

Ayurved management of Alopecia areata by viddhakarma (parasurgical procedure) - A case study

Chandrakant S. Pawar^{1*}, Madhavi Banarase², Shalaka M. More³Ph.D. Scholar¹, Professor and H.O.D², Assistant Professor³Department of Shalya Tantra^{1,2}, Department of Shalakya Tantra³^{1,2}P.D.E.A.'s College of Ayurved And Research Center, Nigdi Pradhikaran, Pune, Maharashtra, India- 411044Parul Institute of Ayurved, Vadodara, Gujarat, India³

Corresponding Author:

Chandrakant S. Pawar

E-mail: drchandrakantpawar@gmail.com



Submission: 19.05.2022

Acceptance: 13.08.2022

Publication: 31.08.2022

https://www.doi.org/10.63778/PDEASIJRAAS-ARJCP/2022_83139

Abstract:

Hair considered as a barometer of beauty. Everyone is conscious about hair and always in search for better remedy for its maintenance and management if hair problem occurs. Alopecia Areata is characterized by localized areas of nonscarring hair loss, specially affects scalp, beard which can be compared with *Indralupta*.

Viddhakarma is a technical term employed to denote a para-surgical procedure which is a modified type of *Siravedh*. In *Viddhakarma* multiple pricks taken on skin of affected site of the body. In present case *Viddhakarma* procedure was performed in *Indralupta* and results shown were profound and outstanding evidence of clinical application of basic principles of *Ayurveda*. *Viddhakarma* eliminates the vitiated *Vata* dosha along with *Pitta* and *Kapha* and removes *Avarodha of romkoop*, which is main pathogenesis in *Indralupta*. *Viddhakarma* improves the blood circulation to the roots of the hairs which helps to provide nutrients to the hairs and enhances the growth and health of hairs.

Panchtikta grita and *Asthiposhaka Vati* played important role in pacification of *Rakta* and *Pitta dosha* and *Asthiposhaka Vati* nourishes the *Asthidhatu* ultimately nourishes the hairs which is considered as *Asthimala*.

Key Words: Alopecia Areata, *Indralupta*, *Viddhakarma*, Parasurgical procedure, *Panchtikta*

Introduction:

Alopecia Areata also known as spot baldness. It is a common autoimmune skin disease causing hair loss on the scalp, face and sometimes other areas of the body.⁽¹⁾ Its prevalence in general population was estimated at 0.1-0.2 % with a lifetime risk of 1.7%.⁽²⁾ Males were reported to be more affected as compare to females. Its main treatment in contemporary science is corti-costeroids which are having harmful side effects and not advisable for long term use.

Alopecia areata can be correlated with *In-dralupta*. In *Sushrut Samhita* it is mentioned under *Kshudraroga*.⁽³⁾ *Acharya Sushruta* has enlisted it in *Raktapradoshaj Vikara*.⁽⁴⁾ *In-dralupta* is a *Tridoshaj Vyadhi*. *Pitta* associated with *Vata* gets lodged in *Romakupa* causes hair fall. Later on, *Kaphadosha* in association with *Rakta* causes obstruction of hair roots and re-stricts the here growth.⁽⁵⁾ *Acharyua Sushruta* in *Chikitsa Sthana* has advised *Siravedh* or *Pracchan Karma* procedure in the management of *Indralupta*.⁽⁶⁾ *Viddhakarma* is modified type of *Siravedha* in which multiple pricks taken on skin at specific depth, with a fine needle on the site mentioned by *Acharya Sushruta*.⁽⁷⁾

After looking towards pathogenesis and management advised by *Acharya Sushruta*. *Viddhakarma* procedure was appropriate choice along with oral medication *Panchtikta grita* and *Asthiposhaka Vati*, in present case.

Case Report:

A 22 years old male student from professional college presented with complaints of patchy hair loss over scalp visited to Shayla OPD on 10.01.2022.

Chief Complaints:

Patchy hair loss over Scalp.

History of present illness:

1 Year back patient was having healthy hairs. Gradually there was, thinning of hair started and then hair started shedding off.

History of past illness:

There was no significant past history of autoimmune disorders was found in relation suggestive of these disorders.

Family History:

No member of family had history of such illness.

Drug History: No history of prolonged medicinal treatment before appearance of lesions.

General Examination:

Patient moderately built with no other systemic illness.

General condition: Good

Systemic Examination:

CVS: S1S2-NAD, No added Sounds

CNS-NAD

Case Report

P/A-Soft, Non-tender.

Pulse-74/min, BP-124/80 mmHg.

Prakriti: Vatapradhan Pitta

Saara: Twaka saara

Agni: Vishamagni

Hetu: Excessive Junk food, Lavana rasa, Abhishyand aahaara.

Samprapti: Dosha: Vata, Pitta, Kapha

Dushya: Rasa, Asthi

Local examination-

Inspection:

Patchy hair loss on scalp Right temporal and occipital region.

Investigations:

Routine Hematological investigation were done before procedure.

Hb- 11.6g/dl. BT/CT, TLC, DLC reports were within normal limit.

Consent:

Written and informed consent was taken from patient, before procedure.

Table No.1 : Personal history

Diet	Vegetarian
Micturition	4-5 times /day, 0-1 /night
Bowel Habit	Irregular
Appetite	Good
Sleep	Inadequate, disturbed.
Addiction	Nil

Table No. 2 : Ashtavidha Pariksha

<i>Nadi</i>	74/min, Regular, Normal in character
<i>Mala</i>	Irregular, often constipated.
<i>Mutra</i>	Frequency - Normal
<i>Jivha</i>	Coated
<i>Shabda</i>	Clear
<i>Sparsha</i>	Normal
<i>Drika</i>	Normal
<i>Akruti</i>	<i>Madhyam</i>

Prakriti: Vatapradhan Pitta

Saara: Twaka saara

Agni: Vishamagni

Hetu: Excessive Junk food, Lavana rasa, Abhishyand aahaara.

Samprapti: Dosha: Vata, Pitta, Kapha

Dushya: Rasa, Asthi

Local examination-

Inspection:

Patchy hair loss on scalp Right temporal and occipital region.

Investigations:

Routine Hematological investigation were done before procedure.

Hb- 11.6g/dl. BT/CT, TLC, DLC reports were within normal limit.

Consent:

Written and informed consent was taken from patient, before procedure.

Material And Methodology:

Treatment Protocol:

As per the Patients history and condition *Viddhakarma*(A modified type of *Siravedha*) along with oral medicines was planned and performed. Total duration of treatment was 2 months.

Viddhakarma Procedure:

Poorva Karma (Pre-operative procedure):

Material required for procedure was arranged prior to the procedure.

Sterile gloves, 26. No. needle(half inch), Betadine, Gauze pieces, Cotton swabs.

Pradhan Karma (Operative Procedure):

Position: Sitting position. Site of procedure was cleaned with betadine. Multiple pricks 1 cm distance away from each other were taken. Depth of prick: 2 -3 mm deep. Drops of blood came was cleaned with swab.

Pashchaat Karma (Post-operative Procedure):

Site of prick was observed for oozing and cleaned properly with betadine after confirmation of complete haemostasis. Patient was advised not to take head bath on same day.

Assessment Criteria:

Assessment was done on the basis of improvement in clinical symptom and SALT score. Scalp is divided into 4 areas

namely, Vertex-40%, (0.4) of scalp surface area, Right and Left profile of scalp -18% (0.18) each, Posterior aspect of scalp 24% (0.24) surface area of Scalp. Percentage of hair loss in these areas multiplied by percent surface area seen that area. SALT score is sum of percentage of hair loss in all above mentioned areas.⁽⁸⁾

Results:

There is a complete hair growth on both the patches of *Indralupta* after 2 months of treatment. After 4 sittings (2 weeks) of *Viddhakarma* patient was reported stoppage of hair fall from site and new hair growth was visible. After completion of 8 weeks there was complete hair growth was seen. (Fig-3 and Fig.5).

Table No. 3 : Treatment Protocol

Sr. No.	Management	Dose/duration
1.	<i>Viddhakarma</i>	Two sittings per week for first 4 weeks One sitting per week for next 4 weeks
2.	<i>Panchtiktagrita</i>	1 tsf (5g) daily morning on empty stomach.
3.	<i>Asthiposhakvati</i>	1 tab. two times after food with normal water.

Figure No. 1 : *Viddhakarma* Procedure



Figure No. 2 : Before treatment



Figure No. 3 : After treatment



Figure No. 4 : Before treatment



Figure No. 5 : After treatment



Table No. 4: Assessment by SALT scale

Area	SALT (Before treatment)	SALT (After treatment)
Vertex	00	00
Right Scalp	2.6	00
Left Scalp	00	00
Occipital scalp	3.6	00
Total	6.2	00

Discussion:

According to *Acharya Sushruta*, *Vitiated Pitta* along with *Vata* causes hair fall. According to *Ayurved* *Vitiated Rakta* and *Kapha* blocks orifices of hair follicles, hampers the nutritional supply to the roots of hairs and results in the hair fall. Con-sidering the *Samprapti* of the disease *Viddhakarma* procedure was planned in present case.

When pricks on the affected area taken, small quantity of blood oozed out. Due to this obstruc-tion of orifices gets released which was causative factor for *Indralupta* and it helps in *samprapti vighatana*. [9] There is also *Vata dosha* elimination along with *Kapha* and *Pitta*.

In *Viddhakarma* there is a controlled scalp skin injury. These micro- injuries lead to minimal su-perficial bleeding and triggers wound healing process by realising various growth factors. It also initiate neovascularization, this enhances the delivery of various nutrients and growth factors essential for hair growth and strength.⁽¹⁰⁾

Oral medication given to the patient was *Panchtikta grita* and *Asthiposhaka Vati*. *Panch tikta grita* pacifies *Pitta* and *Rakta Dosha* and *Ashtiposhaka Vati* by nourishing the *Asthi Dhaatu* enhances the growth of hair which is considered as *Mala of Asthi Dhaatu*.

Summary:

Alopecia areata is commonly occurring disorder of hair. In which there is a patchy hair loss over the scalp also called as spot baldness. According to *ayurveda* the condition can be correlated with *Indralupta*.

Acharya Sushruta has mentioned *Siravedha* or *Pracchankarma* for this disease as its part of management. *Viddhakarma* (Para surgical proce-dure) is a modified type of *Siravedha*, in which pricks taken with fine needle at specific depth, on skin of affected site. In present case *Viddhakarma* procedure performed along with oral medication. After 2 months of management there was com-plete hair growth on diseased site.

In present case remarkable result achieved by *Viddhakarma procedure*. There is enormous scope for further research.

Conclusion:

Viddhakarma is minimal invasive para -surgical procedure has shown remarkable result in present case of Alopecia Areata(*Indralupta*). *Viddhakarma* is OPD procedure, requires less time and preoperative preparation and is highly cost effective. There were no any side effect oc-curred during and after completion of total course of treatment.

There is enormous scope for further research, still it proved efficacy of *Viddhakarma* in the present case. This procedure can be practiced with large sample size to establish as a treatment option for *Indralupta* and to confirm its efficacy.

Source of support: Nil.

Conflict of Interest: Nil.

Copyright © 2022 PDEA'S International Journal Research in Ayurved and Allied Sciences. This is an open access article, it is free for all to read, download, copy, distribute, adapt and permitted to reuse under Creative Commons Attribution Non Commercial-ShareAlike: CC BY-NC-SABY 4.0 license.

References:

1. https://en.wikipedia.org/wiki/Alopecia_areata.
2. Jump up Freeberg IM, Fitzpatrick TB (2003). Fitzpatrick Dermatology in medicine New York: McGraw-Hill, Medical publishing Division. ISBN 978-0-07-138076-8.
3. Shrikanth Murthy. Ashtang Hrudya with Sarvangasundara Commentary of Arundutta. Uttarsthana 24/28-30. Reprint edition Varanasi, Chaukhamba Publications; 1997; 242
4. Vaidya Yadavji Trikamji Acharya, Sushruta Samhita, Nibandhsangraha Commentary, Reprint Edition, 2009, Chaukhamba Surbharti Prakashan, Varanasi. Sutrasthana 24/10.
5. Kaviraj Ambikadutta Shastri (Editor). Sushruta Samhita, Nidanasthana Chapter 13, verse no. 33-35, 1st edition. Varanasi Chaukhamba Sanskrit Sansthan; 2011; 284.
6. Kaviraj Ambikadutta Shastri (Editor). Sushruta Samhita, Nidanasthana Chapter 13, verse no. 33-35, 1st edition. Varanasi Chaukhamba Sanskrit Sansthan; 2011; 284.
7. Dr. Gogate R.B.; Viddha and agnikarma chikitsa, Pune, 1st edition 2006, Vaidyamitra Prakashana, Chapter 3, pg. 25.
8. National Alopecia Areata Foundation Available from <http://www.naaf.org/alopecia-areata>
9. Dr. Chintan Gamit, Dr. Dixita Bhan-dari, Dr. Harshit Shah, Management of Indralupta (Alopecia Areata) with Raktamokshana, Imperial Journal of Interdisciplinary Research (IJIR) Vol-3, Issue-2, 2017.
10. Falabella AF, Falanga V. Wound Healing. In: Freinkel RK, Woodley DT, editors. The biology of the skin. New York: Parthenon; 2001. p. 281-99