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Alimentary Interventions in Treatment of Ailments of Integumentary System

Dr. Nikhila B Hiremath* M.D. (Swasthavritta), YIC, (Ph.D)

Sri Sri College of Ayurvedic science & Research, Bengaluru, Karnataka, India

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*Corresponding author

Dr. Nikhila B Hiremath

Email:

hiremath.nikhila6@gmail.com

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Abstract: Psoriasis is a common chronic, recurrent, immune mediated disease of the skin and joints. It can have a significant negative impact on the physical, emotional and psychosocial wellbeing of affected patients. Many Ayurvedic texts have explained skin diseases, which resembles Psoriasis. According these references, Psoriasis can be considered as the vitiation of Vata and Kapha. The "wrong diet" is the major link for disease manifestation. Hence elimination of this 'wrong diet' & implementation of corrective diet plays a major role in breaking the 'Samprapti'. The Dietary interventions for Psoriasis or any skin disease can have the following seven components- *Nidana Parivarjana, Avashta anusara ahara sevana, Matra consideration, avoiding unwholesome diet, observing proper mental status during food intake, Prescription of specific disease related diet*, and very important one- *Education about Aahara*. The article intends to uplift the importance of holistic approach towards diet prescription rather than only disease specific diet.

Keywords: Psoriasis, Skin diseases, Dietary interventions.

INTRODUCTION

Psoriasis is a common chronic, recurrent, immune mediated disease of the skin and joints. It can have a significant negative impact on the physical, emotional and psychosocial wellbeing of affected patients.

Psoriasis is found worldwide but has varied prevalence rates. It has a strong genetic component but environmental factors can play an important role in the presentation of disease. It is caused by the immune system being mistakenly "triggered", resulting in skin cells being produced too quickly.

Many Ayurvedic texts have explained skin diseases, which resembles Psoriasis. According these references, Psoriasis can be considered as the vitiation of Vata and Kapha. Accumulation of low potency poisons (Dooshi visha) & toxins are responsible for pathological changes taking place in the system. Irregular food habits, consumption of foodstuffs that are contra-indicated be consumed together (Eg: milk with fish), excessive intake of certain incompatible food items and other factors can activate the pathogenesis. The "wrong diet" is the major link for disease manifestation, hence elimination of this 'wrong diet' & implementation of corrective diet plays a major role in breaking the 'Samprapti'.

Epidemiology

Psoriasis is found worldwide but the prevalence varies among different ethnic groups. The worldwide incidence and prevalence of psoriasis is poorly understood. In the USA, approximately 2% of the population is affected. High rates of psoriasis have been reported in people of the Faroe Islands, where one study found 2.8% of the population to be affected. The

prevalence of psoriasis is low in certain ethnic groups such as the Japanese, and may be absent in aboriginal Australians and Indians from South America.

Psoriasis can present at any age and has been reported at birth and in older people of advanced age. Accurate determination of the age of onset of psoriasis is problematic as data based on patient recall can be inaccurate; the mean age of onset for the first presentation of psoriasis can range from 15 to 20 years of age, with a second peak occurring at 55–60 years[1].

Etiology

The molecular genetic basis of psoriasis is complex with evidence that multiple genes are involved. Whereas the existence of a genetic component in psoriasis is certain, the exact locations of the genes involved remains to be definitely determined.

The cause of psoriasis is not fully understood. Abnormal keratin formation, epidermal proliferation, activation of the immune system and hereditary factors appear to play roles in the pathogenesis of the disease.

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Psoriasis occurs more frequently in some families. The risk of a child developing psoriasis is 41% if both parents are affected with psoriasis, 14% if one parent is affected and 6% if one sibling is affected.

Both external and systemic factors can trigger psoriasis in genetically predisposed individuals. In about a quarter of people with psoriasis, lesions are provoked by injury to the skin. Psoriatic lesions can also be induced by sunburn and skin diseases. Psychogenic stress also can trigger psoriasis with initial presentations of the disease as well as exacerbations being seen a few weeks to months after a stressful event. In up to 45% of cases, bacterial infections may induce or aggravate psoriasis.

Epidemiological studies identified several modifiable risk factors that may predispose individuals to developing psoriasis or exacerbate pre-existing disease. These include smoking, obesity, alcohol consumption, diet, infections, medications and stressful life events.¹

Psoriasis & Diet

Aaharaja – Nidana [2, 3]

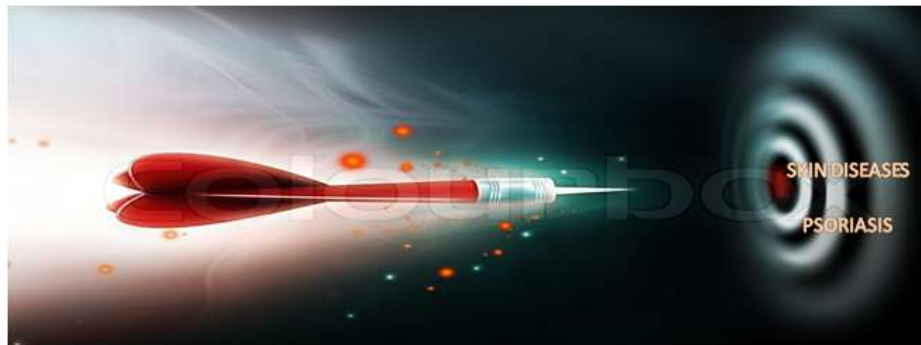
The dietary Nidanas among the general Nidanas of all types of skin diseases are stated by Charaka Acharya (in Nidana & Chikitsa sthana) are follows:

- Krama-Vipareeta indulgence in sheeta & ushna articles, & Consumption of Apatarpaka & Santarpaka food.

- Frequent & excessive use of Madhu, Phanita, Matsya, Lakucha, Moolaka & Kakamachi, & also during indigestion.
- Consumption of Chilichima Matsya along with milk.
- Excessive indulgence in Ku-dhanyas (Kshudraanna)
- Also excessive consumption of Ksheera, dadhi, takra, kola, kulattha, masha, & sneha of Atasi & kusumbha.
- Viruddha Anna-pana
- Excessive use of Drava, Snigdha & Guru aahara
- Improper use of Sheeta, Ushna & aahara having 'Langhana' qualities.
- Drinking cold water when compromised by extreme emotions.
- Consuming under cooked food
- Adhyashan.
- Excessive consumption of newly harvested grains, curd, fish, sour & salty food.
- Also over use of Masha, Moolaka, Pishtanna, tila, Milk & Guda.

The seven dravyas responsible for the manifestation of any skin diseases are stated in this shloka: the tri-doshas, Twak, Rakta, Mamsa & Lasika, when the three doshas vitiate the 4 dushyas, the disease initiates. *The wrong diet plays an important role in vitiating the doshas, as well as creating an environment convenient to vitiate the dhatus.*

The Dietary interventions in management of Psoriasis



While planning for diet the following rules should be followed:

1. 'Nidana Parivarjana' [4] always holds the 1st place in the line of treatment.

Eliciting the aharaja nidanas in the patient. The physician should take a detailed history of patient's diet & advice to avoid the Nidanas if any.

2. 'Avashta anusara' While planning the treatment for a disease, it is stated that the Physician should consider the strength, & temperament of the patient & the state of his digestion as well as seat of affliction, the physical features of the country, the then prevailing season of the year, *should prescribe a diet which he think is the most proper & suitable for the requirements of the case* [5,6].
3. 'Matra' Another rule while prescribing any diet is if given without proper consideration, even milk acts as Visha. & on the other hand poison also acts as medicine if administered properly. Hence *the food should be prescribed with all possible consideration* [7].
4. *Unwholesome diet*: Intake of unwholesome food is responsible for the causation of many diseases including skin diseases [8].

One good example for this is the combination of fish & milk. Both have sweet taste, but due to the contradiction of their potency (fish-hot, milk-cold) they vitiate the blood & obstruct the channel of circulation, & hence leading to manifestation of a disease.

Drugs & diets when dislodge the various doshas but do not expel them out of the body are to be regarded as unwholesome.

Further he emphasizes on consideration of Desha, Kala, Agni, Matra, Satmya, Dosha, Samskara, Virya, Koshta, Avastha, Krama, Parihara & Upachara, Paka & Samyoga, Hritsapat, Sampat, & Vidhi, while assessing the unwholesomeness of a diet.

5. *Mental status*: Chandogya Upnishada states that nutrition of mind is depending upon diet. The one-third part of food is utilized by the mind. The bad quality food may also vitiate mind, and vice versa. If the mind is disturbed, the digestion will further get disturbed.

Prescription of specific disease related diet

The specific diet to be for the Psoriasis (Pathya) is as follows [9]:

- Puraana (one year old) Dhanyas like Yava, Godhuma, Shali, Mudga, Aadhaki, Masoora. Also madhu.

- Jangala Mamsa
- Shaka of Palasha phala, vetrankura, patola, bruhati, kakamachi, nimba, lashuna, hila-mochika, punarnava, leaves of meshashrunji & chakramarda.
- Phala of bhallataka, & tala, khadira sara, twak of chitraka, triphala, jatiphala, nagakeshara, kumkuma. Koshataki & karanja phala
- Purana ghruta, tila, sarshapa, nimba & Ingudi taila
- Laghu anna.

Education about Aahara [10]

Awareness about the basic methodology of consumption of food vidhi-vidhanas, do's & don'ts about the compatibilities & unwholesome food should be created in public so that the diseases which arise due to such lack of knowledge can be prevented.

CONCLUSIONS

- Psoriasis is a chronic, multifactorial disorder which involves the interplay between a myriad of genetic and environmental risk factors.
- In addition to affecting the skin, psoriasis is associated with physical and emotional comorbidities which have a negative impact on the quality of life of the affected patients.
- Behavior modification and the use of preventative health care is a must.
- Patients need to be screened for Aaharaja nidanas & accordingly corrected.
- The prescription of Pathya should be made mandatory.
- Patients should be educated about the importance of implementing the vidhividhanas in their day to day life.

REFERENCES

1. Langley, R. G. B., Krueger, G. G., & Griffiths, C. E. M. (2005). Psoriasis: epidemiology, clinical features, and quality of life. *Annals of the rheumatic diseases*, 64(suppl 2), ii18-ii23.
2. Vaidya. J. (2001). Acharya Charaka Samhita 5th Ed., Varanasi: Chaukhamba Sanskrit Sansthan. P: 216
3. Vaidya. (2001). J. (2001). Acharya Charaka Samhita 5th Ed., Varanasi: Chaukhamba Sanskrit Sansthan. P: 450
4. Acharya J. (2002). Sushruta Samhita Of Susruta 7th Ed., Varanasi: Chaukhamba Orientalia. P 597
5. Vaidya. J. (2001). Acharya Charaka Samhita 5th Ed., Varanasi: Chaukhamba Sanskrit Sansthan. P:150.
6. Acharya J. (2002). Sushruta Samhita Of Susruta 7th Ed., Varanasi: Chaukhamba Orientalia. P Su. Su 20/9
7. Acharya J. (2002). Sushruta Samhita Of Susruta 7th Ed., Varanasi: Chaukhamba Orientalia. P su.su 20

8. Vaidya. Jadavji Trikamji. (2001). Acharya Charaka Samhita 5th Ed., Varanasi: Chaukhamba Sanskrit Sansthana. P:150
9. Vaidya. (2001). Jadavji Trikamji, Acharya Charaka Samhita 5th Ed., Varanasi: Chaukhamba Sanskrit Sansthana. P:450
10. Vaidya. (2001). Jadavji Trikamji, Acharya Charaka Samhita 5th Ed., Varanasi: Chaukhamba Sanskrit Sansthana. P:Ch. V.