



## RESEARCH ARTICLE

# Clinical Observation of *Haridrakhanda* in the Management of *Sheetapitta* with respect to Urticaria: A Retrospective Cohort

<sup>1</sup>Om Raj Sharma, <sup>2</sup>Prashant Shinde, <sup>3</sup>Kavita Vyas, <sup>4</sup>Sumeet Goel

## ABSTRACT

**Introduction:** In the present era, one inevitably meets with various causes of *Dhatu-daurbalya* (disturbed immune system), which lead to various allergic diseases like urticaria—a type I hypersensitivity reaction that can be compared with *Sheetapitta* mentioned in *Ayurveda*. Although the disease is not life-threatening, it makes the patient troubled due to severe itching and its long-lasting tendency.

**Aims and objectives:** To observe safety and efficacy of *Haridrakhanda* in the patients suffering from *Sheetapitta* (urticaria) in the clinical setting.

**Materials and methods:** An observational retrospective cohort design was adopted for the study. Patients of either sex, suffering from urticaria, of age between 18 and 70 years, were selected from the outpatient department (OPD) of Regional Ayurveda Research Institute for Nutritional Disorders (RARIND), Central Council of Research in Ayurvedic Sciences (CCRAS), Mandi, Himachal Pradesh, India, from March 2013 to June 2014. The patients who were treated with *Haridrakhanda* in the dose of 3 gm twice a day with milk for 14 days and who have shown 100% compliance of medicine were only considered for study. Following *Ayurveda* clinical symptoms of *Sheetapitta* were observed: *Varati Dashta Samsthana Shotha* (inflammation rash, like an insect bite), *Kandubahulya* (severe itching), *Todabahulya* (severe pricking pain), *Raga* (redness of skin), *Vidaha* (burning sensation), *Chhardi* (vomiting), and *Jwara* (fever) with grading of 0 (absent), 1 (mild), 2 (moderate), and 3 (severe).

**Results:** Neither any concomitant medication was used nor was any adverse effect reported or noticed during the study. At the end of day 14, all 39 patients experienced improvement, maximum in *Toda* (pain) followed by *Kandu* (itching) and *Varati Dashta Samsthana Shotha* (swelling). Statistically significant improvement was found in all signs and symptoms ( $p < 0.001$ ).

**Conclusion:** *Haridrakhanda* was found safe and effective in the management of *Sheetapitta*. This study may be considered as a primary evidence for further studies on large sample size to consolidate the results.

**Keywords:** Allergy, *Ayurveda*, *Dhatu-daurbalya*, Hypersensitivity reaction.

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**Conflict of interest:** None

## INTRODUCTION

In the present era, an individual has to face lots of difficulties in following *Dinacharya* (daily regime) and *Ritucharya* (seasonal regime) described in *Ayurveda*. Due to over-industrialization and changed lifestyle, one constantly meets with various pollutants. Increased use of junk food and *Viruddhahara* all ultimately result in *Dhatudaurbalya*, which causes sensitization toward allergens as well as antibodies and produce various types of allergic diseases, like urticaria (*Sheetapitta*).<sup>1</sup> Urticaria is a type I hypersensitivity reaction that is manifested because of exposure to such allergens. Epidemiology of urticaria is increasing now days due to industrialization and agriculture. *Vata* and *Kapha* are two *Doshas*, which are primarily disturbed in this disease. In combination with *Pitta* they create redness, swelling, and itching on the skin, and although the disease is not life-threatening, it makes the patient troubled due to its appearance, severe itching disturbing routine, and its nature susceptible to be chronic. Urticaria affects around 20% of people at some point in their lifetime.<sup>2</sup> In some cases, the disorder is relatively mild, recurrent, and frustrating for both the patient and the physician. The discomfort and distress caused by urticaria can lead to serious impairment of quality of life, almost comparable to that experienced by patients with cardiovascular disease. Modern medicine possesses no remedy for permanent cure, but only remission of the disease can be achieved by administering the medicine. Patients have to take those medicines for long time, which have some unwanted side-effects. *Ayurveda* can provide better and permanent management for *Sheetapitta*.

## AIM

To observe safety and efficacy of *Haridrakhanda*<sup>3</sup> in the patients suffering from *Sheetapitta* (urticaria) in the clinical setting.

<sup>1</sup>Former Assistant Director (Ayurveda), <sup>2-4</sup>Research Officer

<sup>1-4</sup>Regional Ayurveda Research Institute for Nutritional Disorders, Mandi, Himachal Pradesh, India

**Corresponding Author:** Om Raj Sharma, Former Assistant Director (Ayurveda), Regional Ayurveda Research Institute for Nutritional Disorders, Mandi, Himachal Pradesh, India, Phone: +919418073962, e-mail: dr.omsharma.mandi@gmail.com

## MATERIALS AND METHODS

An observational retrospective cohort design was adopted. Thirty-nine patients of either sex, of age between 18 and 70 years, were selected from the OPD of RARIND, Mandi, Himachal Pradesh (a research institute under CCRAS, Ministry of AYUSH, New Delhi, India) during March 2013 to June 2014. The patients who were treated with *Haridrakhanda* for *Sheetapitta* [urticaria with recurrent symptoms of itching (*Kandu*), reddening, flares, and burning sensation] were studied. Many patients have been successfully treated with the study drug during this period but only the patients who have shown 100% drug compliance with proper documentation of clinical criteria during treatment were considered for the study.

As the study was done by data mining of old cases of the institute's OPD, consent was not felt necessary and ethical committee of our institute granted consent waiver.

### Study Intervention

*Haridrakhanda* manufactured by the Indian Medicines Pharmaceutical Corporation Limited was prescribed as oral medication to each participant in the dose of 3 gm twice a day with milk for 14 days.

### Outcome Measure

The assessment was done by evaluating the changes in the signs and symptoms (*Ayurveda* subjective parameter) during and after treatment, and scoring system was

adopted for easier statistical analysis of the result. The signs and symptoms of *Sheetapitta* included in scoring were *Varati Dashta Samsthana Shotha* (inflammation rash, like an insect bite), *Kandubahula* (severe itching), *Todabahula* (severe pricking pain), *Raga* (redness of skin), *Vidaha* (burning sensation), *Chhardi* (vomiting), and *Jwara* (fever) with grading of 0 (absent), 1 (mild), 2 (moderate), and 3 (severe).

### Data Analysis

The information gathered based on the above observations was subjected to statistical analysis using Graph Pad Prism Software, version 6.01. Student's paired t-test was applied for statistical improvement analysis in the *Ayurveda* severity score parameter.

### Drug Review

*Haridrakhanda* is composed of 25 contents as depicted in Table 1. Its main content is *Harida* (turmeric), which has potent *Kushthagna* (demolishing skin diseases) and *Varnya* (complexion enhancing) properties.<sup>4</sup> Hence, *Haridrakhanda* was selected for present study with cow milk as an adjuvant drink.<sup>5</sup> Case studies have been published showing promising results of *Haridrakhanda* in the management of urticaria.<sup>6</sup>

## RESULTS

No concomitant medication was used during the study, and no any adverse effect was reported or noticed during

Table 1: *Haridrakhanda*

Name of drug	Latin name	Used parts
<i>Haridra</i> <sup>4</sup>	<i>Cucurma longa</i> Linn	Rhizome
<i>Nishoth</i> <sup>7</sup>	<i>Operculinaterpethum</i> Linn	Resin
<i>Haritak</i> <sup>8</sup>	<i>Terminalia chebula</i> Retz	Fruit
<i>Daruharidra</i> <sup>9</sup>	<i>Berberisaristata</i> DC	Root
<i>Nagarmotha</i> <sup>10</sup>	<i>Mesuaferrea</i> L	Inflorescence
<i>Ajawayan</i> <sup>11</sup>	<i>Trachyspermumammi</i> L	Fruits
<i>Ajamoda</i> <sup>12</sup>	<i>Thymus serphyllum</i> L	Fruits
<i>Chitrakamula</i> <sup>13</sup>	<i>Plumbagozeylanica</i> L	Root
<i>Kutaki</i> <sup>14</sup>	<i>Picrorhizakurroa</i> Roxb	Root
<i>Shweta Jjeerak</i> <sup>15</sup>	<i>Cumintrmcvmintrm</i> Linn	Fruits
<i>Pippali</i> <sup>16</sup>	<i>Piper longum</i> Linn	Fruit
<i>Sunthi</i> <sup>17</sup>	<i>Zingiberofficinale</i> Rosc	Rhizome
<i>Dalchini</i> <sup>18</sup>	<i>Cinammomumtamala</i> Nees	Stem bark
<i>Laghu Ela</i> <sup>19</sup>	<i>Elattariacardamomum</i> (L) Maton	Fruits
<i>Tejapatra</i> <sup>20</sup>	<i>Cinammomumtamala</i> Nees	Leaves
<i>Vidanga</i> <sup>21</sup>	<i>Embelicaribes</i> Burm	Fruit
<i>Guduchi</i> <sup>22</sup>	<i>Tinosporacordifolia</i> (Willd.) Miers	Stem
<i>Vasa</i> <sup>23</sup>	<i>Adhatodavasica</i> Nees	Leaves
<i>Kutaki</i> <sup>24</sup>	<i>Picrorhizakurroa</i>	Root
<i>Bibhitak</i> <sup>25</sup>	<i>Terminalia belerica</i> Roxb	Fruits
<i>Amalaki</i> <sup>26</sup>	<i>Emblica officinalis</i> Gaertn	Fruits
<i>Chavya</i> <sup>27</sup>	<i>Piper cubeba</i> Linn	Fruits
<i>Dhaniya</i> <sup>28</sup>	<i>Coriandrum sativa</i> L	Fruits
<i>Loha Bhasma</i> <sup>29</sup>	–	<i>Bhasma</i> (residue after incineration—calcined preparation)
<i>Abhraka Bhasma</i> <sup>30</sup>	–	<i>Bhasma</i> (residue after incineration—calcined preparation)

**Table 2:** Improvement in all the Ayurveda parameters of Sheeta Pitta

Ayurveda subjective parameters	Mean before (BT) and after treatment (AT)		
	BT	Day 14	Percent improvement BT-AT
Varati Dashta Samsthana Shotha (inflammation rash, like an insect bite)	2.13	0.13	93.89
Kandu bahula (severe itching)	2.36	0.13	94.49
Toda bahula (severe pricking pain)	0.64	0.025	96.09
Raga (redness of skin)	1.54	0.52	66.23
Vidaha (burning sensation)	0.79	0.51	35.44
Chhardi (vomiting) and Jwara (fever)	0	0	–
	7.46	1.315	82.37

**Table 3:** Overall improvement in Ayurveda parameter after 14 days of treatment

Signs and symptoms	N	Mean			Relief %	SD	SE	p-value
		BT	AT	BT-AT				
Varati Dashta Samsthana Shotha	39	3.312	0.2368	2.895	92.43	0.8941	0.1450	<0.0001
Kandu	39	3.385	0.2308	3.154	93.175	0.8414	0.1352	<0.0001
Toda	39	1.205	0.1282	1.077	89.371	1.384	0.2376	<0.0001
Raga	39	2.385	0.1026	2.282	96.77	0.9986	0.1599	<0.0001
Vidaha	39	1.316	0.1053	1.211	92.02	1.234	0.2001	<0.0001

the study. Comparing baseline to day 14 (end of treatment), all 39 participants experienced improvement as shown in Tables 2 and 3.

## DISCUSSION

Maximum improvement was seen in *Toda* followed by *Kandubahula* and *Varati Dashta Samsthana Shotha*. The main content of *Haridra khanda* is *Haridra* (turmeric), which is a potent antiallergic drug, recommended in various allergic conditions including skin allergies like urticaria, itching, blisters, etc.<sup>31</sup> As it was an observational study on patients of *Sheetapitta*, being treated in usual clinical setting of OPD of RARIND, Mandi, neither any randomization was done nor were any confounding factors controlled. The medicine was made available to patients from OPD of RARIND, Mandi. Further, no deterioration was noted in the subsequent follow-up of the patients, but many patients do come with recurrence of mild symptoms of urticaria after 4 to 5 months requiring repeat of the same treatment, but the data were not collected and hence were not taken in the study for statistical analysis.

## CONCLUSION

The results of the treatment were encouraging and no side-effect was noted clinically during the therapy. This study may be considered as a primary evidence for further extensive studies and clinical research on large sample size for further evaluation.

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## हिन्दी सारांश

### शीतपित्त (अर्टिकेरिया) की चिकित्सा में हरिद्राखण्ड के चिकित्सकीय उपयोग का अध्ययन: रेट्रोस्पेक्टिव कोहोर्ट अनुसन्धान

<sup>1</sup>ओम राज शर्मा, <sup>2</sup>प्रशांत शिंदे, <sup>3</sup>कविता व्यास, <sup>4</sup>सुमीत गोयल

**भूमिका:** आधुनिक काल में हर व्यक्ति आपरिहार्य रूप से धातुदौर्बल्य के अनेकविध कारणों के सम्पर्क में आता रहता है जिनसे शीतपित्त जैसे अनेकविध अनुर्जताजन्य धातुप्रत्यनीक विकार पैदा हो सकते हैं। हालांकि यह रोग घातक नहीं है फिर भी इस में तीव्र खुजली एवं लंबे समय तक बने रहने के स्वभाव के कारण रोगी को अपने दैनिक कार्यों में प्रतिकूलता का सामना करना पड़ता है।

**अनुसन्धान लक्ष्य एवं उद्देश्य:** शीतपित्त से पीड़ित रोगियों में हरिद्राखण्ड के निरापदत्व एवं चिकित्सकीय प्रभाव का अध्ययन करना।

**सामग्री व विधि:** इस शोधकार्य के लिये रेट्रोस्पेक्टिव कोहोर्ट अनुसंधान पद्धति का प्रवरण किया गया। शीतपित्त से ग्रस्त 90 से 100 वर्ष के बीच की आयुवाले महिला एवं पुरुष रोगियों का चयन क्षेत्रिय आयुर्वेद पोषणजन्य विकार अनुसन्धान संस्थान (सी० सी० आर०ए० एस०) मण्डी (हि०प्र०) के बहिरंग विभाग से मार्च 2013 से जून 2014 तक किया गया। सभी रोगियों जिनका 98 दिनों तक, हरिद्राखण्ड 3 ग्राम का दिन में दो बार दूध के साथ सेवन करवाया गया था उनहे अध्ययन में शामिल किया गया। रोगियों पर औषधि के प्रभाव का मूल्यांकन शीतपित्त के इन लक्षणों के आधार पर किया गया, वरटी दष्ट संस्थान शोथ (कीट के काटने के सामान लालिमायुक्त शोथ), कण्डु बाहुल्य (तीव्र खुजली), तोदबाहुल्य (तीव्र पीड़ा), राग (लालिमा), विदाह (तीव्र जलन), छर्दि (उलटी) एवं ज्वर। इन लक्षणों के अभाव से लेकर तीव्रता के मुल्यांकन हेतु इनका शुन्य से लेकर चार तक श्रेणी विभाजन किया गया।

**परिणाम:** शीतपित्त के रोगियों में हरिद्राखण्ड से सम्पूर्ण औषधीय अनुवर्तन पाया गया। अनुसंधान की कालावधि में ना तो अन्य किसी औषधि का प्रयोग किया गया ना हि किसी भी प्रकार की अवाञ्छनिय प्रतिक्रियाएं प्रतिवेदित हुईं। शोधकार्य के अंत में सभी 39 रोगियों ने शीतपित्त के सभी लक्षणों में स्पष्ट रूप से सुधार का अनुभव किया। सबसे अधिक लाभ क्रमशः तोद कण्डू एवं वरटी दष्ट संस्थान शोथ में प्राप्त हुआ।

**निष्कर्ष:** शीतपित्त के रोगियों में हरिद्राखण्ड के औषधीय प्रयोग को निरापद एवं चिकित्सकीय रूप से प्रभावशाली पाया गया। इस शोधकार्य का उपयोग भविष्य में किये जानेवाले विस्तृत शोधकार्यों के लिए प्राथमिक प्रमाण के रूप में किया जा सकता है।

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