



ISSN: 0975-833X

Available online at <http://www.journalcra.com>

International Journal of Current Research
Vol. 12, Issue, 10, pp.14340-14346, October, 2020

DOI: <https://doi.org/10.24941/ijcr.39919.10.2020>

INTERNATIONAL JOURNAL
OF CURRENT RESEARCH

RESEARCH ARTICLE

ROLE OF COMBINED EFFECT OF SIDDHARTAK SNANA AND MATRA BASTI WITH SHAMANA YOGA CHIKITSA IN EKAKUSHTA (PSORIASIS) – A CASE STUDY

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ARTICLE INFO

Article History:

Received 29th July, 2020
Received in revised form
17th August, 2020
Accepted 19th September, 2020
Published online 30th October, 2020

Key Words:

Ayurveda, Ekakushta, Matra basti,
Psoriasis, Shaman
Yoga Chikitsa.

ABSTRACT

In Ayurveda, all the skin diseases are explained under Kushtha roga and are classified as Maha kushtha (major skin disorders) and Kshudra Kushtha (minor skin disorders). Ekakushta is one among the eleven Kshudra Kushta; it is predominance of Kapha & Vata Dosha. It is one of the most common disorders of the dermatologic diseases which is non-infectious chronic relapsing inflammatory skin disease having unknown etiology characterized by well-defined dry scaly erythematous patches and covered with adherent silvery white scales. Clinically Ekakushta can be correlated with psoriasis. 2 to 3% of the total world population has psoriasis, and prevalence in India ranges from 0.44 to 2.8%. Ekakushta (Psoriasis) can be better managed by the Ayurvedic principles of management namely Nidana Parivarjana (avoiding etiological factor), Shodhana chikitsa (Panchakarma therapy), Shamana chikitsa (palliative treatment). A 66 year old male patient having severe itchy, scaly lesions all over the body including scalp associated with burning sensation approached OPD. The patient was treated with Matra basti 80 ml with Sahacharadi oil, external application of Sidharthaka Snana, Sarwang Abhyang, Vashpa Sweda along with Shamana Yoga Chikitsa Kankbindwarishta, Gandhak rasayana, Talkeshwar ras, Manjishthadi churna, Triphala guggul. Patient got 70% results in chief and associated complaints within 15 days. This case study revealed the efficacy of Ayurvedic therapy, including both external and internal medications, for one month in the management of Kushtha. Subject Area: EKAKUSTHA (PSORIASIS)

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Citation: Astha verma and Shailesh dhenge, 2020. "Role of combined effect of Siddhartak Snana and Matra basti with Shamana yoga chikitsa in Ekakushta (Psoriasis) – A Case study", *International Journal of Current Research*, 12, (10), 14340-14346.

INTRODUCTION

In classics *Ekakushta* is considered as one among the *Ashtamahagada* (octaminous disorders) by all *Acharya*.^[1] In all types *Kushtha*, the basic body components vitiated are called as *Saptakodravysangraha* i.e. *Tridosha* (~*Vata*, *Pitta*, *Kapha*), *Twaka* (~skin), *Rakta* (~blood), *Maans* (~muscle), *lasika* (~lymph).^[2] Clinical features of *Ekaushtha* mention by *Acharya Charaka* are *Aswedanam* (lesions is dry, rough and loss of perspiration), *Mahavastu* (lesions are found all over the body), *Matasyashakalopam* (well defined raised macules, papules of erythema found which are covered with silvery scales) and *Aruna varna* (discoloration).^[3] It is very much similar to psoriasis which is common genetically determined, chronic autoimmune, inflammatory skin disease according

to 2020 ICD-10-CM Diagnosis Code L40.9 characterized by rounded erythematous, dry, itchy or sore patches of thick, red skin with silvery scaling patches. Psoriatic lesions have a predilection for nails, scalp, genitalia, extensor surfaces, and the lumbosacral region, elbows, knees, scalp, back, face, palms and feet. Due to food and life style variations it has become a global problem varying its incidence as per geographical distribution, sex and age group. According to World Health Organization (WHO), the worldwide prevalence of psoriasis is 2%–3%. In India, the prevalence of psoriasis varies from 0.44% to 2.88%. Psoriasis first appears during two peak age ranges, the first peak occurs in persons aged 16–22 years, and the second occurs in persons aged 57–60 years.^[4] In this case study for *Samprapti Bhang Siddharthak snana*^[5] and *Matra Basti*^[6] along with *Shaman* (~mitigation) *Yoga Chikitsa*^[7] was given to the patient. Aggravation of *Ekakushta* occurs due to predominance of *Vata Dosh*^[8] in the pathogenesis. *Vata* is located in *Pakvashaya* (intestine) which is main responsible factor for the elimination and retention of *Mala* (stool), *Mutra* (urine)

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and other toxic particles. *Vata* is very active principal in pathogenesis of any disease in *Vridhhavastha* (old age) and *Basti* (enema) is the best treatment for the *Vataj vyadhi*. If we control *Vata dosha* then it can help to give better results to cure the disease.

Case study: A 62-year-old unmarried Hindu male farmer with lower socio-economical status visited outpatient department of Mandsaur Ayurveda Hospital, Mandsaur with complaints of silvery scales on both elbows, knees, scalp, back, face, palms and feet (*Matasyashakalopam*), lesions are dry, rough and loss of perspiration (*Aswedanam*), Pain and swelling on both palm & Foot, Foul smell of the body (*Anga gandhtwam*), burning sensation of palms (*Karadaham*), burning sensation of soles (*Pada daham*), pus formation (*Paka*), numbness (*Suptata*), associated with constipation (*Malabdhata*), poor appetite (*Khudhamanda*), stress (*Chinta*) and depression (*Manasikawasad*). Patient had been suffering from above symptoms since last 6 months. He took allopathic treatment from private clinic but symptoms aggravated in spite of treatment, so he came to Mandsaur Ayurveda hospital for further management. Patient had *Vatakaphaj prakuti*, was non-hypertensive, diabetic and had no alcoholic or narcotic addiction, did not have any family history for any other ailments. Patient had food habits like *Rukshaanna sewana* (dry food intake) like *Poha*, bread, and toast, *Virudhha ahara* (incompatible food), *Pittaprapokapa ahara* (diet which increase burning sensations) like Non-vegetarian, spicy, and salty food, *Abhishyandi ahar* (food which close micro channels of the body) and had lifestyle like *Atilanghana* (fasting), *Ratrijagran* (Late night sleep), *Vega dharan* (suppression of natural urges, Insufficient water intake, sedentary lifestyle). Blood pressure was 130/90 mmHg, pulse was 98/min and respiratory rate was 18/min. Patient having symptoms such as *Matasyashakalopam*, *Aswedanam*, *Anga gandhtwam*, *Karadaham*, *Pada daham*, *Paka*, *Suptata*, *Malabdhata*, *Khudhamanda*, *Chinta* and *Manasikawasad* which confirmed diagnosis as *Ekakushta*. Informed consent was obtained from the patient for documentation and publication of his case history.

Investigations: Laboratory investigations of patient were as follows: -Hemoglobin - 11.5 %, total WBC count – 9500 Cells/CuMm, ESR – 36 - Mm in 1hr, Fasting blood sugar – 150mg/dL, postprandial blood sugar – 220mg/dl, Serum Creatinine - 0.8mg/dL, HIV – Negative, HbsAg – Negative respectively.

Nidan Panchak [9] : *Hetu* (etiology or causative factors): *Sannikrishta* and *Viprakrishta* both type of *Hetus* are responsible factor in the pathogenesis of the disease like improper food habits (*Mithyaahara*), Taking food at irregular time (*Vishmasana*) or in state of indigestion (*Ajirnasana*), Non-vegetarian, spicy, and salty food; *Ruksha Ahar* (*Poha*, bread and toast), Insufficient water intake, sedentary lifestyle, improper physical, mental or verbal activities, Psychogenic factors, low immunity power, *Vridhhavastha*, *Varsha ritu* associated with Diabetes mellitus and suppression of natural urges.

Purvaroop (prodromal symptoms): *Agnimandhya*.

Roop (manifestation): *Sarwang twak Kandu*, *twak Vaivarnata*, *Ajirna*, *Aruchi*, *Malabadhata*, *Mansik awasad*.

Samprapti (Patho-physiology of the disease): In the present case, above causative factors provoked the *Dosha*, *Vata-Kapha Pradhan Tridosha Prakopa* (Three elements of the body -*Vata*, *Pitta*, *Kapha*) gets *Agnimandhya* (low digestive power) and also cause of *Dushti* (vitiation) of *Grahani* (duodenum). Thus the food does not get digested properly leading production of *Ama* (undigested food). *Ama dosha* Increases the *Prabhava* on *Kapha dosha* vitiation and Psychogenic factors with all *Hetus* increase the condition of *Vata dosha*. These vitiated *doshas* flow through *Rakta dhatu* and spread in all over the body. They accumulated at the place of *Twaka*, *Mans*, *Lasika* of the body and shows the symptoms like changes in Skin lesions (erythematous scaly skin), Itchy or sore patches of thick, Red skin with silvery scales on elbows, Knees, Scalp, back, face, Palms & Feet, Loss of perspiration, Burning sensation, Pus Formation, Pain and swelling on both palm and feet according to *Dosh-dushya samurchana* (amalgamation of vitiated doshas with weak and susceptible tissues) with also involvement of *Rakta dhatu dushti* and *Pitta* aggravation along with *Vatakapha pradhanata*. So there is initiation of disease *Ekakushta*.

Vyaktavastha (Diagnosis): *Ekakushta*.

Assessment of Patient

The results were evaluated by subjective and objective parameters mainly based on clinical observation by grading method. Subjective criteria were Mental Stress, Hypersensitivity to cold, *Kandu*, *Ruka* (pain in foot and palm), *Suptata* (numbness in foot and palm), *Matasyashakalopam*, *Aswedanam*, *Anga gandhtwam*, *Karadaham*, *Padadaham*, *Paka*, *Malabadhata*, *Kshudha Mandata* and Objective parameter were PASI Score. [10] Symptoms were graded as symptomless (-), mild (+), moderate (++) and severe (+++). PASI Scores range from 0 to 72. A score of more than 10 generally translates to moderate-to-severe.

Observations and Result

Follow-up and Outcome: The clinical features of *Ekakushta* started improving by the 7th day and later significantly reduced by 15th day of the treatment. After 1 month, almost 100 percent improvement was found. Later he was asked for follow-up after every 7 days till one month, no signs of recurrence were noticed and patient's condition was healthy and stable.

Outcome of the Treatment: Erythema (redness) was fully reduced after treatment, indurations (thickness) was rough before treatment but it was reduced after three follow-ups, desquamation (scaling) was huge before treatment and it was fully reduced after third follow-up, and itching, which was more before treatment, was reduced after *Shodhana* and *Shamana*. PASI score before treatment was 38.4 and it was 7.8 after 15 days treatment, after one month of treatment it was 1.2. After treatment Blood sugar Fasting was 84mg/dl and Blood sugar Postprandial 166mg/dl.

DISCUSSION

The plaque psoriasis appears to be largely a disorder of hyperkeratinization. The basic defect is rapid displacement of epidermis in psoriatic lesion.

Sr. no	Signs	Symptoms
Inspection		
1.	Color of skin	Redness of skin, silvery scaly skin
2.	Local temperature	Normal
3.	Texture	rough and raised
Palpation		
1.	Skin Lesion area	Skin lesion area was examined for the texture, discoloration, secretions, Auspitz sign and Candle grease sign
2.	Disturbance of skin sensation	Secondary Hyperalgesia, Hypoesthesia
3.	Circulation	Livedo
4.	Edema	Peripheral edema
5.	Skin	positive Auspitz sign when scales are scraped off, there is pinpoint bleeding, results from exposure of dermal papillae nail changes Onychomycosis positive candle-grease sign when a sharp object is used to scratch a lesion, a candle-grease-like scale can be produced Koebner's phenomenon psoriatic lesions appear at site of cutaneous pustular psoriasis present
6.	Disturbance of skin sensation	Secondary Hyperalgesia, Hypoesthesia

Table 2 - Systemic examination

Central nervous system	Normal
Respiratory system	Chest Clear , No added sound
Cardiovascular system	Trachea centrally placed, no dilated or engorged veins , no scars or other visible pulsation, Apical impulse felt , S ₁ S ₂ sound heard, No thrill- Murmur.
G.i. examination	P/A Inspection: No abnormality seen Palpation: Soft abdomen, no tenderness elicited on left side lumbar region, Abdomino- thoracic movement is Normal no bulging during expiration, no abdominal pulsation is seen, no dilated vein, No Hernia, no spleenomegaly/hepatomegaly.

Table 3 - Ashtavidha pariksha

1.	Nadi (pulse)	98 beats/min
2.	Mala (stool)	Asamyak (constipation 1 time, unsatisfactory bowel habit)
3.	Mutra (urine)	Prakrat
4.	Jeeva (tongue)	Saam
5.	Shabda(speech)	Aspashta
6.	Sparsha (skin)	Ruksha, Puyasrava
7.	Druka (eyes)	Prakruta (no pallor and no Icterus)
8.	Akruti (posture)	Hina.

Nidan Panchak^[9]

Table 4 - Samprapti Ghataka

1.	Doshas	Vata Kapha pradhan Tridoshaja
2.	Dusya	Twaka, Rasa Rakta, Mansa, Lasika
3.	Agni	Jatharagni and Dhatwagnimandhya
4.	Strotasa	Rasavaha, Raktavaha, Mansvaha, Swedavahasrotasa, Annavahasrotas
5.	Udbhavsthana	Twaka ,Rasa Rakta, Mansa, Lasika
6.	Adhsthana	Twaka
7.	Dushti Prakara	Sanga
8.	Sanchar sthana	Sarwa sharir
8.	Rog Marga	Bahya
9.	Vyadhi swabhav	chirkari
9.	Sadhysadhya	Krichhasadhya

Table 5 - Treatment Plan

Treatment	Medicine	Time	Dosage	Duration
Siddharthak snana Ch.chi.7/92	Nagarmotha , madanphala, Triphala, Karanja leave, Amaltas leave, Indrajo, Daruharidra, Chittavan chal	Before bath at morning	5 liter Kwath	12/1/2019 to 26/1/2019 15 Days
Sarwang Abhyang Vashpa sweda	Nimbadi Tail	Empty stomach Before Basti	-	19/1/2019 to 26/1/2019 8 Days
Matra basti	Sahacharadi oil	after meal After lunch	6 Tola (80 ml)	19/1/2019 to 26/1/2019 8 Days

Table 5. Treatment Plan

Treatment	Medicine	Time	Dosage	Duration
Siddharthak snana Ch.chi.7/92	Nagarmotha , madaaphala, Triphala, Karanja leave, Amaltas leave, Indrajao, Daruharidra, Chittavan chal	Before bath at morning	5 liter Kwath	12/1/2019 to 26/1/2019 15 Days
Sarwang Abhyang Vashpa sweda	Nimbadi Tail	Empty stomach Before Basti	-	19/1/2019 to 26/1/2019 8 Days
Matra basti	Sahacharadi oil	after meal After lunch	6 Tola (80 ml)	19/1/2019 to 26/1/2019 8 Days

Table 6. Shamana Chikitsa

Sr.no.	Shamana Aushadhi	Dose	Anupana / Kaal	Route	Duration
1.	Gandhak rasayana,	2 tab twice a day	Before meal with warm water	Oral	12/1/2019 to 11/2/2019 (1 month)
2.	Talkeshwar ras,	2 tab twice a day	Before meal with warm water	Oral	12/1/2019 to 11/2/2019 (1 month)
3.	Manjishthadi churna,	5 gm twice a day	Before meal with warm water	Oral	12/1/2019 to 11/2/2019 (1 month)
4.	Triphla guggul	2 tab twice a day	After meal with warm water	Oral	12/1/2019 to 11/2/2019 (1 month)
5.	Kankabindwarishta, Ch.chi.7/77,78,79	15 ml twice a day	After meal with warm water	Oral	12/1/2019 to 11/2/2019 (1 month)

Table 7. Subjective Parameter

Symptoms	Before Treatment	After 15 days	After Treatment
Mansika Avasad (Mental Stress)	++	+	-
Kandu (Itching)	+++	-	-
Ruka (in foot and palm)	+++	-	-
Suptata (in foot and palm)	+++	-	-
Matasyashakalopam	+++	-	-
Aswedanam	+++	+	-
Anga gandhtwam	++	-	-
Karadaham	+++	-	-
Padadaham	+++	-	-
Paka	+++	-	-
Malabadhata	+++	+	-
Kshudha Mandata	++	+	-
Candle grease sign	Positive	Negative	Negative
Auspitz sign	Positive	Negative	Negative

Table 8 - Objective parameter PASI (Psoriasis area severity index) SCORE

Plaque characteristic / Intensity	Head 0.1			Upper Limbs 0.2			Trunk 0.3			Lower Limbs 0.4		
	BT	After 15 day	AT	BT	After 15 day	AT	BT	After 15 day	AT	BT	After 15 day	AT
Erythema (Redness)	4	2	1	4	2	1	2	1	1	3	1	1
Indurations (Thickness)	4	1	0	4	1	0	2	1	0	3	1	0
Desquamation (Scaling)	4	1	0	4	1	0	1	0	0	3	1	0
Total Score	12	4	1	12	4	1	5	2	0	9	3	0
Skin area involve	8	3.5	0.5	15	8	2	18	10	3	22	6	2
Lesion Score												
Area Score (A)	6	1.2	0.1	12	2.4	0.4	6	1.8	0.3	14.4	2.4	0.4
Area Score (B)	1	2	0	2	1	0	1	1	0	2	1	0
Subtotal (C)=(A X B)	6	2.4	0	24	2.4	0	6	1.8	0	28.8	2.4	0
Body surface area (BSA)	0.6	0.24	0	4.8	0.48	0	1.8	0.54	0	11.52	0.96	0
Totals (C X BSA)	3.6	0.576	0	115.2	1.152	0	10.8	0.972	0	331.776	2.304	0

Ekakushta is having Bahudoshya Avastha described under the Raktapradoshaja Vyadhi (blood predominant diseases). Samshodhana (purification therapy) is one of the important treatments of Ayurveda, which deals mainly with elimination of the aggravated Doshas from the body.^[11] In this case study Siddharthak snana and Matra basti along with Shaman Yog chikitsa (internal Ayurvedic medication) combinely serve the purpose of Srtotoshodhana (open micro channels) Dosha shamak, Ama pachak (digestive), Agni vardhan (carminative), Shoth shamak (anti inflammatory), Kushtaghna, Krimihara (antihelmentic), Rakta shodhak (blood purifier), Ropana (healing) etc. Sidharthaka snanan yoga (combination of herbal drugs) have Musta (Cyperus rotundus) with the property of Katu (pungent),

Tikta (bitter), Kashaya (Astringent) Rasatmaka (Taste), Laghu (light), Ruksha (dry) Guna (quality), Shita (cold) Virya (taste conversion after digestion), Katu (pungent) Vipaka act as Kaphapitta dosha shamak, Grahi (absorbent), Deepan (improves digestive fire or digestion strength), Pachana (digestive, relives Ama Dosha), Krimihara, Jantughna relives worm infestation, useful in infected wound, due to Sheeta virya it act as pittashamka relives in burning sensation. Madanphala (Randia spinosas) is Madhura (sweet), Tikta (bitter) Rasatmaka, Laghu, Ruksha Guna, Katu Vipaka, Ushna Virya Balance Kaphavata Dosha, Lekhaniya (scrapes inner lining of blood pipes), Vranapaha (Helps in quick wound healing) reduced Shopha (inflammation).

Table 9. Mode of action of Shaman chikitsa

Sr.no.	Shaman chikitsa	Property	Action
1.	<i>Gandhak rasayana,</i>	<i>Rasa</i> (taste on the tongue): <i>Kashaya</i> (Astringent), <i>Madhura</i> (Sweet), <i>Katu</i> (Pungent), <i>Tikta</i> (Bitter) <i>Guna</i> (Pharmacological Action): <i>Ushna</i> (Hot), <i>Snigdha</i> (Unctuous), <i>Sara</i> (Unstable) <i>Virya</i> : <i>Ushna</i> (Heating) <i>Vipaka</i> (transformed state after digestion): <i>Katu</i> (Pungent)	<i>Rasayana, Dipana, Pachana, Vatahara, Kaphahara, Balya, Medhya, Pittala, Chakchuya, Krimihara, Sutajit, Kushtha-hara, Ama-shotahara, Sutendraviryaprada, Vatahara.</i> <i>Gandhak</i> is a stimulant to the secreting organs such as the skin and the bronchial mucous membranes.
2.	<i>Talkeshwar ras,</i>	<i>Hartal</i> balances <i>Kapha</i> and <i>Vata Dosh</i> <i>Manashila</i> and <i>Gandhak</i> balances <i>Vata</i> and <i>Pitta Dosh</i> Hence <i>Tridosha Shamak</i>	Antileprotic, antibacterial, and anti-inflammatory agents that help in the treatment of leprosy and other skin diseases such as eczema, psoriasis, urticaria (chronic itching), and skin rashes.
3.	<i>Manjishthadi churna,</i>	<i>Kapha-Pitta Shamak</i>	<i>Rakta shodhak</i> (blood purifier), it proliferates lymph (rasa) and blood (rakta) Anti-inflammatory (<i>Shothahara</i>), wound healing (<i>Vrana ropan</i>), relieves skin diseases (<i>Kusthaghna</i>)
4.	<i>Triphla guggul</i>	<i>Rasa</i> : <i>Kashaya Rasa Pradhana Pancha Rasa Guna</i> : <i>Ruksa</i> and <i>Guru</i> (slight) <i>Virya</i> : <i>Ushna Vipaka</i> : <i>Madhura Doshaghata</i> : Mainly used specifically in predominance of <i>Kapha dosha</i> , moderate vitiation of <i>Vata</i> and mildly deranged <i>Pitta</i> .	Antibacterial, Antimicrobial, Mild Laxative, Intestinal Detox, Anti flatulent, Carminative, Anthelmintic or vermifuge, Digestive stimulant, Anti-diabetic, Anti-inflammatory, Analgesic, Adoptogenic, Anti-cancer, Antioxidant, Anti-mutagenic
5.	<i>Kankabindwarishta</i>	<i>Ch.chi.7/77,78,79</i> <i>Tridoshshamaka</i>	<i>Srtotoshodhana</i> (open micro channels) <i>Dosha shamak, Ama pachak, Agni vardhan, Shothar, Kushtaghna, Krimihara, Rakta shodhak, Ropana</i>

1st day

After 7 days of treatment



After 15 days of treatment



After 1 month of treatment



Triphala balance *Tridosha* as *Amalki* (*Emblica officinalis*) *Pittashamak*, *Vibhitaki* (*Terminalia Bellirica*) *Kapha shamaka* and *Haritaki* (*Terminalia chebula*) *Tridosha shamak*. *Daruharidra* is *Tikta- Kashaya Rasatmaka*, *Laghu-Ruksha Guna*, *Katu Vipaki*, *Ushna Virya* act as *Kapha –Pitta Shamak* relieves pain, inflammation, infection and can cure non healing wounds.

Mode of action of Bahya Snehana Swedana in Ekakushta
Aswedanam (absence of sweating) is due to the obstruction in *Swedavaha Srotas* (channels carrying

sweat), *Srotoshodhak* (channel purification) property opens the micro channels and improves circulation, resulting in perspiration. *Mahavastu* (big lesions) are mainly associated with *Dushita Kapha Dosh* and *Rakta Dushya*. **Bahya Snehana** with *Nimabadi* oil before the *Swedana* (sweating) also helps in removes toxicity from the blood circulates in the body, thus reducing big lesions. *Matsyashakalopamam* (scaling), also called hyperkeratinization, is due to vitiation of *Tridosha*, it acts on all *Doshas* and controls scaling. *Rukshata* (dryness) occurs mainly due to *Vata Dosh*, *Snigdha guna* of the oil is control

the *Vata* ultimately reducing *Rukshta*.^[12] *Swedan* helps in *Shithilikarana* (relaxation) of the vitiated doshas, reaches in the abdomen by *Shakha koshta gati* (movement of tissue from to visceral organs) method and eliminates as a *Mala* (waste matter) from the body.

Mode of action of *Matra Basti*: According to classics *Vata Dosha* is predominant in *Vridhhavastha*. *Vata* is located in *Pakvashaya* which is main responsible factor for the elimination and retention of *mala, mutra* and other toxic particles. *Vata* is very active principal in pathogenesis of *Ekakushta* also in *Vridhhavastha* and *basti* is the best treatment for the *Vataj vyadhi*. If we control *Vata* then it can help to give better results to cure the disease. So, here we go for ***Matra basti*** (Medicated oil enema) with ***Sahacharadi Tail*** which promotes *Bala* (strength) of the emaciated and debilitated person. About the possibility of the absorption of *Basti Dravyas* (drugs) from the colon, because of fat soluble property.

Sahacharadi taila is *Ushnavirya & Shitvirya*. The *Ushnavirya* drugs are *Sahachar, Dashmula, Kust, Agar, Shilaras, Tagar, Raktkarvir*. They are *Tikt-Katu-Kashaya Rasatmak, Vatakapha shamak* and *Shitvirya* drugs are *Shatavari, Ushir, Brahmi, Priyangu* all are *Katu-Madur rasatmak, Vatapittashamak*. When administered *Sahacharadi* oil as *Matra basti* it act as *Tridoshashamak*.

The combination of *Siddhartak Snana and Matra basti* with *Shamana yoga chikitsa* helps in *samprapti bhanga* and earlier positive "Candle grease sign" got negative after treatment. Auspitz sign got negative which is mainly due to *Rakta Dushya*, so this study is an ultimate therapy for *Ekaushtha*. In this way, it helps in breaking pathogenesis, resulting in controlling the symptoms of *Ekakushta*.

Conclusion

In this case study *Siddhartak Snana and Matra basti* with *Shamana yoga chikitsa* having a great effect on symptoms and pathogenesis. Symptoms like *Matsyashakalopamam, Krishna Aruna Aandala, Mahavastu* and *Abhrakapatra sadrusha* lesions are the cardinal features of *Ekakushta* and they are similar to that of plaque psoriasis. PASI score was reduced remarkably and showed clinically significant result in reduction of all the symptoms.

Through this case we found a safe, simple, effective treatment without any complication, easy to take and study was advance the knowledge in this way. This condition impacts on the economically active population representing a significant healthcare cost burden, as it is associated with restricted activity and/or hospitalization.

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