



## Ayurvedic approach in the management of Charmakhya Kushta w.s.r. to Lichen Simplex Chronicus (Neurodermatitis) - A Case Report

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**Introduction:** Skin is the essential organ of the human body, which plays a vital role in cosmetology. It acts as a barrier and also vulnerable to a range of illnesses. The Nirukti of the Kushta is derived from the sutra "Kushnati Vapu Iti Kushtam" which means that causes Vikrati to the Shareera is called Kushta. In Ayurveda all skin disorders are classified as Kushta which is further divided into Mahakushta and Kshudra Kushta. Charmakhya is one of the Kshudra Kushta mentioned in Ayurvedic literature.

**Case Presentation:** A 55 years old male patient presented with blackish, thick discolouration on the medial aspect of right lower leg, associated with severe itching and burning sensation since 2 years.

**Management and outcomes:** The patient was treated with Shodhana Chikitsa i.e., Virechana and Matra Basti followed by Jalauka Avacharana along with Shaman Aushadhis. The patient showed significant improvement after the treatment.

**Discussion:** Ayurvedic treatment for Charmakhya Kushta typically involves a holistic approach incorporating dietary changes, detoxification procedures (such as Panchkarma) and herbal remedies helps in restoring Dosha balance and promoting skin health. Ayurveda not only alleviates symptoms but also promotes overall well-being and reduces dependency on allopathic medications. This holistic approach signifies a promising pathway for individuals seeking profound and enduring relief from conditions like Charmakhya.

**Keywords:** Charmakhya Kushta, Virechana, Shodhana, Shamana, Jalauka Avacharana

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## Introduction

The skin is the interface between humans and their environment is the largest organ in the body. It acts as a barrier, protecting the body from harsh external conditions and preventing the loss of important body constituents, especially water. In recent years, there has been a considerable increase in the incidence of skin problems in tropical and developing countries like India due to various reasons like poverty, poor sanitation, lack of hygiene and pollution etc.[1].

In Ayurveda the word “Kushta” practically refers to all skin conditions which is mainly classified into two types - *Maha Kushta* and *Kshudra Kushta*. According to *Acharya Charaka Charmakhya* is one among the *Kshudra Kushta* resembling a *Hasticharma*. [2]

In modern dermatology it can be compared with Lichen Simplex Chronicus. Lichen simplex chronicus is defined as a common form of chronic neurodermatitis that presents as dry, patchy areas of skin that are scaly and thick. The hypertrophic epidermis generally seen is typically the result of habitual scratching or rubbing of a specific area of the skin. The root of the disorder may be both a primary symptom, reflective of perhaps a psychological component or secondary to other cutaneous issues such as eczema or psoriasis. [3]

This mainly effects three *Doshas* (*Kapha Pradhan Tridosha*) and four *Dushyas* (*Rasa, Rakta, Mamsa, Ambu*). *Twak Vikaras* are mainly caused by *Rakta Dusti* and *Virechana* is the prime treatment for *Raktaj Rogas*. [4]

Hence *Shodhana* (*Virechana*) was adopted since the *Doshas* are in *Bahudoshavastha* followed by *Shamana* and *Jalauka Avacharana*, which showed substantial results in curing the disease. Lichen simplex chronicus has been estimated to occur in approximately 12% of the population. The highest prevalence is typically from middle to late adulthood and often peaks at 30 to 50 years of age. [5]

## Case Report

A 55 years old male patient presented with the complaint of blackish thick plaques with hyperpigmentation on the medial aspect of the right lower leg. It was associated with intense itching and burning sensation since 2 years.

### H/O Present Illness

The patient was apparently normal 2 years back, then he gradually developed blackish dry patch associated with intense itching on the medial aspect of the right lower leg. After 6-7 months due to continuous habit of scratching or rubbing of a specific area of the skin, the patch became thick, lichenified and converted into plaque. It was associated with hyperpigmentation and burning sensation for which the patient consulted to a dermatologist, was instructed to take antihistamines and topical steroids. However, over the course of two months, he witnessed the thickening of hard skin and spread of the lesion due to continuous itching. For that the patient visited the Kayachikitsa OPD of the I.T.R.A, Jamnagar and got admitted for further management.

**Past History:** No H/O HTN, DM, IHD.

**Family History:** No any family history found.

### Personal History

**Diet:** Veg (*Amlarasapriti*)

**Appetite:** Average

**Jaran Shakti:** *Madhyam*

**Kostha:** *Madhyam*

**Sleep:** 6-7 hours, Adequate

**Exercise:** Nil

**Habits:** Pan masala (2-3/day)

**Temperament:** Angry

**Satva Pariskha:** *Madhyam*

**Mutra:** 3-4 times/day

**Mala Pravriti:** 2 times/day, Normal consistency, Satisfactory

**B.P:** 120/80 mmhg

**Pulse:** 78/min

**RR:** 18/min

**Temp:** 37.6°C

**Height:** 170 cm

**Weight:** 76 kg

**B.M.I:** 26.29 kg/m<sup>2</sup>

**Aakriti:** Madhyam

**Marital Status:** Married

**Occupation:** Shopkeeper

**Socio economic Status:** Middle Class

#### Skin Examination (*Sthanika Pareeksha*)

Site of Lesion	Type of Lesion	Measure (in cm)	Discharge	Scaling, Thickness	Signs	Associated Symptoms
Rt Lower leg (Medial aspect)	Plaque (irregular borders)	10 cm approx.)	Not present	Present, more than 0.5 cm.	Candle grease sign- Negative Auzpitz sign- Positive	Itching, Burning Sensation

**Lichenification:** Present

**Type of dermatitis:** Neurodermatitis

#### Ashtavidh Pariksha

**Naadi:** Pitta Pradhan Vaat

**Mutra:** 3-4 times/day (*Swetpeetabh*)

**Mal:** 2 times/day (Satisfactory)

**Jihva:** Raktabh (*Sama*)

**Shabda:** Spastha

**Sparsha:** Rukshata

**Druk:** Samyak

**Akruti:** Madhyam

#### Dasha Vidha Pariksha

**Prakriti:** Vata-Kaphaj

**Vikruti:** Lakshan Nimittaj

**Satva:** Madhyam

**Saar:** Madhyam

**Samhanana:** Madhyam

**Satmaya:** Madhyam

**Vaya:** 55 yr

**Praman:** Weight - 76kg, Height - 170cms

**Aharashakti:** Madhyam

**Vyamshakti:** Madhyam

#### Nidana of Charmakhya Kushta

**Aharaja:** Amla Pradhan Ahara, Vidahi Ahara,

*Vishamaashan, Viruddha Ahara.*

**Viharaja:** Aatap Sevana (Exposure to Heat due to occupation), Aaghaataja (Due to continuous scratching).

**Mansika:** Chinta, Shoka, Krodha

#### Samprapti of Charmakhya Kushta:

*Nidana Sevana*

↓

*Jatharagni Mandya*

↓

*Ama (Vikrita Dhatugata Rasotpatti)*

↓

*Tridosha Prakopa*

↓

*Dushti in Dhatus & Srotas causes Sroto Sangha at Twak, Rakta, Mansa and Lasika (Dosha Dushya Sammurchana)*

↓

*Vata Sangha in Twak & causes Dushti of Kleda leads to Rukshata in Twachadi Dravyas.*

↓

*Krishna Aruna Vaivarnyata, Bahala, Hasticharmvat Lakshana of Twak, Leads to **Charmakhya***

#### Samprapti Ghatakas

- **Dosha** - Vata Kapha Pradhan Tridosha
- **Dushya** - Twak, Rakta, Mamsa, Lasika
- **Agni** - Jatharagni mandya & Dhatwagni mandya
- **Ama** - Jatharagni mandya janya ama & Dhatwagni mandyajanya ama
- **Srotas** - Rasavaha, Raktavaha, Mamsavaha srotas
- **Sroto dushti Prakara** - Sanga & Atipravrutti.
- **Udbhavasthana** - Ama-Pakvashaya
- **Sanchara sthana** - Tiryag Sira
- **Adhisthana** - Twacha
- **Vyadhimarga** - Bahya Vyadhi
- **Swabhava** - Chirakari

#### Differential Diagnosis

- Vicharchika
- Dadru
- Ek kushtha
- Charmakhya

**Final Diagnosis:** *Charmakhya*

Lichen Simplex Chronicus (Neurodermatitis)

*(Doshas: Vata-Kapha Pradhan Tridosha)***Treatment Schedule**

SN	Treatment (Patient Admitted on 25/03/25)
1.	Shodhana • Virechana • Jalaukavacharana • Matra Basti
2.	Shaman Chikitsa
3.	Lepa Chikitsa
4.	Nidana Parivarjana
5.	Pathya-Apathya Vivechana

**Panchkarma Chikitsa**

Procedure	Medicine	Days & Date	Dose
1. Snehapana	Guggulu Tiktakam Ghritam	1. 27/3/25 2. 28/3/25 3. 29/3/25 4. 30/3/25 5. 31/3/25 6. 1/4/25 7. 2/4/25	30ml 60ml 100ml 130ml 150ml 180ml 200ml
2. Sarvang Abhyanga & Naadi Sweda	Bala Taila	3 days (3/4/25 - 5/4/25)	Quantity Sufficient
3. Virechana	Manibhadra Guda Triphala Kwath Abhyaadi Modaka	On 4th day (6/4/25) (16 Vegas are obtained)	150gms 150ml 2 tabs
4. Samsarjana Krama	Pathya advised	5 days	-
5. Jalaukavacharana	Jalauka	4 sittings	-
6. Matra Basti	Nimbadi Taila	8 days (11/4/25- 18/4/25)	60 ml
7. Lepa	Dashang Lepa	7 days	Quantity Sufficient

*Sneha Siddhi lakshanas* were observed on the 7th day of *Snehapana*, like *Snigdha Varcha*, *Gatra Mardavata* etc.

- *Vegiki* - 16 Vega (*Madhyam Suddhi* obtained)

- *Antiki* - *Kaphanta*

- *Laingiki* - *Buddhi*, *Indriya Shuddhi*, *Agnideepana*, *Vatanulomana*.

After *Virechana Karma*, *Jalaukavacharana* was done during *Samsarjan Krama*, and 4 sittings are performed at 7 days interval.

After *Matra Basti* the patient was discharged from the IPD on 19/04/25, and the *Lepa* was done on OPD basis i.e., on follow ups i.e., 27/04/25 - 5/05/25.

Follow-up: After each 7 days.

**Shaman Chikitsa**

**(Shaman Aushadhi is given after Samasarjan Krama for 30 days)**

SN	Shamanoushadi	Matra
1.	Panchtikta Kwath Manjisthadi Kwath	40ml BD before food
2.	Arogyavardhini Ras- 250mg Gandhak Rasayana- 125mg Panchnimba Churna- 3 gms	BD after food with lukewarm water
3.	Kaishor Guggulu	2 tabs BD after food with lukewarm water
4.	Gandhak Malhar	For local application
5.	Jivantyaadi Yamak	For local application
6.	Rasamanikya- 65mg Manjistha Churna- 3gms Sariva Churna- 3gms Patola Churna- 3 gms Guduchi Churna- 3 gms Khadir Churna- 3gms	BD after food with lukewarm water

**Pathya Apathya**

**Pathya** - *Mudga Yusha*, Regular Home-made food, *Koshna Jala*, *Pranayama*.

**Apathya** - *Diwaswapna*, Scratching, *Dadhi Sevana*, *Sheeta Ushna Vyatyasa*, Consumption of excessive *Katu*, *Tikta*, *Lavana Rasa Sevana*.

**Observations and Results**

Observations	Before Treatment	After Snehapana	After Virechana	After Jalaukavacharana	After Matra Basti	1st Follow up	2nd Follow up
Size shape	Irregular	Present	Present	Reduced	Reduced	Reduced	Absent
Colour	Blackish	Present	Reduced	Reduced	Reduced	Reduced	Absent
Thickness	>0.5cm in diameter	Reduced	Reduced	Reduced	Reduced	Reduced	Normal
Lesions	Dry, Plaques	Reduced	Reduced	Reduced	Reduced	Absent	Absent
Moisture	Dryness, no sweating	Present	Reduced	Reduced	Reduced	Absent	Absent
Temperature	Warmth	Present	Present	Absent	Absent	Absent	Absent
Mobility and turgor	Reduced	Present	Present	Present	Present	Present	Present
Texture	Rough	Present	Present	Reduced	Reduced	Reduced	Absent
Candle Greece Sign	Negative	Negative	Negative	Negative	Negative	Negative	Negative
Auspitz Sign	Present	Present	Present	Present	Present	Absent	Absent

Result is indicated in Photographs below i.e., (Photo 1-8)





**1. Before Treatment**



**2. After Snehapana**



**3. After Virechana**



**4. During Jalaukavacharna**



**5. After Jalaulavacharna**



**6. After Matra Basti (Pt Discharged)**



**7. First Follow Up (27/04/25)**



## 8. Second Follow Up (5/05/25)

### Assessment Criteria

A special scoring pattern for assessment of Subjective Parameters [*Kandu* (itching), *Pidika* (eruptions), *Vaivarnya* (discolouration), *Vedana* (pain), *Srava* (discharge), *Twak Rukshata* (dryness of skin), *Shotha* (inflammation), *Daha* (burning sensation), *Raji* (striae), *Paka*, Disturbed sleep and Irritability] was adopted from previous research work, where effect was assessed on the basis of changes occurred at the end point in comparison to base line score. Which was 20 before treatment and after treatment which was reduced to 4.

Assessment of patients also was done by following scale: (Appendix 1)

1. DLQI (Dermatology Life Quality Index)[6] - To measure health related quality of life of patients (before treatment: 15 & after treatment: 2) (Appendix 1)

## Discussion

Lichen simplex chronicus is a form of chronic localized pruritus with a secondary dermatitis, and one of the most common types of chronic itch conditions, estimated to affect more than 10% of the general population.[7] Lichen Simplex Chronicus is reminiscent of *Charmakhya Kushta*, with symptoms such as *Kharasparshata*, elephant-like skin (*Hasticharmavata*), and itching. *Charmakhya Kushta* mostly presents *Vata Kaphja Dhusti*, which induces *Dushti* in *Ras* and *Rakta Dhatus*. *Dhatus* and *Srotas* comprise *Sroto Sangha* in *Twak*, *Rakta*, *Mamsa*, and *Lasika*. *Vata Sangha* in *Twak* generates *Kleda Dushti*, which leads to *Rukshata* in *Twachadi Dravya*. *Krishna Aruna Vaivarnyata*, *Bahala*, and *Twak's Hasticharmavat Lakshana* led to *Charmakhya*. [8]

By Proper understanding of *Nidana*, *lakshana*, *Samprapti*, *Rogi Bala*, *Roga Bala*, *Desha*, *Kaala*, *Ritu*, *Avastha* of disease we can treat the condition by adapting treatment procedures like *Snehapana*, *Saravnga Abhyanga Swedana*, *Virechana*, *Jalaukavacharana*, *Matra Basti*, *Lepa* along with *Shamanoushadi* and *Pathya Ahara Vihara*. The mode of action of procedure and drugs are as follows:

### **Snehapaan (Panchtikta Ghrita Guggulu):**

*Panchtikta Ghrita Guggulu* consist of drugs like *Giloy*, *Neem*, *Kantkari* etc. which acts as an agent or a substance that inhibits the manifestation of immediate hypersensitivity. And help to reduce oxidative stress, by scavenging free radicals. It acts as *Kandughana*, *Krumighna* and *Raktshodhaka* hence useful in *Charmakhya Kushta*. [9] *Tikta Rasatmaka*, *Madhur Vipaki* and *Ushna Viryatmaka* properties of *Ghrita* acts mainly on *Kleda*, *Meda*, *Lasika*, *Rakta*, *Pitta* and *Kapha* which helps in balancing the vitiated *Dosha* and *Dhatu*.

**Virechana (Manibhadra Guda):** It is a *Tridosahara* formulation acts on *Kapha* and *Pitta Shamaka* and *Vatanulomaka*, offers anti-inflammatory benefits in managing Lichen simplex Chronicus through its key ingredients *Vidanga*, *Trivrit*, *Amalaki* and *Haritaki*. Hence it is used in *Virechana* since it is a particular therapy for *Pitta Dosha*, it may also eliminate *Kapha Dosha*.

**Jalaukavacharana:** It is a *Pancha Shodhana* by *Acharya Sushruta*; it is advised in *Vata*, *Pitta*, *Kapha*, *Dushta Shonita*, *Kushta Roga*. *Jalaukavacharana* was performed to achieve *Raktashuddhi* as *Rakta* is one of main *Dushya*. [10]

**Basti:** *Matra Basti* was done with *Nimbadi Taila*. *Taila* is best for *Shamana* of *Vata* & it does not increase *Kapha*. [11] *Nimba* is the one of the drugs for *Kushta Roga* & *Sneha Basti* is best for *Vata Shamana*. Therefore, *Nimba Taila Matra Basti* is helped in the treatment of *Charmakhya Kushta*. [12]

**Dashang Lepa:** *Dashang Lepa* is a combination of 10 drugs and mainly used for inflammatory condition like swelling & edema, also used in headache, itching and skin diseases. [13] The ingredients of *Dashang Lepa* having anti-inflammatory, anti-allergic, antioxidant and calming & soothing properties. [14]

**Jeevantyadi Yamak:** It is a combination of two *Sneha*, *Taila* and *Ghrita* which effectively manages the *Rukshata* of skin and improve skin texture.



**Rasamanikya:** The major ingredients of *Rasmanikya* are *Tamara Bhasma*, *Hartala* and *Abhrak Bhasma*. *Tamara Bhasma* helps in red blood cells formation thus restore complexion and colour of skin. The skin predominance to *Vata Dosha* remain dry and sensitive to touching sensation, *Rasmanikya* pacifies excess *Vata* thus prevent skin dehydration and sensitivity. *Rasmanikya* correct aggravated *Kapha Dosha* thus help to maintain skin texture and tolerant to sun exposure.[15]

**Arogyavardhini Vati:** It has *Kutki* as main ingredient that has anti-pruritic and antioxidant properties and works as *Dhatu Poshaka* (promotes body tissue), hence resolving morbidity at *Dhatu* level. It is, *Deepani* (appetiser), *Pachani* (digestive), *Tridoshashamaka* (pacify all *Doshas*), and is indicated in *Kushtha* treatment.

**Kaishor Guggulu:** It is indicated explicitly in *Vata Rakta*, *Vrana*, and *Kushtha*. It acts as an antiallergic, anti-bacterial and blood purifier.[16]

**Gandhak Rasayana:** It is widely used in the treatment of skin disorders. *Shoditha Gandhaka* is *Agnideepaka*, *Amapachaka*, *Amanashaka*, *Vishahara*, *Soshaka*, *Kruminashaka*. All properties essential to treat *Kushta* are present in *Shuddha Gandhaka*. [17] *Gandhaka Rasayana* relieves discolouration of skin, helps to re-establish natural colour, alleviates *Dooshita Kapha* and *Visha*. [18]

## Conclusion

*Kushtha* is described as one of the most chronic diseases in the *Ayurvedic* system of medicine. Skin is an essential organ of communication with the external world, the seat of *Saparshanendriya*. Therefore, any *Apathya seven* and *Manasika Nidana* leading *Tridosha prakopa*, due to *Dosha Dushya Samurchana* and *Khavaigunya* in *Twacha* manifests the disease *Charmakhya Kushta*. This case study shows that the *Charmakhya Kushta* can be successfully treated with the *Shodhan*, *Shaman*, and *Bahirparimarjan Chikitsa*. Since this is a single case study, it is recommended that research be conducted on a larger number of patients to demonstrate the efficacy of ayurvedic treatment modalities with no adverse reactions.

## Patient Perspective

After getting disease, I tried several allopathic treatments to heal, but I wasn't satisfied with outcome.

Then, I decided to start an ayurvedic treatment. I started to feel better after starting the customized ayurvedic regimen, which included Panchakarma and ayurvedic medications.

I am very appreciative of my health's steady improvement without side effects.

## Informed Consent

Patient consent was obtained before publishing the paper

## Appendix-1

### Assessment Criteria for Chief Complaints

#### 1) Kandu - Itching

No Kandu at all	0
Very mild Kandu (Rarely/sometimes itch)	1
Mild Kandu (Itching is there for small time period)	2
Moderate Kandu (Itching is there continuously in specific time day/night)	3
Severe Kandu (Itching is present continuously regardless of specific time period)	4

#### 2) Pidika - Eruptions

Absence of Pidika	0
Very mild Pidika (1-2 Pidika)	1
Moderate Pidika (upto 10 Pidika per lesion)	2
Severe Pidika (10-20 Pidika per lesion)	3
Very severe Pidika (more than 25 Pidika per lesion)	4

#### 3) Vaivarnya - Discolouration

Normal color of skin	0
LohitaVarna (Reddish coloration of skin)	1
LohitaShyavaVarna (reddish black discoloration of skin)	2
ShyavaVarna (blackish discoloration of skin)	3
ShyamaVarna (black discoloration of skin)	4

#### 4) Vedana - Pain

Absent	0
Pain occasionally after itching	1
Mild pain after itching	2
Moderate pain (Continuous pain without disturbance in sleep)	3
Severe pain (Continuous pain with disturbed sleep)	4

#### 5) Srava - Discharge

No discharge	0
Mild discharge	1
Moderate discharge	2
Severe discharge	3
Excessive discharge with foul smelling	4

**6) Twak Rukshata - Dryness of Skin**

No line on scrubbing with nail	0
Faint line on scrubbing by nail	1
Lining and even words can be written by nail	2
Excessive Rukshata leading to Kandu	3
Rukshata leading to crack formation	4

**7) Shotha – Swelling/Inflammation**

No Shotha	0
Shotha present in less than 25% of area	1
Shotha present between 25-50% of the area	2
Shotha present between 50-75% of the area	3
Shotha present more than 75% of area	4

**8) Daha - Burning Sensation**

Absence of burning sensation	0
Very mild (Burning sensation rarely)	1
Mild (Burning sensation on and off)	2
Moderate (Burning sensation is there continuously in specific time day/night)	3
Severe (Burning sensation is there continuously regardless of specific time period)	4

**9) Raji - Thickening of the Skin (Striae)**

No thickening of the skin	0
Thickening of the skin but no criss cross marking (Raji)	1
Mild thickening with criss cross marking	2
Thickening with criss cross marking	3
Severe Lichnification	4

**10) Disturbed Sleep**

Sound sleep	0
Sometimes disturbed sleep due to Charmakhya	1
Often disturbed sleep due to Charmakhya	2
Daily disturbed sleep due to Charmakhya	3
Unable to sleep for more than 3-4 hours per day due to Charmakhya	4

**11) Irritability**

No irritation	0
Mild irritation	1
Sometimes irritation and followed by anger	2
Often irritation and followed by anger and depression	3
Continuous irritation followed by anger and depression	4

**Score: BT 20/44 AT 4/44****DLQI (Dermatology Life Quality Index)[1]**

Questionary	BT	AT
1) Over the last week, how itchy, sore, painful or stinging has your skin been?	3	1
2) Over the last week, how embarrassed or self-conscious have you been because of your skin?	2	0
3) Over the last week, how much has your skin interfered with you going shopping or looking after your home or garden?	2	0
4) Over the last week, how much has your skin influenced the clothes you wear?	2	0
5) Over the last week, how much has your skin affected any social or leisure activity?	2	1
6) Over the last week, how much has your skin made it difficult for you to do any sport?	1	0
7) Over the last week, has your skin prevented you from working or studying	1	0
8) Over the last week, how much has your skin created problems with your partner or any your close friends or relatives?	1	0
9) Over the last week, how much has your skin caused any sexual difficulties?	0	0
10) Over the last week, how much of a problem has the treatment for your skin been, for example by making your home messy, or by taking up time?	1	0
Total	15 (very large effect)	2 (small effect)

The scoring of each question is as follows:

Scoring	
Very much	3
A lot	2
A little	1
Not at all	0
Not relevant	0

Score	Interpretation
0-1	No effect at all on patients' life
2-5	Small effect on patients' life
6-10	Moderate effect on patients' life
11-20	Very large effect on patients' life
21-30	Extremely large effect on patients' life

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