A CONCEPTUAL STUDY OF SHEETPITA, UDARD AND KOTHA W.S.R TO URTICARIA : A REVIEW

Rajveer Sason1*, Anita Sharma2

*1PG Scholar, 2Associate Professor, PG Department of Agada Tantra, National Institute of Ayurveda, Amer Road, India.

ABSTRACT

Urticaria is a type I hypersensitivity reaction which 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 the combination with Pitta they create redness, swelling and itching on the skin. Acute urticaria is associated with more diffuse swelling of lips, face and throat and is spread all over the body.

Urticaria is a vascular reaction of the skin characterized by a sudden general eruption of pale Sign and Symptoms of Urticaria resembles with Koth, Udarda, Sheetapitta. Kotha is one of the symptom mentioned by our Acharyas when body exposed to Asatmyaj Ahara and Vihara. Eg. Contact with poisonous material and Sheeta vyu etc. Our Ancient Acharyas has mentioned several classical Ayurvedic formulations for the cure of urticaria. Ayurveda provides us with detailed information about toxins, their management and methods of purging these poisons out of the body. Ayurvedic herbo mineral preparations restores healthy skin and cure urticaria by establishing the equilibrium of Tridosha (Vata, Pitta, Kapha) and Sapt dhatus (body tissues). The present paper intends to highlight the Ayurvedic management in reducing sign-symptoms and recurrence of the disease.

KEYWORDS: Urticaria, Sheetpitta, Udard, Kotha, Doshas.

INTRODUCTION

In Ayurveda, allergic manifestation is mentioned under the concept of Satmya-asatmya. It manifests due to exposure to Asatmya ahara-vihara and contact with different poisonous materials (allergens). Symptoms of allergic skin reaction is mentioned as Kotha in Brihata Trayi later on it is developed as separate disease under the title Sheetapitta-Udarda-Kotha by Madhavakara.

The word “allergy” is derived from the ancient Greek word allos meaning “other” and ergon meaning “work”. Allergy is one of four forms of hypersensitivity and is formally called as type I (or Immediate) hypersensitivity. Allergic reactions are distinctive because of excessive activation of certain white blood cells called mast cells and basophils by a type of antibody called Immunoglobulin E (IgE). This reaction results in an inflammatory response which can range from mild discomfort to grave consequences. Skin allergies frequently cause rashes, or swelling and inflammation within the skin, which is known as a “wheat and flare” reaction characteristic of hives [Urticaria] and angioedema. “Urticaria is a recurrent, transient, cutaneous swelling with erythema which resolves within 24 hours without leaving any residual cutaneous signs.”

Disease Review

The proper references for Sheetpitta are not found in Brihatrayies but explanation about Udarda, Kotha, Utkotha are found as a vyadhi3 or purvarupa4 or lakshana5. In Ayurvedic texts, the Sheetpitta, Udarda & Kotha these few different characters are described almost similar but having different characters and different causative factors. Sheetpitta and Udarda are synonyms of each other described by Madhavakara. He quoted that Shitapitta having Vatika dominancy while Udarada having Kaphaja dominancy and also mentioned specific characters of Udard.6

The Great Physician Charak has not directly used a word Sheetpitta but words Kotha, Utkoha and Udarda has mentioned at different places.

Madhava nidana explained detail Nidana panchaka of ‘Sheetpitta-Udarda-Kotha’. He only mentioned ‘Sheeta maruta sparsha’ as causative factor but in Charaka samhita we can find many causative factors, which are summarized below.

Nidana

Table 1: Nidana mentioned in Charak Samhita

| 1. | Rakta Dusti | Raktapradoshaja Vikara, Raktarshe dushita raka nigraha, Raktaja Vikara etc. |
| 2. | As Symptom in other Diseases | Poorvarupa of Kushta, Puravarvartaka jwara, Sannipatic jwara, Nanatmaja Pittavikara, Nanatmaja Kaphavikara, Poorvarupa of Unmada etc. |
| 3. | Faulty Ahara and Vihara | Santarpana Janya Vikara, Chhardi Nigraha vikara, Divaswapanjanya Vikara, Contact with various poisonous materials i.e., bathing water, oil massage, clothes, ornaments etc., Symptom of Amashayagata visha, Intake of Dooshivisha etc. |
Urticaria (hives) are transient lesions that are composed of a central weal surrounded by an erythematous halo. Individual lesions are round, oval, or figurate and are often pruritic.

Pathogenesis

Urticaria results from an immediate hypersensitivity reaction after exposure to an allergen or an antigen. Upon exposure, the skin mast cell releases the mediator histamine. Through histamine's effects on the histamine1 (H1) receptors, the capillaries are dilated. With the dilation of the capillaries, vascular permeability occurs. Arteriolar dilatation through nerve reflex causes the typical flaring and eventually the extravasations of fluid cause the wheals. Histamine also causes the pruritus that accompanies the condition. Other mast cells products act as chemotactic factors that attract other cells.

Epidemiology

1. Incidence: 20% of total population may suffer from urticaria once in their life. Acute urticaria is most common in young patients while chronic type is in middle-aged women. A personal or family history of atopy is no more common in patients with urticaria. Patients with active atopic dermatitis or hay fever have an increased incidence of allergic urticaria.

2. Age: Bandkowski (1968) gave an age incidence of 3.4% in babies and children compared with general population rate of 1.87% and he also pointed out that of 885 cases of Urticaria only one had occurred in a patient over 65 year of age. Urbech and Gottlieb showed that of 500 cases, 2/3rd occurred between ages of 20-40 years. It is generally agreed that urticaria is common in third and fourth decade of life.

3. Sex: Generally, women having a greater tendency for urticaria. Voltenani (1965) reported 64% of cases were females.

Causes of urticaria can be classified as under IgE antibodies mediated

Food - Nuts, eggs, fresh fruits especially citrus, chocolates, Fish and shellfish, tomatoes, milk and cheese, spices, yeasts, food additives and preservatives such as tartrazine.

Drugs - Pain killers e.g. Aspirin, codeine, antibiotics, penicillin, sulphonamides. salicylates, Indomethacin and other non steroidal anti inflammatory drugs, opiates, radio contrast media, menthol.

Insect stings, Contactant: Latex, perfumes, wool animals.

Non-IgE mediated

Endogenous mediators, Components of complement C3a, C5a, Neuropeptides (substance P), Eosinophilic major basic protein.

Autoantibodies (IgG) - Direct against IgE or the high affinity IgE receptor

Physical Stimuli - Simple friction or scratching (dermatographism), sunlight, pressure, heat, cold temperature, water, vibration.

Inhalants - Latex, dust, animal dander, pollen.

Infections - Viral upper respiratory infections, bacterial (sinusitis, dental abscess, otitis), viral hepatitis, vaginitis, fungal, helminth.

Systemic Diseases - Collagen vascular diseases, leukemia, lymphoma, endocrinopathies, menstruation.

Samsprapti

Samsprapti is defined as the process involved in the pathogenesis of a disease by vitiated Doshas which are constantly circulating in the body. The first and foremost person to describe the Samsprapti of Sheetapitta-Udarda-Kotha is Madhavakara in Madhav Nidana, as other Acharays have just repeated the same thing. Prakupita Vata and Kapha (Pradushtau Kapha Maruta) due to ‘Sheeta Marutadi Nidana’ (Sheeta Maruta Samsparshat) – when being mixed with ‘Pitta’ (Pittena Saha Sambhooya) spreads internally and externally (bahir-antah visarpatah) and results in to ‘Sheetapitta-Udarda-Kotha’.

Table 2: Rupa (symptoms) of Sheetapitta-Udarda-Kotha

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Rupa</th>
<th>S.No.</th>
<th>Rupa</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Varati dashta</td>
<td>5</td>
<td>Jwara</td>
</tr>
<tr>
<td>2</td>
<td>Kandu bahula</td>
<td>6</td>
<td>Vidaha</td>
</tr>
<tr>
<td>3</td>
<td>Toda bahula</td>
<td>7</td>
<td>Sotsanga saraga</td>
</tr>
<tr>
<td>4</td>
<td>Chardi</td>
<td>8</td>
<td>Vinasha</td>
</tr>
<tr>
<td>5</td>
<td>samsthana Shotha</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
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<td>7</td>
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</tbody>
</table>

MODERN DESCRIPTION OF URTICARIA

Definition

The word ‘urticaria’ derived from Latin word ‘Urtica’ which means stinging nettle. A transient redness and swelling of skin with itching, causing weals in the dermis or large hypodermal swellings, is called Urticaria. Urticaria (hives) are transient lesions that are composed of a central weal surrounded by an erythematous halo. Individual lesions are round, oval, or figurate and are often pruritic.
effect or cells such as eosinophils. Urticaria results not only from sensitivity to antigens, but also from physical factors such as cold, heat, sunlight, water, pressure and vibration. The underlying mechanisms are not well understood, but the final common pathway is believed to involve release of mediators by activated mast cells and basophilic leukocytes. These mediators increase vascular permeability, and plasma leaks into the dermis, resulting in Urticarial wheals.  

**Pathogenic pathways of Urticaria**

<table>
<thead>
<tr>
<th>Contact of Allergen to antigen Presenting cell</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cell migrate to lymphnode</td>
</tr>
</tbody>
</table>

Release TH2

| IL-13 | IL-4 |

IgE Production

| Ige binds to high affinity receptors located on the surface of Mast cells and basophilic |

Release of Chemical mediators

| Release of mediator in the skin |

| Release in superficial layer of skin | Release in deeper layer of dermis and subcutaneous tissue |

| Urticaria | Angioedema |

### Classification

1. Acute
2. Chronic

**1) Acute Urticaria:** Typically, lesions lasting less than 6 weeks are referred to as acute Urticaria. This form is more common in young people and is most likely due to exposure to food allergens, food additives, certain medications.

**2) Chronic Urticaria:** The word ‘chronic’ simply means that it lasts a long time. If Urticaria lasts six weeks or more, it is called ‘chronic urticaria’.

### Physical Urticaria

The physical urticaria is different from other urticarias in that the characteristic wheals can be reproduced by a physical stimulus such as cold, heat, pressure, vibration, sunlight, water, exercise, and increases in core body temperature.

**Thermal Urticaria:** Cold Urticaria, Heat Urticaria

**Light - Solar Urticaria, Porphyria**

**Water - Aquagenic urticaria (water, sweat)**

**Contact Urticaria**

**a) Dermographism:** In Dermographism, which accounts for an estimated 8.5% of all cases of physical Urticaria, wheals and flares occur in response to simple rubbing of the skin. Urticaria accompanies the wheal and flare, and seems disproportionate to the degree of stimulation and the appearance of the wheal and flare.

**b) Pressure urticaria:** This type of urticaria can occur right way, precisely after a pressure stimulus or as a deferred response to sustained pressure being enforced to skin. The source of pressure on the skin can happen from tight fitted clothes, belts, clothing with tough straps.

**c) Vibratory urticaria:** It is rare familial condition consisting of erythema and edema following the stretching of skin.

**d) Localized heat urticaria:** It occurs when heat is applied locally, results in edema and erythema at the site of heat contact.
e) Cholinergic urticaria- 34% of all the physical urticaria are cholinergic, which occur with exercise, anxiety, sweating, and passive warming. The precipitating factor in this reaction is elevated core body temperature.12

Ayurvedic treatment for Urticaria

Principles of treatment of Sheetpitta, Udarda & Kotha

Chakradutta has clearly and systematically described the Shodhana Chikitsa of these diseases giving considerable importance to Doshagati. He has advised that the individuals suffering from Sheetapitta can be given either Sheeta or Usna ahara and Panijyas with due consideration to Doshagati.13

Bhavaprakasha has described Shodhana, Shamana and Bahi Parimarjana Chikitsa in Sheetapitta.14 Yogaratnakara has described Krimighna and Dadrugha drugs to treat Sheetpitta.15

Bhashajya ratnavali has mentioned that patient suffering from Kotha should, in brief, adopt line of treatment prescribed for Kusta, Amlapitta, Udarda.16

PRINCIPLES OF TREATMENT OF SHEETAPITTA-UDARDA KOTHAPA

<table>
<thead>
<tr>
<th>S.No</th>
<th>Methods</th>
<th>Sheetpitta</th>
<th>Udarda</th>
<th>Kotha</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Snehana</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>2.</td>
<td>Svedana</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>3.</td>
<td>Vamana</td>
<td>+</td>
<td>+</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Virechana</td>
<td>+</td>
<td>+</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Raktmokshana</td>
<td>+</td>
<td>+</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Lepas</td>
<td>+</td>
<td>+</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Udvartanas</td>
<td>+</td>
<td>+</td>
<td></td>
</tr>
</tbody>
</table>

Shodhana Chikitsa17

Vamana: Emesis should be given with decoction of Patola and Arishtaka.

Virechana: Purgation should be given with decoction of Triphala, Guggul Pippali

Charaka Samhita18

Udarda Prashamana Mahakashaya, Katu Taila, Mustadi Churna

Sushruta Samhita19

Eladi Gana

Bhavaprakasha20

Navakarshika Guggulu

Trikatu +Sharkara

Yavani +Vyosha +Yavakshara

Aadraksa Rasa +Purana Guda

Yavani + Guda

Guda + Amalaki

Nimba Patra + Ghruta +Amalaki

Ardraka Khand21

Chakradatta21

Visarpokta Amritadi Kwatha

Agnimantha Moola +Ghruta

Shushka Pakva Gambhari Phala after boiling with milk

Bhashajya Ratnavali22

Yashtyadi Kwatha

Goghrita +Maricha. As Vardhamana Prayoga

Haridra Khand23

Brihat Haridra Khand23

Shleshmapittantako Rasa

Veereshvaro Rasa

Shitapitraprabhanjana Rasa

Durva + Nisha – Lepa

Siddhartha + Rajan +Kusha+ Prapunnada +

Tila + Katu Taila – Udvartana

Katu Taila – Abhyanga

Kshara+ Rock salt + Oil – Abhyanga

Yogaratnakara23

Vardhamana Pippali

Vardhamana Lasuna Prayoga

Pathya-Apathya24

Pathya-Apathya sevana vidhi plays an important role in the management of any disease. Pathya is that which is suitable to the disease and to the diseased. While Apathya is unsuitable and which aggravates the disease process leading to more discomfort to the patients. Pathya and Apathya ahara is listed below,

<table>
<thead>
<tr>
<th>Pathya Ahara</th>
<th>Apathya Ahara and Vihara</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Jeerna Shali</td>
<td>1. Ksheera vikarani</td>
</tr>
<tr>
<td>2. Jangala Mamsa</td>
<td>2. Chhardi Nigraha</td>
</tr>
<tr>
<td>3. Triphala</td>
<td>3. Ikshu Vikarani</td>
</tr>
<tr>
<td>4. Madhu</td>
<td>4. Divaswapna</td>
</tr>
<tr>
<td>5. Madga Yusha</td>
<td>5. Matsya</td>
</tr>
<tr>
<td>7. Usmodaka</td>
<td>7. Disha Pavana</td>
</tr>
<tr>
<td>8. Karkotaka Shaka</td>
<td>8. Snana</td>
</tr>
<tr>
<td>10. Moolaka Yusha</td>
<td>10. Atapa Sevana</td>
</tr>
<tr>
<td>11. Dadhama Phala</td>
<td>11. Virudhahara</td>
</tr>
<tr>
<td>12. Shigru Shaka</td>
<td>12. Vyavaya</td>
</tr>
</tbody>
</table>

CONCLUSION

In modern science there is vast treatment of Urticaria and other allergic skin disorders but reoccurrence of disease is common in very much cases. Ayurveda has lot of potential in the treatment aspect of allergic skin reaction by using of various Ayurvedic formulations and by following Pathya apathy in a logical manner.

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*Address for correspondence
Dr. Rajveer Sason
M.D.Schoolr
Dept. of Agada Tantra evam Vyavahara Ayurveda, National Institute of Ayurveda, Jaipur, Rajasthan – 302002
Email: sasonrajveer2@gmail.com
Mob: +919509116664

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