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Case Report

# Management of Chronic Contact Eczema (Stravi Vicharchika) through Ayurvedic Therapy: A Case Study

**Aishwarya Sureshrao Kadam*, Sourabh Gyanranjan Deshmukh**

Department of Kayachikitsa, Mahatma Gandhi Ayurved Hospital and Research Centre, DMIHER, Wardha, Maharashtra, INDIA.

**ABSTRACT**

Ayurveda, the traditional Indian medical science, broadly identifies skin ailments under the umbrella term *Kushtharoga*, which covers a diverse range of dermatological issues. These disorders are categorized into two groups: Mahakushtha (major skin diseases) and Kshudra Kushtha (minor skin diseases). The major group includes chronic and severe conditions like psoriasis, eczema, leprosy, and vitiligo, whereas the mild group consists of more common concerns such as acne and various forms of dermatitis. Eczema is a skin condition that presents with a range of clinical and histological features. The initial signs often include red macules, small raised papules, and fluid-filled vesicles, which may merge to form larger patches or plaques. This presentation is most typical of acute eczema, especially in forms like vesicular hand eczema (pompholyx) or acute allergic/contact dermatitis. In more severe cases, symptoms like oozing and crust formation are commonly seen. In Ayurveda, eczema is identified with *Vicharchika*, where dry eczema (*Shushka Vicharchika*) manifests as itching (*Kandu*), raised lesions (*Pidika*), and dark brown discoloration (*Shyava Varnata*), while wet eczema (*Stravi Vicharchika*) shows similar features along with excessive discharge (*Bahustrava*).This is a case report of a 38-year-old female patient presented with widespread scaly skin lesions on the lower limbs accompanied by intense itching and serous discharge persisting for two and half months. Based on the clinical signs and symptoms, the condition was diagnosed as *Stravi Vicharchika* (Chronic Contact Eczema) according to Ayurvedic principles. The patient was successfully treated with Ayurvedic *shamana chikitsa* (Alleviating medications) along with *pathya* (Dietary Regimen) in one month. This case highlights the promising role of Ayurvedic therapy, illustrating how individualized treatment approaches can effectively manage skin disorders.

**Keywords** Ayurveda, Bahustrava, Contact Dermatitis Eczema Eczema, Kshudra kushtha, Shyava varnata, Stravi Vicharchika, Vicharchika.

**Correspondence:**
**Dr. Aishwarya Sureshrao Kadam**
Department of Kayachikitsa, Kayachikitsa, Mahatma Gandhi Ayurved Hospital, and Research Centre, DMIHER, Wardha-442001, Maharashtra, INDIA.
Email: aishwaryakadam135@gmail.com

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## INTRODUCTION

Chronic contact eczema is a recurrent inflammatory skin disorder caused by repeated exposure to irritants or allergens, leading to symptoms such as itching, erythema, dryness, scaling, and oozing that impair quality of life (Kliegman *et al*., 2016). In Ayurveda, this condition is correlated with *Vicharchika*, classified under *Kshudra Kushtha*, and described with features including *kandu* (itching), *raga* (redness), *rukshata* (dryness), *srava* (oozing), and *shyavata* (discoloration), reflecting Kapha-Pitta predominance (Arya *et al*., 2016). Conventional management often relies on corticosteroids and immunosuppressants, which provide symptomatic relief but are associated with recurrence and adverse effects (Lawrence *et al*., 2023). Ayurvedic management emphasizes *Shodhana* (purification therapies), *Shamana* (pacifying therapies), and lifestyle modifications to correct *dosha* imbalance and achieve sustained outcomes. The classical *Samhitas* do not provide a specific or detailed line of treatment for *Vicharchika*. Therefore, its management is primarily based on assessing the predominant *Dosha*. The therapeutic approach should be formulated considering both *Roga Bala* (severity of the disease) and *Rogi Bala* (strength of the patient). In most cases, patients with *Vicharchika* who experience limited relief from modern medical treatments turn to Ayurveda in search of more effective and lasting remedies for their condition.

### Patient information

#### *Case History*

A female patient of age 38 years came to Kayachikitsa OPD complaining of widespread scaly lesions over the lower limbs affected, accompanied by intense itching for 2.5months and serous discharge with burning sensation and discolouration, since approximately 2 months. It was provisionally diagnosed as *Stravi Vicharchika*.

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## History of present illness

The patient presented with clinical signs and symptoms including *Kandu* (itching sensation) for 2.5 months, *Shyava Varna* (dark brownish discoloration) and *Bahusrava* (profuse discharge) and *Daha* (burning sensation) for 2 months. Despite receiving allopathic treatment from a general physician at a private hospital (corticosteroids and antibiotics) for 2 months, she experienced no significant relief and subsequently approached at Kayachikitsa OPD for further management.

## Personal / Past/ Medical/ Family history

The patient reported disturbed sleep for the past two months, primarily due to severe itching and a persistent burning sensation. Her dietary habits included frequent intake of curd and milk (twice daily), spicy and oily foods, and tea consumption three times a day. She had no prior history of Diabetes Mellitus, Hypertension, or any other notable medical or surgical conditions Family history was non-contributory. On psychological evaluation, the patient appeared to be under considerable stress, which was largely attributed to her ongoing discomfort, including the intense itching, burning sensation, and disrupted sleep pattern. Clinical evaluations, including *Ashtavidha Pariksha* and *Dashavidha Pariksha*, showed no abnormalities. The differential diagnosis includes Kitibha, Dadru, Charmakeela and Pama Kushtha (a scabies-like condition), while the final diagnosis is chronic contact eczema, also known as Stravi Vicharchika (Tables 1-6).

**Table 1: Chief complaints along with the duration of the patient.**

| Chief complaints | Duration |
|---|---|
| Kandu | 2.5 months |
| Strava | 2 months |
| Shyavata/ vaivarnyata | 2 months |
| Daha | 2 months |

## Examination on the basis of Ayurveda parameters

**Table 2: *Ashtavidha pariksha*.**

| Parameters | Findings |
|---|---|
| Nadi | 78/min, *pitta-kaphaj* |
| Mala | Niram, 1-2 times/day |
| Mutra | Niram, 5-6 times/day |
| Jivha | *Ishatsaam* (coated) |
| Shabda | *Spashta* (clear) |
| Sparsha | *Anushnasheeta* (normal) |
| Druk | *Prakrit* (no pallor, icterus present) |
| Akriti | Madhyam (medium) |

**Table 3: *Dashavidha pariksha*.**

| Sl. No. | Examination | Observation |
|---|---|---|
| 1. | *Prakruti* (constitution of the patient) | Pitta-kapha |
| 2. | *Vikruti* (pathological variations) | *Dosha* (*Bodily humors*)-*Kapha-vata*<br>*Dhatu* (*Body tissues*)-*Rasa, Rakta, Mamsa*<br>*Strotas* (*channels*)-*Rasavaha, Raktavaha, Mamsavaha* |
| 3. | *Sara* (quality of tissues) | *Madhyam* (average) |
| 4. | *Samhanana* (built of the body) | *Madhyam* (average) |
| 5. | *Praman* (anthropometric measurements) | Weight-58 kg, Height-5.6 |
| 6. | *Satmya* (adaptability) | *Madhyam* (average) |
| 7. | *Satva* (mental strength) | *Madhyam* (average) |
| 8. | *Aahar Shakti* (food and digestion capacity) | *Madhyam* (average) |
| 9. | *Vyayam Shakti* (exercise capacity) | *Madhyam* (average) |
| 10. | *Vaya* (age) | *Madhayam Avastha* (Middle age) |

## Assessment Parameters

**Table 4: Gradation of symptoms/subjective parameters of *Vicharchika* (Sali and Banu, 2022).**

| Symptoms | Gradation | Score |
|---|---|---|
| *Kandu* (Itching) | No itching | 0 |
| | Itching present rarely | 1 |
| | Itching disturbing patient's attention | 2 |
| | Severe itching disturbing patient's sleep | 3 |
| *Strava* (Discharge) | No Strava | 0 |
| | Occasional Strava after itching | 1 |
| | Mild Strava after itching | 2 |
| | Profuse Strava making clothes wet | 3 |
| *Shyavata / vaivarnyata* (Discoloration) | Normal skin colour | 0 |
| | Brownish red discoloration | 1 |
| | Blackish red discoloration | 2 |
| | Blackish discoloration | 3 |
| *Daha* (Burning sensation) | Absence of burning sensation in affected part | 0 |
| | Rarely burning sensation in affected part | 1 |
| | Continues burning sensation in affected part | 2 |
| | Disturbing patient's sleep | 3 |

### Shamana chikitsa

**Table 5: Treatment Modality.**

| Sl. No. | Name Of Medications | Dose With *Anupan* | Duration |
|---|---|---|---|
| 1. | *Gandhaka rasayana* (250 mg) | 2 tablets, two times a day with water, after meals | 30 days |
| 2. | *Sutshekhar rasa* (250 mg) | 1 tablet, three times a day orally chewing, before meals | 30 days |
| 3. | Patolkaturohinyadi kashayam | 20 mL, two times a day with warm water, after meals | 30 days |
| 4. | Karanj tailam | Local application, twice a day | 30 days |
| 5. | Panchatikta ghrita | 2 tsp, two times a day with warm water, before meals+local application once a day | 30 days |
| 6. | Gandharva Haritaki churna | 5 g, with warm water, at bed time | 15 days |

(Note- The treatment was given for 15 days and then continued the same for next 15 days after first follow up).

### Pathya-Apathya: (Dietary Regimen)

The patient was advised to follow a strict dietary and lifestyle regimen to support the management of *Stravi Vicharchika*. She was instructed to consume a light and easily digestible diet including moong dal, old rice, bottle gourd, bitter gourd. She was strictly advised to avoid curd, milk, fermented foods, sweets, seafood, oily and spicy items, as these aggravate *Kapha* and *Pitta*. Lifestyle modifications included maintaining skin hygiene, avoiding synthetic clothing, exposure to heat, dust, and chemical irritants, along with ensuring adequate sleep and practicing stress-reducing activities like meditation (Figure 1).

## DISCUSSION

Eczema (dermatitis) is one of the most prevalent and distressing allergic skin conditions. In the acute phase, it is mainly characterized by fluid accumulation within the epidermis (spongiosis) and the formation of blisters (intraepidermal vesicles). As the condition becomes chronic, thickening of the epidermis (acanthosis) becomes more prominent (Arya *et al*., 2016). Eczema, a type of dermatitis, typically develops after exposure to irritants or allergens. Among children, the most prevalent form is atopic dermatitis. The term "eczema" is broadly used to describe various chronic or recurring skin rashes, which may manifest with symptoms such as redness, swelling, intense itching, skin cracking, crust formation, fluid discharge, or even bleeding (Kliegman *et al*., 2016). In Ayurveda, it is correlated with *Vicharchika*. It is classified under *Kshudra Kushtha* in Ayurveda and is typically characterized by symptoms such as *kandu* (itching), *strava* (discharge), and *daha* (burning sensation). The condition can manifest in both acute and chronic forms, involving significant discomfort and variable clinical presentation (Ranade, 2013).

The classical *Samhitas* do not provide a specific or detailed line of treatment for *Vicharchika*. Therefore, its management is primarily based on assessing the predominant *Dosha*. The therapeutic approach should be formulated considering both *Roga Bala* (severity of the disease) and *Rogi Bala* (strength of the patient). In most cases, patients with *Vicharchika* who experience limited relief from modern medical treatments turn to Ayurveda in search of more effective and lasting remedies for their condition. Therefore, the treatment approach should be individualized based on the dominant *Dosha* involved and the strength of the disease (*Roga Bala*) as well as the patient's strength (*Rogi Bala*). The medications used for treatment possess anti-inflammatory and antiseptic qualities. They help alleviate itching, discharge, pain, and discoloration of the affected skin over the feet.

### Gandhak Rasayan

This Ayurvedic formulation, primarily indicated for the healing of skin ailments, is recognized for its potent antibacterial, antiviral, and antimicrobial properties, as described in the *Rasayan Adhikar* section of *Yogratnakar*. The key ingredient is *Gandhak* (purified sulfur), known for its *Kandughna* (anti-itching) and *Krimighna* (anti-parasitic) effects. This detoxification step is essential to neutralize its potential toxicity and enhance its therapeutic efficacy (Shastri, 2013). *Gandhak Rasayana* works by purifying the blood and skin (*Rasa-Rakta Dhatus*), reducing infection and inflammation, normalizing skin turnover, and rejuvenating tissues.

### Sutshekhar Rasa

It helps balance *Pitta* and *Vata Doshas*, thereby preventing the recurrence of related disorders (Patil and Jadhav, 2024). Its key ingredients, *Parada* and *Gandhaka*, detoxify and purify the blood; *Tankana* provides antiseptic balance; *Shankha* and *Kapardika Bhasma* soothe inflammation; *Dadima* offers antioxidant support; and *Ghrita* nourishes the skin. Together, these ingredients help purify the *Rasa-Rakta Dhatus* and promote healing of eczema lesions.

## OBSERVATION

**Table 6:** Depicting variations in symptoms observed before and after treatment.

| Symptoms | Before treatment | After 15 days | After treatment on 30th day |
|---|---|---|---|
| Kandu | 3 | 2 | 0 |
| Strava | 2 | 1 | 0 |
| Shyava varnata | 3 | 2 | 1 |
| Daha | 3 | 2 | 0 |




**Figure 1:** Before and after treatment difference in patient's symptoms.

### Patolkaturohinyadi kashaya

This formulation is classified under the *Shodhanadi Gana* in the *Ashtanga Hridaya* and is rich in *Tikta Rasa* (bitter-tasting herbs), which play a vital role in the purification (*Prasadana*) of *Rasadhatu* (plasma fluids) and *Raktadhatu* (blood) by pacifying the vitiated *Kapha* and *Pitta Doshas* (fundamental bio-energetic forces governing body functions) (Gaud, 2013). It functions as a blood purifier (*Raktashodhaka*), anti-pruritic (*Kandughna*), effective in skin disorders (*Kushtaghna*), and enhances complexion (*Varnya*). Additionally, *Pippali* in the formulation contributes significantly to enhancing the bioavailability of the other ingredients (Chavan *et al*., 2011).

### Karanja tailam

*Karanja* based formulations have shown effectiveness in managing chronic plaque psoriasis due to the presence of active compounds like *karanjin* and *pongapin*. Molecular docking studies revealed that both *karanjin* and *pongapin* exhibited binding affinities with various target receptors that were comparable to those of methotrexate, a standard drug used in psoriasis treatment. These findings suggest that pongapin and karanjin could serve as potential natural alternatives for the management of psoriasis (Saste and Mytrhey, 2022).

### Panchatikta Ghrita

For *Snehapana* (internal oleation), the patient was given *Panchatikta Ghrita*. It is composed of *Nimba, Patola, Vyaghri, Guduchi, Vasa, Haritaki, Vibhitaki, Amalaki*, and *Goghrita*. These ingredients possess *Raktaprasadaka* (blood-purifying) and *Kushtaghna* (anti-skin disorder) properties. The predominant *Tikta Rasa* (bitter taste) in this formulation is particularly effective in managing *Pitta*-dominant conditions and *Rakta Vikara* (blood disorders). Therefore, in this case, the formulation was administered both internally and applied topically to the affected areas, providing a soothing and therapeutic effect (Singh *et al*., 2020).

### Gandharva Haritaki churna

*Haritaki* is mainly used in *Vata-Kaphaja* conditions of *Vyadhi* (ResearchGate, 2022). *Gandharva Haritaki Churna* is a traditional polyherbal Ayurvedic formulation known for its gentle purgative action, which is considered more potent than that of *Triphala*. As indicated by the name itself, the primary components of this formulation are *Haritaki* and *Eranda Taila* (castor oil). Its detoxifying and lightening action supports skin restoration and reduces redness in *Pitta*-prone dermatoses. *Gandharva Haritaki* is a traditional Ayurvedic formulation commonly employed to promote digestion, aid detoxification, and enhance overall vitality. Its key constituents, *Haritaki* and *Trivrit*, are extensively recognized in classical texts for their medicinal benefits. It supports the digestion of toxins (*Ama*), purifies the system, and promotes bowel cleansing, thereby facilitating the proper formation of *Raktadhatu*, which precedes *Rasadhatu* (Patil, 2020).

## CONCLUSION

Thus, in this case study, Ayurvedic herbs when administered alongside strict dietary regulations have proven to be highly effective in very less time in the management of *Vicharchika* (Eczema). This therapeutic approach not only provided symptomatic relief but also addressed the root cause and *samprapti vighatana*, contributing to long-term disease control and improved quality of life.

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## GLOSSARY

**ADRs:** Adverse Drug Reactions; **Ama:** Toxic metabolic waste formed due to improper digestion in Ayurveda; **Anupan:** Vehicle or medium used for administering medicine; **Ashtavidha Pariksha:** Eightfold Ayurvedic clinical examination; **Avastha:** Stage or condition; **Bahusrava:** Profuse discharge; **Bala:** Strength or severity; **Bhasma:** Calcined mineral or metallic Ayurvedic preparation; **Dadima:** *Punica granatum* (pomegranate); **Dashavidha Pariksha:** Tenfold Ayurvedic clinical examination; **Dhatu:** Body tissues; **Gandhaka:** Purified sulfur; **Ghrita:** Clarified butter (ghee); **Kapha:** One of the three Doshas governing structure and lubrication; **Kandughna:** Anti-pruritic (anti-itching) property; **Kaphaja**: Dominated by Kapha Dosha; **Karanja:** *Pongamia pinnata*; **Krimighna:** Antimicrobial or anti-parasitic property; **Kshudra Kushtha:** Minor skin disorders in Ayurveda; **Kushtaghna:** Effective against skin diseases; **Madhyam:** Moderate or average; **Mala:** Stool or excretory waste; **Mamsa:** Muscle tissue; **Mutra:** Urine; **Nadi:** Pulse examination; **Niram:** Normal or free from abnormalities; **OPD:** Outpatient Department; **Parada:** Purified mercury; **Pathya:** Recommended diet and lifestyle regimen; **Pippali:** *Piper longum* (long pepper); **Pitta:** One of the three Doshas governing metabolism and heat; **Prakruti:** Natural body constitution; **Praman:** Anthropometric measurements; **Prasadana:** Purification or cleansing; **QoL:** Quality of Life; **Raga:** Redness or erythema; **Rakta:** Blood tissue; **Raktadhatu:** Blood tissue system; **Raktaprasadaka:** Blood-purifying property; **Raktashodhaka:** Blood purifier; **Rasa:** Plasma or nutrient fluid; **Rasadhatu:** Plasma tissue; **Rasavaha:** Channels carrying plasma/nutrients; **Rogi Bala:** Strength or immunity of the patient; **Roga Bala:** Severity or strength of disease; **Rukshata:** Dryness; **Samhanana:** Body build and compactness; **Samprapti Vighatana:** Breaking the pathogenesis of disease; **Sara:** Quality or excellence of body tissues.

## CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

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