada, Dosa, Fried Rice)

Diet Habit: Vegetarian

2) Vihar (~Routine): Student (College time at morning hour, Papad Selling at afternoon hour)

- Breakfast - 8AM
- Lunch – 11 AM
- Evening Breakfast – 4 or 5 pm
- Dinner – Mostly Chinese food (rice).
- Bedtime – 11.30 pm

3) Vyasan (~ Addiction): No

4) Kshudha (~ Hunger): *Atikshudha*

5) Pipasa (~Thrust): *Madhyma*

6) Nidra (~Sleep): *Samyaka*

Ashtavidh Parikshan:

- 1) *Nadi* : 98/min, regular
- 2) *Mala* :Samyaka
- 3) *Mutra* :Samyaka
- 4) *Jivha: Sama*
- 5) *Shabda: Kshina*
- 6) *Sparsha* : *Atiushana*
- 7) *Druk* : *Prakrit*
- 8) *Akruti* : *Krishha*

Dashvidh Parikshan:

- 1) *Prakriti* : *Pitta-Vatapradhan*
- 2) *Sarata* : *Rasa, Rakta, Mamsa, Meda – Hina Sartah*
- 3) *Samhanan* : *Hina*
- 4) *Satmya* : *Sarvasatmya*
- 5) *Satva* : *Madhyam satva*

6) *Aharshakti* :

Abhyavahara: Prakrit

Jaranshakti: Prakrit

7) *Vyayamshakti :Alpa*

8) *Praman* : Height- 151 cm, Weight- 36kg, BMI- 15.8kg/mt²

9) *Vaya* : 23 years

10) *Desh: Sadharan*

Vikrut Srotas Parikshan:

1) *Pranavah: Shwasanottar Galshula*

2) *Annavah: Aruchi, Anannabhilasha, Drava-Malapravritti.*

3) *Rasavah: Ashraddha, Aruchi, Asyavairasya, Sada, Krishangata, Angamarda, Jwar.*

4) *Raktvah: Parushata, Twak- Rukshata.*

5) *Purishvah: Dravamalapravritti*

Veg : 5-6 Vega

Sanghat: Dravamala

Gandh: Durgandhita

Varna: Pitavarna

6) *Swedvah: Asveda*

General Examinations:

General Condition : Moderate

Pulse : 62/min

Blood Pressure : 130/90 mmHg

SPO2 : 98%

Temp. : 98.2 F

Pallor : not seen

Cyanosis : not seen

Oedema : not seen

Icterus : not seen

INVESTIGATIONS:

To rule out any other pathology, all the relevant blood investigations were done such as Complete blood counts, ESR, HIV etc. and found to be within normal limits

Samprapti Ghataka:

Dosha – Tridosha

Dushya – Twak, Rakta, Mamsa, Lasika

Dusta-srotas –Annavaha, Rasavaha, Raktavaha, Mutra, Purish, Sweda

MANAGEMENT

Deepan- Pachan Chikitsa:-

Table -1 Showing Deepan Pachan Chikitsa Given

<i>Medicine</i>	<i>Dose</i>	<i>Kal</i>	<i>Anupana</i>	<i>Duration</i>
<i>Aampachak Vati^[6]</i>	<i>250 mg 2 tab</i>	<i>Vyanodane</i>	<i>Koshna jala</i>	<i>5 days</i>

<i>Samshamani Vati</i> ^[7]	250 mg 2 tab	<i>Vyanodane</i>	<i>Koshna jala</i>	5 days
<i>Sunthi + Musta siddha jalpana</i> ^[8]		<i>Muhur muhur</i>		5 days

After *Pachan Chikitsa*, *Kshuda-Vridhhi* and *Prakrit Malapravrutti* was observed and then started *Snehapana* and planned for *Vaman Karma*.

Snehapana Karma: -

Snehapana - (Goghrita + Panchatikta Ghrita^[9]*)*

Table -2 Showing Snehapana Given

Day	Time	Matra	Kshudha kala	Bhojan Kala
Day 1	7 am	30 ml	12.30 pm	3 pm
Day 2	6.30 am	60 ml	2 pm	5 pm
Day 3	7 am	120 ml	5 pm	9 pm
Day 4	7.30 am	120 ml	3.30 pm	10 pm

- Followed *Snehaviram* for 1 day
- *Sarvang Snehana and Svedana* was advised on *Snehaviram* day.

Vaman Karma :-

Vaman Karma was done by using following medications -

1. *Dashmula Siddha Niruha basti* 600 ml stat given - at 6.30 am.
2. *Koshna Godugdha pana* 200 ml - After *Basti Pratyagaman*
3. *Sarvanga Snehana Svedana*
4. *Chatan Dravya* - at 7.20 am

Madanphala Churna - 2.5 gm
Vacha Churna - 5 gm
Yashtimadhu Churna - 7.5 gm
Saindhava - 10 gm
Madhu - As required

Shuddhi:

Antiki – Pittant

Maniki – Input - 8.500 lit Output – 10 lit

Vaigiki - *Pravar* - 3
 Madhyam -14
 Avar -11

Laingiki – *Madhyam Shuddhi*

Dhumpana:

1. *Ubhaya Nasika* – 1 *Avarti/ Pratyeki*
2. *Mukha* – 1 *Avarti*

Sansarjana Kram: Given for 5 days as per *Madhyam Shuddhi Vaman Karma*. ^[10]

Shaman Chikitsa:

Table- 3 Showing Shaman Chikitsa Given

Medicine	Dose	Kal	Anupana	Duration
<i>Arogyavardhini Vati</i> ^[11]	250 mg 2 tab	<i>Vyanodane</i>	Lukewarm water	15 days
<i>Mahamangishthadi Kwath</i> ^[12]	4 tsf	<i>Vyanodane</i>		30 days
<i>Krumighna Kwath</i> ^[13]	40 ml	<i>Vyanodane</i>		15 days
<i>Kushtaghna Kwath</i> ^[14]	40 ml	<i>Vyanodane</i>		15 days
<i>Maha-tiktaka Ghrita</i> ^[15]	10 ml	<i>Apane</i>	Lukewarm water	30 days

Bahya Chikitsa (~ medication over the body)

Table-4 Showing Bahya Chikitsa Given

<i>Takradhara with Amalaki Churna</i> ^[16]	<i>Sarvanga</i>	Once a day
<i>Triphaladi Tail</i> ^[17]	<i>Sarvanga Snehana</i>	Once a day

After treatment patient got relief in symptoms and was discharged. After 3 months, she again came to hospital and was having good relief except that she reported to have occasional rash over her arms and skull for which she was again subjected for *Vaman Karma*. As *Charak* stated that repeated *Shodhan Chikitsa* (~pharmaceutical process of purification) in *Bahudoshha Rogi*.^[18] Patient was admitted and planned for *Vaman Karma* and procedure was done as described earlier and *Madhyam Shuddhi* achieved and *Sansarjana Krama* was given for 5 days followed by *Shaman Chikitsa*.

Shaman Chikitsa:

1. Chopachini Churna - 5mg Vyanodane with Madhu
2. Rasamanikya Ras – 5 mg^[19]
Chopachini Churna- 20 mg
Guduchi Satva – 20 mg
Arogyavardhini Vati – 30 tab
Gandhak Rasayana – 30 Tab
40 Pockets – 1 Pocket Vyanodane with Madhu

Pathya-Apathya

Pathya is one which is compatible and does not prove harmful to the body. In *Chikitsasthan*, *Acharya Charak* stated another definition for *Pathya* such that everything that is *Priyam* (suitable) to *Manasa* and *Sharira* is Called *Pathya*.^[20]

Diet schedule:

Morning: Milk, Rajgira Ladu, Lahi

Lunch and Dinner: Bhakari, Moong Dal, Moong Dal Khichadi

Apathya (~ non conducive): Oily food, Spicy food, Bakery food stuff, fermented food

Pathya (~ conducive): Moong Dal Khichadi, Green Vegetables, fruits (Pomegranate)

OBSERVATION AND RESULT:

Subjective criteria Assessments -

Table -5 Showing Improvement in Lakshanas Observed

Lakshan	Before Treatment	After Treatment
<i>Sarvanga Raktavarniya</i> <i>Mandalotpatti</i>	Present since 4 months	Lesions disappear
<i>Sarvanga Kandu</i>	Present since 1 months	Absent
<i>Sarvangadaha, Yonidaha</i>	Present since 1 months	Absent
<i>Sakashta Malappravritti</i>	Present since 1 months	<i>Samyaka Malappravritti</i>
<i>Daurbalyaprachiti</i>	Present since 8 days	Absent

Before and after Treatment images of skin lesions Image of Hands

Treatment

After Treatment

Before



Image of Legs

Before Treatment

After Treatment



Image of Abdomen

Before Treatment

After Treatment



Image of Back

Before Treatment

After Treatment



DISCUSSION:

In this case, type of Pyoderma may be correlated with *Shataru* according to their sign and symptoms in *Ayurveda*. *Shataru* is having *Kapha-Pitta* dominance. Charak has explained *Vaman-Virechan Chikitsa* in *Kushtha Vyadhi*. Charak has explained the line of treatment according to predominance *Doshas*. *Vaman* in *Kapha* dominant. Here *Vaman Karma* was planned which will cure Vitiation of *Pitta* and *Kapha Dosha*. As Charak stated repeated *Shodhan Chikitsa* in *Bahudoshia Rogi*, hence we planned for 2nd setting of *Vaman Karma*. In the management of this case study, *Samyaka Snehapana Lakshan* was found after *Pachan*. *Snehapana* was given for 6 days with *Panchatikta ghrith* followed by *Sneha virama* for one day and then *Vaman Karma* was done. *Madhyam Shuddhi* and *Pittant Veg* was found by *Vaman Karma* which was followed by *Sansarjana krama* for 5 days and then followed by *Shaman Chikitsa* which is mentioned above elaborately, remarkable improvement in signs and symptoms was observed.

The properties and probable mode of action of drug are as given below

Table -6 Showing Probable Mode of Action of *Aushadhi Dravya*

Sr no.	Drug	Properties
1	<i>ArogyavardhiniVati</i> ^[11]	<i>Doshaghnata – Tridoshagna</i> <i>Rogaghana- Kushtagna</i>
2.	<i>Mahamanjishthadi Kwath</i> ^[12]	<i>Doshaghnata – Kapha- Pitta</i> <i>Shamaka</i> <i>Rogaghana- Kushtagna</i>
3.	<i>Krumighna Kwath</i> ^[13]	<i>Doshaghnata – Pitta Shamaka,</i> <i>RaktaShodhak</i>
4.	<i>Kushtagna Kwath</i> ^[14]	<i>Doshaghnata - Pitta Shamaka</i> <i>Rogaghana- Kushtagna</i>
5.	<i>Triphaladi Taila</i> ^[17]	<i>Doshaghnata – Kapha- Pitta</i> <i>Shamaka</i> <i>Rogaghana- Kushtagna</i>
6.	<i>Maha-tiktakaGrita</i> ^[15]	<i>Doshaghnata – Rakta, Pitta</i> <i>Shamaka</i> <i>Rogaghana- Kushtagna</i>

CONCLUSION:

The treatment with *Vaman karma* followed by *Shaman Aushadhi* along with *Pathyakar Ahar Vihar* was planned as per *Doshaj* involvement in *Shataru Kushtha* (*Kapha-Pitta predominant*) *Tridoshaj Vyadhi*. Encouraging results was observed in subjective parameters. It is a case study which is not yet concluded as significance. Large sample will be studied for conclude the efficacy of *Shodhan* and *Shaman* in *Shataru Kushtha*.

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Conflicts of interest

There are no conflicts of interest.

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