

A Case Study On Visa Bilwadi Agad & Karveeradi Taila In The Management Of Vicharchika (Seborrhoeic Dermatitis)

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ABSTRACT

Vicharchika (Seborrhoeic dermatitis), described in Ayurvedic literature under the broad category of Kushtha (skin disorders), is characterized by symptoms such as Kandu (itching), Srava (discharge), Vaivarnya (discoloration), Pidika (papular eruptions), Syava varna (hyperpigmentation or discoloration), and thickened lesions. It is predominantly associated with the vitiation of Kapha and Pitta doshas, along with the involvement of Rakta dhatu. In contemporary dermatology, Seborrhoeic Dermatitis is a chronic, relapsing inflammatory skin condition affecting sebaceous gland-rich areas such as the scalp, face, and upper trunk, presenting with erythema, scaling, and pruritus. Visa bilwadi agad acts internally by its Vishaghna (Antitoxic), Krimighna (Antimicrobial), and Deepana-pachan (Appetizer) properties helping to detoxify the body, improves digestion, and purify the blood thereby reducing itching, inflammation and discharge. On the other hand, Karveeradi taila is applied externally and works through its Kusthaghna (Anti-dermatic), Kandughna (itching) and Lekhana (scraping) actions to relieve itching, dry oozing lesions, and promote healing of thickened skin.

In this study observation was done on the basis of assessment criteria, assessment done before treatment was 16 and gets reduced to 3 after treatment. In objective parameters significant changes are seen. SGPT before treatment is 125.0 U/L & it gets reduced to 36.45 U/L after treatment. SGOT before treatment is 79.4 U/L it gets reduced to 25.03 U/L. Clinical observations indicated significant improvement in cardinal symptoms, including reduction in itching, scaling, and discoloration. The combined therapy demonstrated effective disease management with minimal recurrence. Thus, this integrative Ayurvedic approach provides a safe and promising treatment modality for Vicharchika (Seborrhoeic dermatitis)...

Keywords: Ayurveda, Agad tantra, Vicharchika, Seborrhoeic dermatitis, kushtha, visa bilwadi agad, karveeradi taila...

INTRODUCTION

Vicharchika (seborrhoeic dermatitis) is a commonly encountered dermatological condition described in Ayurveda under the category of Khudra kushthai (minor skin disorders). It is primarily characterized by symptoms such as Kandu (intense itching), Srava (discharge), Pidika (eruptions or lesions), Shyava or Aruna varna (discoloration), and varying degrees of dryness or scaling. According to acharya charak & vagbhat Vicharchika (seborrhoeic dermatitis) is Kapha dominant and according to acharya susrut it is Pitta dominant, along with the involvement of Rakta dhatu (blood). In the Ayurvedic classics, Vicharchika (seborrhoeic dermatitis) is considered as a chronic and relapsing disorder that significantly affects the quality of life due to persistent discomfort and cosmetic concerns. The etiological factors include improper dietary habits, incompatible food combinations (Viruddha ahara), poor lifestyle practices (Vihara), and suppression of natural urges, all of which contribute to doshic imbalance and subsequent manifestation of the disease..

From a contemporary perspective, Vicharchika (seborrhoeic dermatitis) is often correlated with conditions such as seborrhoeic dermatitis based on similarities in clinical presentation. Seborrhoeic dermatitis is a common, chronic inflammatory skin condition that mainly affects areas rich in oil (sebaceous) glands, such as the scalp, face, upper chest, and back. It is characterized by red, itchy skin with flaky, greasy scales. This condition is closely associated with the overgrowth of a yeast called *Malassezia*, which naturally lives on the skin. In susceptible individuals, this yeast triggers an inflammatory response, leading to the symptoms seen in Seborrhoeic dermatitis.

2. CASE PRESENTATION-

A 54-year-old male patient presented to the OPD of sanjeevani ayurved hospital of DSRRAU JODHPUR, with the following complaints with duration:

1. Kandu (itching) for 7-8 months.
 2. Daha (burning sensation on scalp) for 1 year
 3. Rukshata (dryness) for 1 year
 4. Pidika (eruptions) for 6 months.
 5. Vaivarnya (discolouration) for 7-8 months.
 6. Twak Sphutana around the ears and back with Kandu (severe itching), Daha & Vaivarnya.
- No other associated complaints were reported.

2.1. History of Present Illness -

The patient works as a farmer. He had a history of allergies from pesticides. He developed symptoms at the beginning of plantation of crop (kharif) and especially exposure to sunlight worsened the problem. His diet was irregular. Sweating was an aggravating factor. Oiling provided relief. No relevant history was found, and no family member has a similar problem.

General Examination –

Table 1: Personal history of 54-year registered patient of Vicharchika (seborrhoeic dermatitis).

Weight	65kg
Height	168cm
Blood pressure	130/90 mm of Hg
Respiration rate	18/min
Sleep	Not sound
Oedema	not present

Asthvidha pariksha of the patient-

Table 2: Ashtavidha Pariksha of patient as per ayurveda

Nadi (pulse)	76 bpm
Mala (stool)	2 time / day (irregular)
Mutra (urine)	normal
Jihva (tongue)	Saam
Sparasha (touch)	Ruksha
Twaka (skin)	dry skin
Drika (eyes)	normal

2.2 Diagnostic Assessment

2.2.1. Local Examination-

Table 3 -Rupa of Vicharchika (Seborrhoeic dermatitis)

S. NO.	Assessment criteria	Grade 0	Grade 1	Grade 2	Grade 3
1	Kandu (itching)	No itching	Mild itching not disturbing any activity	Occasional itching disturbs normal activity	Itching present continuously and disturbing sleep
2	Daha (burning)	No burning sensation	Mild burning not disturbing any activity	Occasionally burning disturbs normal activity	Burning present continuously and disturbing sleep
3	Rukshata (Dryness/Roughness)	No dryness (Snigdha)	Dryness with rough skin	Dryness with scaling (Khara)	Dryness with cracking (Parusha)
4	Pidika (Eruption)	No eruption in the lesion.	Scanty eruption in few lesion	Scanty eruption in at least half of the lesion	All the lesion full of eruption
5	Vaivarnya (Discolouration))	Nearly normal skin colour	Brownish red discolouration	Blackish red discoloration	discoloration
6	Rajya (Cracks)	No cracks	Mild	Moderate	Severe
		0	1	2	3

Grade	Meaning	Description
Grade 1	Normal	No disease or symptoms present
Grade 2	Mild	Early stage with minimal symptoms
Grade 3	Moderate	Clear symptoms, requires treatment
Grade 4	Severe	Serious symptoms

2.2.2. Lab investigation- LFT (Liver function test)-

Total Bilirubin
Direct Bilirubin
Indirect Bilirubin
SGPT(ALT)
SGOT(AST)
Alkaline phosphatase
Total Serum Protein
Serum Albumin

3. DIAGNOSIS

Based on the history and clinical examination, the case was clinically diagnosed as Vicharchika (Seborrhoeic dermatitis).
Treatment protocol-

Table 4: Showing posology of treatment protocol

S.no.	Drug	Dose	Duration
1.	Visabilwadi Agadvi	250 mg	QID for 7 days
2.	Karveeradi Tailavii	Local application on affected area	Twice in a day

Scalp care instructions-

The patient was advised on proper scalp care:

Always use boiled and cooled water to wash the head.

Avoid using hot water for hair washing.

Use a clean, sun-dried towel daily.

4. RESULTS-

Follow-up was conducted every 7 days.

On the 7th, 14th, day assessments, gradual relief was observed in each symptom associated with seborrhoeic dermatitis.

Table 5: - Assessment of symptoms of Vicharchika (Seborrhoeic dermatitis) before treatment and after follow up

S.NO.	SIGN & SYMPTOMS	Before treatment	7th day of treatment	14th day of treatment
1.	Kandu (itching)	3	2	1
2.	Daha (burning)	2	2	0
3.	Rukshata (dryness)	3	2	1
4.	Pidika (eruptions)	2	2	0
5.	Vaivarnya (discolouration)	3	0	0
6.	Rajya (cracks) around ears & back with Kandu, Daha.	3	1	1
	Changes in total score	16	9	3

Changes in objective parameter -LFT

	Before treatment	After treatment	Range
Total bilirubin	0.13mg/dl	0.77	0.10-1.20mg/dl
Direct bilirubin	0.20	0.12	0-0.20 mg/dl
Indirect bilirubin	0.2	0.65	0-0.9 mg/dl
SGPT	125.0	36.45	00-45.0 U/L
SGOT	79.4	25.03	00-35.0 U/L
Alkaline Phosphate	118	75.98	60-250U/L
Total Serum Protein	7.3	7.43	6.6-8.8gm/dl
Serum Albumin	4.7	5.01	3.5-5.2gm/dl
Serum Globulin	2.6	2.4	2.5-3.3gm/dl

Picture 1 – Photograph of patient before and after treatment

Before treatment after 7th day of treatment after 14th day of treatment



5. DISCUSSION-

The cardinal features of Vicharchika (seborrheic dermatitis) as explained in classical texts, can be correlated with seborrheic dermatitis in contemporary science. The doshas involved in this case were Pitta (according to susurut) and Kapha (according to charak & vagbhat). Visabilwadi Agad is a classical Ayurvedic formulation that is highly effective in the treatment of Vicharchika (seborrheic dermatitis) due to its detoxifying, anti-inflammatory, and doshabalancing properties. It has total 17 contents including Ishwari, Neelini, Patha, Bilwa, Sursa, Karanj, Devdaru, Haritaki, Vibhitaki, Amalaki, Tagar, Haridra, Daruharidra, Pippali,

Sunthi, Maricha & Ajamootra. Most of its contents, such as Bilva, Tulsi, Karanja, Devadaru, Tagara, Maricha, Pippali, Daruharidra, Neelini, Ishwari, and Patha, possess Katu and Tikta rasa, Laghu and Ruksha guna, and Ushna virya, which help in pacifying Kapha and Vata doshas, thereby reducing swelling, oozing, scaling, and thickening of lesions. Drugs like Haridra, Daruharidra, Tulsi, and Neelini provide anti-inflammatory and antimicrobial effects, alleviating redness, burning, and itching associated with Vicharchika (seborrheic dermatitis). Contents such as Sunthi, Maricha, Pippali, and Tagara stimulate digestive fire (Agni), promoting the elimination of Ama (toxins) that contribute to skin disorders. Additionally, Amalaki and Haritaki act as Tridosahara and supporting healing and regeneration of the skin, especially in chronic or fissured lesions. The inclusion of Ajamootra adds antitoxic (Vishaghna) action, enhancing the body's ability to neutralize internal toxins. Its Vishaghna (anti-toxic) property helps in neutralizing Ama and latent toxins that contribute to chronic inflammation. The Deepana-pachana action improves digestive fire, thereby preventing further formation of Ama, which is considered a root cause in Vicharchika (seborrheic dermatitis). Additionally, its Krimighna and Rakta shodhana properties aid in controlling microbial involvement and purifying vitiated blood, ultimately reducing symptoms like itching and discharge. Together, the synergistic actions of these contents address both the root cause of Vicharchika (seborrheic dermatitis). In the present case, administration of Visa Bilwadi Agada provided significant internal correction.

Topical application of Karveeradi Taila played a crucial role in local symptom management

Owing to its kushthaghna and kandughna properties. Karveeradi tail has 6 contents including Karveer, Chitrak, Vidang, Til tail, Gomutra, Jal (water) it has effectively reduced itching and inflammation. Its Lekhana and Rukshana actions helped in drying the oozing lesions and reducing lichenification. The presence of Karveer, processed appropriately, contributes to its potent antimicrobial and skin-healing effects, facilitating faster resolution of lesions.

The combined use of these formulations demonstrates a synergistic effect, where Visa Bilwadi Agada addresses the internal etiopathogenesis while Karveeradi Taila provides symptomatic relief and promotes local healing. This integrative approach not only alleviates clinical features but also helps in reducing recurrence by correcting the underlying doshic imbalance.

Thus, the case highlights the effectiveness of a dual therapeutic strategy in Vicharchika (seborrhoeic dermatitis), emphasizing the importance of addressing both systemic and local factors for comprehensive disease management.

6. CONCLUSION

Visabilwadi Agada and Karveeradi Taila are effective in the management of Vicharchika (seborrhoeic dermatitis) due to their complementary actions. Visabilwadi Agada works internally by detoxifying the body, improving digestion, and correcting the imbalance of doshas, thereby addressing the root cause of the disease. Karveeradi Taila, when applied externally, helps reduce itching, oozing, and inflammation while promoting healing of skin lesions. Together, this combined therapy provides both systemic and local relief, leading to better symptom control and reduced chances of recurrence in Vicharchika (seborrhoeic dermatitis)..

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