A Systemic Review of Raktamokshana In Vicharchika (Eczema).

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Abstract
According to Ayurvedic scriptures, skin is one of the five 'Gyanindriyas' (sensory organs). It is a very advanced organ that is essential to the body’s overall functioning. Eczema represents for around 30% of all skin illnesses. It is the second most prevalent cause of function loss. Vicharchika is a clinical entity in which the lesion is covered by Shyava coloured pidika (dark discoloured skin eruption), kandu (profuse itching), and ruja (pain). It can affect the entire body and can be moist or dry. Vicharchika is easily associated with Eczema when compared to current illness. Erythema or skin reddening, is the initial symptom. When these vesicles or papules break down, oozing from the afflicted lesional skin begins. If the problem is not treated, the skin will thicken and scales may appear. Despite significant advances in dermatology and the introduction of powerful antibiotics, antifungal and steroids, Eczema continues to defy dermatologists best efforts. Shodhana therapy is an Ayurvedic specialty that serves as a pre-treatment procedure for more advanced treatment. The root cause of illnesses is removed from the primary site of lesion in this method, and so the major cause of disease is destroyed. Raktamokshana is an essential parasurgical method of bloodletting that Acharya Sushruta put into the fundamental detoxification therapy plan. The meta-analysis of various Raktamokshana procedures is primarily intended to investigate their efficacy and safety in the treatment of various disorders. Only two trials looked at the modified Shringa technique, namely Siravedha and Jaoukavacharanara, which are commonly used in practice for various skin and musculoskeletal diseases. There has been no clinical investigation to show the effect of additional Raktamokshana procedures or alterations in diverse clinical entities. Based on the basic principles of Ayurveda and physiological activities, the efficacy of three forms of Raktamokshana, namely Siravedha, Jalouka, and Shringa, may be supported. This study needs the performance of future scientific multi-centric research investigations with a big sample size in order to pursue these results and increase their global acceptability.

Aims: The primary goal of this article is to consolidate scientific evidence for Raktamokshana’s use in vicharchika (eczema).

Objectives: Review the use of several Raktamokshana modes in Vicharchika (eczema).

Key words:- Raktamokshana is one among the Pancha Shodhana i.e. Vamana, Virechana, Basti, Shirovirechana and Raktamokshana. It is one among the unique para-surgical procedure mentioned for the management of disorders caused due to vitiation of Raka.

INTRODUCTION:-

Vicharchika (Eczema) is a very rare disease that has been mentioned in ancient science among the Kushtha (Skin Disease). Though Vicharchika is not a life-threatening condition, its appearance, excessive itching, disturbance of routine, and susceptibility to chronicity make it a source of concern for patients. Vicharchika is referenced in Ayurvedic texts1 under the name Kshudra Kushtha and is also regarded as a curable condition, but the recurring nature of this disease causes a lot of stress for patients and is also challenging for physicians. According to Charaka pidika, kandu, and srava describe Vicharchika (pro-fuse discharge)2. The symptoms are rukshata (dry skin) with kandu (intense itching) and rajjha (marked linings), according to Sushruta the Father of Surgery.3 Eczema, which is described as a non-contagious inflammation of the skin marked by erythema, scaling, oedema, vesiculation, and leaking, has a similar clinical appearance in modern dermatology.4 Particularly at the site of lesion, there is blockage of sweat glands which creates Asvedanam (loss of sweating) or hyperactivity of sweat glands which creates Atisvedanam (excessive sweating). Modern medicine treats eczema with corticosteroids, antifungal/antiseptics, however these treatments only provide symptomatic relief and have certain adverse effects such as liver and renal failure, bone marrow depletion, and so on. Long-term usage of topical steroids can cause the skin to acquire permanent stretch marks (striae), bruising, and colour changes. If the patient has dark skin, the changes will be more visible.5 Letting out impure blood from the body is known as Raktamokshan. Mokshana: Liberating emancipating shedding or causing to flow. Synonyms of Raktha mokshana: Asravirsavvana, Shomitha mokshana, Raktha nirharana, Raktha sravana and Raktha harana. Raktamokshana is the ideal treatment when the Doshas get vitiated by Rakta. Raktamokshana is an important line of management for Rakta Pradoshaja Vikaras. The blood which becomes pure by these is responsible for endowment of strength, complexion, happiness and a long life. Siravyadha ,
a type of Raktamokshana is considered as half of the treatment in Shalya Tantra like that of Basti in Kaya Chikitsa. The diseases which are not cured by Snehadi kriya or Lepanadi Kriya are cured instantaneously by Siravyadhya. One should know about Rakta Doshanusara Rakta Dushti Lakshana:

<table>
<thead>
<tr>
<th>S.N</th>
<th>Vata</th>
<th>Pitta</th>
<th>Kapha</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Phenila</td>
<td>Neela</td>
<td>Gairikodaka pratikasha</td>
</tr>
<tr>
<td>2.</td>
<td>Aruna</td>
<td>Peeta</td>
<td>Snigdha</td>
</tr>
<tr>
<td>3.</td>
<td>Krushna</td>
<td>Harita</td>
<td>Sheeta</td>
</tr>
<tr>
<td>4.</td>
<td>Parusha</td>
<td>Shyava</td>
<td>Nahala</td>
</tr>
<tr>
<td>5.</td>
<td>Tanu</td>
<td>Visra</td>
<td>Picchila</td>
</tr>
<tr>
<td>6.</td>
<td>Sheegra Gama</td>
<td>Anishta pipilika, Makshika</td>
<td>Chirasravi</td>
</tr>
<tr>
<td>7.</td>
<td>Sheegra skanda</td>
<td>Askandi</td>
<td>Mansa peshi prabha</td>
</tr>
</tbody>
</table>

Samprapthi of Raktavaha Srotvikara

Probable Samprapti of Vicharchika -

Disease Vicharchika is brought on by eating habits that are unhealthy and unbalanced (viruddha ahaar-vihar). Viruddha ahaar include the consumption of fish with milk, mulak and lasuna with ksheera, excessive alcohol consumption with milk, Gramya, audaka, and anupamamsa with milk, and the consumption of sour-tasting articles with milk, as well as viruddha vihaar such as sudden diving into cold water or drinking cold water after fear, exhaustion, and removal from sunlight doing physical exercise and sun bath after heavy meal, suppression of urges of emesis. All these factors lead to vitiation of three doshas moving in the blood.

Lakshana (Symptoms) Table 1: Correlation of symptoms of Vicharchika and Eczema

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Lakshanain Vicharchika</th>
<th>In Eczema</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Kandu</td>
<td>Itching</td>
</tr>
<tr>
<td>2.</td>
<td>Atiruja</td>
<td>Pain</td>
</tr>
<tr>
<td>3.</td>
<td>Daah</td>
<td>Burning sensation</td>
</tr>
<tr>
<td>4.</td>
<td>Shyava pidika</td>
<td>Skin eruption with dark discolouration</td>
</tr>
<tr>
<td>5.</td>
<td>Bahusrava</td>
<td>Profuse discharge</td>
</tr>
<tr>
<td>6.</td>
<td>Raja</td>
<td>Marked linings</td>
</tr>
<tr>
<td>7.</td>
<td>Rakshata</td>
<td>Dryness</td>
</tr>
</tbody>
</table>

The lesion of Vicharchika, according to Acharya Sushruta, is Raksha, hence it becomes Raksha Vicharchika (dry Eczema), but others have indicated either Srava or Lasika in lesions termed ardra Vicharchika (wet type of Eczema). Vicharchika is a Sadhya Kushtha type.

Eczema is a treatable disorder, according to modern science, but treatment is hampered in tropical regions by heat, humidity, and the prevalence of unhygienic conditions.

Management

In Ayurveda, two forms of therapy, Shodhana and Shaman, are given top priority, especially for chronic and repeated ailments. The most significant step for Bahudoshjavyadhidi is Shodhana treatment. If doshas are drained by shaman therapy, there is a possibility they will be re-provoked, but if they are eradicated through Shodhana therapy, there is no chance they will be re-provoked.

Vidahi Anmapana

Snigdha, Drava Ahara

Agnimandhya

Further aggravation of Pitta

Entering into Raktavaha Srotas

Causes Dushti of Srotas leading to Vikara

Nidanasevana

Tridosha Prakopa

Reaches to Twaka, Rakta, Mamsa, Ambu and produce Shaihthilya Further vitiation of Doshas occurs

These Doshas gets enlodged at the place of Dhatu shaihthilya

Produce Kushtha

Vidah Annapana

Snigdhodra Ahara

Agnimandhya

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Produce Kushtha
JALAVUKAVACHARANA

Jalaukavacharana is a method of Rakthamokshana. It can be applied even to Parama Sukumaras as it is a safe and less complicated process. “The physician who has detailed knowledge about Jalaukas, their habitat, their method of collection, varieties, storage and method of application is successful in treating any disease amenable to them.”

External Characteristics
Shape & Size
- Leeches are little, squishy, vermiform worm-like invertebrates.
- Flattened dorso-ventrally, elongated.
- 6 longitudinal reddish or brown stripes, almost tubular when constricted and ribbon-shaped when expanded > 7 to 15 cm in length.
- At the back, it’s the widest, and at the front, it’s the narrowest.
- The ventral surface is more or less plane, whereas the dorsal surface is somewhat convex.
- The transverse outline resembles an ellipse.
- The ventral surface is orange, yellow, or black and yellow, while the dorsal surface is vivid olive green.
- On the dorsal side of the body, there are black stripe markings on the median longitudinal.
- Suckers: Suckers are hollow muscular organs on each end of the body.

(1) Anterior Sucker- (Oral sucker) (Cephalic sucker): It is made up of three parts: a cup-like hollow, a pre-oral chamber, and the mouth. It has three jaws with severely serrated edges that are utilized like circular saws, and roughly 100 horny teeth on them that are used to incise the host. Sucks blood with this end. After sucking inverted Y shaped mark at the site is seen.
(2) Posterior Sucker- (Anal sucker): the posterior sucker is mainly used for leverage and is also useful for the purpose of locomotion.

SALIVA’S CHEMICAL COMPONENTS

The leech generates a variety of essential compounds, including an anticoagulant, a local vasodilator, and a local anaesthetic, such as Hirudin, Hyaluronidas, and others, that contribute to the bite's unique properties. Anti-thrombin activity was discovered to be preserved in hungry leech in a research. Leeches can be used to draw blood from regions where tissue has been transplanted or reattached. Jalaukas were found in numerous places of ancient India, according to the Sushruta Samhita.

- Yavana (Turka sthana)
- Pandya (South region country- Deccan)
- Sahya (Tract of land traversed by the Ghat mountains)
- Paataana 3 (Modern time origination. of Mathura) etc. are the places for leech

Classesifications of Jalauka

Features of Poisonous Jalauka

Krishna-Anjana choorna varna i.e. black in colour like Kajjali, and has a broad head (mahamastaka) Karbura- Ayata like Varmy fish (Sarpakara), over the udara a slight elevation or depression is seen. Atagarda - Hairy, big in size (Mahaparshva), has a black mouth.

Indrayudha- The body is marked with various coloured ridges like an Indrayudha (Rainbow).
Samudrika - Blackish yellow with dotted skin and resembles colour of many flowers, Dhavala bindhu chitra (flower like white spots over body).
Gochandana- Narrow mouth (Anumukhi), Marked by bifurcating lines at the lower end, like the scrotal sac of a bull.
Features of Non Poisonous Jalauka

Kapila - Colour like Manahshila (real gar) at the sides, the dorsal surface is slimy (Snigdha) and coloured like a Mudga pulse (Greenish shade).
Pingala- Colour Reddish or reddish brown, Shape - Round, Locomotion - fast moving
Shankhumukhi- Colour- Blackish red like that of the liver, Sucks blood fast, has sharp and long suckers.
Mooshika- Colour & Shape - like that of Rat, has a foul smelling body.
Pundareekamukhi- Colour - like Mudga (greenish black), its mouth resembles the fully bloomed lotus.
Savarka-Savarka is one which is marked with impressions like glossy lotus leaves, measures 18 Angulas in length. Its medicinal use is advised in lower animals.

METHOD OF APPLICATION JALAVUKAVACHARANA VIDHI:

It is studied under three headings

Poorna Karma
Pradhana Karma
Paschata Karma

Poorna Karma:
(i) Atra siddhata (Preparation of patient)
(ii) Jalauka siddhata
(iii) Sambhara sangraha

Preparation of Patient

The vital data of Yogya patients is verified to ensure that they are fit for the operation. The part of the body where Jalaukavacharana is to be performed is massaged with mud, cow dung, or gauze to dry the damaged region. This helps Jalaukas to stick easily.

Preparation of Jalauka

A Jalauka of good quality is taken and kept in Rajani & Sarshapa kalkodaka. By this procedure Jalaukas become active and get rid of exhaustion.
Collection of Required Materials:- Shastra, Shalaka, Pichu, Plotha, Patra, Patra, Saindhava, Taila, Kashaya and Alepana Kalka are to be collected.

**Pradhana Karma:**
The patient is placed in a supine posture and forced to sit or lay down. The Jalauka is applied to a previously dry site. The Jalauka bites the skin and suckes the blood. A drop of milk or blood is lost on the surface or a small prick is created if the Jalauka does not suck or bite the skin. Regardless, if the Jalauka does not suck, a new Jalauka is selected for application. As soon as the Jalauka begins sucking blood, wrap it with moist white gauze, leaving the area around its face exposed. When its face resembles a horse's hoof and it rises. We can see that it has started sucking on its neck.

We know it has started sucking pure blood when the patient experiences itching and pain at the location of Jalaukaavacharana. Then it should be taken away. If the Jalauka refuses to quit sucking because it craves blood, it is killed by placing powdered rock salt or Haridra powder in its mouth.

If Dusta Rakta is still there, it should be induced to flow out by applying a turmeric, jaggery, and honey mixture to the bite site. This is done because Dusta Rakta is mobilised from its Ashaya and travels to the Dansha Sihana, where it stagnates. It may result in the production of pus.

**Paschat Karma**

**Patient Care:** After the Jalauka has been removed, the wound produced by the Jalauka is coated with Shatadouta Ghrita and securely wrapped.

**Paschat Karma for Jalauka after Jalaukavacharana:** When the Jalauka is no longer sucking, a paste of Tandulakana should be applied to its body, and a mixture of Taila and Saindava Lavana should be administered to its mouth. The tail end of the Jalauka should then be gripped with the thumb and little finger of the left hand. With the right hand's fingers, the Jalauka's body is squeezed and gently moved towards its face. The sucked blood will be spat out as a result of this motion. This is repeated until suitable vomiting signals in jalauka are discovered. After that, the Jalauka is placed in a water-filled jar. If the Jalauka is actively moving around in the container, this indicates proper emesis. If it is sluggish and sinks to the bottom of the jar, emesis should be repeated. If it still does not vomit all of the blood, it contracts Indramada or Raktamada, an illness that prevents the leech from being used for bloodletting in the future.

The Jalauka is maintained in an earthen pot with water once it has vomited properly. Jalauka should not be administered again for the next seven days. The Jalauka regains its activeness and strength after adequate vomiting. It gets very weak or perhaps dies if too much vomiting is caused. It becomes inebriated or sluggish if vomiting is done incorrectly. They should be transferred from one pot to another filled with healthy mud, and the water should be changed to prevent putrefaction of the Jalauka's saliva. If this is not done properly, the Jalauka will become poisonous if it comes into touch with it.

Because of the leech's hirudin, bleeding may last for a long period. Bleeding period varies by region, ranging from a few hours to three days. This is a result of hirudin and other chemicals that lower blood surface tension. Bleeding time is also affected by anti-coagulating drugs. Although blood loss from a single bite is not serious, applying pressure can help minimise bleeding. The wound will itch while it heals, but scratching it will complicate the healing process and introduce other infections.

After Raktamokshana Agni (digestive power) becomes weak due to the depletion of tissues and Vata becomes aggravated due to dhata kshaya: As a result, the patient should be given meals that are not too cold, are light (easy to digest), unctuous, encourage blood formation, and are either somewhat sour or tasteless. Food, which consists of buttermilk with Yoosha, Yavagu or Peya must be given to the patient. One has to protect his Agni; the diet which promotes the formation of blood must be advised. The following are to be avoided at least for one month.

If a small residue of vitiated Rakta remains inside, diseases do not get aggravated and so they can be allowed to stay, but excess flow of Rakta should not be allowed.

**CONCLUSION**

Vicharchika is a type of Kushtha, Rakta pradoshaj and Tridosha prakopaj and chirkari (chronic) vyadh. In Vicharchika, leeches work best by eliminating the morbid, vitiated Dosha and Dhatu. However, the therapy's effect is not limited to removing
contaminated blood; the leech also releases enzymes into the wound. As a result, Jalaukavacharana has provided stabilisation and improvement of capillary and peripheral blood circulation, as well as shown anti-inflammatory action; immune-stimulation and immuno-modulating affect, and early wound healing effect. This activity might be due to salivary enzymes such as Hirudin, which has an anticoagulant effect when combined with diuretics and antibiotics, Calin, which prevents blood coagulation, Eglin, Hyaluronidase, Antithrombin, Antiprotase, and Antichymotrypsin, among others.

Leeches are an excellent treatment for a variety of skin conditions. The demand for leeches is growing every day from clinicians all across the world. The therapist who is already in leeches, their habitat, collecting methods, varieties, storage, and application methods is successful in treating the condition.

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