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## Ayurvedic management of Chickenpox w.s.r. to *Masurika*- A Case study

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### Abstract:

Varicella-zoster virus causes chickenpox, causes a red rash that is blisters and then crusts over. It spreads rapidly. Direct or indirect contact with another person, the infection is spread. Despite the fact that it is typically a benign and self-limiting; serious consequences could be brought on by the varicella zoster virus. By immunizing the child, modern management provides chicken pox prevention. However, some of them get the sickness after vaccination, and when the disease manifests, they can only provide symptomatic relief. A 14 years old (male) patient visited to OPD with complaints of high-grade fever (102° F) for two days followed by reddish rash all over face, abdomen and back with burning sensation and itching; swelling on the face; constipation and anorexia. The patient's symptoms were correlated with, *Masurika* according to Ayurveda. The clinical manifestation of *Masurika* is comparable to chicken pox. The many red coloured boils that develop throughout the sickness and ultimately burst to leave the body covered in scabs are referred to as *Masurika*, which is derived from the word *Masoor* (red lentil). According to *Acharya*, *Masurika* (*Kshudrarog*) is "*Upasansargaj*" *Vyadhi*. *Masurika vyadhi Chikitsasutra* was told as per *Kushta and Visarpa*. The symptoms of patient were due to predominantly *Pittadosha* vitiation along with *rasa* and *Rakta dhatudushti*. The patient was treated with *Pittashaman*, *Raktaprasadan* and *Mrudu Virechan chikitsa*. The burning sensation (7 to 0) and itching (7 to 1) were assisted by numeric rating scale (NRS). Within 10 days complete cured achieved without any complication.

**Keywords:** *Masurika*, Chickenpox, Varicella zoster, Ayurveda, *Sansargaj vyadhi*.

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**INTRODUCTION:**

Varicella-zoster (V-Z) virus is the source of the extremely contagious disease known as chickenpox, which is characterised by vesicular rash and accompanied malaise and fever, and it happens in both kinds that are endemic and epidemic.<sup>[1]</sup> Chickenpox typically a minor, self-limiting condition that often has an impact on children. Those with immune-compromised conditions may experience severe problems and additionally to the person with chronic conditions already existent. The most frequent late consequence of chicken pox is shingles, which is brought on by Varicella zoster virus reactivation.<sup>[2]</sup> This Disease has a high probability of transmission because it's spread via droplets in the air. Symptomatic alleviation is the goal of modern chickenpox treatment, which includes medications like antipyretics and antivirals like acyclovir, and a few topical applicants seeking comfort from itching.<sup>[3]</sup> Group A streptococcal infections of the skin and soft tissues in children are among the complications of chickenpox. Other complications include lung infection (pneumonia), Swelling or infection of the brain (encephalitis, cerebellar ataxia), bleeding issues (haemorrhagic complications), dehydration and bloodstream infections (sepsis). *Ayurvedic* medicine compares *Masurika* to chicken pox. According to *Madhav Nidan*, the name "*Masurika*" alludes to a number of boils on the body that turn red when an illness is present.<sup>[4]</sup> Only the *Dushta Dhatu* in *Masurika* exhibits symptoms. According to the conceptual terms, in *Masurika* any *Dhatu* might be impacted at any time depending upon the immunity of the individual.<sup>[4]</sup> All the seven *Dhatugata Dushti Lakshan* of *Masurika* were given in classics. The *Chikitsa* sutra stated to do *Chikitsa* as per *Kushta* and *Visarpa Vyadhi*.<sup>[5]</sup> This case study highlights

the fast recovery of patient without any complication.

**Patient information:**

A 14-year-old male patient with weight and height of patient were 35.4 kg and 4'1" respectively; visited the OPD on 12 May, 2023 with chief complaints of High grade fever (102°F) on first day, patient taken medicine for fever (tab. Paracetamol) SOS for two days and fever got down. On third day reddish rash appeared all over face, abdomen and back with burning sensation and itching at the sites of rashes, swelling on the face. Patient has anorexia and constipation too. The rashes become pus containing small blisters after a day of fever.

Past History: no history of chickenpox before.

Major illness: No history of diabetes and hypertension or any other skin disease, and the patient was not taking any other drugs.

Addiction: No any

Family history: No any

Vaccination history: All vaccination taken along with MMR vaccine.

**Patient's daily routine:**

Patient wake up at 8.30 am. Have 2 cups of tea in a day. He does breakfast at 9.30 am which includes *Samosa*, *Vadapav*, *Poha*, sandwich, and sometimes *Upma* or *Sheera*. Lunch in between 1-2pm and it contains 2 and half *Chapati* (roti), potato, green leafy vegetables, *Bhendi* (ledy finger), *Gobi* (cauliflower), *Palak* (spinach), *Aachar* (pickle), tomato, flax seed, green chilli, *Papad*, and has a propensity of adding more salt to the food preparations. The patient consumes junk food in the evening (twice a week). Dinner takes place between 9 and 10 p.m. 1 am was the time to go to bed.

**Material And Method:**

A 14-Year-Old Male Patient visited OPD having symptoms of High-grade fever (102°F) for two days. Patient took tablet Paracetamol at home and fever decreased but on the third

day reddish rash appeared all over face, abdomen and back with burning sensation and itching at the sites of rashes, swelling on the face. Patient has anorexia and constipation too. The rashes become pus containing small blisters after a day of fever. The patient was diagnosed as *Masurika* as per Ayurveda. The treatment was planned accordingly. Treatment was planned to reduce the vitiated *pitta Dosha* and *Rakta Dhatu* predominantly. In later stage vitiated *Vatadosha* was treated. Internal management included *Sutashekhara Rasa*, *Sariva Ghanavati*, *Patolakaturohinyadi Kwath* and *Haritaki Churna* for *Anulomana* and after blisters become dry and scaly *Guduchyadi Tail* was given for local application. The Outcome of treatment was assisted visually as well as NRS scale was used to assist the symptoms like burning sensation and itching.

#### Informed consent:

All the information was explained thoroughly to the patient regarding the treatment of disease along with its advantages and

disadvantages. Also, patient consent to publish the case report data was obtained.

#### FINDINGS:

##### Local findings:

Area: Maculopapular rashes were found all over the face, abdomen and back region. Face swelling was noted. [Figure 1]; *Aarakta* (reddish) in colour; No particular odour, *Ushna Sparsha* (touch); secretion: slight pus following itching; According to a numeric rating scale, the pain and burning are both extreme (NRS Score: 7); bleed: no bleeding even after itching; Sensation loss: no; blisters: present; Palpitations: no; no any lymphadenopathy noted.

##### Clinical findings:

The patient had temperature 99.5° F, had a blood pressure reading of 114/70 mmHg, and had a pulse rate of 90 per minute. The systemic examination was also normal, and the patient was fully cognizant and able to perform regular mental processes. There was no history of chickenpox before. Auscultation revealed a clear chest, and a heart; gastrointestinal examination (P/A) revealed tenderness.

#### TIMELINE

**Table 1: Timeline giving details of the events in the treatment.**

Day	Date	Sign & Symptoms	Treatment protocol
Day 1 <sup>st</sup>	12/05/2023	Mild fever (99° F), small reddish blisters (maculopapular rash) all over the face, abdomen and back region. Itching (NRS- score 7) Burning sensation (NRS- score 7) Swelling over the face Constipation Anorexia	<i>Sutashekhara rasa</i> (125 mg) Bid <i>Sariva Ghanavati</i> (250 mg) Bid <i>Patolakaturohinyadi Kwath</i> (15 ml) Bid <i>Haritaki Churna</i> (500mg) at night <i>Guduchyadi oil</i> for L/A Advice: <i>Nimbapatra Dhupan</i> in room Bath by using <i>Nimbapatra Swarasa Siddha-jala</i> .
Day 7 <sup>th</sup>	16/05/2023	No fever No face swelling No constipation No anorexia	<i>Sariva Ghanavati</i> (250 mg) Bid <i>Patolakaturohinyadi Kwath</i> (15 ml) Bid <i>Haritaki Churna</i> (500 mg) at night

		Some Smaller Pink colour blisters on the face, abdomen and back region while some blisters were dried and scaly Itching (NRS- score 3) Burning sensation (NRS- score 1)	<i>Guduchyadi oil</i> for L/A Advice: <i>Nimba patra dhupan</i> in room Bath by using <i>Nimbapatra Swarasa Siddha-jala</i> .
Day 10 <sup>th</sup>	21/05/2023	No blisters seen. No itching (NRS- score 0) No burning sensation (NRS- score 0) Only mild discoloration seen at the place of blisters.	<i>Sariva Ghanvati</i> (250 mg) Bid <i>Guduchyadi oil</i> for L/A

**DIAGNOSTIC ASSESSMENT:**

The diagnosis of chickenpox was confirmed based on the observations of red blistering rashes [Figure 1] over the face, abdomen, and back that were presented by the patient with fever and anorexia. It corresponded to the clinical signs of *Masurika* described in early *Ayurvedic* texts. Chickenpox (*Masurika*), measles (*Romantika*) and herpes (*Visarpa*) were considered for differential diagnosis, since the two viruses have similar symptoms. The maculopapular rash pattern associated with chicken pox is followed by the production of vesicles and ultimately burst, forming scabs (this lesion pattern is further detailed in *Masurika's Dhatugatavasta*) while in measles rash is maculopapular (explained in term "*Kshudrapidka*" in *Romantika*) and the Koplik spot, a little red area with blue and white dots centres located within the oral cavity. As in measles, appearance is not seen, so it was ruled out. In herpes, the rapid spreading of the rash and pattern of rash is typically unilateral and did not cross the midline. [6] Thus considering all this point patient was diagnosed as *Masurika* (chickenpox). The assessment of blisters was based on the area covered by the blister, appearance of blister and the crusting off blisters. [Table 3] The numeric rating scale (NRS) was used to rate the degree of burning sensation and itching. The clinical results photos are all listed below, arranged chronologically.

Etiopathogenesis (*Samprapti*) of *Masurika* Excessive and/or regular consumption of food items such as spicy (*Katu*), sour (*Amla*), salty (*Lavana*), alkaline or caustic (*Kshara*), incompatible diet (*Viruddha*), high meal frequency/day (*Adhyashana*), spoilt or contaminated food (*Dushta*); causes vitiation of bodily humours (*Doshas*) and blood (*Dushta Rakta*) that ultimately leads to the manifestation of skin eruptions (*Pidaka*) similar to that of lentils (*Masura*) in size, shape, and color (*Akriti* and *Samsthana*).

*Ashtavidh Pariksha*

*Nadi*: - *Hansagati*, 78/min

*Shabd*: - *Spashta*

*Mala*: - *Niram*

*Sparsha*: - *Mrudu*

*Mutra*: - *Prakrut*

*Druka*: - *Prakrut*

*Jeehva*: - *Niram*

*Aakruti*: - *Sam*

**THERAPEUTIC INTERVENTIONS:**

There was *Twak* (skin) as *Adhishthan*, *Rakta Dhatudushti*, and *Pittapradhan Vata-Kapha Dosh*a vitiation. Considering with all of these aggravating variables in mind, a treatment plan was developed for the patient. *Ayurvedic* treatment procedure for internal medications was designed with the involvement of *Dosha-Dhatu* and *Masurika Vyadhi*. *Sutashekhara Rasa*, *Sariva Ghanvati*, *Patolakaturhinyadi Kwath* and *Haritaki Churna* for *Anulomana* were given internally.

At the time of second follow up as there were no fever *Sutashekhara rasa* was withdrawn. *Guduchyadi* oil for local application was given. After all the symptoms were gone and only slight discoloration remains at the site of blisters, only *Sariva Ghanvati* and *Guduchyadi* oil L/A was continued to improve skin texture and discoloration. All

medications involving herbal and herbo-mineral drugs used in treatment were given in Table 1 along with their dose and duration. The patient was also educated with *Pathya-Apathya*. Patient was also made aware about the description given in classics regarding the *Upasargaja Vyadhi* and told to follow the rules to avoid the spread for disease<sup>7</sup>.

**Table 2: Wholesome and unwholesome diet**

Wholesome things	Unwholesome things
i) Dietary regimen ( <i>Ahara</i> ): soup made with green lentils, black raisins, clarified butter, Indian gooseberries, rice, jawar roti, all fruity vegetables, and fruits like pomegranates and sapodilla.	Dietary regimen ( <i>Ahara</i> ): leafy greens, black gram, horse gram, legume, garlic, salt and salty foods, heavy meals like curd and non-vegetarian cuisine.
ii) lifestyle ( <i>Vihar</i> ): rest, <i>Nimbapatra Dhupan</i> in room, <i>Nimbapatra Swarasa Siddhajala Snan</i> .	Lifestyle ( <i>Vihar</i> ): Exercise, sleep during the day, allowing in to emotions, sadness, rage, and sun and heat exposure.

**FOLLOW UP AND OUTCOME:**

Patient was asked to visit after seven days of first visit. On the seventh day there was no fever, constipation, anorexia and face swelling only some smaller Pink colour blisters on the face, abdomen and back region were seen while some blisters were dried and became scaly. The itching (NRS-score 3) and burning sensation (NRS- score 1)

reduced markedly as represented graphically as in figure 1. At the time of second follow up on day 10<sup>th</sup> there was No blisters, no itching (NRS- score 0), no burning sensation (NRS-score 0), Only mild discoloration seen at the place of blisters. The clinical status of patient was recorded at each follow up by taking photographs shown as in Image 1-3.

**Table 3: blister assessment**

Sr. No	Assessment parameters	Day 1 <sup>st</sup>	Day 7 <sup>th</sup>	Day 10 <sup>th</sup>
1.	Area covered by blisters	Blisters started from face followed by abdomen and back region	No new blister appeared. Blisters covering whole face, abdomen and back region.	No new blister appeared. Ruminants of blisters covering whole face, abdomen and back region.
2.	Appearance of blisters	Reddish blisters	Small pinkish blisters	Blisters dry and become scaly leaving slight discoloration at the site.

**DISCUSSION:**

The V-Z virus causes the acute illness known as chickenpox, which is extremely contagious. As people age, the frequency and severity of chickenpox rise; the first attack provides enduring immunity, increasing the likelihood of an uncommon second attack. According to *Ayurveda*, the clinical state of this case corresponds with *Masurika Vyadhi* based on the size and rate of blister eruption. It is comparable to chickenpox. A handful of herbal and herbo-mineral medications are provided in context to handle such ailments. In *Ayurveda* Planning for the management of any illness is based on the illness stage, specifically mentioning *Dosha* prevalence and associated symptoms. As in *Masurika Dhatugata Avastha* is also described. *Acharya* stated *Masurika* under *Upasargaj Vyadhi*.<sup>[7]</sup> "To come into contact with disease, super-induced due to bonding with evil" is what the word "*Upasarga*" means. "The word *Sansarga* also carries the same meaning as touch, conjunction, relation. With all due respect, this illness category more in line with infectious illness. Additionally, it is possible to understand *Grah*-supernatural bonding evil as a bacterium, which is an inevitable source of disease and it's dispensed among healthy employees. In this case, the patient was examined thoroughly and diagnosed as *Masurika* according to *Ayurveda*. Patient has history of *Jwara* before two days of onset of blisters. There was burning sensation and itching at the site of blisters. Blisters were all over the face, abdomen and back region. Patient experiences anorexia and constipation. The treatments recommended in *Ayurveda* for *Masurika* is as per the treatment of *Kushta* and *Visarpa*.<sup>[5]</sup> In this case *Pittapradhan Dosha* and *Raktadhatu Dushti* was noted. So the *Pittashamak Chikitsa* (pitta pacifying treatment) and *Anulomana* and *Raktaprasadan Chikitsa* was planned. Drugs

such as *Pittahara* (pacifying the pitta), *Raktaprasadak*, *Dahashamak* (pacifying the burning sensation), and *Deepan-Pachan* were chosen for internal medication (palliative treatment). *Dhupan Chikitsa* was also used, for sanitization and purification purpose of premises, for disinfectant purpose, and for treating skin disorders.<sup>[8]</sup> Patient was instructed to live in one room; to do *Nimbapatra Dhupan*<sup>[9]</sup> in room daily and also advised to take a bath with water containing *nimba patra swarasa*.

*Jwara* is a condition that typically arises from *Ama*. In *Masurika Jwara* is one of the symptoms. Several medications with qualities like *Deepana* and *Pachana* are found in *Sutashekhara Rasa*. Because it contains herbs like *Vatsanabha* (*Aconitum ferox*), which are highly efficient against *Jwara* and *Swedajanan*.<sup>[10]</sup> The components of *Sutashekhara Ras*, *Dhatura* and *Vatsanabha*, are known as *Vish Dravya*. The attributes of *Vishdravya* include *Vyavayi* and *Vikasi*. These characteristics rapidly demonstrate efficacy of drug and are time effective.<sup>[11]</sup>

In addition to *Sutashekhara Rasa*, *Sariva Ghanvati* was selected because of its *Madhura* (sweet), *Tikta* (bitter), *Raktaprasadhak*, *Dahashamak*, *Vishaghna*, and *Raktagata Amapachan* qualities<sup>[12]</sup> Strong antiviral effects against the herpes virus have also been demonstrated by *sariva* root (*Hemidesmus indicus* R. Br.)<sup>[13, 14]</sup>. In addition, *Hemidesmus indicus* R. Br. possesses immunomodulatory, properties.<sup>[15]</sup>

In *Ashtangahridaya*, *Patolakaturohinyadi Kashaya* is listed under *Shodhanadi Gana*. It is enhanced with *Tikta rasa* (bitter) *Dravyas*, which balance vitiated *Pitta* and *Kapha Doshas* and aid in *Rasadhatu* and *Raktadhatu Prasadana*. It possesses the qualities of *Jwaraghna* (antipyretic), *Vishaghna* (anti-poison), and *Kushthaghna*

(corrects skin problems).<sup>[16]</sup> It helps with skin conditions that include burning, discoloration, and irritation. It works well as a medication for liver detoxification as well. The liver is a vital organ for *pitta Dosh*a and *Raktadhatu* to operate normally, according to Ayurveda. Because of the qualities of *Amapachana* and *Agnivardhana*, it enhances hunger and facilitates digestion.

*Haritaki Churna* was used basically for its *Anulomana* property. It possesses another property like *Kushtghna*, *Krimighna* also.<sup>[17]</sup> *Terminelia chebula* has anti-viral<sup>[18]</sup>, antimicrobial activity.<sup>[19]</sup>

*Guduchyadi* Ointment was used for local application (*Pradeha*); includes *Guduchi*, or *Tinospora cordifolia*, as the main component. *Tinospora cordifolia* is commonly used as medicine in the *Ayurvedic* for its antispasmodic, anti-inflammatory, antibiotic, anti-allergic, and overall tonic qualities.<sup>[20]</sup> The *Guduchyadi Taila* is mentioned in relation to the ailment *Vatarakta*, which is a form of arthritic pain. It is recommended therapeutically to relieve itching. This disorder is accompanied by pigmentation and itching. Consequently, in this instance, it was recommended as a topical applicant for minimising discomfort and itching while accelerated the healing process.

Medical fumigation is referred to as *Dhoopan Chikitsa*. It is a crucial treatment according to *Ayurveda*. Numerous *Dhoopan Yogas* are listed in the various *Ayurvedic* textbooks. Only natural ingredients are used in *Dhoopan Chikitsa* (fumigation treatment), making it safe for both humans and the environment. In *Dhoopan Chikitsa*, also known as medical fumigation, a combination of medicinal compounds undergoes burning in a certain method to produce a medicated smoke known as *Dhoopa*.<sup>[21]</sup>

The Herbs of plant origin have *Kushtha-Hara*, *Krimihara*, and *Kandughna* qualities, which are primarily used in modern research

as antimicrobial, antifungal, and antibacterial capabilities.<sup>[22]</sup> *Acharya Shusruta* includes *nimba* in *Rakshoghna Dravya*. *Dhoopan* with *Nimba* has found effective in various studies.<sup>[23]</sup> Its active constituents possess insecticidal like 22, 23-dihydronimocinol extracted from leaves<sup>[24]</sup> the leaves of *Azadirachta indica*, or *neem*, and have strong antibacterial properties. Numerous groups of phytochemicals with antibacterial qualities include saponins, glycosides, alkaloids, and flavonoids; these compounds are involved in the defence mechanism against infections.<sup>[25]</sup> *Azadirachta indica* showed significant antiviral activity against varicella zoster.<sup>[26]</sup> There are many other drugs advised for *Dhoopan* or mentioned in management of *Sansargaja Roga* still due to easily available and cost effectivity *Nimbapatra Dhupan* and *Nimbapatra Swarsa Siddhajala Snan* was advised to patient. The prescribed treatment plan was successful in bringing about prompt clinical alleviation (burning, itching, fever, spreading of blisters, healing of blisters and post-healing scars) and speeding up the recovery process in the patient.

#### CONCLUSION:

The patient in the case study found significant relief after undergoing *Ayurvedic* treatment, which included the use of *Sutashekhar Rasa*, *Sariva Ghanvati*, *Patolkaturohinyadi Kwath*, *Haritaki Churna*, and *Guduchyadi* oil applied locally to help heal the scar. However, it's important to note that a single case might not provide sufficient evidence to make a definite conclusion; we need to conduct more thorough research using a comprehensive approach to confirm these outcomes.

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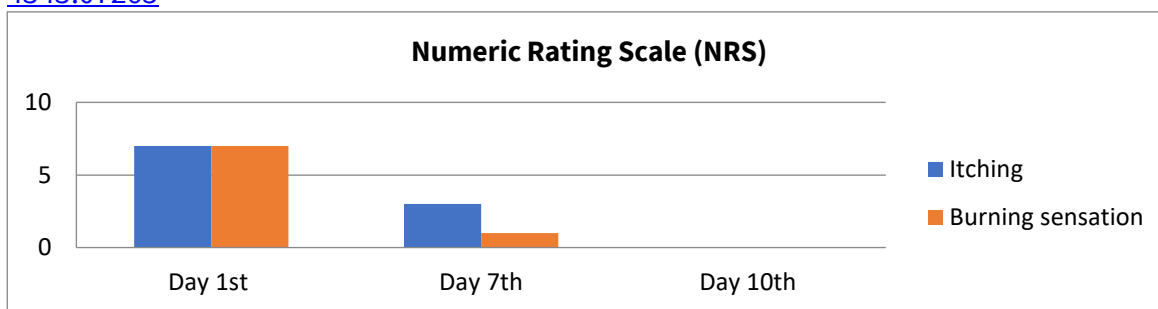


Figure no. 1: burning sensation & itching at each follow-up assisted by Numeric Rating Scale (NRS)



Image 1: On day first clinical presentation of patient

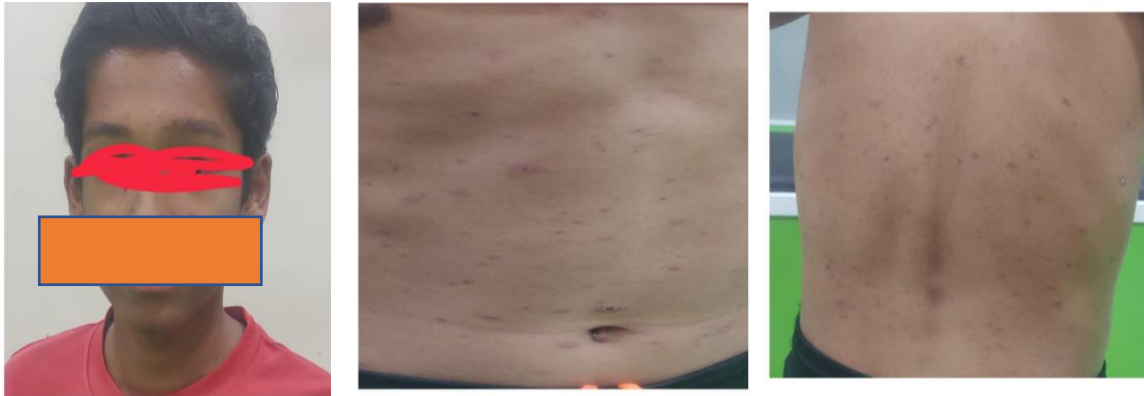


Image 2: On 7<sup>th</sup> day clinical presentation of patient



Image 1 to 3: clinical presentation of patient

Image 3: On 10<sup>th</sup> day clinical presentation of patient

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