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CASE STUDY

"Healing Roots: An Ayurvedic Approach to Disease Management in *Charmadal*" – A Case Study

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ABSTRACT

Charmadal is classified under *Kshudra Kushtha* in Ayurvedic texts and is characterized by *Raga*, *Kandu*, *Pidaka*, *Ruja*, *Tvacha chhidra*, and *Sparsha Asahyata*. The clinical presentation of Dyshidrotic Eczema shows a striking resemblance to *Charmadal* as described in the *Samhitas.* According to *Charaka Samhita*, *Charmadal* is one of the types of *Kshudra Kushtha* (minor skin disorders). It is predominantly a *Pitta-Kapha dosha* condition. Modern medical management offers only temporary relief with topical corticosteroids, which are palliative in nature. However, Ayurvedic *Chikitsa Sutra* for *Charmadal* includes both *Shodhana* (purificatory therapies) and *Shamana* (palliative treatment), as detailed in the classical texts. The administration of appropriate *Shamana Aushadhis* (oral Ayurvedic medicines) led to significant symptomatic relief, reduction in lesion severity, and notable enhancement in the patient's overall *Jeevana Guna* (quality of life. At the National Institute of Ayurveda in Jaipur, a 29-year-old woman came to the Kriya Sharir outpatient department complaining of reddish-blackish skin lesions on her arms, legs, face, abdomen, and neck area. She also complained of intense itching, burning, watery discharge, and blood leaking from the lesions after scratching for 3 years. The patient's symptoms were completely eliminated after a 3-month course of treatment that included both external and internal Ayurvedic drugs. The results of this case study demonstrate that Ayurvedic medications can effectively treat this illness with no discernible adverse effects.

1. INTRODUCTION

According to *Charaka Samhita*, *Charmadal* is one of the types of *Kshudra Kushtha*. *Raga*, *Kandu*, *Pidaka*, *Ruja*, *Tvachachhidra*, and *Sparsha Asahyata* are the main characteristics of this *Pitta-Kapha dosha* condition.[1] According to *Acharya Sushruta*, *Charmadal* is specifically mentioned as a *Kshudra Kushtha*.[2] It's caused by the vitiation of *Kapha* and *Pitta dosha* and is characterized by *kandu* (itching), *daha* (burning sensation), *raga* (redness), and *srava* (oozing).[3] Further references are found in *Madhava Nidana*,[4] which also emphasize the *Pitta-Kapha* dominance and the involvement of vitiated *Rakta dhatu* (blood tissue).[5] This description correlates closely with Dyshidrotic eczema, Cheriopompholyx,[6] Atopic dermatitis, and Allergic dermatitis in modern dermatology, which are present with similar symptoms.[7] Atopic dermatitis is a common chronic or relapsing dermatitis[8] characterized by severe pruritis, erythema, edema, papulo-vesicular and exudative lesions of the face (cheek and infra-auricular area), scalp, and extensor aspect of the lower limbs.[9]

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The name "*Charmadal*" is derived from two Sanskrit words: *Charma* meaning skin and *Dala* meaning irritation or disturbance,[10] indicating a condition marked by discomfort and disruption of the skin's normal appearance and function.[11]

Charmadal is typically associated with imbalances in the *doshas* (especially *Pitta* and *Kapha*), along with vitiation of the *Rakta* (blood) and *Rasa* (plasma) *dhatus*.[12] It is often triggered by poor dietary habits, improper digestion, accumulation of toxins (*ama*), and external allergens or irritants.[13] Although considered a minor skin disease in Ayurveda,[14] *Charmadal* can significantly affect a person's comfort and quality of life, if left untreated.

Pathogenesis (*Samprapti*) of disease progresses through the classical Ayurvedic stages:[15]

1.1. *Samprapti Ghataka*

- *Dosha – Tridosha, Pitta Pradhana, Kapha Anubandhita Vata*
- *Dushya – Dhatu - Twak, Rakta, Mamsa, Lasika (Ambu)*
- *Srotas – Rasa, Rakta, Mamsa* and *Udakavaha*
- *Agni – Jatharagni and Dhatwagni Mandya*
- *Sroto Dushti – Sanga* and *Vimarga gamana*
- *Udbhava Sthana – Amashaya*
- *Sanchara Sthana – Tiryaga Sira*
- *Vyakta Sthana – Twak*
- *Rogamarga – Bahya*
- *Swabhava – Chirkari*

Effective management of *Charmadal* involves a combination of internal detoxification (*Shodhana*), herbal therapies (*Shamana*), dietary regulation, and topical applications.[16] With the holistic approach of Ayurveda, *Charmadal* can be treated not just symptomatically but at its root cause by restoring *doshic* balance and purifying the blood.

2. CASE REPORT

A 29-year-old female patient visited the Kriya Sharir outpatient department (OPD) at the National Institute of Ayurveda, Jaipur. With the complaint of reddish blackish lesions over the skin of bilateral upper and lower limbs, face, abdomen, and neck region associated with severe itching, burning sensation, watery discharge, and oozing of blood from the lesions after scratching present in lesions for 3 years.

She took treatment for her condition from many skin specialists and was administered with topical and oral steroids, and got symptomatic relief but again the symptoms would re-occur. After knowing the probable cause of the disease, the patient again went to several institutions, got relieved, and again the symptoms would relapse. She then visited the National Institute of Ayurveda Kriya Sharir OPD for treatment.

2.1. Clinical Findings

2.1.1. General examinations

The general condition of the patient was good without any physical asymmetry visible. She had reduced appetite, normal bowel habits, regular normal micturition, and a disturbed sleep pattern. She had *Vata-Pitta* predominant *Prakriti*. Her menstrual cycle was regular with normal menstrual flow.

2.1.2. Local examinations

Redness, itching, pustules, pain and cracks in the skin, tenderness and oozing of blood on bilateral arms, bilateral legs, face, abdomen, and neck region on skin.

- Severe pruritus – present.
- Dry skin caused by atopic xerosis, particularly in the winter.
- Constant scratching may lead to lichenification.

H/O past illness: NAD.

NO/H/O: Diabetes milletus hypertension (DM/HTN)/thyroid dysfunction.

Family history of a similar presenting condition was absent.

Examination: Vitals of the patient.

Blood pressure: 110/70 mmHg.

Pulse rate: 76/min.

Temperature: Afebrile.

Others: Edema, pallor, icterus, lymphadenopathy absent.

3. TIMELINE

Details mention in table 2.

3.1. Diagnostic Assessment

The patient was diagnosed with *Charmadal* based on Ayurvedic diagnostic criteria.

3.2. Therapeutic Intervention

All the medicines given in combination form, followed by every 15 days for 3 months mentioned in table 1.

4. RESULTS

4.1. Follow-UPS and Outcomes

Over the course of 15 days, the patient was periodically observed. The disease's subjective parameters were evaluated the before and after treatment results are shown in fig 1-3.

5. DISCUSSION

The symptoms observed in this case resemble *Charmadala Kushtha*, a type of *Tridoshaja Kushtha* with predominance of *Kapha* and *Pitta*. The presence of *Kaphaja* features, such as *Kandu* (itching) and *Sraava* (discharge), along with *Pittaja* signs, such as *Daha* (burning sensation), *Raaga* (redness), and *Sphota* (eruptions), support this diagnosis.

For *Shamana Chikitsa* (palliative treatment), a combination of *Panchnimbadi Churna, Ras Manikya,* and *Haridra Khanda*[17] was administered. *Panchnimbadi Churna* is known for its *Kushtaghna* (anti-skin disease) and *Raktaprasadaka* (blood purifying) effects. *Haridra Khanda* has *Kaphaghna*, *Kandughna*, and *Agni-deepana* properties, with ingredients that help control allergic manifestations and act as immunomodulators.

Ras Manikya and *Manjistha Churna* primarily act on *Rakta* and *Twacha* (blood and skin), making it particularly beneficial when symptoms, such as severe burning and redness are present. *Arogyavardhini Vati* is a tridoshic formulation, but it mainly pacifies *Kapha* and subdues vitiated *Pitta*.

Panchtikta Guggulu Ghrita has *Tikta*, *Katu*, and *Madhura Rasa* with *Ushna Virya*, making it effective against *Kapha* and *Pitta* disorders. Since *Rakta Dushti* and *Kleda* are key factors in *Kushtha*, the use of *Nimba Patra* (found in *Panchnimbadi, Arogyavardhini Vati, Panchtikta Guggulu Ghrita, and Khadiraristha*) proves to be a potent *Kledaghna* agent.

With Khadir as its main ingredient, Khadirarishta has the qualities of Krumighna, Kandughna, Kaphaghna, and Pittashamaka. It also helps to relieve rashes, itching, and hypersensitivity.

Guggulu, Triphala, Guduchi, Trikatu, Nishoth, and Danti are all included in Kaishore Guggulu.

It has *Tikta, Katu, Kashaya rasa,* and is *Laghu, Ruksha*, and *Tikshna* in *guna.*

Its *Ushna virya* (hot potency) and *Katu vipaka* (pungent post-digestive effect) aid in deep detox.

It purifies the blood (*Raktashodhaka*) and pacifies excess *Pitta* and *Kapha*.

It also acts as an anti-inflammatory (*Shothahara*), anti-microbial (*Jantughna*), and skin disease eliminating remedy (*Kushtaghna*).

Triphala Guggulu contains *Triphala, Guggulu*, and *Pippali*, known for detoxification and digestive enhancement.

It has *Kashaya, Tikta,* and *Katu rasa,* with *Laghu* and *Ruksha guna, Ushna virya*, and *Katu vipaka.*

It performs the *Lekhana* (scraping) action to reduce fat, toxins, and metabolic waste (*Ama*).

Acts as *Shothahara* (anti-inflammatory), *Vrana Ropaka* (wound healer), and *Medohara* (anti-obesity).

Also functions as a *Shulahara* (pain reliever) and *Amapachaka* (detoxifier).

Taruni kusumakar Churna contains *Taruni* (Rosa centifolia), *Trivrit, Mulethi, Haritaki, Saunf*, and other herbs. Acts as a gentle laxative, relieving chronic constipation, helps in detoxifying the digestive system and purifying the blood. Balances *Vata* and *Pitta doshas*, promoting internal harmony. Aids in improving skin health.

Jatyadi Taila is an ancient Ayurvedic medicinal oil that is applied externally and is mostly used for skin conditions and wound healing.

It comprises antibacterial and therapeutic herbs, such as *Manjistha*, *Jati*, *Nimba*, and *Haridra*.

It has *Tikta. Kashaya rasa* and is *Ruksha* and *Sheeta virya*.

Acts as *Vrana Ropaka* (promotes wound healing) and *Kandughna* (relieves itching).

Its anti-inflammatory, antibacterial, and antiseptic actions help cleanse wounds and reduce infection.

6. CONCLUSION

Based on the above discussion, it can be inferred that *Shamana* therapy in Ayurveda can offer notable relief from the signs and symptoms of *Charmadala Kushtha*.

Although this single case study yielded promising results, further research involving a larger sample size is necessary to validate and confirm these findings on a broader scale.

7. ACKNOWLEDGMENTS

Nil.

8. AUTHORS' CONTRIBUTIONS

All authors have contributed equally to conception, design, data collection, analysis, drafting, and final approval of the manuscript.

9. FUNDING

Nil.

10. ETHICAL APPROVALS

This study does not require ethical clearance as it is a case study.

11. CONFLICTS OF INTEREST

Nil.

12. DATA AVAILABILITY

This is an original manuscript and all data are available for only review purposes from the principal investigators.

13. PUBLISHERS NOTE

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Table 1: Therapeutic Intervention

S. No.	Drug name	Dose	Anupaan	Days	Time	Specific
1.	*Haridra Khanda*	10 g	Luke warm water	90	BD	BF
2.	*Pancha Tiktta Guggulu Ghrita*	10 mL	Luke warm water	90	BD	BF
3.	*Pancha Nimba Churna*	2 g	Water	90	BD	AF
4.	*Ras Manikya*	125 mg	Water	90	BD	AF
5.	*Arogyavardhini Vati*	250 mg	Water	90	BD	AF
6.	*Manjistha Churna*	500 mg	Water	90	BD	AF
7.	*Khadiraristha*	20 mL	Water	90	BD	AF
8.	*Triphala Guggulu*	500 mg	Water	90	BD	AF
9.	*Kaishore Guggulu*	500 mg	Water	90	BD	AF
10.	*Taruni Kusumakar Churna*	3 gm	Luke warm water	90	HS	AF
11.	*Jatyadi Taila*	For L/A		90	BD	TDS

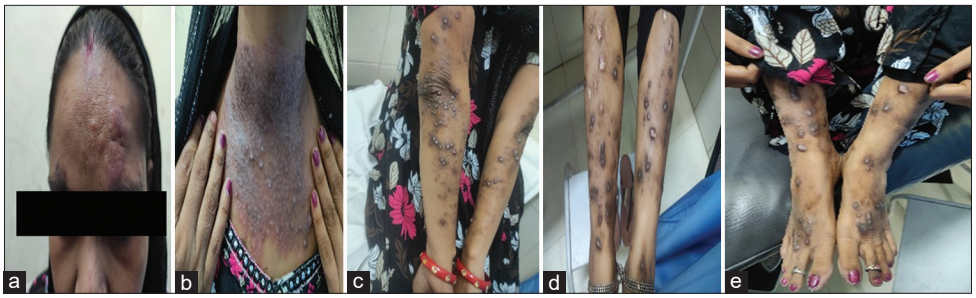

Figure 1: (a-e) Before treatment: First visit

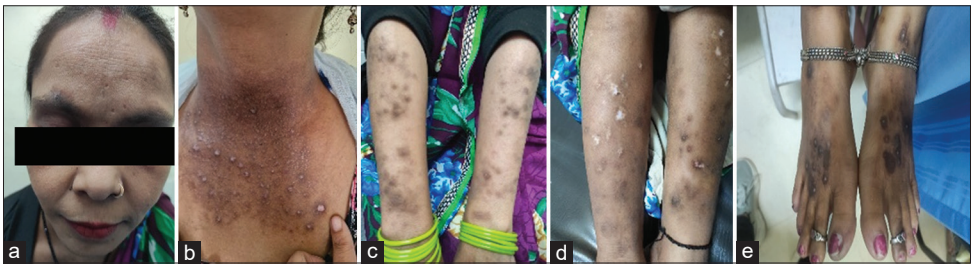

Figure 2: (a-e) After 1 month of treatment

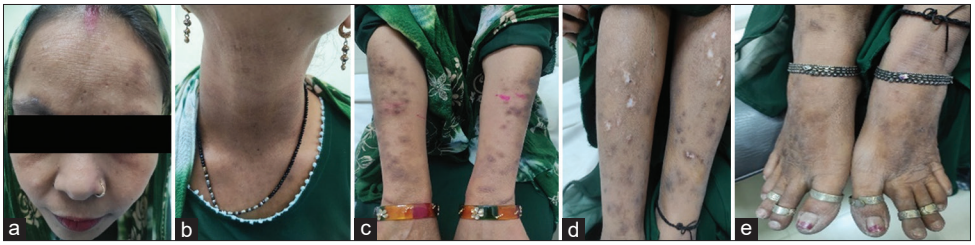

Figure 3: (a-e) After 3 months of treatment

Table 2: Timeline with therapeutic intervention

Time duration	Intervention
July 31, 2024 (1st day of visit)	The patient visited to outpatient department of Kriya Sharir National Institute of Ayurveda, Jaipur, with the complaint of reddish black lesions on the skin of bilateral arms, bilateral legs, face, abdomen, and neck region associated with severe itching, burning sensation, watery discharge, and oozing of blood from the lesions after scratching. Treatment administered to the patient on the first visit- 1. *Haridra khand* 1tsf BD before meal. 2. *Pancha tikta guggulu ghrita* 1tsf BD before meal. 3. *Pancha nimba churna* 2 g BD, after meal. *Ras manikya* 125 mg BD, after meal. *Arogya vardhini* vati 250 mg BD, after meal. *Manjistha churna* 500 mg BD, after meal. *Khadirarista* 20 mL BD, after meal. 4. *Triphala guggulu* 500 mg BD after meal. 5. *Kaishore guggulu* 500 mg BD after meal. 6. *Taruni kusumakar churna* 3 g HS 7. *Jatyadi* tail for Local application
August 28, 2024 (2nd visit)	No new elevated outgrowths were formed after taking the medication Same medication was continued to the patient.
September 25, 2024 (3rd visit)	No new elevated outgrowths were formed after taking the medication Same medication was continued to the patient.
October 23, 2024 (4th visit)	All outgrowths have diminished.