

Effective Management of Plantar Psoriasis (*Kalanjagapadai*) through Siddha Medicines: A Case Report

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Abstract

Case Report

Psoriasis is a long-standing autoimmune disease characterized by patches of abnormal skin. Plantar psoriasis is a variant of psoriasis that characteristically affects the skin of the soles. It features hyperkeratosis, or mixed morphologies. This is such a case report of a patient with plantar Psoriasis successfully treated by Siddha medicine (*Kilinjal mezhugu*). Siddha medicine is one of the traditional Indian systems of medicines, having its unique 32 types of external therapy kalimbu (ointment) was selected to manage the symptoms of the disease. In external therapy, an ointment is a viscous semisolid preparation that does not flow used topically on a variety of body surfaces. Kalimbu is also applied on the skin of fungal infection, eczema and other skin patches apart from use as local analgesics. A case reported was a female of 68 years old age of the patient came to the outpatient department of National Institute of Siddha (NIS) with symptoms of itching, scaly plaques, burning in feet which aggravates at morning and night, weight-bearing area of the sole had painful cracking, plantar psoriasis fissures, severe pain, scaling in both plantar region for 10 years. After the complete clinical examination, the patient is diagnosed with plantar psoriasis. The complaints of plantar psoriasis were treated with the Siddha formulation (*Kilinjal mezhugu*) for about 45 days without any recurrence and good quality of life. We reported in this article the clinical characteristics of a case of 68 years old female with plantar psoriasis is being presented which was treated successfully with Siddha formulation (*Kilinjal mezhugu*). In the present case, the Siddha formulation treatment showed promising results in plantar psoriasis. No adverse events were noted with the treatment.

Keywords: Siddha Formulation, (*Kilinjal mezhugu*) Kalimbu, Plantar Psoriasis, *Kalanjagapadai*.

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INTRODUCTION

Psoriasis is a long-standing autoimmune disease characterized by patches of abnormal skin [1]. It is Non Infectious chronic inflammatory disease of the skin characterized by well-defined erythematous plaques with a silvery scale. It is a common skin disease affecting about 1-2 percent of the general population [1]. Palmoplantar psoriasis is a variant of psoriasis that characteristically affects the skin of the palms and/ or soles [2]. Psoriasis is a common, chronic non-communicable skin disease, with no clear cause or cure.

The negative impact of this condition on people's lives can be immense. Psoriasis affects people of all ages, and in all countries. The reported prevalence of psoriasis between 0.09% and 11.43% makes psoriasis a serious global problem with at least 100

million individuals affected worldwide. Psoriasis is a chronic, non-communicable, painful, disfiguring and disabling disease for which there is no cure and with great negative on patients. It can occur at any age and is most common in the group 50 to 69 [3]. Palmo plantar variant of psoriasis comprises 3% to 4% of all ages of psoriasis which affects 2 % to 5% of the population [4].

Siddha medicine is one of the traditional Indian systems of medicines, having its unique 32 types of external therapy, kalimbu (ointment) is one among them [5], an ointment is a viscous semisolid preparation used topically on a variety of body surfaces. These include the skin and mucus membranes.

Inorganic drugs which are as hard as a rock are powdered along with astringent drugs ground well with

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oil or butter and applied to the wounds or skin disease areas. Sometimes anti-infective and wound healing drugs are added to molten wax in an oil base and triturated well for uniform mixing and consistency. Kalimbu is also applied on the skin of fungal infection, eczema and other skin patches apart from use as local analgesics [6]. Kalimbu is an external method of application of wet ointment or semisolid medicine in the affected areas. It is a mixture of oil and water possesses viscous semisolid nature, used topically on the affected areas. These include dermal applications and mucus applications. Kalimbu possesses wound healing and infection control properties [7].

CASE SUMMARY

A case report was prepared with a female of 68 years old age of the patient came to the outpatient department of National Institute of Siddha (NIS) with symptoms of itching, scaly plaques, burning in feet which aggravates at morning and night, weight-bearing area of the sole had painful cracking, scaling, and swelling. Also, she had burning on her feet which aggravates in the morning and night and was diagnosed as plantar psoriasis fissures, severe pain, and scaling in both plantar regions for 10 years. After the complete clinical examination, the patient is diagnosed with plantar psoriasis.

The patient was advised to take an oil bath on the second day. And the patient was administered with Agashthiyar kuzhambu on the second day as a purgative therapy. External therapy kalimbu (ointment) was selected to manage the symptoms of the disease. The affected area was washed with Thiripala chooranam mixed with water. NIS OPD medication (*Kilinjil mezhugu*) was mixed with castor oil and applied over the affected area. The patient was advised to come for a review after 15 days. On the review visit, the symptoms were reduced to 75%. The patient was advised to follow the same medication for another 15 days. After 40 days fissures and scaling were completely reduced. The treatment was found to be highly effective for the cured of plantar psoriasis through Siddha external medicine.

Diagnosis, Assessment

The patient was diagnosed as having plantar psoriasis and according to Siddha diagnosis of '*Kalanjagapadai*' is made [8]. Plantar psoriasis is made clinically based on history and findings of the thorough dermatological examination.

Dietary advice

Advised to the patient, to avoid *Agathi* spinach (*Sesbania grandiflora* Linn), *Bitter gourd* (*Momordica charantia* Linn), and Chicken.

Table-1: Intervention of Case Studies

S. No	Duration	Medicine	Dose	Frequency	Adjuvant
1	Day 1	Oil both	30 ml	-	-
2	Day 2	Agashthiyar kuzhambu	200 mg	At early morning, OD, Before food	Hot water
3	Day 3 to day 30	<i>Kilinjil mezhugu</i> [5] For local application	5 to 10 gm	Twice a day External only	
		Thiripala chooranam external wash	Quantity sufficient	Twice a day External only	

DISCUSSION

Siddha treatment is the best medication in the Indian traditional system, and the Siddha system has excellent medicines for the treatment of auto-immune disorders. Treatment for psoriasis with Siddha formulation has already been proved by a lot of cases. The Siddha literature has discussed all psoriasis under the name of *kalanjagapadai*, it is another name is in Siddha literature (*sethil uthir noi*, *venparu sethil uthirnoi*). Psoriasis is approximately 2% of people are affected by the disease. It mostly often affects people between the ages of 5 and 25, and increases during pre-puberty and post-menopause [8]. The Indian traditional medicines are preventive, curative and manageable measures for the health. Siddha medicine particularly Jeeva vaguppu (animal product) plays an important role maintain the system.

These lesions should be made wet with like warm water and those softened lesions should be removed. After removing them, external therapy medicine is to be applied [8]. For neutralizing mukkutram, we started the following line of treatment. 1st-day oil bath the 2 end day purgation with Agashthiyarkuzhambu and 3rd-day rest. Then, every day we asked the patient to wash the lesion with Thiripala chooranam and allowed it to dry. Then the patient is instructed to mix 5 gram of (*Kilinjil mezhugu*) in castor oil and apply it over the lesion. In the first 15 days, the lesions got slightly reduced. So we continued the medicine for the next 15 days. After 15 days, 75% of lesions were reduced. During the next visit, surprisingly it was completely cured.



Fig-1, 2: Before the treatment of both soles



Fig-3: After 15 days (Both soles)



Fig-4: After 30 days (Both soles)



Fig-5, 6: After 40 days (Right and left sole) without Plantar Psoriasis

CONCLUSION

This single case study result concluded that the Siddha formulation (*Kilinjil mezhugu*) is more effective for the treatment of plantar psoriasis. To confirm its therapeutic potency, further randomized controlled clinical trials to be conducted in the future. The chronic inflammatory and autoimmune nature of psoriasis needs a Siddha formulation (*Kilinjil mezhugu*) treatment approach for its comprehensive cure. In the present case, the Siddha formulation treatment showed promising results in plantar psoriasis. No adverse events were noted with the treatment. Altogether, Siddha formulation treatment can be an effective solution for plantar psoriasis.

REFERENCES

1. Joglekar, N., Datye, A., & Pawaskar, M. (2020). A case study of Plantar Psoriasis. *Journal of Ayurveda and Integrated Medical Sciences*, 5(01), 259-263.
2. Farley, E., Masrour, S., McKey, J., & Menter, A. (2009). Palmoplantar psoriasis: a phenotypical and clinical review with introduction of a new quality-of-life assessment tool. *Journal of the American Academy of Dermatology*, 60(6), 1024-1031.
3. World Health Organization. ((2016)Global report . on psoriasis
4. Khandpur, S., Singhal, V., Sharma, V.K. (2011). Palmoplantar involvement in psoriasis: a clinical study. *Indian J Dermatol Venereol Leprol*, 77(5), 625.
5. Dr. R. Thiyagarajan, Gunapadham Thadhu Jeeva Vaguppu 2 & 3, Indian Medicine and Homeopathy, Ninth Edition, 2016.
6. Dr. T. Thirunarayanan. (2016).Introduction to siddha medicine, centre for traditional medicine & research: Publication: 2016.
7. Dr. G. Senthilvel, Dr. J. Jeyavenkatesh. (2017). A Complete Manual on Siddha External Therapies, Shanlax Publications, Madurai.
8. Dr. R. Thiyagarajan L, I, M. (2008). Siddha Maruthuvam Sirappu, Indian medicine and Homeopathy, Ninth edition 2008.