Summary and Conclusion

It is well acknowledged that Psoriasis is a chronic, inflammatory, multisystem disorder with predominantly skin and joint manifestations, which affects approximately 2 to 3% of the population worldwide. Both Ayurveda and modern medical science have accepted that diet, activities, environmental, genetic, immunological and psychological factors play key role in the etio-pathogenesis of dermatological disorders including psoriasis.

In Ayurvedic system of medicine almost all dermatological disorders are described under the heading of Kushtha. It can be concluded that there is no single type of Kushtha has been described in the Ayurveda which can exactly or almost be co-related with the psoriasis. Depending upon the more or less similarities in clinical features and or severity various authors co-related the psoriasis with Kitibh Kushtha, Eka-Kushtha or Mandala Kushtha.

Reddish or reddish-black lesions which may associated with itching are characteristic to Kitibh Kushtha are similar with psoriasis. Scaling is characteristic to both Ek-Kushtha and psoriasis. Mandala Kushtha and psoriasis both are characterize by reddish rounded skin lesions and being a Maha Kushtha, Mandala Kushtha is also similar in severity with psoriasis.

The present clinical study entitled “A comparative clinical study of Nishadi Vati, Kushthaghna Vati and Virechan therapy in the management of psoriasis” was carried out on 101 diagnosed psoriasis patients. The patients were randomly allocated in the three groups, A, B and C which had 35, 34 and 32 patients respectively. The
trial was carried out in the department of Kayachikitsa, Sir Sunderlal hospital, Banaras Hindu University, Varanasi.

In group A, the herbo-mineral compound Nishadi Vati was given in a dose of 1 gm twice a day. In group B, polyherbal formulation Kushthaghna Vati was given in a dose of 1 gm twice a day and in group C, Virechan therapy was administered every month. Total trial was carried out for consecutive three months with monthly follow ups.

Satisfactory result was observed at the end of trial in all the three groups in the patients of psoriasis. In case of itching, Virechan therapy provided better results when compared to Nishadi Vati and Kushthaghna Vati. Nishadi Vati provided better results in case of burning sensation. Virechan Therapy also provided better results in the improvement of PASI score. Kushthaghna Vati provided better results in the reduction of DLQI score when compared with Virechan therapy and Nishadi Vati thus, provided better quality of life to the patients. The trial drugs and Virechan therapy are safe, as they had not impaired the hepatic & renal profile of the patients and also had not impaired the blood sugar levels.

The Virechan therapy, Nishadi Vati and Kushthaghna Vati worked most probably by immunomodulation and by reducing the psychosocial stress associated with the patients of psoriasis. Altered immunity and psychosocial stress are the major culprits involved in the etio-pathogenesis and manifestation of psoriasis.

Thus, Nishadi Vati, Kushthaghna Vati and Virechan therapy can be used alone or in combination or in combination with other therapeutics to provide much better results.

In this way, a humble effort has been made to explore a new type of comparative clinical study for the management of psoriasis. The study explored the comparison between the efficacy of a herbo-mineral formulation, a polyherbal compound and a type of bio-purificatory therapeutic procedure, which have been individually found to be possess a clinically demonstrable effect in the management of Psoriasis and thus, can be used in clinical practice.