

Role of Prachchanna karma followed by ushana lepa in Indralupta – a Case Study

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ABSTRACT

In humans, hair's main purpose revolves around its profound role in social interactions. Alopecia areata is an autoimmune disorder characterized by transient, non-scarring hair loss and preservation of the hair follicle. Hair loss can take many forms ranging from loss in well-defined patches to diffuse or total hair loss, which can affect all hair bearing sites. Patchy alopecia affecting the scalp is the most common type. Alopecia areata affects nearly 2% of the general population at some point during their lifetime. A breakdown of immune privilege of the hair follicle is thought to be an important driver of alopecia areata. Although it is not a life threatening condition, but the cosmetic disfigurement which leads on to significant psychological and emotional distress supports a multibillion-dollar effort to reverse this condition. Indralupta is a condition explained as kapalagata roga by Acharya vagbhata and as kshudra roga by Acharya sushruta and madhava nidana, characterised by patchy loss of hair particularly over the scalp without any clinical inflammatory signs. The main line of treatment in contemporary science is cortico-steroids, which has harmful side effects and cannot be used long term.

Hence there is the highest need of harmless, effective treatment from alternative medical sciences. Ayurveda indicates use of Prachchanna karma as a Shodhana chikitsa and Lepa as a shamana chikitsa in the treatment of Indralupta. Prachchanna helps in clearing the obstructed Romakupas. Raktamokshana is the ideal treatment when Dosha is vitiated with Rakta. A case study of Indralupta was carried out at the outpatient department of Shalakya Tantra at Shri C.B. Guttal Ayurveda Medical College, Dharwad, Karnataka, which was successfully treated. A case of a 22-year-old male patient who presented with the complaint of Indralupta has been treated with Prachchanna karma followed by Trikatu Lepa along with internal medicine. There was a significant improvement in symptoms such as decreased patch size and regrowth of the hair. This case study shows that Indralupta can be

successfully managed by Ayurvedic treatment modalities.

Key Words : Alopecia areata, Kapalagata roga, Indralupta, Romakupas, Prachchanna karma, Raktamokshana, Lepa.

I. INTRODUCTION:

The main functions of hair are to protect the skin from mechanical insults, irritants, allergens and irradiation by ultra-violet (UV) (Buffoli et al., 2014, de Galvez et al., 2015, Shi et al., 2015), and to regulate body temperature (Tansey and Johnson, 2015). In addition, hair has a sensory function, relaying sensory information from mechanical stimuli at the skin surface to the nervous system (Lechner and Lewin, 2013). As part of the immune response, the hair follicle is also a reservoir of Langerhans cells which re-populate the epidermis layer of the skin following injury and signal to activate other immune cells (Heath and Mueller, 2012). Moreover, the hair is important for an individual's appearance, especially for women.

Alopecia areata is a complex autoimmune condition that causes non scarring hair loss. It typically presents with sharply demarcated round patches of hair loss with characteristic exclamation point hairs observed on periphery of the patches. The patho-physiology of this disorder states that it is a hair follicle-cycling defect as the hair follicle matrix epithelium in the cortical differentiation stage is attacked by inflammatory cells resulting in a premature catagenic phase or hair fall. The hair follicle stem cells are not destroyed and continue to regenerate but do not go beyond the anagen III/IV phase. Hair loss can take many forms ranging from loss in well-defined patches to diffuse or total hair loss, which can affect all hair bearing sites. Patchy alopecia affecting the scalp is the most common type. Alopecia areata affects nearly 2% of the general population at some point during their lifetime. A breakdown of immune privilege of the hair follicle is thought to be an important driver of alopecia areata. Although it is not a life threatening condition, but the cosmetic disfigurement which

leads on to significant psychological and emotional distress supports a multibillion-dollar effort to reverse this condition. ^(1,2,3,4,5,6)

Indralupta is a condition explained as kapalagata roga by Acharya vagbhata ⁽⁷⁾ and as kshudra roga by Acharya sushruta ⁽⁸⁾ and madhava nidana, characterised by patchy loss of hair particularly over the scalp without any clinical inflammatory signs. According to Acharya Sushruta and Vagbhata Vata Doṣha along with Pitta Doṣha resides in Romkoopa (hair root) results in hair fall (Keshapatan). After then Kapha Doṣha along with Rakta Doṣha block Romkoopa so no more hair produce on that place, its results in Indralupta ⁽⁹⁾. According to Acharya Kartikeya, hair loss of beard and mustache is called Indralupta. According to Ayurvedic fundamentals Kesha is Mala of Asthi Dhatu ⁽¹⁰⁾.

Indralupta occurs due to Rakta Dushti ⁽¹¹⁾ and treatment of Indralupta includes Prachchhana karma as a first line of treatment according to many Acharya. For the treatment of vitiated Rakta, Raktamokshana is the line of treatment ⁽¹²⁾. Prachchanna Karma is one among Rakt Mokshana ⁽¹³⁾. Acharya Sushruta and Acharya Vagbhata both described Prachchanna Karma as a treatment of Indralupta ⁽¹⁴⁾.

Prachchanna Karma helps in removing vitiated blood from the affected site, where as application of Ushana with honey does the Lekhana karma thereby removes the obstruction caused by Kapha Dosha, ⁽¹⁵⁾ which inturn helps in regeneration of the scalp hair.

II. CASE STUDY :

A 22 years old male patient came to Shalakyia outpatient department of Shri C. B. Guttal Ayurvedic medical college, Dharwad, Karnataka, with the chief complaints of Patchy hair loss over the right side of the scalp since last 3 months.

History of present illness: Patient was apparently healthy before three months then slowly started with patchy hair loss over the right side of the scalp.

Poorva Vyadhi Vrutanta : Not k/c/o HTN, DM. No history of autoimmune disorders (like Atopic dermatitis, psoriasis, Vitiligo, Urticaria, Rheumatoid arthritis).

Kula vruttanta - Nothing significant.

➤ **Dietary History:** The patient had history like regular intake of curd in night, spicy food and irregular food habits with consumption of oily and junk food and Ratrijagarana (Awakening in the night), chinta (Stress), Khroda (Anger).

On examination: There was a patchy hair loss measuring approximately of about 2x4cms over the right scalp.

➤ Physical examination

Shareera Akriti - Madhyama

Shareera Bala - Madhyama

Nadi - 78min

Rakthachapa - 120/80mm Hg

Swasagati - 18 per min

Dehoshmata - 98.5° F

➤ Dashavidha Pariksha

▪ **Prakruti -** Vata Pitta Prakriti

▪ **Sara -** Pravara

▪ **Samhanana -** Madhyama

▪ **Satmya -** Madhyama

▪ **Satva -** Madhyama

▪ **Ahara Shakti -** Madhyama

▪ **Jarana Shakti -** Madhyama

▪ **Vyayama Shakti -** Madhyama

▪ **Vaya -** Madhyama

➤ Roga Pareeksha

▪ **Nidana**

o **Aharaja -** Intake of oily, spicy food, junk food, curd at night

o **Viharaja -** Exposure to raja and atapa

o **Manasika -** Chinta (work load)

▪ **Poorvaroopa -** Itching and hair fall

▪ **Roopa -** Patchy hair loss

▪ **Upashaya -** Ushnasupachya Ahara.

▪ **Anupashaya -** Katu, Kshara, Lavana, Atisheeta Gamana

Probable Samprapti

Nidana Sevana which leads to Agnimandya vitiates Tridosha which inturn causes Rakta Prakopa (Pitta Dosha present at hair follicles associated with Vata cause falling off the hairs, afterwards Kapha associated with Rakta blocks the hair follicles), due to which no new hair growth is seen in that place. ⁽¹⁶⁾

➤ Samprapti Ghataka

▪ **Dosha :** Vata Pitta Kapha

▪ **Dushya :** Rasa, Rakta, Asthi

▪ **Upadhathu :** Kesha, Nakha.

▪ **Agni :** Dhatwagnimandya, Jatharagnimandya,

▪ **Aama :** Dhatwagnimandyajanya Ama, Jatharagnimandyajanya Ama.

▪ **Udbhava Sthana :** Amashaya

▪ **Sanchara Sthana :** Rasayani

▪ **Adhishthana :** Shiras

- **Rogmarga** : Bahya
- **Vyaktastana** : Twak
- **Strotas** : Rasavaha, Raktavaha, Asthivaha.
- **Strotodushti Prakara** : Sanga
- **Vyadhi Swabhava** : Chirakari

➤ **Sthanika Pariksha (Local examination of scalp)**

Site of involvement - On right side of the scalp

Size - 2 cm x 4 cm

Shape - circular

Skin colour - reddish

Rashes/Discharge - absent

Sensation - absent

The patient was clinically diagnosed as case of Indralupta (Alopecia areata) and advised for Prachchanna karma over the affected area and Lepa procedure. Procedure was repeated once in 7 days for 4 times and Shamanoushadis were advised for 28 days.

Chikitsa (Treatment planned)

Poorva Karma

Collection of materials includes insulin syringe, pair of gloves, sterile cotton balls, betadine solution, Triphala Kashaya. Vitals were checked and found to be stable. Hb%, HBsAg, RBS, CT, BT were checked and found to be in normal limit.

Pradhana Karma

In the presence of bright light, Patient was made to lie down on a table comfortably. Then the patchy area should be cleaned with betadine solution. Insulin syringe is taken and continuously close pricks are made over the scalp where area is affected. Prick should be neither too deep nor too superficial but should be sufficient enough for the blood to ooze out. Observe the bleeding intensity and wipe it using sterile cotton balls.

Paschat Karma :

Once the bleeding stops, then the area should be cleaned using cotton swab dipped in Triphala Kashaya. And apply lepa of ushana churna with honey

Note: observe for excess bleeding

Prescribed medicine

1. Manjishthadi Kashaya (10ml) Twice a day before food
2. Saptamruta Loha Twice a day after food
3. Triphala Guggulu Three times a day after food

Pathya:

Aharaja: Ushna, Laghu, Supachya Ahara

Vihara: Chatradharana

Apathya:

Ahara: Ati lavana (excess salt), Ati Katu (Excess spice).

Vihara: Shirasnana, Ratri Jagarana (Awakening in the night), Atapa and Raja Sevana.

Follow Up: Patient reviewed 15 days after the treatment (44th day) Sparse greyish hairs with brownish tinge appeared over some part of the bald patches. After 3 months of follow up patch covered with small hair is observed. Length and density increased; hair fall decreased no further complications observed. After 6 Months Normalised hair growth is noticed. And no recurrence was observed after one year.

III. DISCUSSION

- Acharya Vagbhatta was the first to differentiate Indralupta and Khalitya. Kartika – the commentator of Madhava Nidana has differentiated Khalitya, Ruhya and Indralupta.
- Hormonal imbalance plays important role in hair fall. Stress induced by diseases, surgery or emotional crisis disturbs the protein synthesis in hair follicle and as a result of it large numbers of hairs of Anagen phase enters in Telogen (dying) phase. Consequently, massive hair loss is evident. Indralupta is not a Kulaja Vikar according to Ayurveda. But modern science considers genetic predisposing factor.
- In etiopathological study it is noticed that, the Lavana, Katu and Kshara Pradhana Dravya, Guru, Snigdha and ati Ushna ahara, Raja and Atapa Sevana, Prajagarana, Divaswapa, Chinta and Krodha are the responsible etiopathological factors for the development of Samprapti of Indralupta.⁽¹⁷⁾ Pitta present in the hair follicles along with the vata causes hair fall then kapha along with the pitta closes the orifices of the hair follicles due to which new hair growth is affected.
- Prachchanna Karma is beneficial in removing vitiated rakta, where as Ushna tikshna lepa helps in relieving the avarodh of romakoopa made by kapha by mitigating kapha dosha. Mahamanjishtadi kashaya is having raktaprasadana property hence it normalises rakta and pitta dosha. And Saptamrita Loha provides nourishment to the hair roots thus promotes the hair growth.

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