**BioGecko** 

Vol 12 Issue 02 2023

ISSN NO: 2230-5807

# Siddha Management of Palmoplantar Psoriasis - A Clinical Case Study

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#### Abstract

Psoriasis is a chronic inflammatory skin condition that affects roughly 2-3% of the global population and is characterised by keratinocyte hyper proliferation and aberrant differentiation. Palmoplantar psoriasis is a variant of psoriasis that characteristically affects the skin of the palms and soles. The treatment of inflammation and other degenerative disorders was pioneered by Siddha medicine; the majority of Siddha preparations are made up of plant ingredients with novel therapeutic characteristics. The main aim of the present case study is to explore the clinical efficacy of the siddha formulations against palmar psoriasis. The treatment began with an oil bath on the first day, and the Murukkanvithaimathiraigaveas purgation on the second day. On the third day, internal medicine Parangipattairasayanam and external medicine Pungan oil were chosen as treatments to manage the disorders' symptoms. Results analysis of the present investigation signifies that siddha therapy continued for 48 days, the patient was advised to take the above medication, and its clinical relevance was assessed on a regular basis during the follow-up. There was a significant decrease in palmar psoriatic lesions evidence, with a potential declination in the superficial scale. The case study demonstrated that the prescribed siddha formulation imposes remarkable clinical cure in limiting palmar psoriatic lesions. In conclusion, Siddha system of medicine may be considered as drug of choice for management of palmoplantar psoriasis.

**Key words:** Palmar Psoriasis, Skin inflammation, Siddha formulation, *Parangipattairasayanam*, *Pungan oil* 

#### 1. Introduction

Psoriasis is a chronic immune-mediated inflammatory skin disease that usually affects the elbows, knees, scalp, and lower back; however, it can affect any skin surface. Psoriasis is characterised by red, scaly plaques that can appear anywhere on the body [1]. The disorder has a significant impact on people's quality of life, to the point that it may be devastating and socially isolating for those affected by it [2]. Psoriasis is increasingly recognised as a systemic illness and is linked to a number of comorbidities, including psychiatric, metabolic, arthritic, and cardiovascular conditions. As a direct result, the lifespan is diminished [3] Palmar plantar psoriasis is a skin disease which is classified under Psoriasis. Auto immune deficiency is the main reason behind the causation of Palmar Plantar Psoriasis. The symptoms are itching, hyper pigmented lesion with fissure, scalings etc., seen in hands and feet. Though there are various external and internal allopathic medicines are available currently in the market to treat Psoriasis, Siddha medicines plays a very significant role in curing all kind of Psoriasis without causing any adverse effects. Enormous Siddha herbals and herbomineral, metallic formulations are still wondering for its immense Anti-psoriatic effect. Palmar Psoriasis can appear at any age; however, the majority of sufferers have symptoms for the first time before the age of 35 [4].

Siddha is an old traditional method used to restore an individual's health and well-being. Despite its long herbal pedigree, current technological advancements have explored the exact

ISSN NO: 2230-5807

mechanism through which the medication functions. Herbal remedies include physiologically active treatments known as secondary metabolites, which have the ability to prevent the course of a variety of illnesses. In terms of innovation, each siddha formulation is truly a combination of numerous medicinal components, thus the approach of anti-infective mechanism becomes complicated, considerably reducing the possibility of anti-microbial resistance [5,6]. The main aim of the presentto manage palmar psoriasisby using siddha formulations.

#### 2. Materials and Methods

## **Case Presentation**

A woman of 32 years old was diagnosed with a severe type of palmar psoriasis, which manifested as hyperpigmentation in both the sole and palm of her hand. This was followed by the development of an erythematous lesion in the waist and gluteal area over the course of five years. She did not have a history of psoriasis in her family and also suffered from the comorbidity of hyperthyroidism for which she is under allopathy medicine. Examinations of the cardiovascular system, the respiratory system, and the abdomen had not shown any abnormalities. During the patient's evaluation and examination, it was diagnosed that the individual is suffering from palmar psoriasis as shown in figure 1.

## 3. Siddha treatment protocol

Following a thorough clinical examination, the patient was diagnosed with palmar psoriasis, and treatment was initiated using Siddha diagnostic procedures and Siddha philosophy. The treatment began with an oil bath on the first day, and the *Murukkanvithaimathirai*gave as purgation on the second day. On the third day, internal medicine *Parangipattairasayanam* and external medicine *Pungan oil* were chosen as treatments to manage the symptoms. The patient was advised to come in for a review once a week for 48 days as shown in Table 1.

**Table 1: The given Siddha treatment** 

Name of the Drug	Mode of therapy	Dose and Adjuvant
Arakkuthylam	External Medicine	Twice in a week
Murukkanvithaimathirai	Internal Medicine	2 tablets with hot water on 2 <sup>nd</sup> day
ParangipattaiChooranam	Internal Medicine	2 tablet ,After food with hot water
Pungan oil	External Medicine	For the duration of 48 days
Parangipattairasayanam	Internal Medicine	5gm, BiD With milk after food for 48 days

#### 3. Results

## Recovery of palmar psoriasis using siddha formulations

Siddha Treatment continued for 48 days, the patient was advised to take the above medication, and its clinical relevance was assessed on a regular basis during the follow-up. There was a significant decrease in palmar psoriatic lesions evidence, with a potential declination in the superficial scale. The current study demonstrated that the prescribed siddha formulation imposes remarkable affect on palmar psoriatic lesions as shown in figure 1.

ISSN NO: 2230-5807

Figure 1: Clinical representation of palmar psoriasis (A) Before and (B) After Treatment with siddha medication

#### (A) Before Treatment







#### 4. Discussion

Psoriasis is a widespread chronic inflammatory disease that affects about 125 million individuals all over the world [7], and its prevalence ranges from 0.33% to 0.6% in different racial groups. Psoriasis is now understood to be of a biological nature, and as a result, it has been identified as an autoimmune disease. This recognition has led to the realisation that the disease has significant impacts on health implications that extend beyond the skin [8].

According to research, utilising herbal medications and capitalising on the immunoregulatory and antioxidative roles that they play in the treatment of palmar psoriasis is one of the potential approaches to modify the response of the cells that are actively participating in the progression of palmar psoriasis [9]. It was observed from the present investigation that siddha treatment continued for 48 days, the patient was advised to take the listed medication, and its clinical relevance was assessed on a regular basis during the follow-up. There was a significant decrease in palmar psoriatic lesions evidence, with a potential declination in the superficial scale. The current case study demonstrated that the prescribed siddha medicine imposes remarkable clinical cure in limiting palmar psoriatic lesions.

#### 5. Conclusion

Psoriasis is a chronic inflammatory skin disease that also frequently affects the joints and is associated with other comorbidities. Systemic and topical anti-inflammatory, anti-proliferative, immunosuppressive, and biological medicines are common treatments available for psoriasis. Regardless of whether these systemic regimens are administered systemically or topically, significant adverse effects can occur. The present treatment focuses solely on illness management rather than cure. This is because palmar psoriasis has a lifetime repeated episodic progression. Outcome of our study clearly evident that treatment with siddha formulation for the period of 48 days reveals significant recovery on palmar psoriatic lesions. Based on the results it was concluded that siddha system of medicine considered as drug of choice for clinical management of palmarpsoriasis in near future.

**BioGecko** 

Vol 12 Issue 02 2023

ISSN NO: 2230-5807

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