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### Case Report

## MANAGEMENT OF SHEETAPITTA – A CASE STUDY

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### ABSTRACT

A 33-years old female, presented with complaints of Reddish lesions in the both the limbs on and off since 1 moth associated with Burning sensation, pain ,itching aggravating more during evening hours and on exposure to cold climate . diagnosed as Sheeta-Pitta vis-à-vis Urticaria Pigmentosa. Its management is successfully done by following the principle of Shodhana & Shamana.

The purpose of this paper is to illustrate how a clinical hypothesis based on appropriate exploration of Dosha – Dushya along with scrutinizing magnitude of its impaction will help in curing the condition by using the principle of both purificatory and palliative treatment.

**Keywords:** Sheeta –Pitta, Urticaria Pigmentosa . Haridrakanda ,Virechana ,Trivruth draksha kashaya , Sameerapannaga Rasa.

### INTRODUCTION

A 33 years old adult female, house maker by profession, complained of frequent eruption of reddish lesions on both lower and upper limbs since 1 month associated with localized itching ,burning sensation and pain, the Aggravating factors for the complaint being evening time, exposure to cold climate and wind. The lesions first appeared left dorsum of the ankle joint and spread to extremities, more on lower limbs specifically from the foot to thigh. The case was diagnosed as Sheeta – Pitta on the basis of etiology and aggravating factors. This disease manifests in individual due to the vitiation of Vata and Pitta predominantly, with specific etiology being exposure to cold climate and wind.

On examination the lesions were reddish in color (hairs of the affected site being normal) Maculo–papular in nature, spreading on both lower limb and Upper limbs with irregular shape and Asymmetrical Distribution. Lesions had Irregular margin with no Discharge and exudation with intact Sensation perception over the site. Colour of the lesion –red, Hair over the lesion –present, Temperature –absent. The size varied in linear measurement from 0.2 to 0.5cm.

Pathogenesis of this sheeta –pitta is because of aetiological factor Vatadi dosha got prakopa and inturn lead to the vitiation of Pitta dosha and Rakta dusti, further spreading to extremities and leading to the manifestation of weals (maculo –papular rash ), the sheeta –pitta<sup>1,2</sup>.

The role of vata dosha in the manifestation was done by the presence of symptoms like dryness, pain and aggravating factors like exposure to cold climate. Similarly the role of pitta in the manifestation was done by the presence of symptoms like burning sensation and presence of itching indicates involvement of Kapha in the manifestation.

Considering this, the predominance Rakta,Pitta,Vata dosha Virechana (purgation) was followed, by other medications were planned<sup>3,4</sup>. Frequent sips of Panchakola Phanta (Hot infusion) , Tab Anulomana were given to correct the Agni on first day. On the second day, Panchatikta kashaya,was added as shamana oushadhi. Burning sensation increased with New red lesion developed, Pain and Itching on 4/8/13. Patient had menstrual Period from 4/8/13 to 6/8/13, stopped all the previous medicines.

On 6/8/13 Symptoms reduced and period stopped and then started with Shatavari grita for Snehapana (Internal oleation) in gradual increasing dose starting with 30 ml<sup>5</sup>. On 9/8/13 expected level of Snigdghata was achieved and Virechana was planned with Trivrut Leha as purgative, 80 grams and 150 ml of Draksha Kashaya as Anupana (adjuvant to main drug). Changes observed are listed in table no 1 .

Medicines advised on discharge were Haridrakanda 1tsp tid after food. Patient was asked to review after 15 days for follow .The total Duration of treatment was for 4 months till date. Patient got complete remission by 45 days. The

photographs of before, after purification and subsequent follow up are given.

**A PROBABLE MODE OF ACTION OF DRUG**

1. In Ayurveda, presentation and prognosis of disease depends on multiple factors. Urticaria pigmentosa has a distinctive appearance consisting of brown or reddish-skin lesion, predominantly on limbs. Underlying these freckles are the small collections of mast cells. There are no permanent cures for urticaria pigmentosa. However, treatments are possible. Most treatments for mastocytosis can be used to treat urticaria pigmentosa. Many common

anti-allergy medications are useful because they reduce the mast cell's ability to react to histamine<sup>6</sup>.

Sheeta pitta is may be tridosha or dvidosa, but in this case predominately involvement of Vata ,Pitta Rakta were there with less involvement kapha As it involves Vata pitta Rakta predominately so thought of Shatavari grita is selected. In this case, as the site of pathogenesis was restricted to lower limbs and upper limbs , purificatory measure Virecana was planned with Trivrut Lehya with Draksha kashaya. Medicines advised on discharge was Haridrakanda 1tsp tid . On discharge, overall 30% improvement was observed.

**Table 1: Showing The Administration Of Medicines**

Date	procedure	Treatment
02/8/13	Dipana-pachana-anulomana	Panchakola Phanta Tab Anuloma ds 0—0—2
3/8/13	Shamana oushadi	Panchatikta kashaya 2 tps bid
6/8/13 and 7/8/13	snehapana	Shatavari grita Started with 30ml/60 ml
8/8/13	Snehapana	110ml, achieved samyak snigda lakshana
9/8/13 to 10/8/13	Abhyanga	Panda taila
11/8/13	Virechana	Trivruth lehya 80 gm and draksha kashaya 150 ml. 16 vegas ---- last 5.45pm
12/8/13	Discharged	Haridrakanda 1tsp tid r/v after one week , 6 kg reduced

On first review as per patient wordings the condition got worsened some times if she exposed to cold air or climate. Hence, Guggulutikta Kashaya, a mixture of Avipattikara Churna and Sameerapannaga Rasa internally was administered. During first follow up Avipattikara Churna is added with Sameerapannaga Rasa are been given, as both are

endowed with different action. Avipattikara churna does Doshaanulomana (Proper channelizing Doshic movements) and Sameera pannagarasa controls further vitiation of Dosha Though the lesions were reduced in extremities by above treatments on second follow-up. In third follow-up patient got marked relief.



After 60 days



After 90 days



### CONCLUSION

Present case study is a documentary evidence of successful management of Sheeta –Pitta vis-à-vis Urticaria Pigmentosa through Virecana and shamana Cikitsa.

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