

Ayurvedic Management of Lichen Planus: A Case Study

Dr. Santosh Achutrao Chate

Professor, Kaumarbharityatantra, Yashwantrao
Chavan Ayurvedic Medical College and Hospital,
N. Bhalgaon, Aurangabad.

Abstract

Lichen Planus is an uncommon papulosquamous skin disorder. It affects all age group but most common between the ages of 30 to 60. Lichen Planus is thought to occur as a result of an immune dysfunction rather of debatable etiology. It is characterised by the formation of flat topped, polygonal, greyish white, purple/ liliac eruptions. Modern medicine management like topical corticosteroid creams, lotion, injections, oral antihistamine pills, etc are not significant for cure of disease.

A 43 yrs. old male patient with Lichen Planus since 6 yrs. came for Ayurvedic treatment after trying other pathy treatments. Lichen Planus can be treated with the principles of treatment mentioned for Kushtha in Ayurveda. So according to predominance of doshas in Lichen Planus, I treated patient with Vaman therapy of Panchkarma first, then oral Ayurvedic medicines with local oil application for 11 months. At the end of treatment patient was completely cured without any adverse effects.

Keywords: Lichen Planus, Kushtha, Ayurveda, Vaman, Panchkarma.

Introduction

An inflammatory skin condition typically affecting the skin and the oral mucosa is referred to "Lichen Planus", from the words "lichen" that grows on rocks and tree bark and from the Latin word "planus" means flat.

It is characterized by the formation of flat topped, polygonal, grayish white, purple/ liliac eruptions, itching on skin specially on the arms and legs, less often on some other parts of body including the nails, vagina, penis, scalp and mouth.¹ The typical lesion consists of polygonal and pleomorphic papules which are very small (1-4 mm.) at the outset but gradually become the size of a pea with a violet colour.² It affects all age group but most common between the ages of 30 to 60.³ Its precise etiology is unknown. However, it may either be bacterial or viral in origin. Lichen Planus is thought to occur as a result of an immune dysfunction with altered surface keratinocyte antigen presentation and subsequent cytotoxic T-cell reaction.⁴ Immunologic factors are also incriminated due the presence of consistant immune-fluorescence pattern. Also several drugs such as chloroquine, quinacrine, streptomycin, para-amino salicylic acid, methyl dopa, quinidine, phenothiazine, levamisole, penicillamine, etc. are incriminated.^{5a}

As per Modern medical science treatment of Lichen Planus is steroids like prednisolone, antifungal like griseofulvin, antihistamines like promethazine hydrochloride, pheniramine maleate and topical corticosteroids for local application like

clobetasol propionate, fluocinotone acetonide. Also intralesional injections like triamcinolone acetonide^{5b} but these treatments are just symptomatic, they can not even stop progress of disease, so the cure is too far. So I decided to treat patient as per predominance of doshas and as per treatment mentioned in Ayurvedic Texts for Kushtha.

A Case Report

A male patient of age 43 yrs. came in OPD with chief complaints of polygonal, flat topped, grayish violet coloured, hyperpigmented papules (pitika) measuring 3-4 mm and some 6-8 mm in size on ankles, forearms, thighs, neck and on lower back. Itching (kandu) at the site of papules was there. The onset of disease was started before 6 yrs., at that time papules were arrived first on ankle and neck of 2-3 mm size then gradually they appear on thighs, forearms, lower back and size of old papules increased upto 6-8 mm.

Patient had taken 2-3 yrs. allopathy treatment but disease did not controlled, just itching was relieved during treatment. After discontinuation of treatment, itching also started immediately.

There was neither any previous history of any major skin or autoimmune disorder. While taking details about his daily diet, he used to take milkshakes, milk with khichadi which is viruddha ahar according to Ayurveda and these hetusevan leads to skin diseases here Hypertrophic Lichen Planus. According to allopathy etiology is unknown.

On Examination

Prakruti – Pittaprdhan vatanubandhi
Bal – madhyam
Nadi – 76 /min. Prakrut
Mala-mutra pravrutti – Prakrut
Agni – Prakrut
Jivha – Alpa sama
B.P.- 124/ 78 mmhg.
Temperature – 98.7 °F
CVS / CNS / RS – NAD
P/A – Soft
No H/O HTN and DM.

Pathological Investigations

The most useful diagnostic test is a skin biopsy.

Skin biopsy was performed by previous dermatologist to confirm the diagnosis and the report confirmed the Hypertrophic Lichen Planus disease.

Ayurvedic Management

Shodhana Karma:

Poorva Karma:

Snehapana: Before administration of Vamana, patient had given internal Snehapana with Mahatikta Ghrut in increasing dose i.e.30-60-90-120-150 ml for 5 days and samyak snehana lakshanas were seen. After observing the Samyaka Snigdha Lakshanas the patient was advised to take Kaphotkleshaka Ahara (i.e. Dahi, Udidwada, Dahi-Bhaat, Lassi, etc.) and Sarvanga Snehana with Tila Taila and Sarvanga Swedana with Dashmoola Kwath performed.

Pradhana Karma:

On Vamana day patient was advised to pass natural urges before the procedure and then kept on Sarvanga Snehana and Sarvanga Sweadana. Patient was examined i.e. Pulse, B.P., R.R. etc. before Vamana procedure.

Vamana Kalpa- Madanaphala Pippali Choorna + Vacha + Saindhava + Madhu.

Ikshu rasa was given to patient for akanthapan, as it is also vamanopaga.

Examined the whole procedure as per said in ancient texts i.e. Vaigiki, Laingiki, Antiki and Maniki. Also examined the Pulse, B.P., R. R. during and after the procedure.

Paschata Karma:

After Samyaka Vamana Vegas, Patient was kept on Paschata Karma i.e. Dhoompana, Samsarjana Krama (Peya, Vilepi in diet for 3-5days) with complete rest.

Shamana chikitsa:

Sr . No .	Ayurvedic Medicine	Doses	Anupana	Durati on
1	Arogyavardhini Rasa	500 mg tab. 2 bd after meals	Koshna jala	3 months
2	Panchtikta Ghruta Guggulu	500 mg tab. 2 bd after meals	Koshna jala	3 months
3	Mhamanjishthadi Kadha	20 ml bd after meals	20 ml Koshna jala	3 months
4	Mahatikta Ghruta	15 ml bd at 8.00 am and 5.00 pm on empty stomach	Koshna jala	3 months
5	Mahamarichyadi tailam bruhat	Local application		3 months

With this treatment patient was asked to stop viruddha ahara, bakery food, chilled water, ice cream, etc.

After 3 months treatment, there was significant reduction in sizes of Papules or Lesions and itching observed. One thing noticed was there were no new lesions seen. So, same treatment was continued for another 3 months.

After 6 months further progress towards reduction in sizes of lesions were observed. Then instead of Arogyavardhini rasa, Gandhak Rasayan was started as 500 mg bd and rest of medicines continued all till the papules/ lesions disappear completely and patient get rid of Hypertrophic Lichen Planus for which next five months treatment was needed. One other good thing observed was patient did not have any adverse effects during and after treatment.

Discussion

As patient had taken allopathy treatment for 2-3 yrs, he preferred to take Ayurvedic treatment. Patients diagnosis was Hypertrophic Lichen Planus by observing classical symptoms and also was confirmed by skin biopsy. But according to Ayurveda there is no 100% resembling vyadhi to Lichen Planus, so I decided to treat according to

predominance of dosha Kapha and Vata. Also Ayurvedic Management done like Kushtha Vyadhi. I had planned treatment considering chronic nature of the disease. So first Vaman karma and then shamana chikitsa as a line of treatment was decided.

Probable mode of action of Ayurvedic Management

Shodhana Chikitsa :

Vaman karma is clearly mentioned by Charaka in Siddhithana and Vagbhata in Ashtang Hrudaya Sutrasthana for Treatment of Kushtha⁶. Here Kapha dosha was predominant so decided for Vaman Karma.

Shamana Chikitsa :

Arogyvardhini Rasa is specially indicated for all types of Kushtha⁷ (skin disorders) in Rasa Yoga Sagar. Panchtikta Ghruta Guggulu due to its tikta rasatmak dravyas it works as raktashodhak and krumighna⁸. Mahamanjishthadi kadha has kushthaghna, raktaprasadan, raktashodhak, jantughna properties which are useful in treating the all tvachavikar⁹. Mahatikta Ghruta has an important role in all types of Kushtha¹⁰. Marichyadi tailam bruhat¹¹ is indicated for local application in Kushtharogachikitsa prakaranam of Bhaishajyaratnavali. Gandhak Rasayan possesses kushthaghna, vishaghna properties¹² which plays important role in cure of the various skin diseases.

Conclusion

A patient with Hypertrophic Lichen Planus was successfully cured with Ayurvedic Treatment without any adverse effects. Further study on more number of patient will definitely needed.

References

1. Textbook Of Clinical Dermatology, 5th edition, Virendra N. Sehgal, Jaypee Brothers Medical Publishers, 2011.
2. Textbook Of Medicine, Prof. P.C.Das, Current Book International, fourth edition, Jan. 2000.
3. Boyd AS, Neldner KHG. Lichen Planus. J Acad Dermatol. 1991;25(4):593-619.PMID: 1791218.
4. Clinical Dermatology, first edition, Carol Soutor, Maria Hordinsky, McGraw Hill Education Lange.
5. a,b. Textbook Of Clinical Dermatology, 5th edition, Virendra N. Sehgal, Jaypee Brothers Medical Publishers, 2011.
6. Charaka Samhita, Siddhithana 2-10.
7. Bharat bhaishajya ratnakar, 1/448.
8. Rasatantrasara Siddhaprayog Sangraha-2.
9. Sharangadhara Samhita, Madhyam khanda-Kushtha.
10. Bhaishajya Ratnavali. Kaviraj Shri Ambikadutta Shastry. 54 Kushthachikitsa Prakaranam, Chaukhambha Sanskrit Sansthan. Varanasi. 17th edition.,P.no. 633.
11. Bhaishajya Ratnavali. Kaviraj Shri Ambikadutta Shastry. 54 Kushthachikitsa Prakaranam, Chaukhambha Sanskrit Sansthan. Varanasi. 17th edition.,P.no. 636.
12. Bharat bhaishajya ratnakar, 2/1533.