A comparative study of Virechana Karma and Jalaukavacharna along with Atrushadi Kashaya Pana in Ek-Kushtha (Psoriasis)

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DOI:10.21760/jaims.10.2.3

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Ek-Kushtha is classified under the broad spectrum of Kshudra Kushtha. It shows great resemblance with a dermatological condition i.e., psoriasis. Psoriasis is characterized by Chronic, non-infectious, relapsing, inflammatory thickened skin plaque with mica like scaling. About 2-3% of people worldwide suffer from psoriasis, which has serious effects on the body as well as Psychological and Social impact. The Ayurvedic approach for the management of Ek-Kushtha is mainly based on Sanshodhana Chikitsa via different Panchakarma modalities like Vamana, Virechana and Raktamokshana. After Sanshodhana Karma use of Samana Aushadhi is more effective for managing this condition. Therefore, in order to find and implement a different, safer, more effective, and long-lasting therapy method, the study entitled, A comparative study of Virechana Karma and Jalaukavacharana along with Atrushadi Kashaya Pana in Ek-Kushtha (psoriasis) was conducted on 60 patients. They were selected on the basis of standard inclusion and exclusion criteria and randomly divided into two different treatment groups; Group A (Virechana Karma along with Atrushadi Kashaya Pana) and Group B (Jalaukavacharana along with Atrushadi Kashaya Pana). Total duration of the treatment was of 45 days along with a follow up period of 1 month. Although both interventions were nearly equally effective, but in overall improvement of the patients "Group A" had shown better result than Group B. For better scientific validation, further research studies, and clinical trials should be carried out with larger sample size and longer duration of treatment.

Keywords: Ek-Kushtha, Psoriasis, Virechana, Jalaukavacharana, Atrushadi Kashaya, Chronic inflammatory skin disease, Autoimmune disorder

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Anirudh, Post Graduate Scholar, , Rishikul Campus, Haridwar, Uttarakhand Ayurved University, Dehradun, Uttarakhand, India. Email: sainianirudh007@gmail.com	Anirudh, KK Sharma, Shukla GD, A comparative study of Virechana Karma and Jalaukavacharna along with Atrushadi Kashaya Pana in Ek-Kushtha (Psoriasis). J Ayu Int Med Sci. 2025;10(2):9-17. Available From https://jaims.in/jaims/article/view/3977	

Introduction

The state of your skin speaks a lot about you. Your skin will be affected by everything Whatever you do; what you eat, what you drink, and the type of job you do, and the type of environment your body is exposed will have telling effects on your skin in good or bad ways.

Skin disorders are one of the burning problems of the modern era and psoriasis is one of them, psoriasis has been linked to several physical comorbidities, including psoriatic arthritis, heart disease and obesity, but it is also connected to mental health conditions like depression and anxiety, particularly because of its visibility.

There is five *"Gyanendriya -Adhisthana"* [1] mentioned in *Ayurveda* and skin is one of them, which responsible for '*Sparshagyanam'* or touch sensation. In *Ayurveda* texts all skin disease has been described under term *Kushtha.*

Term *Kushtha* denotes a pathological condition which affect the skin. *Acharya Charaka* says *"Kushtha Deergharoganam"* [2] it clarifies the chronic nature of the disease.

In *Ayurveda* 18 type of *Kushtha* has been described as per the Various *Dosha's* dominancy and *Ek-Kushtha* is one amongst eleven *Kshudra Kushtha*.

The factors which help in development of *Kushtha* are known as "*Saptako Dravya Sangraha*" i.e., 3 *Doshas (Vata, Pitta, Kapha*) and 4 *Dushyas* (*Tawacha, Rakta, Mamsa, Lasika*) [3] *Ek-Kushtha* can be correlated with Psoriasis on the basis of similarity in etio-pathogenesis and Symptomatology.

Psoriasis is a Chronic dermatosis, characterized by an unpredictable course of remission and relapse and presence at typical sites of well defined, erythematous, indurated papules and plaques, which are surmounted by large, loose, silvery scales.

There is frequent nail and joint involvement. It clinically presents with lesion of varying size, and distribution all over the body, but extensor aspects of extremities especially the knee and elbows, scalp and sacral region of back are more common sites.

According to WHO the world-wide prevalence of Psoriasis is 2-3 % (April, 2013). In India prevalence of Psoriasis varies from 0.44 - 2.88%.[4]

Acharya Charaka has specifically highlighted the role of *Panchakarma* modalities by saying that the disease treated by *Shamana* may reoccur in due course of time but when disease treated by *Shodhana* therapy will never recur.[5]

Aims and Objectives

1. To evaluate the efficacy of *Virechana Karma* in *Ek-Kushtha* (Psoriasis)
2. To evaluate the effect of *Raktamokshana* in *Ek-Kushtha* (Psoriasis)
3. To Compare the efficacy of *Virechana* and *Raktamokshana* in *Ek-Kushtha* (Psoriasis).

Materials and Methods

For present clinical study, patients were completely screened on basis of classical signs & symptoms of (Psoriasis) from OPD & IPD of *Panchakarma* department of Rishikul Campus Hospital, UAU, total 60 patients were registered for trial & randomly divided into two groups. Total 55 patients completed treatment. Total duration of treatment was 45 days along with a follow-up period of 30 days.

1. Inclusion Criteria

- Patient having sign and symptoms of *Ek-Kushtha* (Psoriasis).
- Patient of age between 16years to 60 years will be included.
- Patient fit and willing to take part in *Virecahna Karma.*
- Patient fit and willing to take part in

2. Exclusion Criteria

- Known case of Malignancy, IHD, CHF, and any other vascular disease.
- Uncontrolled Diabetes Mellitus & Hypertension & other life threatening & Complicated diseases.
- Any other known systemic disease.
- Pregnant and lactating women.

Study Methodology

Table 1: Grouping of the subjects

Group	No. of Patients	Drug/Procedure	Dose	Duration
Group A	30	Virechana Karma + Atrushadi Kashaya	135ml 48ml BD	After completion of Virechana Karma Atrushadi Kashaya Pana till 45 days
Group B	30	Jalaukavacharana + Atrushadi Kashaya	48ml BD	6 sitting with 7 days gap between each sitting, Kashaya Pana everyday

Grouping Pattern

Group - A (*Virechana*)

Purva Karma

1. Deepan-Pachana - Trikatu Churna / Shivaksharpachan Churna 3-5 gm with lukewarm water BD upto 7days until *Samyak Deepana Pachana Lakshana*
2. Snehapana - Shuddha Goghrita for 3 to 7 days.
3. Sarvang Abhyanga with *Murchita Tila Taila* and *Sarvang Swedana* with *Dashmoola Kwatha* for 3 days.

Pradhan Karma

Virechana Karma - Trivruta + Triphala + Danti in form of *Yavkut* followed by *Kashaya Pana* 180 ml.

Pashchaat Karma

Samsarjan Krama diet as per *Shuddhi* - 3-7 days.

Group - B (*Jalaukavacharana*)

Purva Karma
- Collection of leeches
- Preservation of leech
- Examination of patients
- Shodhana of leech
- Preparation of patient
- Collection of required materials

Pradhan Karma
- Application of leech
- Inference of sucking
- Provide cooling atmosphere
- Removal of *Leech*

Pashchaat Karma
- Vomiting of leech
- Dressing of lesion
- Preservation of *Leech*

Atrushadi Kashaya - 12gm *Yavakuta Churna* taken Boil with 16 times water, until remains 1/4th.
Final quantity to be used - 48ml.

Assessment of result: Effect of the treatment were compared before and after the treatment on the basis of self-formulated scoring scales based on subjective parameters associated with the disease.

Subjective parameters: It was done on the basis of improvement in following signs and symptoms of *Ek-Kushtha* (Psoriasis):

1. Aswednam (Anhidrosis)
2. Mahavastu (Large and clear demarcated Scales)
3. Matsyashaklopamam (fishy scales)
4. Kandu (Itching)
5. Rukshta (Itching)
6. Auspitz sign
7. Candle grease sign
8. PASI Score

Criteria for the assessment of overall effect of therapy

To assess the effect of therapy objectively, all the signs and symptoms will be observed on the basis of percentile.
- Complete remission: 100% relief
- Marked improvement: >75% to < 100%
- Moderate improvement >50% to 75 %
- Mild improvement: >25 % to 50 %
- No improvement: ≤ 25 %

Observation and Results

Pre-treatment observations

Table 2: Status of 60 patients with clinical symptoms of *Ek-Kushtha* (Psoriasis)

Group	Therapy	Registered patients	Drop out	Completed the treatment
Group A	Virechana Karma along with Atrushadi Kashaya	30	1	29
Group B	Jalaukavacharana along with Atrushadi Kashaya	30	4	26
Total		60	5	55

Total 77 patients were Screened,we have excludeed 17 patients, total 60 patients were registered out of which 55 patients completed the trial and 5 patients left the trial in between.

Observation

Age group: The maximum number of patients, i.e., 55%, belonged to the 31-45 age group, following this, 27.67% of patients were in the 16-30 year.

Gender: The maximum number of patients (68%) were males.

Socioeconomic status: The maximum number of patients (36.67%) belonged to the lower middle class.

Religion: The maximum number of patients (85%) were Hindu.

Habitat: The maximum number of patients (50%) were from sub-urban areas.

*Agni***:** The maximum number of patients (46%) were had *Vishmagni.*

*Koshtha***:** The maximum number of patients (58%) were *Madhyam Koshthi.*

Prakruti: The maximum number of patients (46%) exhibited *Kaphapaittika Prakruti.*

Addiction: The maximum number of patients (33%) had addicted to tea/coffee.

Onset: The maximum number of patients (85%) had gradual onset.

Post-Treatment Results

Table 3: Effect of treatment - *Virechana Karma* on Group-A patients

Group A	N	Mean		Median		SD		Wilcoxon W	% Effect	P-Value	Result
		BT	AT	BT	AT	BT	AT				
Candle Grease Sign	29	1.83	1.34	2.00	1.00	0.38	0.55	-3.742b	26.42	<0.001	HS
Auspitz sign	24	1.38	0.86	2.00	1.00	0.78	0.64	-3.873b	37.50	<0.001	HS
Aswedanam	28	2.21	1.17	2.00	1.00	0.87	0.78	-4.667b	46.88	<0.0001	ES
Mahavastu	28	1.81	1.35	2.00	1.00	0.57	0.49	-3.162b	25.53	<0.01	VS
Matsyashaklopamam	27	2.55	1.00	3.00	1.00	1.00	1.03	-4.400b	60.81	<0.0001	ES
Rukshta	25	2.34	1.69	3.00	2.00	1.27	1.07	-4.179b	27.94	<0.0001	ES
Kandu	24	2.90	1.70	2.00	1.00	0.90	0.68	-4.500b	41.31	<0.0001	ES
PASI Score	29	10.79	7.34	11.00	7.00	9.37	7.34	-3.812	31.97	<0.001	HS

Table No. 3 shows that Statistically Extremely Significant (ES) = (p < 0.0001) result found in *Aswednama, Matsyashaklopamam, Rukshta* and *Kandu.*

Highly Significant (HS) = (p < 0.001) - result was found in Candle Grease Sign, Auspitz sign and PASI Score.

Very significant (VS) = (p < 0.01) - result was found in *Mahavastu* criteria.

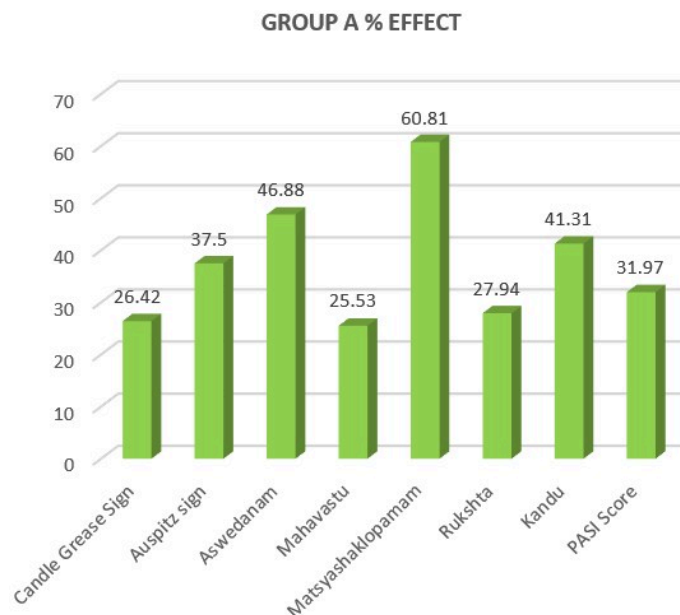Table No. 4 shows that Extremely Significant (ES) = (p < 0.0001) Statistically Extremely significant result found in Candle grease sign*, Matsyashaklopamam, Rukshta* and *Kandu.*

Highly Significant (HS) = (p < 0.001) - result was found in *Aswednama* and PASI Score.

Very significant (VS) = (p < 0.01) - result was found in *Mahavastu* criteria.

Significant (S) = (p < 0.05) - result was found in Auspitz sign criteria.

Table 4: Effect of treatment - *Jalaukavacharana* on Group-B patients.

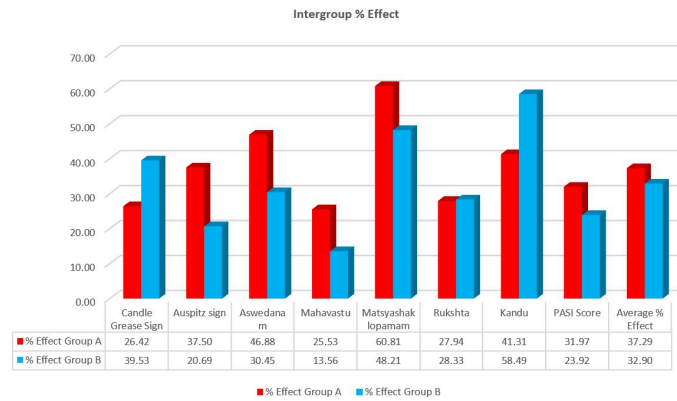| Group B	N	Mean		Median		SD		Wilcoxon W	P-Value	% Effect	Result
		BT	AT	BT	AT	BT	AT				
Candle Grease Sign	24	1.65	1.00	2.00	1.00	0.63	0.34	-4.243b	39.53	<0.0001	ES
Auspitz sign	20	1.12	0.88	1.00	1.00	0.71	0.64	-2.309b	20.69	< 0.05	Sig
Aswedanam	21	1.54	1.07	1.50	1.00	0.90	0.83	-3.690b	30.45	<0.001	HS
Mahavastu	20	2.03	1.76	2.00	2.00	0.68	0.80	-2.840b	13.56	<0.01	VS
Matsyashaklopamam	23	2.15	1.12	2.00	1.00	1.04	0.80	-4.210b	48.21	<0.0001	ES
Rukshta	23	2.31	1.65	3.00	1.00	1.10	0.79	-4.119b	28.33	<0.0001	ES
Kandu	21	2.04	0.85	2.00	0.00	1.03	0.58	-4.160b	58.49	<0.0001	ES
PASI Score	26	10.37	7.89	10.00	8.00	5.35	4.50	-4.7821	23.92	<0.001	HS

GROUP B % EFFECT
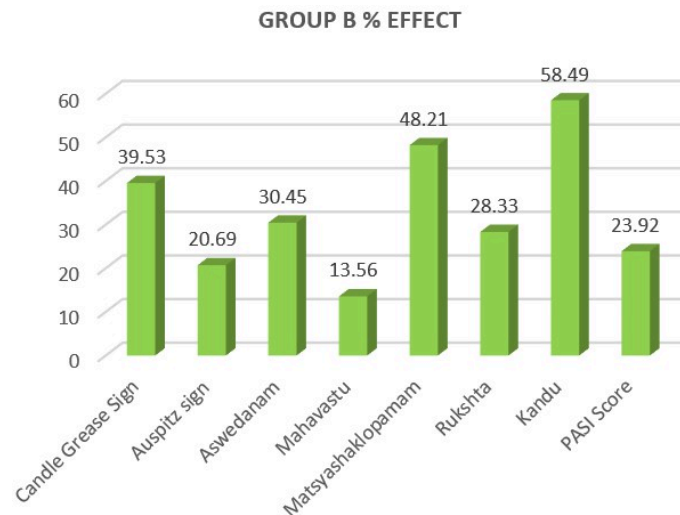
Table 5: Intergroup Comparison Cumulative Table of Intergroup Comparison of Subjective Parameters (Mann Whitney U Test)

Variable	Group	N	Mean Rank	Sum of Ranks	Mann-Whitney U	P-Value	Result
Candle Grease Sign	Group A	29	27.28	791.00	270.000	<0.05	Sig
	Group B	24	29.04	696.92			
	Total	53					
Auspitz sign	Group A	24	31.21	748.97	328.000	<0.05	Sig
	Group B	20	24.54	490.77			
	Total	44					
Aswedanam	Group A	28	31.14	871.86	267.000	<0.01	Sig
	Group B	21	24.38	512.08			
	Total	49					
Mahavastu	Group A	28	29.19	817.38	380.000	>0.05	NS
	Group B	20	26.83	536.55			
	Total	48					
Matsyashaklopamam	Group A	27	31.36	846.78	315.000	<0.05	Sig
	Group B	23	24.37	560.40			
	Total	50					
Rukshta	Group A	25	27.74	693.53	375.000	>0.05	NS
	Group B	23	28.29	650.63			
	Total	48					
Kandu	Group A	24	24.98	599.54	260.000	<0.05	Sig
	Group B	21	30.91	649.19			
	Total	45					
PASI Score	Group A	29	25.98	753.44	280.000	<0.05	Sig
	Group B	26	29.91	777.76			
	Total	55					

Table No. 5 shows that very significant (p < 0.01) - result was found in *Aswednama* criteria.

Significant result (p < 0.05) - result was found in Candle grease sign, Auspitz sign, *Matsyashaklopamam, Kandu* and PASI Score parameters.

Insignificant result (p >0.05) - was found in *Mahavastu* and *Rukshta* criteria.

Intergroup % Effect

	Candle Grease Sign	Auspitz sign	Aswedanam	Mahavastu	Matsyashaklopamam	Rukshta	Kandu	PASI Score	Average % Effect
% Effect Group A	26.42	37.50	46.88	25.53	60.81	27.94	41.31	31.97	37.29
% Effect Group B	39.53	20.69	30.45	13.56	48.21	28.33	58.49	23.92	32.90

Table 6: Post treatment effect on follow-up (Group -A)

Group A	Mean		Median		SD		Wilcoxon W	P-Value	% Change	Result
	AT	FU	AT	FU	AT	FU				
Candle Grease Sign	1.34	1.38	1.00	1.00	0.55	0.68	-.333b	0.739	-2.56	NS
Auspitz sign	0.86	0.86	1.00	1.00	0.64	0.64	.000c	1.000	0.00	NS
Aswedanam	1.17	1.31	1.00	1.00	0.78	0.71	-.707d	0.480	-11.76	NS
Mahavastu	1.35	1.76	2.00	2.00	0.80	0.87	-1.941d	0.052	-30.64	NS
Matsyashaklopamam	1.00	1.31	1.00	1.00	1.03	0.89	-1.213b	0.225	-31.03	NS
Rukshta	1.69	1.69	2.00	2.00	1.07	1.00	-.258d	0.796	0.00	NS
Kandu	1.70	0.86	1.00	1.00	0.68	0.95	-1.807b	0.071	49.29	NS
PASI Score	7.34	7.67	7.00	8.00	9.37	8.30	-.333b	0.739	-4.50	NS

Table 7: Post treatment effect on follow-up (Group -B)

Group B	Mean		Median		SD		Wilcoxon W	P-Value	% Change	Result
	AT	FU	AT	FU	AT	FU				
Candle Grease Sign	1.00	0.69	1.00	1.00	0.34	0.55	-1.807b	0.071	30.77	NS
Auspitz sign	0.88	0.69	1.00	1.00	0.64	0.68	-.540c	0.589	21.74	NS
Aswedanam	1.07	0.65	1.00	1.00	0.83	0.69	-.707b	0.480	38.89	NS
Mahavastu	1.76	1.00	1.00	1.00	0.49	0.63	-2.714b	0.007	43.14	Sig
Matsyashaklopamam	1.12	0.73	1.00	1.00	0.80	0.78	-.707b	0.480	34.48	NS
Rukshta	1.65	1.15	1.00	1.00	0.79	0.88	-.894b	0.371	30.23	NS
Kandu	0.85	0.62	0.00	0.00	0.58	0.98	-.811c	0.417	27.27	NS
PASI Score	7.89	7.34	8.00	7.00	4.50	4.34	-.333b	0.739	6.97	NS

Table 8: Comparison between Group A and Group B for AT – FU Observations

Variable	Group	N	Mean Rank	Sum of Ranks	Mann-Whitney U	P-Value	Result
Candle Grease Sign	Group A	29	24.67	715.50	280.500	0.049	Sig
	Group B	24	31.71	824.50			
	Total	53					
Auspitz sign	Group A	24	25.21	731.00	296.000	0.058	NS
	Group B	20	31.12	809.00			
	Total	44					
Aswedanam	Group A	28	26.17	759.00	324.000	0.261	NS
	Group B	21	30.04	781.00			
	Total	49					
Mahavastu	Group A	28	26.09	756.50	321.500	0.292	NS
	Group B	20	30.13	783.50			
	Total	48					
Matsyashaklopamam	Group A	27	23.88	692.50	257.500	0.020	Sig
	Group B	23	32.60	847.50			
	Total	50					
Rukshta	Group A	25	24.47	709.50	274.500	0.063	NS
	Group B	23	31.94	830.50			
	Total	48					
Kandu	Group A	24	24.88	721.50	286.500	0.074	NS
	Group B	21	31.48	818.50			
	Total	45					
PASI Score	Group A	29	26.98	782.44	280.000	0.035	Sig
	Group B	26	28.91	751.76			
	Total	55					

Table 9: Overall assessment of the therapy

Overall Effect	Group A		Group B	
	N	%	N	%
Marked Improvement	0	0.00%	0	0.00%
Moderate Improvement	12	41.38%	3	11.54%
Mild Improvement	12	41.38%	19	73.08%
No Improvement	5	17.24%	4	15.38%
TOTAL	29	100.00%	26	100.00%

Post Treatment Follow-Up

After 1 month of completion of treatment Group-A shows less reoccurrence of symptoms as per percentage change, While in Group B there is no reoccurrence of clinical parameters.

OVERALL EFFECT
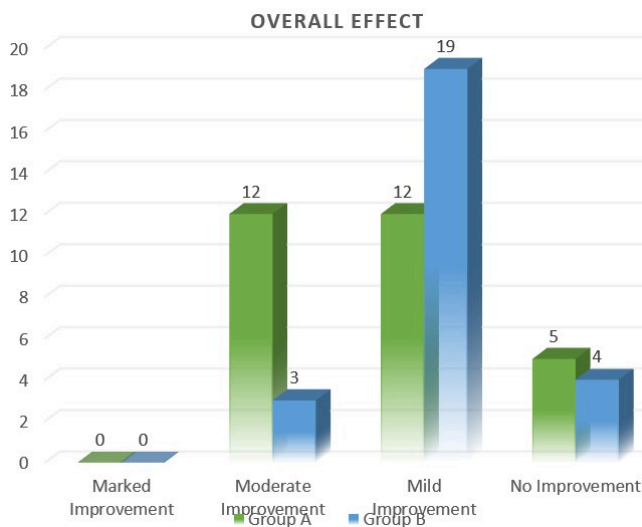
Disscussion

Mode of action of *Virechana Karma*

Most popular purifying technique, particularly for *Paittika* ailments due to its ease of usage, ability to remove *Dosha* in greater amounts with less strain, and lower risk of consequences than *Vamana*. Additionally, it helps with conditions where *Pitta* is associated with *Vata* or *Kapha.*[5]

Virechana Karma can be classified into the two categories listed below[6]

1. Systemic: this lowers the body's morbid *Dosha*, especially *Pitta*, to *Amasaya* or *Pakvasaya*.

2. Local: Term "local evacuant" refers to the removal of *Dosha*, in the form of *Mala*, from the gut by *Adhobhaghahara*

- Firstly, *Virechana Aushadhi* gets absorbed, the *Virya* causes the *Virechana Aushadhi* to go through the *Hridaya*, *Dhamani*, and finally the macro and micro channels of the body.

- *Vyavayi Guna* of *Aushadhi* takes charge of its rapid absorption.

- *Dhatu Saitilya Karma*, caused by the *Vikasi Guna*, allows the bond to relax and soften.

- The *Dosha Sanghata* (compactness) gets liquified (*Vishyandana*) because of *Ushna Guna*.

- The microform breakdown of *Mala* and *Dosha* is the action of *Tikshna Guna*.

- Because of *Sukshma Guṇa*, endogenic poisons are broken down by penetrating microchannels and then eliminated.

- *Virechana* drugs are *Jala* and *Prithvi Mahabhoota Pradhana*, and naturally having *Adhobhaghara Prabhav*, due to this mechanism *Virechana*

Bharajaka Pitta is a type of *Pitta*, Place of *Bhrajaka Pitta* is *Twacha*, and *Ek-Kushtha* is *Twaka Sthanagata Vyadhi* as well, *Virechana* helps in eliminate *Dushita Dosha* (*Vata-Pitta-Kapha*) and balance them. By this *Virechana* can helps in getting rid of *Ek-Kushtha*.

Mode of action of *Jalaukavacharana* (*Raktamokshana*)

Ayurveda categorizes *Kushtha* as *Rakta-Pradoshaja Vikara*, caused by vitiation of all three *Doshas* (*Vata-Pitta-Kapha). Pitta Dosha* is *Mala* of *Kapha* hence *Pitta* is also playing major role in development of *Ek-Kushtha.*

- As per *Ayurvedic* classics, *Raktadushti* is one of the prime causes of skin disease.

- In *Ek-Kushtha* involvement of *Rakta Dhatu* and *Raktavaha Srotas* so as a *Shodhana* therapy *Jalaukavacharana* is beneficial in *Ek-Kushtha*.

By transporting the vitiated *Dosha*, *Rakta* plays a significant role in the disease's dissemination from one area of the body to another.

The *Shodhana* of *Rakta* is necessary due to *Rakta's Dushti* Since *Jalauka* removes vitiated *Rakta* and heals illnesses, it is regarded as the ultimate remedy for All *Raktaaja Vyadhies* like psoriasis.

Jalaukavacharana, or leech therapy is an Ayurvedic treatment modality, to treat ailments like *Ek-Kushtha*, a kind of skin disorder. Generally, skin disease occurs due to *Dushti* of *Rakta Dosha.*

Raktamokshana **works in** ***Ek-Kushtha*** **as follows**

Blood Purification: By drawing stagnant blood and encouraging the removal of toxins linked to skin conditions, leeches aid in blood detoxification.

Improved Circulation: By enhancing blood flow to the area affected by disease, the therapy promotes better nutrient delivery and healing.

Effect on Inflammation: Hirudin, one of the bioactive compounds secreted by leeches, has anti-inflammatory qualities that reduce swelling and redness in *Ek-Kushtha.*

All in all, *Jalaukavacharana* helps to improve skin health, restore equilibrium and Relieves symptoms of *Ek-Kushtha.*

Mode of action of *Atrushadi Kashaya*

Atrushadi Kashaya **has following ingredients:**

"Vasa, Amrita, Eranda, Avalguja, Haritaki".

Artrushadi Kashaya is a decoction that is frequently used in *Ayurveda* medicine to treat skin conditions, such as psoriasis. Mode of action of this *Kashaya*, which is founded in the principles of *Ayurvedic* pharmacology, entails a number of crucial mechanisms meant to promote healing and detoxification while balancing *Doshas*.

Detoxification property (*Shodhana*): The detoxifying qualities of this decoction are well-known and useful in psoriasis as per *Bhaishajya Ratnavali*. It assists in purifying blood (*Rakta Shodhana*) & helps in removing accumulated toxins (*Ama Dosha*), *Ama Dosha* & *Mandagni* are prime cause for development of all disease, which are believed to contribute to skin illnesses like psoriasis. Maximum drugs of *Atrushadi Kashaya* are consists of *Tikta-Kashaya Rasa Pradhana Dravya*, which helps in pacifying *Vrahad* (Aggravated) *Kapha* & *Pitta Dosha.* In *Ek-Kushtha* there is an imbalance in these *Doshas*.

"वासा पित्तहरं शीतं कुष्ठे च विषहरिणी।"**[7]**

Acharya Charaka mentioned that *Kashaya rasa* is useful for *Rakta Shodhana* in Skin disease like *Ek-Kushtha*, as "*Kashaya Raso Raktadosha Haranam*." **[8]**

According to the *Charaka Samhita*, *Guduchi's* blood-purifying and anti-inflammatory qualities make it a useful herb for treating *Kushtha*, or skin conditions.

गुडूची तिक्तकशाया मेध्या कुष्ठकृमिनुत् ।

वातस्रातिसरार्थांसि गुल्मान्दोषान्निहन्ति च || (Ch.Chi. 9/12)

Bakuchi is referenced in *Bhavaprakasha Nighantu's Haritakyadi Varga*, where it is said to be helpful in curing *Kushtha* (skin disorders) and other skin ailments.

Conclusion

Overall response to *Virechana Karma* in Group-A: Complete remission (100% relief) was observed in 0% patients, marked improvement (> 75% to less than 100% relief) in 0% patients, moderate improvement (> 50% to less than 75% relief) in 41.38% patients and mild improvement (> 25% to less than 50% relief) in 41.38% patients whereas there were 5% patients who showed no improvement (less than 25% relief).

Overall response to *Jalaukavacharana* in Group-B: Complete remission (100% relief) was observed in 0% patients, marked improvement (> 75% to less than 100% relief) in 0% patients, moderate improvement (> 50% to less than 75% relief) in 11.54% patients and mild improvement (> 25% to less than 50% relief) in 73.08% patients whereas 15.38% patients showed no improvement (less than25%relief).

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