

# Ayurvedic Management of *Sheetapitta* (~URTICARIA) - A Case Report

Dr. Rahulkumar Pande<sup>1</sup>, Dr. Harish Kumar Singhal<sup>2</sup>

<sup>1</sup>PG Scholar, P.G. Department of Kaumarbhritya, Postgraduate Institute of Ayurveda, Dr. S.R. Rajasthan Ayurved University, Jodhpur, Rajasthan

<sup>2</sup>Professor & H.O.D., P.G. Department of Kaumarbhritya, Postgraduate Institute of Ayurveda, Dr. S.R. Rajasthan Ayurved University, Jodhpur, Rajasthan

**Abstract:** *Sheetapitta* is made up of the terms *Sheeta* and *Pitta*, which are diametrically opposed and denote the dominance of *Sheeta* over *Pitta* Dosha as a result of *Vata* and *Kapha* Dosha. *Urticaria*, characterized by transient wheals, presents with pruritus, erythema, and dermal edema, often triggered by environmental factors and allergens. It affects up to 25% of individuals during their lifetime. Ayurveda correlates this condition with *Sheetapitta*, characterized by analogous symptoms exacerbated by *Vata* and *Kapha* Dosha. A case report involving a 16-year-old female patient with chronic urticaria revealed widespread urticarial lesions and pruritus aggravated by dietary factors such as curd and spices. Treatment included *Brihat Haridra Khanda*, *Sheetapitta Bhanjan Rasa*, *Arogyavardhini Vati*, and *Urtiplex* capsules internally, complemented by *Urtiplex* lotion externally. Significant improvement was observed, with reduced inflammation and itching following a 28-day treatment regimen and a 14-day follow-up. Ayurvedic formulations targeted the underlying imbalance of *Dosha* and dermatological pathology, demonstrating therapeutic efficacy without any adverse effects. This case report underscores the effectiveness of Ayurvedic treatment in managing chronic urticaria.

**Keywords:** Ayurveda, Nettle Sting, *Sheetapitta*, Urticaria, *Varatidamsa Sansthana Shotha*, *Vata-Kapha Doshaja*

## 1. Introduction

*Sheetapitta* is comprised of two exactly opposite words, *Sheeta* and *Pitta* which refers to the dominance of *Sheeta* (due to *Vata* and *Kapha* Dosha) over *Pitta* Dosha. According to *Madhav Nidana*, *Sheetapitta* is characterized by *Varatidamsa-sansthana shotha* (Inflammation like a nettle sting), *Kandubahula* (severe itching), *Todabahula* (excessive pricking pain), *Chardi* (~vomiting), *Jwara* (~fever), and *Vidaha* (burning sensation)<sup>1</sup>. *Madhavakara* described *Sheetapitta* and *Udarda* as synonyms of each other but noted that *Sheetapitta* is characterized by *Vata-Adhikya*, whereas *Udarda* is characterized by *Kapha-Adhikya*<sup>2</sup>. Urticaria is a recurrent, transient, cutaneous swelling with erythema that resolves within 24 hours without leaving any residual cutaneous signs. A transient redness and swelling of skin with itching, causing wheals in the dermis or large hypodermal swellings, is called Urticaria<sup>3</sup>. Modern pathology indicates that approximately 30% of urticaria cases are cholinergic, triggered by factors such as physical exercise, heat exposure, stress, or sweating<sup>4</sup>. Urticaria affects up to 25% of individuals at some point in their lives, with a global incidence ranging from 0.1% to 3%. Women are twice as likely to be affected compared to men<sup>5</sup>. The signs and symptoms of *Sheetapitta* are similar to those of Urticaria, suggesting a correlation between *Sheetapitta* and Urticaria. In contemporary medicine, management for urticaria can provide symptomatic relief for many patients; however, it has limitations related to side effects, temporary efficacy, dependency, and the challenge of addressing underlying causes effectively. Ayurvedic treatment for urticaria focuses on balancing *Dosha* through medications and lifestyle adjustments, aiming to alleviate symptoms and address the underlying causes, promoting long-term relief.

## 2. Patient Information

A 16-year-old female of moderate built came to OPD with the chief complaints of reddish raised circular lesions with orbital swelling all over the body associated with itching. These symptoms persisted intermittently for the last eight years. The patient was apparently healthy when she was nine years old and gradually developed raised reddish circular lesions all over the body due to environmental changes, sun exposure, skin irritation, tight clothing, dust exposure & working on the farm. Initially, she neglected the complaints, but as the symptoms got aggravated, she approached multiple hospitals and was on contemporary medicines for the last eight years. However, there was no significant response, and the symptoms were frequently noticed. No history of prolonged or recurrent febrile illness or any other symptoms was found. The individual's dietary habits and appetite were assessed through the frequency of food intake, which was 5-6 times per day. The patient's common dietary choices included excessive consumption of curd, buttermilk, spicy and salty foods, as well as packaged foods. Additionally, addiction to tea was observed for nine years. Her *Agni* (~digestive fire) was observed *Vishmagni*. The patient's general condition was fair, with no signs of pallor, icterus, or cyanosis and no history of other chronic illnesses or metabolic diseases such as diabetes mellitus or hypertension. There was no evidence of any associated illness.

## 3. Clinical Findings

On local examination, diffuse and scattered rashes were found across the entire body. The colour of the rash was red, with lesions displaying greater than 0.5 cm circumscribed elevations and altered skin coloration [Figure-1&2]. Although the lesions were well-demarcated, they didn't lead to increased or decreased pigmentation. No linear scratch

marks were observed after the lesions were scratched, indicating an absence of excoriation. Furthermore, there were no signs of skin ulceration or erosion, and no scaling or crusting was observed in the affected areas. The absence of visible blood vessels suggested that the rash does not involve vascular abnormalities. Moreover, there was no foul odor associated with the rash. On vital examination, temperature, pulse, and blood pressure were within the normal limits. On systemic examination, the cardiovascular and respiratory systems were found normal.

#### **Asthavidha Parikshana (~Eight folds examination)**

*Nadi*(~pulse) *Parikshana* indicates a predominance of *Pitta* and an aggravation of *Vata*. *Mala*(~stool) *Pravritti* happened twice a day, sometimes exhibiting *Baddha*(~hardness) and *Grathita* (~lumpiness) *mala*, suggesting occasional constipation. Regarding *Mutra Parikshana*, micturition occurred 4-5 times daily without any complaints, and the urine color was normal. *Jihwa*(~Tongue) was observed *Alipta* (minimal or absent coating). *Shabda* was *Spashta* (~clear), and *Sparsha* was observed as *Mridu*(~soft). *Prakrita* (normal) *Drik* and *Madhyama Akriti* was also observed.

#### **Samprapti Ghataka (~Pathogenesis)<sup>6</sup>**

Pathogenesis according to *Ayurvedic* principles in the form of *Nidan Panchaka* (~five diagnostic principles) had been evaluated. Excessive indulgence in the consumption of *Dadhi*(~curd), *Dadhi* with rice, dairy products such as Milk, Paneer, Kalakand, Rabdi, and bakery products, and salty and spicy food was observed in the patient. *Dosha* was *Pittaadhika Vata*, and *Dushya* (~bodily structure that gets vitiated) was *Rasa* and *Rakta*. *Rasadhatwagnimandya* (~diminished *Rasa Dhatu* metabolic fire) and *Jatharagnimandya* (~due to diminished digestive fire) were noticed. *Rasavaha* and *Raktavaha srotas* were affected. *Adhithana* (~place of manifestation) of diseases was *Twaka*(~skin) and *Rogamarga* was *Bahya*.

#### **Diagnostic Assessment**

Based on the signs and symptoms, the patient was diagnosed to be suffering from *Sheetapitta*. The presence of reddish raised circular lesions with orbital swelling like a nettle sting, causing wheals in the dermis confirmed the diagnosis as a case of chronic urticaria [Figure-1&2]. To measure the severity of the disease characteristics (itch, presence, and number of wheals) UAS (Urticaria Activity Score) scale was used<sup>7</sup> which were shown in given Table 1.

#### **Timeline**

The patient was assessed before, after treatment, and after follow-ups to evaluate the efficacy of the treatment. The timeline for drug treatment is in Table 2.

#### **Therapeutic Interventions**

Therapeutic Interventions involved both internal and external medication for the treatment of the condition. Internally, the patient was prescribed *Brihat Haridra Khanda*<sup>8</sup> in a dosage of 10 grams twice daily with milk, *Sheetapitta Bhanjan Rasa*<sup>9</sup> 250 mg twice a daily, *Arogyavardhini vati*<sup>10</sup> 2 tablets twice daily, and *Urtiplex* two capsules twice daily. Externally, the patient was advised to use *Urtiplex* lotion for local application. In terms of lifestyle

modifications, the patient was advised to avoid sour, salty, and spicy foods, as well as fast food, junk food, curd, and pickles<sup>11</sup>. Additionally, she was advised to minimize excessive traveling and use of air conditioning, and recommended to wear full-sleeve clothing to protect the skin. The patient was advised to refrain from late-night sleeping habits.

#### **Follow-Up and Outcome**

The treatment showed a significant result without reoccurrence of any signs and symptoms during the course of the treatment, which was 28 days, and a follow-up period of 14 days. After 14 days of the treatment, a noticeable improvement was observed, with a reduction in inflamed margins, redness, and number of hives.[Figure-3&4] After 28 days of treatment, further improvement was observed, characterized by a complete reduction in the thickness of the lesions, inflamed margins, itching, and redness.[Figure-5] There was no recurrence observed during 14 days of follow-up after the treatment.[Figure-6] The changes in the lesion observed during therapy are placed in Table 3 in graded form. There was no complaint of any adverse drug reactions, such as nausea, vomiting, diarrhea, and abdominal cramps.

#### **4. Discussion**

*Sheetapitta* is a skin condition caused by an imbalance of *Tridosha* (*Vata*, *Pitta*, and *Kapha*). *Varatidamsa-Sansthanashotha* (Inflammation like a nettle sting) and “*Kandu*” are related to excess *Kapha*, while *Shula* is associated with *Vataprakopa*, and “*Daha*” is related to *Pittaprakopa*.<sup>12</sup>Based on the symptoms described, this condition resembles urticaria, which presents as raised, red, itchy wheals on the skin.

*Haridra* (*Curcuma longa*), which is the main ingredient of *Brihat Haridra Khanda*, possesses *Varnya* properties, having the ability to alleviate *Twagdosha*, *Mehasra*, *Shotha*, *Pandu*, and *Vrana*.<sup>13</sup>*Trivrit* (*Operculina turpethum*) possessing *Sukhvirechak* (gentle purgation) and *Bhedaniya* (~laxative) properties. *Abhaya* (*Terminalia Chebula*) possesses *Mriduvirechaka* (mild purgative) and *Vatanulomaka* (promoting downward movement of *Vata*) properties. *Lauha Bhasma* having *Madhura*, *Tikta*, and *Kashaya Rasas* (sweet, bitter, and astringent tastes) along with *Ruksha* and *Guru Gunas* (dry and heavy qualities) exhibits *Kapha-pittahara kushtaghna* action.<sup>14</sup> *Abhraka Bhasma* has *Madhura Rasa* (sweet taste) and *Snigdha Guna* (unctuous quality) *Varnya*, *kushtaghna*, and *dipana* properties.<sup>15</sup> These components collectively contribute to the formulation's *Tridoshahara* (balancing of all three *Doshas*), *Dipana* (digestive), *Raktaprasadana* (blood purifying), *Twacya* (beneficial for the skin), and *Varnya* (complexion enhancing) properties.

*Sheetapitta Bhanjan Rasa* comprised mainly *Shuddha Parada* having *Snigdha* (unctuous), *Rasayana* (rejuvenating), and *Balya* (strengthening) properties which exhibit *Tridoshahara* (balancing of all three *doshas*) action. *Shuddha Gandhak* having *Madhura Rasa* (sweet taste), *Snigdha Guna* (unctuous), and *Katu Vipaka* (pungent post-digestive effect) exhibits *Kushtaghna* (anti-dermatosis) and *Kandughna* (anti-pruritic) *Kapha-vatahara* action. *Kasis*

*Bhasma*, having *Amla* (sour), *Tikta* (bitter), and *Kashaya* (astringent) *rasa*, *Sheeta Virya* (cooling potency), exhibits *Kandughna* (anti-pruritic), *Vishaghna* (anti-toxic), and *Kushtagna* (anti-dermatosis) actions, thus harmonizing *Vata* and *Kapha Dosha*. *Tamra Bhasma* having *Tikta* (bitter), *Madhura* (sweet), and *Kashaya* (astringent) *Rasa*, *Snigdha* (unctuous) *guna* exhibits *Lekhana* (scraping), and *Vishahara* (anti-toxic) actions, provides relief from skin disorders while balancing *Pitta* and *Kapha Dosha*.<sup>16</sup>

*Katuki*, which is the main ingredient of *Arogyavadhini Vati*, possesses *Raktadoshahara*, *Dahahara*, and *Kusthahara* properties. *Guggulu* possesses *Vranahara*, *Vatarogahara*, and *Kusthahara* properties.<sup>17</sup> *Chitraka Moola* possesses *Vataghna*, *Sheleshmapittanut*, and *Kusthshothahara* properties.<sup>18</sup> *Shilajatu* having *Tikta Rasa*, *Sheeta Virya*, and *Katu Vipaka* exhibits *Rasayana* and *Vatahara* Action.<sup>19</sup> *Nimba Patra* having *Tikta Rasa* and *Kusthahara* properties further enhances the formulation's ability to address various skin ailments, contributing to overall skin wellness and health.<sup>20</sup>

*Ayurvedic* medicine consisting of *Daruharidra* (*Berberis aristata*), *Chandana* (*Sandalwood*), *Jatamansi* (*Nardostachys jatamansi*), *Sariva* (*Hemidesmus indicus*), *Shankha bhasma*, *Ushir* (*Vetiveria zizanioides*), *Kapardika* (*Varatika*), *Shunthi* (*Zingiber officinale*), *Amalaki* (*Phyllanthus emblica*), *Katuki* (*Picrorhiza kurroo*), *Khadira* (*Acacia catechu*), *Manjishta* (*Rubia cordifolia*), *Shirisha* (*Albizia lebeck*), *Guduchi* (*Tinospora cordifolia*), *Haridra* (*Curcuma longa*) was administered in the form of Capsules. *Sariva* possessing *Pitta-shamaka* (*Pitta* pacifying), *kanduhara* (anti-pruritic), *Kusthahara* (skin disease alleviating), and *Daha Prashaman* (burning sensation relieving) properties, also functions as a *Rakta Shodhan* (blood purifier). *Daruharidra* and *Haridra* effectively reduce inflammation or swelling resulting from injury or infection, possessing *Kanduhara* and *Kusthahara* properties. Additionally, *Haridra* exhibits antioxidant properties, helping to reduce oxidative stress and reverse cellular damage caused by oxidation. *Manjishta* having *Madhura*, *Tikta*, *Kashya Rasa*, and *Raktashodhak* (blood purifying) and *Varnkrita* properties exhibits *Kustha Visarpanut* Action. *Khadira* having *Kashaya rasa* and *Kusthaghna* properties.

*Ayurvedic* Lotion consisting of *Ghridakumari* (*Aloe Barbadensis*), *Kokam Butter* (*Garnicia Indica*), *Yashad Bhasma*, Oil of Marigold (*Tagetes Erecta*), and Oil of *Sarshapa* (*Brassica Campestris*) was applied externally for local application. *Ghridakumari* (*Aloe Barbadensis*) possessing *Tikta*, *Madhura Rasa*, *Bhedaniya* (Purgative), *Pittanirhara* (Pacifies *Pitta*) *Visphotanashak*, *Raktavikara* properties. *Kokam Butter* (*Garnicia Indica*), has *Madhura Rasa* *snigdha* (unctuous), *sheeta* (cold), and *guru* (heavy) properties. Marigold (*Tagetes Erecta*) has *Kashaya* (Astringent), *Tikta* (Bitter) *rasa*, *Sheeta Virya* and *Shothahara* (Anti-inflammatory), and *Vranalepana* (Wound healing) properties. *Sarshapa* (*Brassica campestris*) having *Katu* (Pungent), *Tikta* (Bitter) *Rasa*, *Kaphapittaghna* (Alleviates *Kapha* and *Pitta Doshas*), *Kandu-kusthakrimihara* (Relieves itching, skin disorders, and microbial infections) properties.

*Parada*, *Loha*, *Tamra*, *Abhraka*, *Kasisa*, *Gandhaka*, and *Shankha* are the major mineral drugs of the above formulation, which possess *Madhura-Kashaya Rasa*, *Snigdha Guna*, *Sheeta Virya* properties which exhibit *Vatakaphahara*, *Tridoshahara*, *Pittahara* action. *Arogyavardini Vati* acts on the vitiated *Vata-Kapha Dosha* in the management of *Sheetapitta*. *Sheetapitta Bhanjana Rasa* and *Brihat Haridra Khanda* are *Pitta shamaka*, *Raktaprasadaka*, and *Vishahara* in action. These *yogas* are *Varnya*, *Twachya*, *Kandughna*, and *Raktaprasadana* in *karma*. These *Rasa Guna* and *Karma* help in the *Samprapti Vighatana* and thus prove to be effective in managing *Sheetapitta*.

## 5. Conclusion

*Sheetapitta* is a frequently encountered skin disorder in clinical practice. A case of *Sheetapitta* was managed with the internal administration of *Brihata Haridra Khanda*, *Sheetapittabhanjan Rasa*, *Arogyavardhini vati*, *Urtiplex* capsules, and external application of *Urtiplex* ointment along with recommended dietary measures, and complete remission was achieved in a short duration (28 days) without any complications. No recurrence was noticed during the follow-up period of 14 days. Hence, by adopting *Shamana chikitsa*, the present case was successfully managed. In general, formulations administered to patient restores healthy skin and cure urticaria by establishing the equilibrium of *Tridosha* (*Vata*, *Pitta*, *Kapha*) and *Sapta Dhatu* (body tissues), thereby relieving symptoms. However, studies on a larger sample size need to be conducted to explore further its safety and clinical efficacy in terms of dose and duration of therapy.

## References

- [1] Madhavanidana of Madhavakara with Madhukoshavyakhya by Vijayarakshita and Shrikanthadatta, Hindi Edited by Prof. Yadunandan Upadhyaya. Varanasi: Chaukhamba SurabharatiPrakashana; Reprinted 2010. PP. 201. Sheetpittodardkotha nidanam/2.
- [2] Madhava nidana 50/4 (Madhukosa commentary) Part 2 by Dr P.Himasagara Chandra Murthy, Chowkhambha Sanskrit Series office, Varanasi, edition, 2012
- [3] Kliegman & St geme, Nelson Textbook of Pediatrics, 21st Edition, Chapter 173 Urticaria(hives)and angioedema, page no 5059
- [4] Siddique N, Pereira BN, Hasan Arshad S. Hepatitis C and urticaria: cause and effect? Allergy, 2004; 59: 668.
- [5] Sujoy Khan, Anirban Maitra, Pravin Hissaria, Sitiesh Roy, Mahesh Padukudru Anand, Nalin Nag, Harpal Singh, "Chronic Urticaria: Indian Context— Challenges and Treatment Options", *Dermatology Research and Practice*, vol. 2013, Article ID 651737, 8 pages, 2013.
- [6] Sri Vijayarakshita and Srikantadatta with Vidyotinihindi commentary By-Sudarshana Shastry, Madhavanidana of Srimadhavakara with Madhukosha Sanskrit commentary by Part –II, 50th chapter 1st -



6th verse 26th edition. Chaukhamba Sanskrit Sansthan, Varanasi, 1996; 168.

[7] Mlynek A, Zalewska-Janowska A, Martus P, Staubach P, Zuberbier T, Maurer M. How to assess disease activity in patients with chronic urticaria? *Allergy*. 2008;63:777-80

[8] Shri Govindadas, Bhaishajya Ratnavali-hindi by Kaviraja Ambikadatta Shastri, Chaukhamba Prakashan, Varanasi, 2013, p917.

[9] Vaidya Pandit Hariprapannaji; Rasayogasagara, Krishnadas Academy; Chokwkhamba Press; Varanasi; 1998; vol.2.p357

[10] Ambikadatta shastri. Rasaratna Samuchchya. 9th edition. Chapter no-20. Verse no-87. Varanasi: Chaukhamba Sanskrit Publisher, 1994; 400.

[11] Vaidya Lakshmi patishastri, Yogaratnakar – Hindi Translation, Chaukhamba Prakashana, Varanasi. Uttarardha, Sheetapittadinam Chikitsa prakarana verse 14, pp.236.

[12] M.M Nidhin et al : Commonly Practiced Rasayogas in Sheetapitta w.s.r. to Urticaria: A Review; Ijaar volume iii issue ix Jul –Aug 2018 Page No:1275-1282

[13] Dravyaguna Vijnana by Prof. P. V. Sharma; Vol-I (Basic concept); Published by Choukhambha Bharati Academy, Varanasi; Edition 2010; page 8

[14] Sadanand Sharma, Rasatarangini, Adhyaya, 10/72-73, commentary by Pandit Kashinath Shastri. 11th ed. Motilal Banarasidas Publication, Delhi, 1979

[15] Sadanand Sharma, Rasatarangini, Adhyaya, 10/72-73, commentary by Pandit Kashinath Shastri. 11th ed. Motilal Banarasidas Publication, Delhi, 1979

[16] Ambikadatta shastri, Rasaratna Samuchchya 10th edition, Chapter no-5/66. Varanasi: Chaukhamba Amarabharti Publisher

[17] Acharya Priyavrat Sharma, Dravyaguna vigyan Part 2, Chaukhambha Bharti Academy, Reprint, 2009; 54.

[18] Acharya Priyavrat Sharma, Dravyaguna vigyan Part 2, Chaukhambha Bharti Academy, Reprint, 2009; 359

[19] Ambikadatta shastri, Rasaratna Samuchchya 10th edition, Chapter no-2/108-109. Varanasi: Chaukhamba Amarabharti Publisher.

[20] Acharya Priyavrat Sharma, Dravyaguna vigyan Part 2, Chaukhambha Bharti Academy, Reprint, 2009; 149.

**Table 1: Urticaria Activity Score (UAS7)**

Score	Wheals or hives	Score	Itching
0	None (no wheals)	0	None
1	Mild (< 20 wheals/24hours)	1	Mild (present but not annoying or troublesome)
2	Moderate (21-50 wheals/24 hours)	2	Moderate (troublesome but does not interfere with regular activity or sleep)
3	Severe (> 50 wheals/24 hours or large confluent areas of wheals)	3	Intense or severe (severe itch that is sufficiently troublesome to interfere with regular activity or sleep)

**Table 2: Showing the administration of internal medicine along with its duration**

Medicines Given	Dose Given	Duration
1. Brihat Haridra Khanda <sup>7</sup>	10 gm twice a day, morning and evening, with milk after a meal.	28 Days
2. Sheetapitta Bhanjan Rasa <sup>8</sup>	250 mg twice a day, morning and evening after meal.	
3. Arogyavardhini vati <sup>9</sup>	2 tablets twice a day, morning and evening after meal.	
4. Capsules Urtiplex	2 tablets twice a day, morning and evening after meal.	
5. Urtiplex Lotion	Local application during both morning and nighttime (2 FTU i.e. 1 gm twice a day) (FTU: Fingertip unit)	

**Table 3: Showing improvement in grading of Sheetapitta (urticaria)**

Sign & Symptoms	Grades On Day 0 (December 22, 2023)	Grades On Day 14 (January 05, 2024)	Grades On Day 28 (January 19, 2024)
Wheals or hives	3	2	0
Itching	2	1	0
<b>Total</b>	<b>5</b>	<b>3</b>	<b>0</b>



**Figure 1**



**Figure 2**



**Figure 3**



**Figure 4**



**Figure 5**



**Figure 6**

**[A] Before Treatment** (December 22, 2023) -Figure (1), Figure (2), **[B] 1<sup>st</sup> Follow Up** ( January 05, 2023)- Figure (3), Figure (4), **[C] 2<sup>nd</sup> Follow Up** ( January 19, 2023)-Figure (5), **[D] After Treatment** ( February 02, 2023) – Figure (6)