

CASE STUDY

# Ayurvedic Management of Henoch-Schonlein purpura (HSP): A Case Study

Author: Sunita Khuntay<sup>1</sup>

Co Authors: SR Inchulkar<sup>2</sup> and Khushboo Karte<sup>3</sup>

<sup>1-3</sup>Department of Agada Tantra Evam Vidhi Ayurved, Shri Narayan Prasad Awasthi Government Ayurved College Raipur, Chhattisgarh, India

## ABSTRACT

Henoch-Schönlein purpura (HSP) is an uncommon small-vessel vasculitis illness that most commonly occurs in children, though in adults it is more severe and more complicated, particularly concerning renal involvement. It is typically preceded by an upper respiratory infection and is manifested by palpable purpura (purples), arthralgia (pain in the joints), renal dysfunction, gastrointestinal manifestations, and renal dysfunction in some patients. HSP from an Ayurvedic context very much resembles *Raktapradoshaja Vikara*, which is the vitiation of *Rakta* and *Pitta dosha* due to an improper food and lifestyle habit. This case study explores the *Ayurvedic* management of HSP in a 43-year-old female patient through the lens of *Agadtantra*, a branch traditionally concerned with toxicology and now being applied in autoimmune pathologies. Over a treatment period of 14 days, marked improvement was observed in cutaneous, musculoskeletal, and gastrointestinal symptoms, suggesting a promising role for *Ayurvedic* interventions in systemic immune-mediated disorders. The findings highlight the therapeutic potential of classical *Ayurvedic* principles in addressing modern clinical challenges and call for further systematic research in this direction.

**Key Words** HSP, IGA vasculitis, *autoimmune disease*, *Rakta Pradoshajavyadhi*, *Agadtantra*

Received 10<sup>th</sup> August 2025 Accepted 23<sup>rd</sup> September 2025 Published 10<sup>th</sup> November 2025

## INTRODUCTION

In *Ayurvedic* physiology, *Raktadhatu* holds a place of profound significance as the second among the *Sapta Dhatus* (seven fundamental tissues)<sup>1</sup>. It is formed from the refined portion (*prasadabhaga*) of *Rasa Dhatu* and is essential for the nourishment and vitality of all bodily tissues. Classical *Ayurvedic* texts describe *Raktadhatu* as sharing several functional and qualitative attributes with *Pitta Dosha*, including heat (*ushna*), liquidity (*drava*), sharpness

(*tikshna*), unctuousness (*sneha*), and mobility (*sara*)<sup>2</sup>. These shared properties are due to the predominance of *Agni* and *Jala Mahabhutas* in both *Rakta* and *Pitta*<sup>2</sup>. Functionally analogous to blood in modern biomedical science, *Raktadhatu* circulates throughout the body, sustaining cellular and tissue health while supporting vital functions such as complexion, sensory perception, and tissue strength. Due to its indispensable role in maintaining homeostasis and life, *Acharya Sushruta* elevated *Rakta* to the

## CASE STUDY

status of a “fourth *dosha*,”<sup>3</sup> distinct from but intricately linked to *Vata*, *Pitta*, and *Kapha*. When in its balanced state, *Rakta* contributes to the maintenance of systemic equilibrium. But when it is vitiated—either by internal or by external causes—it leads to a particular set of disorders called *Raktapradoshaja Vyadhis*. Such conditions are characterized by a host of symptoms, such as dermal discoloration, burning, itching, inflammation, and disturbances in the system. Pathogenesis of these conditions has a close relationship with *Pitta*, which has a common location of residence (*Ashraya-Ashrayi Bhava*) with *Rakta* and hence becomes an initial *dosha* in the process of vitiation. The classical texts describe in detail the blood-borne conditions: *Charaka Samhita* describes them in the *Vidhishonitiya*<sup>4</sup> and *Vividhasitapitiya* chapters<sup>5</sup>, whereas *Sushruta Samhita* places them in the *Vyadhisammuddeshiya Adhyaya*<sup>6</sup>. *Vagbhata*, though not classifying these diseases distinctively as *Dhatupradoshaja Vyadhis*, presents discussion in the *Siravyadhividhi Adhyaya* in close conformity with the conditions attributed to blood vitiation by previous authors. Since there is dynamic interplay between *Raktadhatu* and *Pitta Dosha*, and both play a key role in the evolution of disease, the theoretical framework of *Raktapradoshaja Vyadhi* is a fundamental framework to understand inflammatory and autoimmune diseases in the *Ayurvedic* system. This theoretical framework allows for integrative systems in the management

of systemic disorders with a vascular or haematological aetiology.

## CASE REPORT

A 43-year-old woman presented to the OPD of *Agadtantra* with an acute onset of fever that lasted for one day. On the following day, she had a pruritic, erythematous rash that began as papular lesions on the lower limbs, i.e., the feet. The lesions further extended proximally to involve thighs and upper limbs but remarkably spared the trunk, palms, and soles. The rash was non-blanching and tender without any discharge, burning, or oedema. The patient developed colicky pain of a severe nature in the right and left lower quadrants within 48 hours of the onset of rash, though not with signs and symptoms of the gastrointestinal tract such as diarrhoea or vomiting. This was followed by the onset of arthralgia, further impacting her daily functioning. Initial laboratory investigations results showed: Hb: 10.6 g/dL, WBC: 6.79 X 10<sup>3</sup>/μL, PCV: 34.7%, MCH: 25.4 pq, MCHC: 30.5 g/dL, RDW-SD: 53.5 Fl, PWD: 18.2 fl, MPV:12.7 fL, ANA TITRE: Positive (END POINT- 1:320), COMPLEMENT 4 (C4): 0.01 gm/L, TSH-ULTRASWNSATIVE: 4.996 μIU/ML. The patient's bowel movements and appetite stayed consistent, but nocturnal itching and sporadic stomach pain after meals severely disrupted sleep. According to dietary history, *pitta*-provoking foods such as raw mangoes, pickles, salty snacks (like peanuts and potatoes),

### CASE STUDY

brinjal rice (*vangi bhat*), and curd were frequently consumed. The patient was determined to have a *Kapha-Pitta Prakriti* from an *Ayurvedic* perspective. Her constitutional characteristics included *Vishamagni* (variable digestive capacity), *Madhyama Koshta* (moderate bowel nature), *Madhyama Satva* (balanced

mental strength), *Madhyama Satmya* (moderate adaptability to diet and environment), *Madhyama Sara* (moderate tissue excellence), *Madhyama Samhanana* (moderate physique), and *Madhyama Bala* (moderate physical strength). Henoch-Schönlein disease was diagnosed based on the clinical picture and laboratory results.

### TREATMENT GIVEN

**Table 1** Treatment from dt. 22/02/25 to 07/03/25

Sr.no.	Medicine	Dose	Anupana
1.	<i>Praval panchamrit</i> 250mg <i>Kamdudha ras</i> 125mg <i>Makshik Bhasma</i> 125mg <i>Guduchi satva</i> 250mg	TDS B/F	<i>Dadimavaleha</i>
2.	<i>Kumariaashav</i> 20ml	BD B/F	With equal amount of water
3.	<i>Panchatikta ghritha guggulu</i>	2BD B/F	Luck warm water
4.	<i>Kumkumaadi taila + Aloe vera gel</i>	Q.S. Ext app	
5.	<i>Avipattikar churna</i> 3gm	HS B/F	Luck warm water

### ADVICE GIVEN

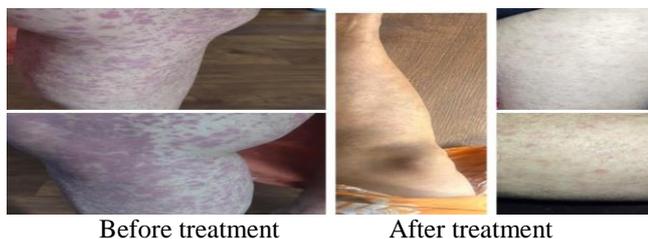
The patient was advised to avoid *viruddhahara* (incompatible food combinations), as well as junk or fast foods, raw mangoes, brinjal, radish, curd, sprouts, non-vegetarian items including eggs, and excessively spicy, salty, oily, or sour food and drinks. Various green leafy vegetables were recommended as part of a diet to aid digestion and balance the *doshas*. Proper intake of fluids was also stressed for hydration purposes. Proper sleep with enough rest was also underscored as part of the healing process. A return visit to the outpatient department was also arranged after 15 days for follow-up and adjustment where needed.

### DISCUSSION

*Praval panchamrit*: *Praval Panchamrut Ras*, with its *Raktaprasadak* (blood-purifying) and *Pittashamak* properties, can be beneficial in skin disorders caused by blood impurities and excess *Pitta*. Its ingredients help detoxify the blood, reduce inflammation, and support healthy skin <sup>7</sup>.

*Kamdudha ras*: *Kamdudha Ras*, which is *Pittashamak* in nature with cooling properties, reduces internal heat and inflammation and is thus used to treat *Pitta*-related skin conditions such as rashes, burning sensation, and redness <sup>8</sup>.

*Makshik Bhasma*: *makshika Bhasma*, being rich in antioxidants and immuno-modulatory activity, neutralizes the free radicals and prevents oxidative damage and inflammation. This makes it helpful for the treatment of skin conditions like acne, eczema, and psoriasis, which are generally



**Figure 1** Clinical picture of palpable purpura involvement of lower extremities before and after treatment

## CASE STUDY

related to oxidative stress as well as immune deficiency<sup>9</sup>.

*Guduchi satva*: *Tinospora cordifolia* or *Guduchi* is highly known for its strong immunomodulatory activity. Active compounds like cordifolioside A and magnoflorine influence cytokine production, stimulate immune cells, and cause mitogenicity, thus enhancing the immunity of the body.

This makes *Guduchi* effective in supporting overall immune function<sup>10</sup>.

*Kumaryasava*: *Kumaryasava* prepared by fermentation using flowers of *Wood for dia fruticosa* had high antioxidant activity. The drug showed strong free radical and hydrogen peroxide scavenging activity and performed better than others in the test. This indicates that its antioxidant efficacy is improved by traditional method of preparation<sup>11</sup>. *Panchatikta ghrith guggulu*: it made with herbs like *Patola*, *Triphala*, and *Guduchi*, is effective in managing skin disorders (*Kushta*) due to its *Pitta-Kapha* balancing, detoxifying, and blood-purifying properties. It helps reduce inflammation, prevents disease spread, and supports healing of skin tissues<sup>12</sup>.

*Kumkumadi taila*: *Kumkumadi taila* helps in managing skin disorders by balancing *Pitta* and *Kapha* doshas. Its key tastes—*Kashaya*, *Tikta*, and *Madhura*—support skin healing, reduce pigmentation, itching, and inflammation, while also enhancing complexion and preventing premature aging<sup>13</sup>.

*Aloe vera gel*: *Aloe vera* helps in skin diseases by reducing inflammation and stabilizing immune responses. It lowers histamine release, supports cytokine activity, and protects skin cells, making it effective in conditions like eczema and dermatitis<sup>14</sup>.

*Avipattikar churna*: *Avipattikar Churna*, with its *Pitta*-pacifying action, helps reduce heat and inflammation, making it beneficial in treating *Pitta*-related skin issues like acne, rashes, and burning sensations<sup>15</sup>.

## CONCLUSION

This case study demonstrates successful management of Henoch-Schönlein purpura with *Ayurvedic* treatment alone summarized in Table 1. No steroids or antibiotics were given throughout therapy. Marked improvement was seen on the seventh day with significant relief from symptoms such as pruritus, abdominal and joint pains, resolution of the skin rash as seen in Figure 1.

### Declaration of patient consent

The authors assure that they have obtained a patient consent form, wherein the caregiver or patient has provided permission for the publication of the case along with images and other clinical information in the journal. The caregiver or patient recognizes that their name and initials will not be revealed and genuine efforts will be made to protect their identity. Complete anonymity cannot be guaranteed.

### Financial support and sponsorship

**CASE STUDY**

Nil.

**Conflicts of interest**

There is no conflict of interest.

## CASE STUDY

## REFERENCES

1. Bhisagrata, Kaviraj Kunjalal. (2002). *Susrutha Samhita of Acharya Susruta: Sutrasthana* (Vol. 1, 21/2, 2nd ed., pp. 185). Varanasi: Chaukhambha Sanskrit Series Office.
2. Kashyap, Manoj, Chandravanshi, Anil Kumar, Sasmal, Gopal, & Bhardwaj, Vijay. (2023). Conceptual study of Rakta Dhatu in different Samhitas. *World Journal of Pharmaceutical and Medical Research*, 9(6), 186–189.
3. Planet Ayurveda. (2025, April 22). Mahatiktaka Ghrita. Planet Ayurveda. <https://www.planetayurveda.com/library/mahatiktaka-ghrita>
4. Murthy, Prof. Srikanta K. R. (2010). *Susruta Samhita of Acharya Susruta: Sutrasthana* (Vol. 1, 14/5, Reprint ed., pp. 87) [English translation]. Varanasi: Chaukhambha Krishnadas Academy.
5. Murthy, Prof. Srikanta K. R. (2010). *Susruta Samhita of Acharya Susruta: Sutrasthana* (Vol. 1, 24/9, Reprint ed., pp. 175) [English translation]. Varanasi: Chaukhambha Krishnadas Academy.
6. Sreekumar, T. (2011). *Ashtanga Hridaya of Acharya Vagbhata: Sutrasthana* (Vol. 1, 1/13, 3rd ed., pp. 38) [English translation and commentary]. Harishree Publications.
7. Raut, Ankita P., Patil, Ranjit D., Takaliker, Jyotsna M., & Bakare, Sunil C. (2023). Critical review on pharmacodynamic action of Prawal Panchamruta Ras. *Asian Digest Journal of Integrative Medicine (ADJIM)*, 8(1), 17–19.
8. Totawar, Vasavi (Madurwar), Dive, Mukund, & Kubde, Sneha. (2020). A review study of the role of Kamdudha Ras in Mahastrotasa Vyadhi. *World Journal of Pharmaceutical and Medical Research*, 6(7), 258–261.
9. Shrikanth, A. S., & Jadar, P. G. (2019, October 31). Immunomodulatory effects of Swarnamakshika Bhasma: An experimental study. *Journal of Ayurveda and Integrative Medicine Sciences*, 4(5), 152–161. Retrieved April 29, 2025, from <https://www.jaims.in>
10. Jagtap, Mruta A., & Patrikar, Vijay G. (2024). A critical review on role of Guduchi Sattva in the management of thrombocytopenia-induced epistaxis. *World Journal of Pharmaceutical and Medical Research*, 10(5), 247–249.
11. Manmode, Rahul, Manwar, Jagdish, Vohra, Mustafa, Padgilwar, Satish, & Bhajipale, Nitin. (2012). Effect of preparation method on antioxidant activity of Ayurvedic formulation Kumaryasava. *Homeopathy & Ayurvedic Medicine*, 1, Article 114. <https://doi.org/10.4172/2167-1206.1000114>
12. Karigar, Shivananda B. (2021). Classical utility of Panchatikta Guggulu Ghrita in its indications: Literary review. *International Ayurvedic Medical Journal*. Retrieved June 2021, from [http://www.iamj.in/posts/images/upload/1266\\_1273.pdf](http://www.iamj.in/posts/images/upload/1266_1273.pdf)

### CASE STUDY

13. Ravi, Arya P., Varada, M. S., Sanila, V. K., & Leena, K. C. (2023). A comprehensive review on Kumkumadi Thaila. *International Journal of Ayurveda and Pharma Research*, 11(11), 61–66.
14. Surjushe, A., Vasani, R., & Saple, D. G. (2008). Aloe vera: A short review. *Indian Journal of Dermatology*, 53(4), 163–166.  
<https://doi.org/10.4103/0019-5154.44785>
15. Ravte, Rohit, Dixit, Amit Kumar, Mitra, Achintya, Hazra, Jayram, & Sharma, Loknath. (2015). Evaluation of the efficacy of Avipattikar Churna in the management of Amlapitta. *European Journal of Biomedical and Pharmaceutical Sciences*, 2, 245–252.