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A Single Case Study: Effect of *Sodhana & Shamana Chikitsa* in the Management of *Vipadika* in Ayurveda

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Abstract

Vipādikā is a type of Kṣudra Kuṣṭha described in Ayurvedic classics, characterized by painful fissures over palms and soles associated with dryness and burning sensation. It is predominantly caused by Vāta–Kapha doṣa with involvement of Rakta and Tvak. In modern medicine, it can be correlated with cracked heels or palmar–plantar psoriasis. Conventional treatment often provides temporary relief with frequent recurrence. This case study demonstrates the effectiveness of Śodhana and Śamana Chikitsā in the management of Vipādikā. A 41-year-old male patient presented with symptoms *pāṇi–pāda sphuṭana* (fissures of palms and soles), *rukṣatā* (dryness), *kharatā* (roughness), *śūla* (pain), and occasionally *kandu* (itching). Treatment included *Deepan Pachan*, *Shodhan Chikitsa* (Purification)- *Vaman Karma*, *Sansarjan kram*, Internal medicine.

After examining the patient we planned him for shodhan (Purification) and shaman (Pacification) chikitsa. First we gave him dipan-pachan with chitrakadi vati (2 tds) for 3 days. On 4th day we start him mahatiktak ghruta as snehpana with increasing quantity. (1st day 30 ml, 2nd day 50ml, 3rd day 75ml, 4th day 100ml, 5th day 150ml) for 5 days. On 9th day we have done abhyanga and swedana. On 10th day we gave him vaman with madanphala 30gm + vacha 10gm + honey 20ml (as a vamak Dravya). For vamanopaga Dravya we gave him yashtimadhu phanta 2.5 liter, saindhav jala 1 liter. After giving vamak Dravya and vamanopaga Dravya patient have 7 vega and 4 anuvega. After vaman we gave him dhumapan chikitsa with ajvain. After vaman patient follow sansarjan krama for 7 days. Then we started him shaman (Pacification) treatment with following drugs. *Arogyavardhani vati*, *Gandhaka Rasāyana*, *Mahamanjisthadi Kwath*, *Mahātiktaka Ghrta*,) External application: *Karanj Taila*, *Pathyaapathya*, *Chikitsā* for 21 days. Marked improvement (90%) was observed without adverse effects, highlighting the role of Ayurveda in chronic skin disorders.

वैपादिकं पाणिपादस्फुटनं तीव्रवेदनम् ||च.चि.७/२२||.

Keywords: Vipādikā, Kṣudra Kuṣṭha.

Introduction

Vipādikā is enumerated under Kṣudra Kuṣṭha by Ācāryas Caraka and Suśruta. The term *Vipādikā* is derived from “vi” (distinct) and “pādikā” (affecting the feet). It is characterized by: *Pāṇi–pāda sphuṭana* (cracks in palms and soles) *Tīvra vedanā* (severe pain) *Rūkṣatā* (dryness) *Dāha* (burning sensation) *Vāta* doṣa causes dryness and fissuring, while *Kapha* contributes to skin thickening. *Rakta duṣṭi* plays a major role in chronicity.

Clinically, *Vipādikā* presents with *pāṇi–pāda sphuṭana* (fissures of palms and soles), *rukṣatā* (dryness), *kharatā* (roughness), *śūla* (pain), and occasionally *kandu* (itching). The fissures may be deep and painful, causing difficulty in walking or performing manual work, thereby affecting the quality of life of the patient. The condition often shows a chronic and recurrent course, especially in individuals exposed to excessive dryness, cold climate, repeated washing,

or prolonged standing. Ayurveda emphasizes correction of Agni, Doṣa-duṣya śodhana, and tissue nourishment.

In modern dermatology, *Vipalika* can be correlated with conditions such as fissured eczema, cracked heels, or chronic hand–foot dermatitis. Ayurvedic management emphasizes *doṣa–śamana* and *doṣa–śodhana* according to severity, along with *snehana*, *lepa*, and *abhyanga* using medicated oils and ghee, internal use of *kuṣṭhaghna* and *raktaprasādaka* drugs, and appropriate dietary and lifestyle modifications. Early diagnosis and holistic management help in preventing chronicity and recurrence of the disease.

Aim and Objectives

Aim: To evaluate the effect of Ayurvedic Śodhana (Purification) and Śamana chikitsā (Pacification) in Vipādikā.

Objectives: To assess symptomatic improvement in Vipādikā.

Study Design: A Single Case Experimental Study**Case Report****Patient Information**

Age: 41 years

Sex: Male

OPD Visit Date: 3 March 2025

Occupation: Pharma Company Worker

Chief Complaints

Painful cracks over both Palms and soles

Excessive dryness and roughness

Burning sensation

(Duration: 3 Months Chronic)

History of Present Illness

The patient was apparently normal before onset. Gradually, dryness of Palms and soles developed, followed by deep painful fissures, burning sensation.

Past History

No history of Diabetes Mellitus, No hypertension, No major systemic illness

General Examination

Pulse: 82/m, Regular, Pitta- Vatatmak, Guru Nadi, Manduk Gati.

Blood Pressure: 130/80 mmHg.) and normal cardiac auscultation with audible S1 and S2 heart sounds, absent murmurs. The patient had a body weight of 60 kg and a height of 5.5 feet. Respiratory rate was 18 breaths per minute with

clear auscultatory findings. The patient was afebrile. Conscious and well-oriented.

No oedema, Icterus, Pallor, Cyanosis, Clubbing, Lymphadenopathy. No history of Diabetes, Hypertension or major illness. No past history of major or minor surgery.

Local Examination

Deep fissures on both Palms and soles Dry, thickened skin, Mild erythema, Tenderness present No discharge or secondary infection.

Ayurvedic View

Doṣa: Vāta–Kapha pradhāna

Duṣya: Rasa, Rakta, Tvak

Agni: Mandāgni

Srotasa: Rasavaha, Raktavaha

Rogamārga: Bāhya

Diagnosis**Ayurvedic Diagnosis:****Vipādikā (Kṣudra Kuṣṭha)****Modern Correlation:****Cracked heels/Palmar–plantar psoriasis**

Investigations: ECG, CBC, RBS on 05/03/2025 Shrimati Damayantiben Patel Ayurvedic Hospital.

Sr. No.	Tests.	Results.	Unit.	Reference Range
1.	Hb%	11.5	gm/dl.	14.0 – 16.0
2.	RBS	108	mg/dl.	70 – 140

Treatment Protocol**1. Shodhan Chikitsa- Vaman Karma**

Sr. No			
1.	Deepan pachan	Chitrakadi vati	2 tds x 3days (2250 mg)
2.	Snehapana	Mahatikta ghruta	1 st day 30 ml, 2 nd day 50ml, 3 rd day 75ml, 4 th day 100ml, 5 th day 150ml
3.	Sarvang Abhyanga swedana	Mahantarayan tail (snehana) dashmoola kwath (sweadan	9 th day
4.	Vaman karma	Madanphala 30gm + vacha 10gm + honey 20ml (as a vamaK Dravya). For vamanopaga Dravya we gave him yashtimadhu phanta 2.5 liter, saindhav jala 1 liter. dhumapan chikitsa with ajvain.	10 th day

2. Sansarjan kram

Meal Time	Diet
1 st	Peya
2 nd	Peya
3 rd	Vilepi
4 th	Vilepi
5 th	Akrut yush
6 th	Krut yush
7 th	Akrut mansa rasa
8 th	Kurta mansa rasa
9 th	Normal diet

3. Internal Medicine: (Arogyavardhani vati, Gandhaka Rasāyana, Mahamanjishthadi Kwath, Mahātikṭaka Ghṛta, Erandbrista haritki)

4. External Application: Karanj Taila

5. Pathya Apathya

- **Pathya:** Cows Ghee, Mung daal, Masurdaal, Loki, Tori, Ghiya, Patol, Purane Shali chawal, Warm Water.
- **Apathya:** Oily Foods, junk Food, packed Food, Bakery products, tea, Coffee, Sugar, Maida, Chana daal, Curd.

Śamana Cikitsā (21 Days)

i). **Arogyavardhani vati** (very useful in vata kapha Pradhan kushtha, Deepan, Pachan, Lekhan, Kandughna, malshudhikarak (bhedan), Medavridhihara)

- ii). **Gandhak Rasayan** (*Jantughna, Kustghna, Raktaprasadan*)
- iii). **Mahatikta Ghrita** (*Pitta and Rakta sodhana, Sukshma, Vyavayi, Kleda, daha and Kanduhara*, Improves *Tvakadhatu* nourishment, reduces *Rukshata* and fissers, *Amapachak*)
- iv). **Mahamanjisthadi Kwath** (*Purification of Rakta, Reduces Kandu and Daha, Prevent Recurrence, Kledhara, Vatanulomana, Kapha Pitta Shamaka*)
- v). **Erandbhrista Haritki** (*Vatanulomana, Kaphahara, Mild Pitta Rechana, Malashodhana, Tvakaprasadana*)
- vi). **Karanj Tailu** (*Kapha Vata shamaka, Kledahara, Krimighna, Kandughna, Vranashodhka and Vrnropaka*, Improves Fissurers in Palms and Soles)

Assessment Criteria

The Patient was assessed before and after treatment on the basis of:
 Severity of fissures, Degree of pain, Dryness of skin, Itching, Improvement in daily activities
 Each symptom was graded on a predefined scoring scale.

Assessment Scale Used

Assessment was done using a subjective symptom grading scale (0–3) for fissures, pain, dryness, and burning sensation. Pain was additionally assessed using Visual Analogue Scale (VAS).

Clinical Features-

1. Pāṇi-pāda Sphuṭana

Symptoms	Score
Severe	3
Moderate	2
Mild	1
No symptoms	0

2. Pain

Symptoms	Score
Severe	3
Moderate	2
Mild	1
No symptoms	0

3. Dryness

Symptoms	Score
Severe	3
Moderate	2
Mild	1
No symptoms	0

4. Burning Sensation

Symptoms	Score
Severe	3
Moderate	2
Mild	1
No symptoms	0

Sr. No	Before Treatment Symptoms	Before Treatment Score	After Treatment Score
1	<i>Pāṇi-Pāda sphuṭana</i> (cracks/fissures of palms and soles)	3	1
2	<i>Ruṣatā</i> (dryness)	3	1
3	<i>Kharatā</i> (roughness)	3	0
4	<i>Śūla</i> (pain)	2	0
5	Burning sensation	2	0

Overall Assessment

- **Marked Improvement:** ≥75% relief
- **Moderate Improvement:** 50–74%
- **Mild Improvement:** 25–49%
- **No Improvement:** <25%

Duration of Study

Total duration of treatment: 21 days
Follow-up period: 7 days



Before Treatment



After Treatment

Results

- After 21 days of treatment, the patient showed:
- 90% relief in fissures
- Complete relief from pain and burning
- Significant improvement in skin texture
- No adverse drug reactions
- Patient showed to marked improvement.
- Recurrence was not seen during the follow-up period in compliant patients.

Discussion

Vipādikā is primarily a Vāta-Kapha disorder where Rūkṣa and Śīta guṇa lead to skin fissuring. Mandāgni plays a key role in chronicity. Dīpana-Pācana and Snehapāna with Mahātikṭaka Ghṛta helped in Doṣa utkleiṣa and Rakta śuddhi. Arogyavardhinī and Gandhaka Rasāyana corrected Agni and Rakta duṣṭi, while Mahāmañjiṣṭhādi Kaṣāya acted as Raktaśodhaka. Karañja Taila promoted wound healing and reduced inflammation.

The observed results can be explained on the basis of Ayurvedic principles:

Reduction in fissures and pain is attributed to the *snigdha*, *vāta-sāmaka*, and *tvak-prasādana* properties of the external and internal medications used.

The role of *Pathya āhāra* and *vihāra* was significant in preventing further aggravation of doṣa and promoting healing.

Management and Outcomes:-

- i). **Arogyavardhani vati** (very usefull in *vata kapha Pradhan kushtha, Deepan, Pachan, Lekhan, Kandughna, malshudhikarak (bhedan), Medavridhihara*)
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Conclusion

This case study demonstrates that Śodhana and Śamana Cikitsā is highly effective in managing Vipādikā. A holistic Ayurvedic approach provides sustained relief, improves quality of life, and prevents recurrence. By giving proper Shodhana and Shamana Chikitsa our study is very effective in mainly Vata Kaphaja pradhanya Skin Disease along with Vipadika. Marked improvement (90%) was observed without adverse effects, highlighting the role of Ayurveda in chronic skin disorders.

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