



THE TREATMENT OF LICHEN AMYLOIDOSIS BY AYURVEDA PRINCIPLES- A CASE STUDY

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ABSTRACT

Amyloidosis is a group of diseases where one or more body organs accumulate various insoluble proteins which cause dysfunction of the organ system. Hyper pigmented macules are relatively common form of cutaneous amyloidosis, when severe may progress to hyper pigmented and keratotic popular lesions called as Lichen amyloidosis. So many treatment protocols are available still the results are disappointing in the management of Lichen amyloidosis. **Aim-** To prove efficacy and safety of detoxification and ayurvedic modalities in long standing skin diseases like lichen Amyloidosis. **Method-** A case of long standing systemic steroid dependent lichen amyloidosis is presented here which was intervened successfully with detoxification

and ayurvedic modalities. **Results-** We were able to reduce itching, discoloration of skin, thickening of skin in 36 months. We were able to stop steroid intake. **Conclusion-** We can treat Lichen amyloidosis with the help of Ayurveda treatment fundamentals Detoxification (Virechana) and herbal remedies which can be used for long lime without any side effect.

KEYWORDS: Lichen, Detoxification, Virechana, Kushtha.

BACKGROUND

The normal skin shows tremendous variation in its morphological features and even physiological functioning at different ages. Age related changes in the skin makes it vulnerable at certain diseases depending on these variations. Amyloidosis is a group of diseases where one or more body organs accumulate various insoluble proteins which cause

dysfunction of the organ system.^[1] Hyper pigmented macules are relatively common form of cutaneous amyloidosis, when severe may progress to hyper pigmented and keratotic popular lesions called as Lichen amyloidosis. The lesions are pruritic, grouped greyish black colored macules or papules of size 2-3 mm each and are arranged close to each other in an orderly rippled pattern so that from a distance they appear as patches or plaques. Common sites are shins, forearm, and upper back.^[2,3] There are three main types of amyloidosis ie- primary, secondary systemic and Familial or hereditary amyloidosis. The conventional treatment for Lichen amyloidosis focus on relieving itching, sedating antihistamines are moderately effective, topical and intralesional steroids provide some relief, other treatment include topical dimethyl sulfoxide and phototherapy. So many treatment protocols are available still the results are disappointing in the management of Lichen amyloidosis.^[4]

The exact cause and pathogenesis of lichen amyloidosis is not known yet determined, but chronic friction associated with rubbing and scratching, some genetic factors and viral infections are possible causes, it can damage the dermis of the skin exposing the dermis. The degenerated keratin peptide of apoptotic keratinocytes transformed by macrophages and fibroblasts into amyloid deposits.^[5] Due to this extracellular protein accumulate on the upper layer of the dermis and creates papule and rashes. It can be characterized by other skin conditions like lichen planus, fungal infections and even atopic dermatitis.

Ayurvedic medicines are often considered effective in chronic and lifestyle diseases.

Eighteen types of Kushtha (skin diseases) are described in Ayurveda literature along with their signs, symptoms and treatment fundamentals. These eighteen Kushtha (skin diseases) are classified into seven mahakushtha (major skin diseases) and eleven kshudra kushtha (minor skin diseases). In Ayurveda the condition of Lichen amyloidosis can be considered under Kitibh Kushtha and Charmakhya kushtha, type of *Kshudra Kushtha* (Minor skin diseases). Tridosha are involved in pathogenesis of all type of skin diseases, depending on dosha predominant symptoms are manifested. Dryness, atrophy, hardness, roughness, horripilation, blackish, brownish, color are manifestation of Vata dosha. Kapha dosha is responsible for symptoms like pruritus, slow progression, elevated, and heaviness. Hence this Kitibh kushtha (lichen amyloidosis) is Vata and kapha dosha dominant.^[6]

Conventional therapy used in this condition is unsatisfactory and is with side effects. A case of long standing systemic steroid dependent lichen amyloidosis is presented here which was intervened successfully with detoxification and ayurvedic modalities.

REPORT OF CASE

A 54 years old Indian Hindu female visited Ayushakti Ayurved Pvt Ltd Kharghar, Navi Mumbai branch with a history of lichen amyloidosis on all over the body part for more than 25 years presented to the intense itch all over the body in 2016 because of not getting relief from pruritus on skin with medicines. The lichen amyloidosis had begun 25 years back when her child was admitted in a private hospital and patient used to sleep below her child's bed for more than week. It started with severe itching on the tibia shin and then reflecting on all over the body with small skin colored papules on anterior shin. The patient stated that in time span of 2 years the papules spread to both the upper extremity with severe pruritus. The patient's history, including that of her family was free from any skin or dermatological diseases. Her past medical history includes Hypothyroidism diagnosed 6 years back, in 2005 she had her right hip joint surgery. In 1997 she was diagnosed with a dermatological condition Lichen amyloidosis by a dermatologist.

Over the last 25 years the patient had tried various therapies, but none were effective for long term. The topical glucocorticoids, oral antihistamines were giving temporary reduction in pruritus for few months, even in around 2008-09 oral pregabalin and gabapentin was used, over the counter products like moisturizers, herbal containing local applications were used.

In first thirty days after (Virechana) patient's itching was reduced by 50% and acidity was reduced significantly but no significant difference in papules or discoloration. It took almost 6 months to find difference in the papules discoloration by 30%. After a year Detoxification (Virechana) was done again in the previous manner, meanwhile all the herbal remedies were continue from the beginning. At the end of the year 2019 papules all over the body reduced significantly, itching reduced completely and the discoloration changed to almost normal skin (Figure 1, 2, 3).

Therapeutic challenge

Several treatment modalities, modern as well as herbal have been suggested for the management of lichen amyloidosis, but none has been effective for a longer term.

After discussion the patient agreed for Detoxification (Virechana) every year and some oral herbal remedies like tablet Skintonic, Suniram, Kaishor guggul, Ojas, amrut ras, virechan were used for longer duration.

Detoxification (Virechana) procedure was started for the patient after his informed written consent for the procedure, all the do's and don'ts, all the possible complications during Virechana procedure explained thoroughly.

Treatment plan Detoxification (Virechana)

The procedure of Detoxification (Virechana) performed in three steps.

1) **Poorvakarma**, *ie.* Preparatory procedures- This was performed before therapy, which includes *Deepana* (Appetising drugs) and *Pachana* (Digestive drugs), which was then followed by *Snehapana*, *ie.* Oral administration of medicated ghee for 4 days, planned after the examination of *Kostha* (nature of bowels) of the patient until achieving the symptoms of adequate oleation (Internal consumption of medicated ghee). Simultaneously *Abhyanga* (external application of Oils) and *Swedana* (Steam) was given for five days.

2) **Pradhankarma**, *ie.* Main procedure- This was the actual administration of Detoxification (Virechana) herbs, as per *Bala* (Strength) *Kostha*(nature of bowels)of the patient. The herbal combination used was tablet virechana four tablets, manufactured by Ayushakti Ayurveda.

3) **Paschatkarma**, *ie.* Post main procedure- As per the number of bouts of bowel evacuated after giving Detoxification (Virechana), *Sansarjanakrama* with *Mand*, *Peya*, and *Vilepee* advised for three days.

The assessment of Detoxification (Virechana) based on various parameters termed as *Shuddhi* (cleansing) criteria like *Vaigiki* (number of bouts of stool passed), *Maniki* (quantitative measurements of stool), *Laingiki* (Symptoms), and *Antyaki* (assessment based on end points of purgation). This particular patient had uttamshudhhi.



Image 1: Gradual changes in LA in 36 months.



Image 2: Gradual changes in LA in 36 months.

DISCUSSION

The vitiated three doshas vata, pitta, kapha along with impaired twaka (skin), rakta (blood), mansa (muscles) and ambu (plasma) together constitute seven essential entities which play a role in pathogenesis of kushtha (skin disease).^[7] In Ayurveda the condition of Lichen amyloidosis of this patient can be considered under Kitibh Kushtha and Charmakhya kushtha, types of *Kshudra Kushtha* (Minor skin diseases). Kitibh kushtha (lichen amyloidosis) is Vata and kapha dosha dominant same is charmakhya kushtha. As per Ayurveda clinical features are Shyav color (blackish brown), Kin khar in touch (rough similar to scar tissue and hard to touch), Parush (touch similar to the granulation process in wound) and hasticharmavat (skin is thick like elephant skin).^[8] There is always sroto-avrodh (blocked channels) by Aama (Endotoxins or auto immune immunoglobulin or protein molecules).

Certain herbs which are Bhedniya in nature (penetrating and channel opening) help to dissolve such stubborn protein molecules and open up the channels to restore the functionality of the cells. The Aam pachak (helps to digest endotoxins), Deepniya (improving metabolic fire), Bhedniya (opening the channels) herbs are very helpful in getting rid of these proteins in pathogenesis of lichen amyloidosis. The main line of treatment described by Acharya Sushruta for Kushtha is repeated Shodhana (Biopurification), so that the disease can be eradicated from the root.^[9] *Virechana* (Detoxification) evacuates all morbid *Doshas* from all micro to macro *Dhatu* channels and regulates *Vata*, thus decreasing all symptoms of on *Srotasa* level in skin diseases.^[10]

Main content of skintonic tablet is Sariva (*Hemidesmus indicus*) which is amahara (removes undigested food), raktaprasadana (purifies blood), asrajit (cures diseases of blood), it is indicated in skin diseases, and itching of skin.^[11,12] Neem (*Azadirachta indica*) and Haridra have anti itching action.^[13] Triphala, Haridra (*Curcuma longa*) and Manjishtha slowly removes toxins from the blood. Main ingredient of Sunirm tablet is Khadeer (*Acacia catechu*). Khadeer (*Acacia catechu*) reduces Trans epidermal water loss and improve dryness of the skin ultimately reducing itching and rubbing which is main pathology Lichen amyloidosis.^[14] Kaishor guggul is a traditional ayurvedic preparation used in various skin disorders.^[15] It is mainly used as anti-allergic and have blood purifying property, it acts a skin health promoter, natural blood cleansers.^[16] Sudarun Lotion derived from Neem leaf can cure chronic dermatological diseases when applied locally¹⁷. Kokum butter, ghee and sesame oil removes dryness and moisturize the skin.

CONCLUSION

All types of Kustha are caused by Trodosha, hence the treatment is always given according to predominance of doshas. We can treat Lichen amyloidosis with the help of Ayurveda treatment fundamentals Detoxification (*Virechana*) and herbal remedies which can be used for long time without any side effect.

REFERENCES

1. DermNet NZ, Amyloidosis- codes and concepts, dermnetnz.org.
2. Dr. Uday Khopkar, Skin Diseases and sexually transmitted infections, Balani publishers, sixth edition, reprint, 2013.
3. Dina Began, Madelaine Haddican, lichen-amyloidosis-lichen-amyloidosis-papular-amyloidosis-lichenoid-amyloidosis/ www.dermatologyadvisor.com/.

4. Sezer E, Erbil AH, Köseoğlu RD, Filiz N, Kurumlu Z. Successful treatment of lichen amyloidosis with cryosurgery. *Gulhane Med J*, 2006; 48: 112-114.
5. Dina Began, Madelaine Haddican, lichen-amyloidosis-lichen-amyloidosis-papular-amyloidosis-lichenoid-amyloidosis/ www.dermatologyadvisor.com/.
6. Sharma RK, Dash B. *Charaka Samhita, Chikitsasthanam. Ch. 7, Ver. 21. Varanasi: Chowkhamba Sanskrit Series Office, 2012; 324-5.*
7. Sharma RK, Dash B. *Charaka Samhita, Chikitsasthanam. Ch. 7, Ver. 21. Varanasi: Chowkhamba Sanskrit Series Office, 2012; 9.*
8. Sharma RK, Dash B. *Charaka Samhita, Chikitsasthanam. Ch. 7, Ver. 21. Varanasi: Chowkhamba Sanskrit Series Office, 2012; 22.*
9. M Ashvini Kumar et al Critical appraisal of virechana karma in psoriasis/ *Int. J. Res. Ayurveda Pharm*, Jul-Aug 2013; 4(4).
10. Naram SP, Parekh H, Mahajan DS, Naik RD. A survey to evaluate the efficacy of virechana, basti and knee dhara in patients with Osteoarthritis of knee joint. *Int J Res Med Sci.*, 2019; 7.
11. Wendy Weissner, Anantamul (*Hemidesmus indicus*) A Review of Biomedical Studies and U.S. Products, *Ayurveda Journal of Health*, 2014; XII(4).
12. National R&D Facility for Rasayana, Sariva (*Hemidesmus indicus*). <http://www.frlht.org/rasayana/node/79>, Accessed on, 30 June 2014.
13. Medicinal properties of Neem: New Findings by D.P. Agrawal.
14. Hoshino T, Yamashita SI, Suzuki N, Baba A, Ogawa S, Izumi T. Impact of Acacia bark extract tablets on the skin of healthy humans: a randomized, double-blind, placebo-controlled study. *Biosci Biotechnol Biochem*, 2019; 83(3): 538-550. doi:10.1080/09168451.2018.1547626.
15. Simha KR, Luxminarayana V, Khanum S. Standardisation of Yograj guggulu. An Ayurvedic polyherbal formulation. *Indian journal of traditional knowledge*, 2008; 7(3): 389-396.
16. Amit Lather et al. / An Ayurvedic Polyherbal Formulation Kaishore Guggulu: A Review, *International Journal of Pharmaceutical & Biological Archives*, 2011; 2(1): 497-503.
17. Imam Hashmat, Neem (*Azadirachta indica* A. Juss) - A Nature's Drugstore: An overview, *International Research Journal of Biological Sciences*, 2012; 1(6): 76-79.