

Management of Indralupta (Alopecia areata) by Jalaukavacharan and Lepa chikitsa in Child: A case report

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Abstract:

Introduction: Alopecia areata is an autoimmune disease resulting in localized, non-scarring hair loss. Patches are more common on the scalp without any scaling and inflammation. In *Ayurveda* hair disorders are described under *Kshudrarog* as *Indralupta*.

Main Clinical Finding: a 10-year-old male patient with a complaint of asymptomatic loss of hair at a single site over the occipital region for one month visited Agadtantra OPD.

Diagnosis: Patient was diagnosed as *Indralupta* (Alopecia areata)

Interventions: Case was successfully treated with only *Bahya Chikitsa*. Two sittings of *Jalaukavacharan* and local application of *Lepa* of *Sanjeevani Vati* in *Malatyadi Tailam* for consecutive 45 days.

Outcome: The patch was completely covered with lustrous black hair after the treatment. No adverse effects were observed during the period of treatment.

Conclusions: It can be concluded that *Ayurveda* provides a promising result in the patient of *Indralupta*. It can be a choice of treatment, which is cost-effectiveness and has no adverse effects.

Keywords: Alopecia areata, Indralupta, Jalaukavacharan, Sanjeevani Vati, Malatyadi Tailam

Introduction

Alopecia areata (AA) is an auto-immune disorder which affects the hair-bearing areas of the body. Most common site of involvement is the scalp.⁽¹⁾ It affects nearly 2% of the general population at some point during their lifetime. Incidence is high among the younger age group. Representation of alopecia areata is observed as patch without inflammation and absence of scarring. Empty hair follicles are found in affected area. Histological study shows T lymphocytes in a cluster around affected hair bulbs.⁽²⁾ In *Ayurveda*, this condition can be correlated with *Indralupta*. *Indralupta* is a *Raktapradoshaja Vikara*⁽³⁾ which is characterized by loss of hair and has been mentioned under *Kshudraroga* by *Acharya Sushruta*.⁽⁴⁾ According to modern medicine, corticosteroids are preferred in the form of topical, intraregional, or systemic therapy. This has many side effects and regrowth of hair follicles is not ensured.

Hence, there is a need for cost-effective and successful treatment. In *Ayurveda*, *Raktamokshana* (Bloodletting) is one of the treatment modality mentioned for *Raktapradoshaja Vikara*. Leech therapy is one of the simplest techniques that can be used for *Raktamokshana* (Bloodletting), especially in children, old or a woman, or a person of an extremely timid disposition, or a person of a delicate constitution.⁽⁵⁾

Case Report:

Patient information: A 10 years old male child patient, along with his grandfather visited Agadtantra OPD xxx xxx, in May 2022.

Ethical considerations: since the patient was minor, consent for the treatment and Panchakarma was obtained from grandfather who was accompanying him.

Medical, family, and psychosocial history including lifestyle and genetic information;

No history suggestive of any systemic illness was observed. There was no history of similar illness in the family. Patient had not received any treatment for this condition, hence no medical history for these symptoms were given by relative.

Other pertinent co-morbidities, interventions, therapies including self-care; No other co-morbidities were seen.

Physical examination focused on important findings: A well-defined smooth, shiny area of non-scarring alopecia in an oval pattern of dimension 3 cm length and 2 cm width was present over the occipital region just above the nape of neck region of the scalp. No signs of inflammation or dandruff. (Figure no. 1)



Figure 1 : Examined, counseling done, treatment explained and medicine started



Figure 2 : Sent to Panchakarma department for first *Jalaukavacharan*



Figure 3: Fine Hair Appeared over Bald Patch



Figure 4: Complete *Upashay*



Figure 5: No recurrence

Information about substance abuse (tobacco smoking, alcohol, any other): no history of any substance abuse like tobacco, alcohol, etc. was noted.

Objectives for reporting the case: Complete response rates ranging between 32% and 33.3% with relapse rates ranging from 9.5% to 64% is reported in systematic review of allopathic treatment of alopecia areata in pediatric cases. The use of topical corticosteroids is mainly advised in children. Side effects of this therapy include skin atrophy, telangiectasias, and folliculitis⁽⁶⁾ objective of reporting of this case is prevention of relapse and success of only local

treatment. Child was monitored after the completion of treatment also to rule out relapse.

Main medical problem: Patient was asymptomatic before one month. Then, he gradually started to have an asymptomatic loss of hair at a single site over the occipital region just above the nape of neck. Hair loss started spontaneously without any itching or dandruff. Diagnosis based on clinical examination was done as *Indralupta / Alopecia areata (pediatric)*.

Dashavidha Pariksha / Ashtavidha Pariksha :

Table no. 1:- General examination

Ahaar [Diet]: Mishrahar	Bhaar [Weight]: 43.5kg
Akruti : Madhyam	Height: 144cm
Shabda : Spashta	Nadi [Pulse]: 78/min
Druk : Prakrut	Temperature: Normal
Sparsh : Koshna	Jivha [Tongue] : Niram
Nidra [sleep]: Prakrut	Kshudha [Appetite]: Prakrut
Mala [Bowel habits]: Samyak	Mootra [urine]: Samyak
Prakruti- Kapha Pradhan Pitta	BMI - 20.9 [normal]

Hetu (etiological factors) observed:

Detail history was obtained from patient as well as his relatives regarding his diet and regular routine. Following two factors were observed:

1. *Atilavanasevana*- history of excessive salt consumption daily in the form of salted potato chips, *Farsan*, pickles and *Papad*
2. Milk + wheat *Roti* : *Virudhahara* in the form of *Roti* and milk consumption daily in both meals was observed.

x. Medication and Therapeutic Procedures:

In *Chakradatta*, *Abhyang* by *Malatyadi Tail* , repeated

Pracchan or *Siravyadh* (venesection) treatment are advised for the person suffering from *Indralupta*.⁽⁷⁾ considering age of the patient, *Jalaukavacharan* (bloodletting) was done. Treatment was done for 45 days including follow-up. Total 2 sittings of *Jalaukavacharan* (leech application two sittings with a gap of 26 days) were done in a period of 45 days.

Externally, *Lepa* was advised to be prepared at home with *Sanjeevani vati* 2 tablets crushed and mixed with *Malatyadi tailam* and to apply on affected area daily in the evening. Instructions were given to wash the *Lepa* after 30 minutes.(Table no. 2)

Table no. 2: Prescribed Medicines

Sr. No.	Medicines	Content	Dose	Pharmacological actions	Therapeutic indications
1	Malatyadi tailam ⁽⁸⁾	1. Malati (<i>Jasminum grandiflorum</i>) 2. Karveera (<i>Nerium indicum</i>) 3. Naktamala (<i>Pongamia pinnata</i>) 4. Agni (<i>Plumbago zeylanica</i>) 5. Coconut oil	As required (External application only)	Strotorodh Nashak Keshya	1. Alopecia areata 2. Dandruff 3. Tinea capitis 4. Seborrheic eczema 5. Other scalp conditions.
2	Sanjeevani vati ⁽⁹⁾	1. Vidanga (<i>Emblica ribes</i>) 2. Ginger root (<i>Zingiber officinale</i>) 3. Pippali (<i>Piper longum</i>) 4. Haritaki (<i>Terminalia chebula</i>) 5. Amlaki (<i>Emblica officinalis</i>) 6. Vacha (<i>Acorus calamus</i>) 7. Guduchi (<i>Tinospora cordifolia</i>) 8. Shuddha Bhallatak (<i>Semecarpus nacardium</i>) Purified 9. Shuddha Vatsanabh (<i>Aconitum ferox</i>) purified	Daily 2 tablets crushed for external use (Lepa)	Aama pachak Strotorodh nashak	1. Auto immune disorders 2. Indigestion 3. Rheumatoid arthritis 4. Faulty metabolism of fats ,proteins, carbohydrates

Instructions were given to avoid all the possible etiopathological factors involved in the disease. (Table no. 3). Follow-up period was 15days.

Table No. 3: Possible Itio-pathological factors which was advised to be stopped or avoid

1	Atilavanasevana- to stop excessive use, to use Saindhava Lavana instead of Samudra Lavana
2	Stop Milk + Meal and to stop eating milk with any food or fruit
3	Use of cold water -To use Ushnodaka (Warm water) for drinking

Clinical solution:

According to *Sushruta Samhita*, all three *Doshas* are vitiated in case of *Indralupta*, vitiated *Shleshma* along with *Rakta* blocks the hair follicles.⁽⁹⁾ *Samprapti Bhang* can be achieved by application of *Lepa* and *Jalaukavacharan*.

xii. **Treatment complications:** No side effects were reported during *Jalaukavacharan* or *lepa* treatment.

Timeline: timeline of the treatment along with follow up and observations are mentioned in Table No. 4

Table No. 4 : Timeline of Provided treatment and follow up

Days	Observation and Results
1	Examined, counseling done, treatment explained and medicine started (Figure 1)
3	Sent to Panchakarma department for first <i>Jalaukavacharan</i> (Figure 2)
15	fine hair appeared over bald patch (Figure 3)
30	Improvement in bald patch, Sent to Panchakarma department for second <i>Jalaukavacharan</i> and advice to continue <i>Lepa</i> .
45	Complete <i>Upashay</i> (Figure 4)
After 4 months	No recurrence (Figure 5)

Diagnostic Focus and Assessment:

Patient was assessed clinically for hair growth over affected area.

Therapeutic Focus and Assessment:

Patient was assessed clinically for hair growth over affected area.

Follow-up and Outcomes: follow up and observations are mentioned in table no.4

Since the patient was minor physical and telephonic follow-ups were done time to time. Follow up after 4 months was done to monitor relapse. Complete cure was observed in this case as shown in [Photo no.5]

Discussion :

In the present case diagnosis of AA or *Indralupta* was made based on clinical presentation. The patient was *Kapha Pradhan Pitta* in *Prakriti* with *Viruddha Ahara Sevan* history. *Indralupta* is a condition mentioned by *Acharya Sushruta* in which the deranged *Vata* and *Pitta* having recourse to the roots of the hair bring about their gradual falling off, while the deranged *Rakta* and *Kapha* of the locality fill up those pores or holes, thus barring their fresh growth.^[10]

Aim is to treat *Strotorodh*, *Dushit Raktmokshan*, *Aama Pachan* and *Keshya*.

Leech therapy is an ideal method for *Raktamokshana* (blood-letting) in blood vitiated by *Pitta*. Leeches have more than 20 bioactive molecules in their secretions. These molecules have analgesic, anti-inflammatory, platelet inhibitory, anticoagulant, and thrombin regulatory functions, as well as extracellular matrix degradative and antimicrobial effects.^[11]

In AA leech therapy may have worked by increasing the microblood circulation through acetylcholine- and histamine-like molecule. Leech saliva also contains Destabilase and chloromycetin which have an antimicrobial effect.^[12] Local application of *Malatyadi taila* following

Jalaukavacharan is an effective and safe remedy in *Indralupta* as observed in previous studies.^[13]

Ushna Tikshna Dravya helps in breaking the *Samprapti* of *Avarodh* by *Kapha*. *Sanjeevani Vati* contains *Dravya* like *Vatsnabh*, *Bhallataka* which helps for the same. *Jalukavcharan* helps to overcome *Pitta* and *Raktadushti*. *Malatyadi Tailam* also contains *Ushna Tikshna Draya* such as *Chitrak* (*Plumbago zeylanica*), *Kanher* (*Nerium Indicum*), *Karanj* (*Pongamia pinnata*), etc. This helps for *Samprapti Bhang*.^[14]

If treated early, only *Bahya Chikitsa* can help to cure *Indralupta*. In repeat follow up after four months no recurrence was observed. This proves the efficacy of treatment and importance of *Nidan Parivarjan* in achievement of complete cure.

Conclusion: *Indralupta* / Alopecia areata have limited treatment modalities in allopathic medicine. *Ayurveda* provides a promising result in the pediatric patient of *Indralupta*. It can be a choice of treatment, which is cost-effectiveness and has no adverse effects. Relapse can also be prevented with the help of *Ayurveda*.

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