International Journal of Pharmaceutical Research and Applications
Volume 10, Issue 6 Nov - Dec 2025, pp: 95-97 www.ijprajournal.com ISSN: 2456-4494

Ayurvedic Management of Vicharchika with Special Reference to Jalaukavacharan – A Case Study

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Date of Submission: 01-11-2025 Date of Acceptance: 10-11-2025

ABSTRACT
Vicharchika, a type of Kushtha, is a chronic skin disorder that can be correlated with eczema in modern terms. It is characterized by Kandu (itching), Srava (oozing), Pidaka (eruptions), and Shyava varna (discoloration) of the skin. Conventional management often provides symptomatic relief but with high recurrence rates. Ayurveda offers a holistic approach addressing the root cause through Shodhana and Shamana therapies. This paper presents a case study highlighting the efficacy of Jalaukavacharan (leech therapy) as part of an integrated Ayurvedic management protocol in the successful treatment of Vicharchika.

Key words – Vicharchika, Kushtha, Jalaukavacharana, Eczema.

I. INTRODUCTION

Skin is the largest sense organ of the body. In Ayurveda, all skin diseases are included in Kushtharoga. Kushtha is mainly of two types – Mahakushtha and Kshudrakushthahaving seven and eleven subtypes respectively. [1]Kushtha is classified as one of the 'AshtaMahagada'.[2]and also Aacharya Charaka said 'KushthamDirgharoganam'[3] i.e., skin diseases are the longest duration disorders.

According to Ayurvedic classics, Vicharchika is aKshudrakusthawith symptoms like Kandu, Pidaka, Srava, and Rukshata. Excessive consumption of Katu, Amla, Lavana rasa, incompatible food (Viruddhaahara), and improper lifestyle lead to vitiation of Tridosha, especially Kapha and Pitta. Vitiated Kapha and Pitta doshas along with Rakta dhatu dushtimanifest as Vicharchika. Treatment principle involves Shodhana (especially Raktamokshana) and Shamana with Rakta shodhaka and Kaphapittahara medicines. Jalokavacharan is described as one of the best Raktamokshana methods for Raktadushtijanya conditions like Vicharchika.

Vicharchika can be corelated with the Eczema. Eczema, clinically known as Atopic Dermatitis, is a chronic, relapsing inflammatory skin disease marked by pruritus, erythema, vesiculation, oozing, and lichenification. It results from a complex interaction of genetic, immunological, and environmental factors, leading to epidermal barrier dysfunction and immune dysregulation. Immunopathologically, it shows a Th2-dominant response with raised serum IgE levels and eosinophilia.

Nidanpanchaka of Vicharchika–
Nidana[4] –
1.Viruddhaahar
2.Kledakarahar
3.Ajeernaadhyashana
4.Chardiveg dharana
5.Ativyayam, Ativyavaya,Atisantapa
6.Sheet -Ushna vyatyasatprayog
7.Dadhi, Matsya, Mash,Til, Lavana,etcsevana.

Poorvarupa[5] –
1.Kandu (Itching)
2.rashes, discolouration
3.Loss of sensation
4.Excessive or piercing pain in wound.

Roop –
According to Aacharya Charaka, Vicharchikais characterized by pidaka, kandu, srava (excessive discharge) and Shyava varna(discoloration).[6]
Samprapti (pathogenesis of Vicharchika)-

Vicharchikais described as a TridoshajaVyadhi with predominance of Kapha dosha.[7] The pathogenesis begins with the indulgence in Nidana sevana, such as consumption of incompatible, heavy, oily, sour, and salty foods, irregular dietary habits, day sleep, and suppression of natural urges. These factors lead to the vitiation of Tridoshas—Vata, Pitta, and Kapha. The vitiated doshas circulate through the body and localize in the Twak(skin), Rakta (blood), Mamsa (muscle), and Lasika (lymph), which are the Dushyas involved in this disease.[8]

Kapha dosha produces itching (kandu), oozing (picchilasrava), and swelling (utsedha), while Pitta dosha manifests as redness (raga), burning sensation (daha), and discharge (srava). Vata dosha contributes to dryness (rukshata),

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roughness (kharata), and blackish discoloration (shyava varna). The Rasavahaand RaktavahaSrotas (micro-channels of plasma and blood circulation) become obstructed due to the accumulation of morbid doshas, leading to Srotorodha (channel blockage) and improper nourishment of the skin tissue. This results in inflammatory changes and altered skin texture.

Line of treatment –
Shodhana Chikitsa –
Vaman
Virechan
Raktamokshana
For vata predominant kushtha, Ghee is given internally. For pitta predominant kushtha, virechan and raktamokshana and for kapha predominant kushtha, vamana is given. [9]
Shaman Chikitsa-
Shaman Aushadhi (internal medicine)
Lepa chikitsa.
Pathya.

II. AIM AND OBJECTIVES

• To assess the efficacy of Jalaukavacharan in the management of Vicharchika.
• To evaluate improvement in classical symptoms like Kandu, Srava, Pidaka, and Rukshata.

III. CASE REPORT

Name: XYZ
Age/Sex: 35-year-old male
Occupation: Office worker
Duration of illness: 1Years 6 months
Complaints: Severe itching, oozing lesions, redness, and scaling over right leg above ankle joint.
Past history: No H/O any major illness, No H/O any surgical illness.
Marital status: Married
Family history: No H/O any major illness.
Samanya Pariksha –
Nadi: Kaphavata , 80/min
Mala: 2times/day
Mutra: 4-5 times/day
Jivha: Sama
Sparsha: Anushna
Agni: Madhyam
Prakruti: Pittapradhanavatanubandhi
Nidra:Samyaka
Blood pressure: 110/80
Clinical Findings:
Kandu – Severe
Srava – Moderate
Pidaka – Present
Rukshata – Moderate
Vaivarnyata– Present

Diagnosis

Ayurvedic Diagnosis: Vicharchika(Kaphapittaja Kustha)
Modern Correlation: Eczema

Treatment Protocol

1. Jalaukavacharan(Leech Therapy):
Site cleaned with lukewarm water. Jalauka applied to lesion areas. Allowed to suck for 20–30 minutes until it detaches naturally. Site cleaned with Haridra churna and dressed with Nimba taila. Frequency: Once a week for 4 weeks.
2. Shamana Chikitsa:
• Mahamanjisthadikwatha – 20 ml twice daily before food
• Arogyavardhinivati – 250 mg twice daily after food
• Gandhakrasayan – 250 mg twice daily
• External application – Local application of Yashtimadhughruta.

3. Pathya–Apathya:
• Pathya: Green leafy vegetables, old rice, bottle gourd, bitter gourd, lukewarm water
• Apathya: Curd, fermented food, seafood, sour and spicy items, day sleep.

IV. RESULTS

After 4 weeks: Itching (Kandu) reduced by 90%, oozing (Srava) completely stopped, redness and lesions reduced markedly, and no recurrence noted during 1-month follow-up.

V. DISCUSSION

Vicharchika is primarily Raktadushtijanyavyadhiwith dominanace of Kapha dosha. Jalokavacharan helps remove vitiated Rakta, thereby reducing inflammation and itching. Manjisthadikwatha and Arogyavardhinivati further purify blood and correct Pitta-Kaphadoshas. The combination of Shodhana and Shamana ensures long-lasting relief.

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VI. CONCLUSION

This case demonstrates that Ayurvedic management of Vicharchikawith Jalaukavacharan and appropriate internal medication offers a safe and effective alternative for chronic skin conditions like Vicharchika. Regular follow-up and dietary regulation help prevent recurrence.

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