



AYURVEDIC MANAGEMENT OF KACHHU WSR TO LICHEN AMYLOIDOSIS – A CASE STUDY

Dr. Kiran Kumar P. V.^{1*}, Dr. Vijayamahantesh Hugar², Dr. Varsha Kulkarni³ and Dr. Bharati B Hiremath⁴

¹Final Year PG Scholar, Department of PG Studies in Panchakarma, Government Ayurveda Medical College and Hospital, Mysuru, 570 001.

²Associate Professor Department of PG Studies in Panchakarma, Government ayurveda medical college and hospital, Mysuru 570 001.

³Professor and Head, Department of PG Studies in Panchakarma, Government Ayurveda Medical College and Hospital, Mysuru, 570 001.

⁴Medical Officer, Government Ayurveda Medical College and Hospital, Mysuru, Government Ayurveda Medical College and Hospital, Mysuru, 570 001.



*Corresponding Author: Dr. Kiran Kumar P. V.

Final Year PG Scholar, Department of PG Studies in Panchakarma, Government Ayurveda Medical College and Hospital, Mysuru, 570 001.

Article Received on 06/09/2024

Article Revised on 26/09/2024

Article Accepted on 16/10/2024

ABSTRACT

Background: Lichen Amyloidosis (LA) is a rare primary cutaneous amyloidosis characterized by chronic idiopathic pruritus.^[1] This condition arises from amyloid protein produced by skin cells, which deposits exclusively in the skin.^[2] Its chronic nature and high recurrence rate often render contemporary treatment protocols unsatisfactory. The manifestations of LA are comparable to the signs and symptoms of Kachhu, a variant of Kshudra Kusta, distinguished by Sleshma and Pitta Pradhanyata. This condition has significant socio-medical implications and negatively impacts the psychological well-being of patients due to its persistent and relapsing nature. **Objectives:** The primary objective of this study is to effectively treat this unique condition using Lepa Chikitsa. **Materials and Methods:** A 48-year-old male patient presented at the Panchakarma OPD of Government Ayurveda Medical College and Hospital, Mysuru, with complaints of Blackish erupted lesions on **Right** lower limb, associated with severe itching and occasional burning sensations for the past 25 years. After assessing the signs, symptoms, and chronicity, the patient was diagnosed with Lichen Amyloidosis classified as Kachhu and was treated accordingly. The treatment lasted for 15 days and included the external application of Simhasya Lepa, along with the internal administration of Arogyavardhini Rasa, Kaishora Guggulu, and Tab Gandhaka Rasayana. **Results and Conclusion:** Post-treatment, there was significant relief in the subjective parameters of itching, along with regression of the condition. Ayurveda demonstrates considerable potential for treating such skin disorders through Shodana, Shamana, and Bahairparimarjana chikitsa.

KEYWORDS: Lichen Amyloidosis, Kachhu, Kshudrakusta, Simhasya Lepa.

I. INTRODUCTION

Lichen Amyloidosis (LA) is a rare primary cutaneous amyloidosis associated with chronic idiopathic pruritus. It appears as clusters of small, dark-colored scaly bumps that may merge to form raised thickened areas, primarily on the shins and lower limbs, though the arms and back can also be affected. LA is typically very itchy and most commonly manifests in individuals during their fifth to sixth decade of life, with no curative treatments currently available.^[4]

In Ayurveda, this condition is analogous to Kachhu, a variant of Kshudra Kusta, as described in texts such as Bhaishjyaratnavali and Bhavaprakash. Clinical features

include small bumps (Sushma bahya pidika), exudations (Srava), intense itching (Tivra Kandru), and burning sensations (Tivra Daha), primarily affecting the palms.^[5] References to Vrushana Kachu^[6] indicate that the condition can manifest in various body parts.

Kachhu is classified as Sleshmapitta Prakopaja Kusta, involving the Raktavaha and Rasavaha srotas in its Samprapti. To alleviate this pathology, Bhaishjyaratnavali recommends Simhasya Lepa^[7] for Bahairparimarjana Chikitsa, stating that the application of this Lepa can lead to the subsidence of Kachhu within three days. In the present case, the same Lepa, combined

with Shamana Aushadhi, was applied, resulting in significant improvement.

A 48-year-old male patient visited the Panchakarma OPD of Government Ayurveda Medical College and Hospital, Mysuru, presenting with complaints of blackish erupted lesions on Right lower limbs, accompanied by severe itching and occasional burning sensations for the past 25 years. Based on the signs, symptoms, and chronicity, the patient was diagnosed with Lichen Amyloidosis as Kachhu and treated accordingly.

CASE HISTORY: A 48-year-old male bus conductor, with no known comorbidities, attended OPD-14 at the Government Ayurveda Medical College and Hospital in Mysuru. He presented with multiple pruritic, firm, hyperpigmented, and hyperkeratotic papules on his right lower shins, a condition he had been experiencing for 25 years. He was diagnosed with Lichen Amyloidosis and reported no family history of the condition. The patient noted that in 1998, he gradually developed small, hard, blackish papules on the anterior aspect of his right lower limb, which were accompanied by itching. Within a month, the rash spread to both lower limbs, particularly on the shins. Over the past 12 years, he had sought treatment at various hospitals but found only partial relief from his symptoms. In search of better

management, the patient opted for Ayurveda, following the treatment principle of Kachhu.

ASSOCIATED COMPLAINT: Patient complaints of Intense Itching on the affected site.

EXAMINATION

SITE: anterior aspect of Right lower limb below knee and above ankle region i.e. on shin

SIZE: 2mm raised from the surface and 1cm diameter

INSPECTION: Colour – Blackish discoloration

Uniformity – Uniformly spread in Right lower limbs

Discharge – Absent

PALPATION

Moisture – Absent

Temperature – Afebrile

Texture – Rough and Hard

Mobility – Immobile

COLOUR: Hyperpigmented

CONFIGURATION: Grouped, Confluent lesions

PRIMARY SKIN LESION: Uniform Papules

SECONDARY SKIN LESION: Lichenification

INVESTIGATIONS: Urine analysis, LFT, Color doppler were done came out normal.



II. MATERIALS AND METHODS

A 48-year-old male patient presented with complaints of blackish erupted lesions on the right lower limb, accompanied by severe itching and occasional burning sensations for the past 25 years. He had tried various contemporary medications and topical applications but did not experience any relief. His family members were reported to be in good health, and he had not found any cure despite the administration of several medications.

Examination Findings: The cardiovascular, central nervous, respiratory, and abdominal systems were normal. The affected areas were the bilateral lower limbs. The lesions were irregularly shaped blackish

bumps. Sensation was present, with no bleeding or discharge; hair growth was normal, and the surrounding skin was pigmented. Special investigations, including a thyroid profile and other routine tests, were within normal limits.

DETAILS OF TREATMENT ADMINISTERED TO THE PATIENT

SL. NO.	Description	Date	Intervention
01	Simhasya Lepa External Application Twice Daily	7/2/24 to 22/2/24	15 days
02	Tab Arogyavardhini Rasa 1 TID AF	7/2/24 to 22/2/24	15 days
03	Tab Kaishora Guggulu 1 TID AF	7/2/24 to 22/2/24	15 days
04	Tab Gandhaka Rasayana 1 TID AF	7/2/24 to 22/2/24	15 days

IV. DISCUSSION

In the manifestation of Kushta, the vitiated tridosha, along with impaired Twak (skin), Rakta (blood), Mamsa (muscles), and Ambu (plasma), together constitute seven essential entities that play a role in the pathogenesis of Kushta.^[8] Based on the permutation and combination of dosha-dushya, skin disorders are numerous. The type of Kushta is diagnosed according to the dominant dosha Lakshanas. Classical texts mention 18 types of Kushta as commonly manifested skin disorders, which are further classified into 7 Mahakushta and 11 Kshudra Kushta. Lichen Amyloidosis can be correlated with Kachhu falls under the kshudra Kusta according to Bhaishajya Ratnavali, a type of Kshudra Kushta characterised by predominance of Sleshma-pitta Dosha.

Mode of Action of Lepa (Procedural Effect): When Lepa is applied to the skin in Pratilomagati, the medicine penetrates the Romakupa and is absorbed through the Svedavahi Srotas. The Virya of the Dravya is absorbed via the Sira-Mukhas.^[9] The Bhrajaka Pitta facilitates the Pachana of Abhyanga, Parisheka, Avagaha, and Lepa Virya, allowing their Virya to enter the body.^[10] The penetration of Lepa Virya occurs at the Twak, Rakta, and Mamsa Dhatu.^[11] In discussing the Shashti Upakramas for Vrana, Acharya Sushruta emphasizes the importance of Alepana Chikitsa, using a simile: just as water extinguishes a fire in a burning house, Lepa immediately pacifies the provoked local Doshas. The primary actions of Lepa are Shodhana, Utsadana, and Ropana.^[12]

PROBABLE MODE OF ACTION OF A SIMHASYA LEPA

The formulation included Haridra Churna, prepared by combining Vasa Patra swarasa and Gomutra in sufficient quantity to achieve a lepa consistency. This was applied to the affected limb for 15 days, twice daily, in the morning and evening. Vasa possesses tikta and katu rasa, along with laghu and rookshana guna, and has sheeta veerya. It is known to alleviate Kapha and Pitta, while also exhibiting kushhtagna and kandugana properties. Haridra has tikta and katu rasa, laghu and rooksha guna, with ushna veerya, making it tridosahara, kushhtagna, kandugana, vrana roopana, and varnya. Gomutra is characterized by katu and lavana rasa, ushna veerya, and possesses arooksha, teekshna, and kaphahara properties, along with krimighna, kushtagna, and kandugna effects. The common properties of tikta rasa, laghu, and rooksha guna, along with Kapha and Pitta hara characteristics, facilitate the breakdown of pathology, potentially leading to an improvement in the condition.

Rationale for Shamana Aushada

Tab Arogyavardhini Rasa, Tab Kaishora Guggulu, and Tab Gandhaka Rasayana are commonly used for kusta, known for their kustagna, krimighna, and rasayana properties. The same attributes of these medications were utilized in this case. This treatment approach yielded highly significant results, providing up to 95% relief from the condition.

CONCLUSION

LA is a condition that significantly impacts both the body and mind due to cosmetic disfigurement. Ayurveda has considerable potential to address such skin diseases. Many patients can achieve normal skin restoration by adhering to the Ayurvedic treatment protocols outlined in Kusta Chikitsa. In this case study, improvements were noted in parameters such as the occurrence of normal pigmentation at the affected site, marked relief in itching, and decreased burning sensation. Simhasya Lepa was used alongside oral medications, including Tab Arogyavardhini Rasa, Tab Kaishora Guggulu, and Tab Gandhaka Rasayana as Shamana Chikitsa.

Given the chronic nature of the disease, there may be a risk of recurrence. There is potential for repeated Shodana, Shamana, and Bahirparimarjana Chikitsa, which may assist in eliminating the root cause of the disease and prevent recurrence, leading to overall improvement of the lesions and restoration of normal skin.

REFERENCES

1. Barry Ladizinski, MD and Kachiu Cecilia Lee, MD MPH, Lichen amyloidosis downloaded on 30/3/23 at 1:30pm <https://www.bad.org.uk/pils/primary-localised-cutaneous-amyloidosis/>.
2. British Association of Dermatology, Registered Charity No. 258474 downloaded on 30/3/23 at 1:30pm <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3986318/>.
3. Shri Govindadasavirachita, Bhaishjyarnavali, Reprint 2009, Chaukhambha Sanskrit Sansthan, Varnasi, Volume 3, Kushtarogadhikara, Verse 43, Page No. 54.
4. British Association of Dermatology, Registered Charity No. 258474 downloaded on 30/3/23 at 1:30pm <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3986318/>.
5. Raja Radha Kanth Deva, Shabdakalpadruma, Volume-2, 3rd edition, 1967, Page No. 7 Chaukhambha Samskruta Grantamala, Varansi.

6. Shri Govindadasavirachita, Bhaishjyarnavali, Reprint 2009, Chaukhambha Sanskrit Sansthan, Varnasi, Volume 3, Kshudrarogadhikara, Verse 85, Page No. 181.
7. Shri Govindadasavirachita, Bhaishjyarnavali, Reprint 2009, Chaukhambha Sanskrit Sansthan, Varnasi, Volume 3, Kushtarogadhikara, Verse 43, Page No. 54.
8. Vaidya Yadavji Trikamji Acharya edited Charaka Samhita, with Ayurveda Deepika Commentry of Chakrapani, Published by Chaukhamba Surbharati Prakashan, Varanasi, Reprint edition 2016, Charaka Samhita, Chikitsa Sthana, Chapter No.7, Shloka No.21.
9. Sushruta, Sushruta Samhita with Nibandhasangraha commentary by Vaidya Yadavji Trikamji Acharya, Reprint 2014, Choukhambha Surabharati Prakashan Varanasi, Sutrasthana, Chapter-18th, Verse – 4 th with commentary, Pg – 84-85.
10. Sushruta, Sushruta Samhita with Nibandhasangraha commentary by Vaidya Yadavji Trikamji Acharya, Reprint 2014, Choukhambha Surabharati Prakashan Varanasi, Shareerasthana, Chapter - 9th, Commentary on verse – 8th, Pg – 385.
11. Sushruta, Sushruta Samhita with Nibandhasangraha commentary by Vaidya Yadavji Trikamji Acharya, Reprint 2014, Choukhambha Surabharati Prakashan Varanasi, Sutrasthana, Chapter - 18th, Verse– 8th, Pg – 85.
12. Sushruta, Sushruta Samhita with Nibandhasangraha commentary by Vaidya Yadavji Trikamji Acharya, Reprint 2014, Choukhambha Surabharati Prakashan Varanasi, Chikitsasthana, Chapter – 1st, Verse– 15th -16th, Pg – 398.