

The Efficacy of Maricha Yoga in Shitapitta: A Case Study

¹Dr Rashi Sharma & ²Dr Nitin Sharma

¹Assistant Professor, Uttarakhand Ayurvedic College, Dehradun, Uttarakhand (India)

²Lecturer, SRM State Ayurvedic College, Bareilly, Uttar Pradesh (India)

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*Corresponding Author

Email: drrashisharma[at]ymail.com

ABSTRACT

Shitapitta has been described in various ayurvedic texts especially in madhava nidana, which has separately described shitapitta with causative factors, symptoms and pathogenesis etc. It can be compared with urticaria in modern terminology. Approximately 15% of population experience urticaria at some point of time in their lives. A case of shitapitta managed successfully by ayurvedic treatment is reported here. A 42 year old male patient having signs and symptoms of shitapitta was treated with 2.5 grams of maricha churna with five grams of goghrua twice a day after the meals, along with local application of maricha siddha tail for 14 days. Patient showed complete improvement in signs and symptoms of shitapitta after the treatment.

1. Introduction

The condition in which there is occurrence of raised, inflammatory and itchy wheals on the skin, as caused by the bite of large black bee is called as shitapitta. Shita maruta sansparsha (contact with the cold wind and cold water) is the main etiology of shitapitta. Along with this vatakara, kaphakara and pitta sanchyatmaka ahara and vihar are the other causes in the etiology of shitapitta. It can be correlated with urticaria in modern science.

A 42 year old male patient visited OPD of Uttarakhand Ayurvedic college and hospital, Dehradun presenting with the signs and symptoms of shitapitta like kandu, daha, toda, mandalotpatti, chhardi and jwara. He was suffering from these symptoms from past six months. The general examination of the patient revealed vitals as pulse rate of 72/min, respiratory rate of 18/min, blood pressure of 120/70 mm of Hg and body weight of 45 kg. The eosinophil count was 8. Based on the above said clinical presentation and investigation, the patient was diagnosed as a case of shitapitta.

2. Management

Patient was advised to stop all the previous medications. 2.5 grams of maricha churna was administered with 5 grams of goghrua twice a day after the meals along with local application of maricha siddha tail for 14 days. On the first follow up (after 7 days of initiation of treatment), the patient reported mild reduction in the signs and symptoms of shitapitta. Complete relief was reported in all the signs and symptoms by the patient on the third follow up (after 14 days of initiation of treatment). The eosinophil count was also reduced to 2 after the treatment. The patient was on follow up till 6th month without any single episode of relapse.

3. Discussion

Vitiation of vata and kapha dosha due to shita, laghu and ruksha guna play a vital role in the pathogenesis of the

shitapitta disease. Also there is excessive accumulation (sanchaya) of pitta due to abhishyandi, vidahi, amla and katu rasa sevana, which in turn comes in contact with the above mentioned vitiated vata and kapha. In this way all the doshas are vitiated and these vitiated doshas come in the amashaya which cause agnimandya and produce apachita ahara rasa. This apachita ahara rasa enters into the rasavaha and vatavaha srotasa and are carried all over the body. Next due to external factors and internal factors there is sthanasanshraya in the swedavaha srotas of the twacha. There is local stagnation of rasa and raktavahinis that cause appearance of shitapitta in the form of itching, burning sensation and pricking pain etc. Due to amashaya dushti, there are also chhardi and jwara.

4. Samprapti Bhanga

Maricha due to ushna virya is vatakaphaghna and thus reduces doshas ansarga and vimargagamana. It is also pramathi, therefore it extracts doshas from sakha and bring it back to the kostha. Goghrua which is here given as anupana is vataghana and pittashamak. Being vataghana, it stops the gati of doshas from kostha to sakha. Being pittashamak, it helps in the shaman of pitta in the kostha. Further the maricha siddha tail which is applied from outside further helps in the vilayan of grathita pitta. In this way the maricha yoga given here helps in samprapti bhanga of shitapitta.

5. Conclusion

According to the pathogenesis and management mentioned in the ayurvedic texts, maricha yoga was chosen accordingly and the case was successfully managed with ayurvedic treatment. Along with the improvement in the signs and symptoms of shitapitta, there is also marked reduction in eosinophil count.

Hence this treatment modality can easily be adopted in clinical practice and further large scale clinical trial should be conducted to establish the efficacy of the treatment.

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