

An Ayurvedic Management of *Vicharchika* (Eczema) By *Shaman Aushadhi*: -A Case Report

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ABSTRACT: -

Introduction: *Vicharchika*, categorized under *Kshudrakushtha* in Ayurveda, is a commonly encountered skin disorder by Ayurvedic dermatologists. Skin disease is one of the top 15 groups of medical conditions. It is often compared to **eczema** in modern dermatology due to its similarity in clinical features of *Vicharchika* such as *Kandu* (itching), *Pidika* (papular eruptions), *Shyava Varna* (dark brown or blackish discoloration), and *Bahusrava* (profuse discharge or oozing). **Main Clinical Finding:** A 28-year-old female, presented to the OPD with chief complaints of itching, pain, vesicles, and blackish discoloration on the both hands, feet, and elbows for the past 2 years. **Diagnosis-**Condition was diagnosed as *Sravi Vicharchika* (Eczema). **Intervention:** The patient was given completely *Ayurvedic treatment* with *Gandhak rasayan Mahamanjisthadi kwath*, *Arogyavardhani vati Khadirarihsta*, *Satdhaut Ghrith* and *Chandrakala rasa*. **Outcomes:** The patient had noticeable improvement in all symptoms. **Conclusion:** Therefore, this study was undertaken to establish that Ayurvedic management yields significant results in the treatment of *Vicharchika*.

KEY WORDS: Eczema, *Sravi Vicharchika*, Ayurvedic Management, Case Report.

INTRODUCTION

Eczema (Dermatitis) is one of the most frequently occurring allergic skin conditions that causes discomfort. In its acute stage, it mainly shows swelling within the epidermis (spongiosis) and the formation of blisters within the epidermal layer. However, in chronic cases, thickening of the epidermis (acanthosis) becomes more prominent.^[1] According to Ayurveda, *Vicharchika* closely resembles a condition known as eczema. This disorder is characterized by several symptoms that are strikingly similar to those seen in eczema, including intense itching, the formation of boils or pustules, skin discoloration or hyperpigmentation, excessive oozing, and over time, thickening and hardening of the skin (lichenification). Additionally, affected individuals may experience pain and significant dryness, all of which align with the classical description of *Vicharchika* in Ayurvedic texts.^[2] Skin disease is one of the top 15 groups of medical conditions. Eczema is an itchy inflammatory skin condition with associated epidermal barrier dysfunction. The prevalence of atopic eczema seems to be rising, and has increased between two-fold and five-fold over the last 30 year. The pathophysiology of eczema involves systemic as well as cutaneous immune and epidermal dysfunction.^[1] In Ayurveda, skin diseases are classified under *Kushtha Roga*, which is further divided into *Maha Kushtha* (major skin disorders) and *Kshudra Kushtha* (minor skin disorders) *Vicharchika* is listed under *Kshudra Kushtha*. All forms of *Kushtha* arise from the aggravation of the *Tridoshas* (Vata, Pitta, and Kapha) along with *Raktadushti* (impurity or vitiation of the blood). Therefore, *Vicharchika* also involves the imbalance of all three doshas, with a predominance of *Kapha* as per Acharya Charaka.^[3] Modern medical science treats eczema (*Vicharchika*) with systemic steroids and other therapeutics to give symptomatic relief. No doubt, the use of steroids suppresses eczema, but it costs deeply in the severe long-term toxicity, including osteoporosis, skin fragility, susceptibility to infection and pituitary-adrenal axis suppression.^[4] Therefore, world is looking towards other system of medicine, especially Ayurveda for this problem. This case represents a chronic, resistant case of *Sravi Vicharchika* (Eczema) managed exclusively through Ayurvedic interventions, resulting in significant clinical improvement without any adverse effects. It highlights the potential of Ayurveda in offering a safe and effective alternative for chronic dermatological conditions. *Kushtha* and its subtypes have been considered as a "*Sapta Dravyasamgraha*" (combination of seven pathological factors). *Rakta Dushti* (vitiation of blood) is one of the important causes of *Kushtha*.^[5] *Vicharchika* has cardinal symptoms of *Kandu*

(Excessive itching), *Pidika* (Vesicle/Boil/Pustule), *Shyavata Ruja* (Discoloration), *Bahusrava*, (Profuseoozing), *Lasikasrava,Raji*(Lichenification), (Pain)*Rukshata*(Excessive dryness). *Vicharchika* is *Kapha pradhana tridoshaja vyadhi* and *Rasa Twak, Rakta, Mamsa* and *Kleda (Ambu)*^[6] are *Dushya* of it, and stress can be responsible for causing eczema. Acharyas have described the *Samprapti* for *Kustha* in general, is taken as follow *Vicharchika* also. Due to various *Nidan sevana*, *Tridosha* gets vitiated simultaneously & produce *Shaithilya* in the *Twak, Mamsa, Rakta* and *Ambu*. Then *Tridosha* gets seated in *Shaithilya dhatu* and vitiating them with *Lakshanotpatti* of *Kustha Roga*.^[7]

Patient Information

A 28-year-old female, housewife by profession, presented to the outpatient department on 7th September 2024 with chief complaints of itching, pain, vesicles, and blackish discoloration on the palmar aspect of both hands, dorsum of both feet, and bilateral extensor surfaces of the elbows for the past 2 years. The lesions were initially noticed on the palmar surface of the right hand as small vesicles associated with itching. Gradually, pain and oozing developed. Over time, the condition progressed and spread to the palmar and dorsal surfaces of both hands, feet, and the extensor surfaces of the elbow joints. She did not have a history of hypertension, diabetes mellitus, and thyroid dysfunction. She did not know about similar allergic manifestations in her family members including parents and siblings. Despite receiving allopathic treatment for 1.5 years, the patient did not experience satisfactory relief and noticed a worsening of symptoms. She then switched to homeopathic medication for six months but again did not experience any significant improvement.

Personal history

The appetite, bowels, bladder, of the patient were normal. The patient's sleep was disturbed because of excessive itching. The patient was taking vegetarian diet and did not have any history of other addictions.

Clinical Finding

On dermatological examination, site of eruption is the palmar aspect of both hands, dorsum of both feet, and bilateral extensor surfaces of the elbows, distribution is asymmetrical, colour black, margin irregular, surface dry and thick with no discharge on elbow and feet, but discharge present on palmer surface of hands associated with pain.

Before Treatment (Fig 1)



Table 1
Severity Scale of Symptoms Based on Literature^[8]

| Symptoms | Gradation | Score |
|----------------------|---|-------|
| Kandu | No itching | 0 |
| | Itching present rarely | 1 |
| | Severe itching disturbs patients' attention | 2 |
| | Severe itching disturbs patients sleep | 3 |
| Srava | No srava | 0 |
| | Occasional srava after itching | 1 |
| | Mild srava after itching | 2 |
| | Profuse srava making clothes wet | 3 |
| Pidika | Absent | 0 |
| | 1-2 pidika one affected part | 1 |
| | 3-4 pidilka in one affected part | 2 |
| | More than 4 pidika in one affected part | 3 |
| Shyavata/vaivarnyata | Normal skin colour | 0 |
| | Brownish red discolouration | 1 |
| | Blackish red discolouration | 2 |
| | Blackish discolouration | 3 |
| Rukshata | No dryness | 0 |
| | Dryness with rough skin | 1 |
| | Dryness with scaling | 2 |
| | Dryness with cracking | 3 |
| Daha | Absence of burning sensation in affected part | 0 |
| | Rarely burning sensation in affected part | 1 |
| | Continue burning sensation in affected part | 2 |
| | Continue burning sensation in affected part disturbing patients sleep | 3 |

Aturabalapramana (strength of individual) was assessed by *Dashavidha atura pariksha* (ten-fold examination of patient). *Prakriti* (constitution) of the patient was *vatakaphaja*; *Sara* (proper nourishment of tissue), *Samhanana* (body built), *Pramana* (body proportion), *Ahara*, and *Jaranashakti* (digestive and metabolic capacity) were *Madhyama* (medium); *Satva* (psychological strength), *Vyayama shakti* (physical strength), and *Satmya* (compatibility) were *Avara* (low); *Vikriti* (morbidty) was *kaphajpittaj*.

Diagnostic Assessment: -

Sroto Pareeksha: *Raktavaha Srotas*

Symptoms: *Daha* (Burning sensation), *Panduta* (pallor), *Vyanga* (Hyperpigmentation), *Kotha* (Skin eruptions) *Kandu* (Itching sensation), *Pidika* (Papule), *ShyavaVarna* (Blackish brown discoloration) and *Bahusrava*.

Diagnosis: *Sravi Vicharchika* (Eczema)

Time Line

Treatment was continued for a period of 5months. Considering the involved dosha and dushya, the patient was prescribed medicine for both oral and local application. The details are mentioned in [Table 2]. The assessment

was done before treatment, after treatment, and after follow-up to evaluate efficacy of treatment provided [Table 2].

| Date | Treatment |
|-------------|---|
| 7 sep 2024 | Gandhak rasayan 2 tab twice a day Mahamanjsthadi kwath 20 ml before meal Shuddha tankan for dusting Satadhauta ghrith for L/A |
| 15 oct 2024 | Gandhak rasayan 2 tab twice a day Mahamanjsthadi kwath 20 ml before meal Shuddha tankan for dusting Satadhauta ghrith for L/A Arogyavardhini vati 1tab twice a day Khadirarista 20 ml twice a day before meal |
| 29 oct 2024 | Same treatment continued |
| 10 dec 2024 | Arogyavardhini vati 1 tab twice a day Gandhak rasayan 2 tab twice a day Mahamanjsthadi kwath 20 ml twice a day before meal Satadhauta ghrith for L/A in night Karanj taila for L/A twice Chandrakala rasa 2 tablets twice a day |
| 28 jan 2025 | Arogyavardhini vati 1tab bd Shuddha Gandhak 250 mg + Amalaki 1gm+Vanga Bhasm 250 mg with honey twice daily. Mahamanjsthadi kwath 20 ml twice a day before meal Satadhauta ghrith for L/A Karanjadi taila for L/A twice daily Khadirarista 20 ml twice a day before meal Chandrakala rasa 2 tablets twice a day |

Follow up and Outcome

The assessment of severity grading was used to objectively measure the severity of *Vicharchika* symptoms. By the end of 3 months, the patient had significant improvement in all symptoms — itching, discharge, pain, and discoloration were almost completely relieved. No adverse effects were reported during therapy. Follow-up at 4 months showed sustained improvement.

Table 3
Assessment score based on signs and symptoms

| Symptoms | Grade Before treatment | Grade after 3 rd follow up | Grade After treatment |
|----------------------|------------------------|---------------------------------------|-----------------------|
| Kandu | 3 | 1 | 0 |
| Srava | 3 | 2 | 0 |
| Pidika | 2 | 1 | 0 |
| Shyavata/vaivarnyata | 3 | 1 | 0 |
| Rukshata | 3 | 2 | 0 |
| Daha | 2 | 2 | 0 |

After 3rd follow up



After Treatment



DISCUSSION

In the present case, unwholesome diet (milk with salt, excess curd, salty and sour food) and daytime sleeping appear to have triggered vitiation of Doshas, leading to *Vicharchika*. Treatment was planned with principles of *Nidana Parivarjana*, *Nitya Shodhana* (biocleansing), *Pitta-Kapha Shamana*, *Rakta Prasadana* (blood purification), *Rasayana* (rejuvenation), and *Samprapti Vighatana* (breaking the pathogenesis), along with *Pathya diet* (light, easily digestible food, bitter vegetables, and old cereals).

Aarogyavardhini Vati^[9] – Contains *Shuddha Parada*, *Gandhaka*, *Katuki*, *Loha Bhasma*, *Shilajatu etc.* Due to its *Katu*, *Tikta Rasa* and *Ushna*, *Laghu* and *Ruksha Guna* It improves liver function, enhances digestion, supports immunity, and acts as *Kushthaghna*, *Deepana*, *Pachana*, and *Raktaprasadana*. It balances *Agni* and *Bhrajaka Pitta*, thus maintaining skin health.

Gandhaka Rasayana^[10] – A *Kharaliya Rasayana* mainly of *Shuddha Gandhaka* with *Amalaki* juice. It is the most potent *Kushtaghna yoga* as described by Charaka. Acts as *Ama pachaka*, *Vishaghna*, *Kriminashaka*, *Agnideepaka*, *Raktaprasadana*, and *Rasayana*. Useful in chronic relapsing skin diseases by reducing *Kleda* and restoring normal skin color.

Mahamanjithadi Kwatha^[11] – With *Manjistha*, *Vidanga*, *Haridra*, *Triphala* etc. Possesses *Tikta-Katu-Kashaya rasa*, *Laghu-Ruksha guna*, *Ushna virya*, and *Katu vipaka*. Acts as Tridoshaghna, mainly *Kapha-Pitta Shamana*, improves *Agni*, corrects *Bhrajaka Pitta*, and restores digestive fire.

Chandrakala Rasa^[12] – Contains *Parad*, *Gandhaka*, *Kutki*, *Giloy satva* etc., processed with herbal decoctions. Acts as antipyretic, digestive, *Rasayana*, nourishing, and improves skin health.

Shatadhauta Ghrita^[13] – Used topically for *Daha* (burning). Improves skin barrier, moisturization, and healing.

Amalaki & Karanja^[14] – *Amalaki* provides antioxidant, immunomodulatory, and anti-inflammatory action, improving elasticity. *Karanja* shows antimicrobial and anti-inflammatory effects, reducing itching and redness.

Khadirarishta^[15] – Contains *Khadira*, *Triphala*, *Neem*, *Guduchi*, etc. Acts as *Raktashodhaka*, *Kushthaghna*, *Krimighna*. Improves digestion and metabolism, purifies blood, reduces toxins, and prevents infections.

Overall, these formulations collectively work as *Kapha-Pitta Shamana*, *Raktaprasadana*, *Kushthaghna*, *Shothahara*, *Varnya*, and *Rasayana*, thereby breaking the pathogenesis and restoring skin health.

Conclusion

The holistic Ayurvedic approach with *Nidana Parivarjana*, *Pathya ahara*, and classical formulations proved effective in managing *Vicharchika* by pacifying *Kapha-Pitta*, purifying blood, correcting *Agni*, and promoting *Rasayana* effects. This case emphasizes Ayurveda's potential in addressing root causes, preventing recurrence, and improving overall quality of life.

Informed Consent

An appropriate patient consent form was obtained before starting the treatment.

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Nil.

Conflicts Of Interest

There are no conflicts of interest.

Declaration of AI in Scientific Writing

No generative AI tools were used for planning, analysing data, writing, or editing this manuscript. All the work presented is solely the effort of the authors.

Data Availability Statement

All relevant data supporting the findings of this case report are included within the article.

Reference

1. Davidson S. Davidson's Principles and Practice of Medicine. 20th ed. Edinburgh: Elsevier; 2020. p. 1283-4.
2. Sai Prasad AJV, Tomar R, Singh H, Sannd R, Kumar S. Evidence based clinical practices in *Vicharchika* (Eczema) and Ayurvedic treatment modalities. International journal of Ayurvedic Medicine. 2019;11(4 Suppl):30-6.
3. Charaka Samhita, Chikitsa Sthana, *Kushthachikitsa*, 7/30. Available from <http://niimh.nic.in/ebooks/echarak> (Accessed on 10 September 2025)

4. Talekar MT, Mandal SK, Sharma RR. Clinical evaluation of Trivrta powder (*Operculina turpethum* Linn.) and Aragvadhya Patra Lepa (paste of leaves of *Cassia fistula* Linn.) in the management of Vicharchika (eczema). *Ayu*. 2018; 39:9-14.
5. Charaka Samhita, Chikitsa Sthana, *Kushthachikitsa*, 7/9. Available from <http://niimh.nic.in/ebooks/echarak> (Accessed on 10 September 2025)
6. Charaka Samhita, Chikitsa Sthana, *Kushthachikitsa*, 7/10. Available from <http://niimh.nic.in/ebooks/echarak> (Accessed on 10 September 2025)
7. Shastri K. Charaka Samhita Chikitsa Sthana with Hindi commentary. Varanasi: Chaukhambha Publication; 2011. 7/39. p. 255.
8. Korde P, Nakade M, Gaikwad P, Chaudhari V. Ayurvedic management of Vicharchika: A case report. *Int J Biol Pharm Allied Sci*. 2023; 12:136-43.
9. Bhuyan SS, Kar AC. Management of Shushka Vicharchika through Shamana Aushadhis: A case report. *J Indian Syst Med*. 2024; 12:120-3.
10. Sharangdhar. Sharangdhar Samhita, Madhyam Khandha 2/137-42. In: Shailaja S, editor. Varanasi: Chaukhambha Sanskrita Sanstana; 2016.
11. Ayurveda Sar Sangrah. Naini Allahabad: Shri Baidyanath Ayurveda Bhavan Limited; 2010. p. 302-3.
12. Kaviraj Ambikadatta Shastri. Bhaishajya Ratnavali, 19th ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2005. Prameha Chikitsa, p. 746.
13. Sharangadhara. Sharangadhara Samhita, Madhyama Khanda, Chapter 9, Ghrita Kalpana. Varanasi: Chaukhambha Orientalia; 2013. p. 209.
14. Tuteja V. Study of immuno-enhancing effect of Amalaki compound in infants [MD (Ayurveda) thesis]. Varanasi: Institute of Medical Sciences, Banaras Hindu University; 1993.
15. Ayurveda Sar Sangrah. Naini Allahabad: Shri Baidyanath Ayurveda Bhavan Limited; 2010. p. 640-641.

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Authors contribution statement

Author 1 Solely responsible for the conception, study design, data collection, analysis, interpretation, drafting, revision, and final approval of the manuscript.

Author 2 Provided supervision, critical guidance, and final approval of the manuscript. Both authors reviewed and approved the final version of the manuscript and agree to be accountable for its content.