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# Management of Allergic Drug Reaction converted into

# Visarpa – A case study

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#### **Abstract:**

Physical appearance is something that is related to psychological stress. Skin is major organ which remains as a presentable material in front of the world which also defines any individuality. Around 20 – 30 % Population suffer from skin ailments. According to study the incidence rate of herpes zoster was highest i.e. 56% at 20 to 40 years of age and from lower socioeconomic strata. These problems vary from age, locality and season. Visarpa is one of the major skin disease which is explained in detail apart from Kusthavyadhi by every Acharya This imparts the severity and significance disease. of Visarpa characterized by Aashu - anunnatashopha, Daha, Jwara, Vedana and nature of pidika is Agnidagdagdavat. described disorder vary greatly in symptoms and

severity. so they can be temporary or permanent. they can be situational or genetic, minor or mortal. thus, visarpa is one which if mismanaged can lead to life threatening situation. Twak Roga are Chirkari and so recurrent relapse occurs easily, visarpa is bahudoshaj vyadhi.

**Keywords** – Visarpa, ADR, Herpes Zoster

#### Introduction

Physical appearance is something that is related to psychological stress. Skin is major organ which remains as a presentable material in front of the world which also defines any individuality. Around  $20-30\,\%$  Population suffer from skin ailments. According to study the incidence rate of herpes zoster was highest i.e. 56% at 20 to 40 years of age and from lower

 socioeconomic strata <sup>[1]</sup>. These problems vary from age, locality and season.

Visarpa is one of the major skin disease which is explained in detail apart from Kusthavyadhi by every Acharya. This imparts the severity and significance of disease. Visarpa is characterized by Aashu – anunnatashopha, Daha, Jwara, Vedana and nature of pidika is described as Agnidagdagdavat. Agnidagdagdavat.

## **Case Report**

- Name XYZ
- Age − 32
- Gender Male
- Residence Mumbai

History of present illness: A male patient of 32 years old, coming from muslim community and presently living in Mumbai, Maharashtra had to severe acute allopatic drug reaction, was complaining ubhay hastanguli pradeshi, janupradeshi, padapradeshi, daha(severe burning sensation) and araktavarni twakvaivarnya (reddish skin Discolouration)and shoth (oedema)and Toda(prickindg type of pain), jwara (fever) since 1 days

- Past medical history: Same complaints before 3 years
- Past surgical History No any relevant surgical history
- Family History- not relevant
- Personal history: Aahar- intake of non-vegetarian food, oily, junk foods.
- On examination
- General –patient was pitta vataj

- Vital signs –pulse -112/min, BP 100/60 mm of Hg
- Local examination –
- The lesions occurred in clusters, red rashes.
- Area over both flanks and mouth region
- On palpation no lymphadenopathy
- Colour Reddish
- Odour no specific odor
- Secretion absent
- Pain present
- Burning sensation present
- Tendency to bleed No
- Loss of sensation No
- Astavidhapariksha
- Nadi (pulse) 112/min
- Mala (stool) vibandha
- Mutra (Urine) samyaka 4-5 times //day
- Jihva (tongue) sama
- Sparsha ushna
- Shabda samyaka
- Copy n. Druk) samyaka
  - Systemic examination:
  - RS AEBE clear B/L
  - CVS S1 S2 heard, no added sounds
  - CNS conscious well oriented, superficial reflexes intact
  - GIT Bowel movements irregular, tongue coated, per abdomen non tender, hard

## Samprapti Ghatak

- Dosha Pitta, Rakta, Kapha, Vata
- Dushya Twak/Rasa, Rakta, Mamsa, Ambu
- Agni Mandya
- Srotas Rasavaha, Raktavaha,
   Mamsavaha
- Srotodushti sanga, vimarga- gaman

- Ama sama
- Vyaktasthana ubhay hasta pad pradeshi, janupradeshi Treatment given

#### Shaman chikitsa

- 1. Shunthivivarjit shadangodak 100 ml BD
- 2. Shatadhout ghrut LA on lesions.
- 3. Sanshamani vati 250 mg 4 BD
- 4. Chandrakala vati 250 mg 2TDS
- 5. Sariva ,Gokshur, Chandan churna Each 1 gm TDS
- 6. Avipattikar churna 3 gm BD
- 7. Valasidha jala

# **Improvement**

Discolouration of skin, burning sensation, pain, fewer decreased.

### **Discussion**

Skin disorder vary greatly in symptoms and severity. so they can be temporary or permanent. they can be situational or genetic, minor or mortal thus, visarpa is one which if mismanaged can lead to life threatening situation. Twak Roga are Chirkari and so recurrent relapse occurs easily visarpa is bahudoshaj vyadhi.

- Shunthivivarjit shandgodak It is pitashamak and reduces fever.
- Shatadhout ghrut : Pitashamak , dahasamnarth.
- Shanshamani vati : It contain guduchi and it is tiktarasatmak ,aampachana so reduces jwar .

- Chandrakala vati Its acts on pittaj vyadhi hence beneficial in all kind of daha.<sup>[4]</sup>
- Sariva, gokshur, chandan churna -Sariva raktashodhak ,gokshur pittashamak ,chandan pitashamak [5]
- Avipattikar churna It acts as a mrudu virechak<sup>[6]</sup>
- Valasiddha jala Pitashamak

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## Before treatment



After treatment





ARCI Research C







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