

# Review Article

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# A systemic review of shwitra and importance of raktamokshan chikitsa

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#### **ABSTRACT**

In Ayurveda, the diseases Kushtha represents all type of Skin disorders. Shwitra is considered as one of the variety of Kushta. On the basis of sign and symptoms Shwitra shows simmilarities with Vitiligo. Vitiligo is a progressive in nature and characterized by hypopigmented white patches. The signs and symptoms of Shwitra are; non exudative white, whitish red or coppery-red coloured patches on the skin, loss and discoloration of the hair, roughness and dryness of the skin. All the acharyas of Ayurveda has mentioned different types of shwitra. The Nidanas of shwitra are similar to kushtha but still various other Nidanas are also found in classics which are particular to shwitra. Samprapti of shwitra has been described separately only by Harita samhita. He said that due to vitiated Vata and Pitta dosha, Rakta dhatus Nirmmiti get disturbed and produces the 'Shwet varniya' patches. Considering the prognosis, shwitra is difficult to cure due to its chronic and relapsing nature. Acharya charaka mentioned Shwitra as a Raktapradoshaja vikara. In Charak samhita the treatment modulation for Raktapradoshaja Vyadhis are as Langhana, Virechana, Raktamokshana etc. Hence, all these procedures are applicable to Shwitra also. So, the present study deals with a systemic review of shwitra from all the classics of Ayurveda and importance of Langhana, Virechana and Raktamokshana in Shwitra.

Keywords: Shwitra, Langhana, Virechana, Raktamokshana

# INTRODUCTION

Now a day everyone is conscious about look. The beauty of Skin represents physical as well as psychological health. Skin is a mirror that reflects external and internal pathology, and thus helps in diagnosis of disease. Worldwide the prevalence rate of various skin problems is about 20-30% of the world population<sup>[1]</sup>. Skin complaints affect all ages from neonates to the elderly and cause harm in number of ways, such as discomfort, disfigurement, disability etc.

In Ayurveda, the diseases *Kushtha* r represents all type of Skin disorders. Again Kushta is categorised into Maha Kushtha and Kshudra Kushtha. Later on, Shwitra has been mentioned as another form of Kushha by Sushruta<sup>[2]</sup>. Shwitra can be differentiate from Kushtha on the basis of chronicity and hereditary history, involvement of Twak only, non-infectious nature of disease, peculiarity of Nidana, Asadhya Lakshana.

On the basis of sign and symptoms *Shwitra* shows similarities with Vitiligo. Vitiligo is a progressive in nature and characterized by hypo pigmented white patches. Due to the chronicity of disease and lack of proper effective treatment which makes patient demoralised. In modern science PUVA (Psoralen + Ultra Violet A exposure) therapy and corticosteroids are mainly used for treatment of disease but these therapies have so many harmful side effects.

# HISTORICAL REVIEW

Acharya Charaka first time described detailed description of the disease Shwitra in chapter of Kustha Chikitsa. He described the treatment, types, symptoms and its Nidana. [3] Acharya Sushruta has mentioned three Doshaj types and symptomatology of Shwitra on this basis. [4] In Bhela samhita Shwitra has been counted among eleven Kshudra Kustha and considered as a type of Asadhya Kustha and description is given in 6th chapter of chikitsasthana. Acharya Harita has mentioned detailed Samprapti of Shwitra in 3<sup>rd</sup> sthana but no symptomatology and types have been mentioned. In Kashyapa samhita Pratyatma Lakshana of Shwitra has been described in Sharira sthana

\*Corresponding author: Dr. Amol Chandrakant Gulve Assistant professor (Department of Kayachikitsa), KDMG'S Ayurved Medical College, Chalisgaon Email: amolgulve43@gmail.com Acharya Vagbhatta has differentiated Kustha and Shwitra on the basis of Kleda, Krimi and different Dhatus in it, but mentioned similar etiological factors<sup>[5]</sup>. Further he said that Shwitra is more severe than Kustha as it soon reaches in a state as like that of a burning home<sup>[6]</sup>.

ETYMOLOGY:

In the Nirukti, The word shwitra is derived from the word 'Shveta' and 'Rak'.whereas Shveta denote the white colour or changing toward white colour.

Acharya Kashyapa, in Kushtha Rogadhikara, mentioned that any changes of skin colour toward white, is called as Shwitra.

Ayurveda 'Shabda Kosha' was mentioned it as colour changes towards whiteness. Harita defines it as Pandura Varna. Vachaspatyam defines it as the type of Kushtha. He used the term 'Dhavala' to notify the colour in Shwitra.

#### CLASSIFICATION

The ailment can be categorized in six subtypes. Following factors might be the base for classification.

#### (1) ACCORDING TO DOSHA [7]:

Shwitra can be categorized on the basis of Doshika variance or by involvement of Dosha in the pathology or the dominancy of the Dosha. Sushruta and Vagbhata were mentioned them as;

- 1. Vatika
- 2. Pittaja
- 3. Shleshmaja

#### (2) ACCORDING TO DHATUGATATVA [8]:

1. Daruna: Rakta Dhatugata

2. Aruna: Mamsa Dhatugata

3. Shwitra: Meda Dhatugata

Charaka has mentioned three types of disease on the basis of Dhatugatatva and they were Daruna, Aruna and Shwitra. He further spoke that the base for categorization was the colour of the Patches.

Sushruta further added one more variety, which vitiated twak only.

# (3) ACCORDING TO NIDANA: [9]

There was no direct classification based on etiological factors. Vagbhata narrate the two varieties on the basis of Agnidagdha.

- Agnidagdha
- 2. Anagnidagdha

Vrana is one kind of inflammatory infiltration which causes block in transfer of melanin from melanocyte to keratenocyte. When trauma directly affect basal layer it causes destruction of melanocyte. It can develop after the lesion healed or within active lesions like sub acute lupus.

# (4) ACCORDING TO SADHYASADHYATVA:

- 1. Sadhya Kilasa
- 2. Asadhya Kilasa

Almost all Acharyas have described the symptom of curable and incurable diseases accept Sushruta, who mentioned only Asadhya Lakshana. This classification was not strictly followed by Acharyas. Charaka mentioned that disease became asadhya when it seated in deep dhatu. Same way Kilasa was Meda Gata hence Asadhya most.

#### (5) ACCORDING TO UTTAPATI:

- 1. Congenital (Sahaja)
- 2. Acquired (Jatottara)

Hereditary factor is responsible for the colour of skin (degree of pigmentation).

#### **NIDANA**

Hetu for Shwitra are described only by Acharya Charaka. Acharya vagbhat has mentioned the hetu of kushta is also responsible for shwitra

The nidanas can be broadly classified as follows,

- 1. Aharaja nidana
- 2. Viharaja nidana
- 3. Chikitsa sambandhi nidana

#### Anya nidana

## Aharaja nidana:

Viruddhahara is main hetu for Kushta. Charaka mentioned the consumption of viruddhahara for long period can causes vyadhis like Kustha and Shwitra [10].

The other factors are Drava, snigdha and guru ahara Intake of navanna, dadhi, masha, pishtanna etc.

Excessive intake of amla and lavana rasa

Excessive intake of Madya, Kshara etc.

Ajeernashana and Asatmya bhojana.

Some unknown factors like intake of Gara Visha has also role in manifestation of this disease.

Garbhaja nidana i.e. consumption of excessive kaphakara ahara by garbhini stree causing Shwitra to the baby cannot be substantiated [11].

#### Viharaja Nidana

Chardi nigraha or suppression of vomiting

Use of cold water immediately after exposure to the scorching sun, exertion or frightening condition

Exercise after having excessive food or after indigestion

Divaswapna

Ratri jagarana

Agantuja factors like Vrana including agnidagdha vrana, injury like cuts scrapes, burns can destroy pigment cells resulting in Vitiligo.

#### Chikitsa sambhandhi Nidana

Improper administration of panchakarma procedures causes Kushta. These are adopted to remove vitiated doshas from the body. If they are not administered properly the doshas may get mobilized and hence circulate through tiryakgata siras and lodge in the twak. This results in the twak vikara.

Acharya Kashyapa has said that Kushta roga may also develop if samsarjana karma is not followed properly.

Some rasadravyas like Suvarna, Roupya, Makshika, Heeraka, Tamra, Vanga, Parada, Abhraka, Gandhaka and Haratala when used improperly in the impure state are capable of producing Kushta though they are Kushtaghna dravyas. [12]

If bleeding in the Raktapitta is stopped in the beginning then it may cause kilas.  $^{[13]}$ 

When Jaloukavacharana is done by vishayukta jalouka, Shwitra occurs at the site of the bite.

# Anya Nidana:

Other nidanas like papkarma, vipra, guru gharshana, poorvakrita karma, Gohatya, use of money and materials acquired by theft and sadhu ninda or vadha or apamana are also said to cause the disease Kushta. <sup>[14]</sup> Acharya Sushruta has mentioned that all types of Kustha originate from Vata, Pitta, Kapha and Krimi <sup>[15]</sup>.

Kulaja nidana is also responsible for Shwitra. Sushruta has mentioned Kushtha as a Adibalapravritta vyadhi i.e. the original cause of the disease is attributed to defects of shukra or shonita<sup>[16]</sup>.

#### **SAMPRAPTI:**

There is no specific samprapti mentioned in any treatise of Ayurveda. It has been only said that both Kushta and Shwitra are having common causative factors and also treatment. It is thus inferred that Samprapti of Kushta holds good for Shwitra also.

According to Harita Samhita Harita, due to vitiated *Vata and Pitta dosha*, *Rakta dhatus* Nirmiti get disturbed and produces the *'Shweta varniya'* patches [17].

It can be said that the nidanas causes tridosha prakopa and simultaneously causes shaithilyata in Twak, Rakta, Mamsa and Meda. These prakupita doshas causes Agnimandya at respective levels of dhatwagni. As a result, ama related to dosha and dushya is formed. These sama doshas are propelled through rasayanees throughout the body. When such doshas gets lodged in shithila twagadi sthanas, causes srotosanga to Raktavaha, Mamsavaha, and Medovaha srotas. This leads to vitiation of local pitta i.e. Bhrajaka pitta and causes Shwitra. Though all three doshas are involved mainly, vyanavayu and Bhrajaka Pitta are specially vitiated.

# **SAMPRAPTI GHATAKA**

Dosha : Tridoshaj

Dushya : Rakta, mamsa and Medas

Srotas : Raktavaha, Mamsavaha, Medovaha srotas

Srotodushti prakara : Sanga

Roga marga : Bahya

Adhishthana : Twak

Vyaktisthana : Twak

#### 1) Sankhya Samprapti

Charaka, Sushruta and both Vagbhata described three types Shwitra. Bhoj acharya and Bhaluki described only two types.

#### 2) Vidhi Samprapti

Sushruta and Vagbhata described 3 types of Shwitra as Vataja, Pittaja and Kaphaja, Bhoja and Bhaluki described two varieties of Shwitra as Vranaja and Doshaja. Charaka, considering ashrayas, classified Shwitra as Raktasrita. Mamsasrita and Medoasrita.

# 3) Bala Samprapti

When doshas are settled in Rakta dhatu possess alpa bala, the same doshas when they settle in Mamsadhatu possess Madhya bala, When the doshas are settled in Medodhatu they posess uttama bala.

# 4) Kala Samprapti

Shwitra, within one year, after its appearance, is designated as Navam and its prognosis considered as good i.e. Sadhya (curable). Shwitra after one year of its appearance is considered as Asadhya (incurable).

# (5) Pradhanya Samprapti

Shwitra is a Swatantra vyadhi at times it may occur as Paratantraja even. For example, as a complication- mismanagement of Agnidagdha Vrana (Burns/Scald)

# Poorvaroopa:

Poorvaroopa of shwitra are not described in any of the samhitas.

#### Roopa of Shwitra:

# Samanya lakshanas

The meaning of Shwitra itself is 'Twachaswetata' i.e. whitish discoloration of the skin, which is a cardinal feature. 'Aparisraavi' i.e. Non-exudative or Non-oozing type of lesion is another important feature of Shwitra roga. All together Twacha swetata and Aparisraavi both are considered as samanya roopa of Shwitra.

Shwitra is a disease which has, dhatugatatwa only up to medodhatu, as it is primly Hypopigmentary disorder. Specific colours are described to know its course and stages. Knowledge regarding dhatugatatwa helps in speculating the prognosis. When the doshas are settled in Rakta, produce Rakta Varna patches, and similarly Tamra varna patches when they settles in Mamsa dhatu, and sweta varna patches when they settles in medodhatu. In view of this, from the

Treatment perspective it becomes difficult when there is involvement of deeper tissues. In other words, deeper the involvement of tissue, the crisis is also deeper.

# Vishishta lakshana

- 1. Vataja shwitra: Aruna Mandala, Krishna, Ajita, Parushya, Rookshata, Tanu and Paridhwamsi.
- Pittaja shwitra: Padmapatra prateekasa, Kamalapatra prateekasa, Tamravarna, Sadaha, paridaha, Romavidwamsi are the terminologies used to describe the pittaja shwitra.
- Kaphaja shwitra: Swetavarna, Sapandura Varna, Kandu, Bahalam, Snigdham, Ghanam. These are the terms used in describing Kaphaja Shwitra.

# Sadhyasadyata

S. No.	Lakshana	Charak	Sushruta	Vagbhata
	Sadhya			
1	Arakta loman	+	-	-
2	Tanu/abahalam	+	-	+
3	Pandu	+	-	-
4	Na ati chirothitam	+	-	+
5	Maayavakashe/asammilitam	+	-	+
6	Varnenaiva dirgubhayam	-	-	+
7	Ashukloaroman	-	-	+
8	Anangidagdham	-	-	+
	Asadhya			
1	Parspara abhinnam/ sambaddha mandalam	+	+	-
2	Bahuhu/bahalam	+	-	+
3	Yat rakta lomavat	+	-	-
4	Varshaganotpannam	+	+	+
5	Antarjatam rakta lomavat	-	+	-
6	Agni dagdha	-	+	-
7	Guhya, Panitala, Oshtagata	-	-	+

# SAPEKSHYA NIDANA

S. No.	Kushtha	Shwitra
1	Sankramika roga	Not so
2	Krimijanya	Not so
3	Dhatuksheenata	Not so
4	Sapta dhatu gatatwa	Tridhatu gatatwam
5	Shareera vedana	Absent
6	Srava present	Aparisravi
7	Sparsha vikruti present	Prakrita sparshaa present

# TREATMENT:

Acharya charaka and sushruta has mentioned that Shwitra is a Raktapradoshaja vyadhi.<sup>[18]</sup> Charaka advised Virechana, Upavasa and Raktamokshana<sup>[19]</sup> whereas sushruta told Raktamokshana for the

management of Raktapradoshaja vyadhis. Acharya harita also mentioned Virechana and Raktamokshana specifically for Shwitra. So, here in this article Raktamokshana are described as follows.<sup>[20]</sup>

#### Raktamokshana:

Shwitra is a type of Kushtha (Skin diseases) having Tridosha prakopa, Pradhana Raktadushti and Chirakari manifestation. Acharya charaka advised Raktamokshana whereas Sushruta has given great emphasis to Jalaukavacharana in the therapy for Rakta pradoshaja Vyadhi<sup>[21]</sup>.

Chakrapanidatta opines that Shastra karma is not advisable to expel out the blood as it may damage the Sparshanendirya. Among the Anushastras (Para surgical measures) Vagbhatta considers Jalauka as the best as all places.

Clinical observation reveals that Raktamokshana by Jalaukavacharana may provide better relief than other Shodhana karma. A.H.Su.14/5 is giving more emphasize on this sentence, particularly when Raktadhatu is involved. According to Sushruta, Raktamokshana is not only beneficial for purification of strotas channels, but also efficious to get relief from disease. Sushruta recommended Jalaukavacharana better for the superficial blood (Avagadha Grathita Rakta). Jalaukavacharana from the lesion of kushta, May washed out the sadosha rakta.

Jalauka sucks only sadosha rakta which is responsible for disease condition. And not the prakruta rakta dhatu

- Jalaukavacharana has counter irritant effect on the lesion, which creates new cellular division which takes place removing dead cell layer, and result in reduction of local Swelling and Lichenification.
- Hence, it can be said that jalaukavacharana gives better relief in Shwitra by expelling the sadosha rakta Dhatu
- Jaluka removes impure blood and allow oxygenated blood to enter the wound area, which might have provided better color to the skin.
- By bloodletting through jalauka, increase the blood circulation of the area, where jalauka is applied.
- Jalauka emits the saliva into the wound. The enzymes which are present in saliva are responsible for wound healing.
- It has anti-inflammatory effect.
- The enzymes present in saliva of jalauka gives the Analgesic effect.
- Immune-stimulation and Immune-modulating effect.

The complete action is carried out by enzymes present in saliva like Hirudin, which works as anticoagulant & diuretics, antibiotic action, Calin which prevents blood coagulation, Eglin, Hyaluronidase acts as ant thrombin, antitrypsin and ant chymotrypsin etc.

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