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CASE REPORT

MANAGEMENT OF INDRALUPTA- A CASE REPORT

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Abstract

Alopecia Areata, a prevalent autoimmune disorder, manifests as patchy hair loss caused by immune-mediated damage to hair follicles. With rising incidence among younger individuals due to stress, poor nutrition, and lifestyle factors, the condition poses significant psychological and social challenges. While modern science lacks definitive and sustainable treatments for Alopecia Areata, ayurveda offers an effective, holistic approach to managing hair loss through detoxification, dosha balancing, and nourishment. Ayurveda correlates Alopecia Areata with Indralupta, attributing its pathogenesis to tridosha and rakta imbalances along with agnimandya. This case study illustrates the successful ayurvedic management of Indralupta in a 28-year-old female using detoxification therapies (snehapana, virechana, prachana karma), internal medications, and local applications. These interventions restored dosha balance, purified srotas and rejuvenated hair follicles. The patient exhibited significant hair regrowth and reduced hair loss, reaffirming the role of ayurveda in offering an individualized and sustainable solution for managing autoimmune and dermatological conditions like Indralupta.

Introduction

In today's beauty-driven world, hair symbolizes identity, style, and confidence, playing a central role in self-expression and personal image. Hair loss is increasingly prevalent among younger individuals in today's era, driven by factors like stress, poor nutrition, hormonal imbalances, and lifestyle choices. As hair loss affects younger individuals, traditional perceptions of aging are being rewritten, making this condition a rising concern in modern health and wellness.

Alopecia areata is an autoimmune condition that causes hair loss in patches, which can occur on the scalp, face, or other parts of the body. The condition arises when the immune system mistakenly attacks the hair follicles, leading to hair loss. Alopecia areata can affect individuals of any age and can vary in severity, with some people experiencing complete hair loss (alopecia totalis) or loss of all body hair (alopecia universalis). It affects approximately 2% of the global population at some point in their lives. In about 1%-2% of cases, it can progress to

alopecia totalis or alopecia universalis. The lifetime risk is around 1.7%, and the annual incidence is reported to be 0.1%-0.2%, with both men and women affected equally.¹

In Alopecia areata, the immune system, particularly CD8+ T cells, attacks hair follicles during the anagen (growth) phase, disrupting their "immune privilege". This leads to hair loss without scarring, as the follicles remain intact. Autoreactive Th1, Th17, NK cells and CD8+ cells release IFN- γ and other cytokines like TNF- α and IL-12/23, disrupting the hair growth cycle and causing premature hair loss.²

Alopecia, in Ayurveda, can be correlated with *Indralupta*. Classical texts, including *Charaka Samhitha* and *Sushruta Samhitha*, classify *Indralupta* under *Kshudra Roga*, while *Vagbhata acharya* categorizes it under *Shirokapala roga* ^[3,4]. The pathogenesis of *Indralupta* involves an imbalance of the *tridosha* along with *rakta*. Specifically, vitiated *pitta* and *vata* doshas disturb the hair follicles, causing hair fall. Subsequently, *kapha* dosha, in combination with *rakta*, obstructs the *roma kupa*, or hair follicles, which prevents the regrowth of hair. This *dosha* imbalance ultimately disrupts the normal functioning of the scalp, leading to the characteristic hair loss observed in *Indralupta*.

CASE HISTORY

A 28-year-old female presented to the OPD with a chief complaint of sudden, patchy hair loss on the scalp which had commenced approximately 2 months ago. The patient first noticed a small, round, smooth patch of hair loss on the crown of her head, which gradually increased in size over the following weeks. The patches were non-itchy and non-painful, with no associated redness, scaling, or inflammation. She denied any previous history of hair loss, scalp conditions, or trauma to the affected area. The patient reported a recent surge in stress levels, attributing it to academic pressures and a personal life event, which she suspected might be exacerbating her hair loss condition. She had no significant medical history of recent illnesses, fever, or systemic issues. Additionally, she reported no family history of autoimmune diseases, thyroid disorders, or other dermatological conditions. Her medical history was unremarkable, with no known allergies, chronic illnesses, or previous treatments for hair loss. She was not taking any medications at the time of presentation and had no significant social or family history of alopecia or autoimmune diseases.

On examination - Scalp

Inspection

- -round Patchy hair loss
- -No redness, no scaling, no dandruff
- -site- parietal scalp

Table no:1 - Blood Examination

Hb- 13 gm%	ESR - 5mm at 1 hr
TWBC- 7320 cells/cmm	FBS - 98 mg%
TRBC- 4.7 million/cmm	T. Cholesterol - 155 mg%
T. Platelet count- 2.94 per microliter	Ca - 9.2 mg%
AEC - 400 cells/cmm	TSH- 1.02 milli IU/l
BT - 2min 10 sec	CT - 8min 0.02 sec
HIV Test- Negative	HBsAg- Negative
VDRL- Negative	HCV- Negative

Samprapthi ghatakas

Dosha: Vatha, Pitha, Kapha Dushya: Rasa, Raktha and Asthi Agni: Vishamagni Srothas: Annavaha, Rasavaha, Rakthavaha and Asthivaha Srothodushti: Sangha Adhishtana: Shira kapala

Sadhyasadyatha: Sadhya

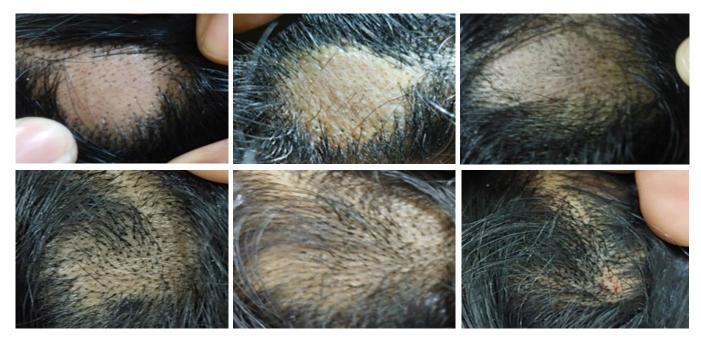
INTERVENTION

Table no:2- Internal medicines

SL.NO.	DRUG	DOSE	Duration
1	Patoladi kashayam	96 ml, twice daily before food	0-7 days
2	Manibhadra gudam	1 tsp, bed time	0-7days
3	Vaiswanara choornam	1 tsp, twice daily before food	0-7 days

Table no:3-	Procedures
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SL. NO	PROCEDURE	MEDICINES USED	DURATION
1	Snehapanam	Tikthakam ghrutham	8-12 days
2	Abhyanga and ushmasweda	Eladi thailam	12-13 days
3	Virechana	Avipathi choornam	14th day
4	Peyadi kramam		15-17th day
5	Prachanam		From 18 th day 31 st day on alternative days
6	Lepanam	Dattura swarasa Indralupthamashi + Malathyadi keram	18- 31 st days
7	Tikthaka ghrutham	5g morning empty stomach	18 to 31 st days
8	Manjishtadi kashayam	96ml twice daily before food	18 to 31 st days
9	Triphala choornam	5g bed time with luke warm water	
10	Saptamrita louha	1 tablet twice daily after food	18 to 31 st days



Figures : Illustrating the stages of treatment outcomes

DISCUSSION

In the pathogenesis of *Indralupta*, the involvement of *tridosha* along with *rakta* is significant. *Agnimandya* plays a pivotal role in the pathogenesis and clinical manifestation of the disease. When *jatharagni* and *dhatwagni* become impaired, the transformation and nourishment of *dhatus* are disrupted. Since *kesha* is considered a *mala* of *asthi dhatu⁵*, any disturbance in the process of dhatu formation and transformation due to *agnimandya* directly impacts the quality and health of hair. Impaired transformation and nourishment compromise hair root strength, culminating in hair loss. Thus, addressing *agnimandya* becomes a key aspect in managing and preventing *Indralupta*.

In addition to addressing *agnimandya*, the management of *Indralupta* also involves balancing the vitiated *doshas* through *sodhanam* and *doshaghna chikitsa*. Furthermore, when *rakta* is vitiated, it can be effectively treated using *raktamokshana*, which helps to purify the blood and remove accumulated toxins. This multi-pronged approach aims at correcting both systemic imbalances and localized issues, thereby supporting healthy hair growth and preventing further hair loss.

For *deepana* and *pachana*, primarily internal medications are administered to enhance digestive fire and promote proper digestion. *Patoladi Kashaya*, composed of nine *tridoshahara* ingredients, balances all three *doshas* and is noted for its *kushtaghna*, *rakthashodhaka*, *rakthaprasadaka*, and have *rasayana* properties⁶. With predominantly *tikta* and *kashaya* tastes, it aids in enhancing *agni*, and promotes *srotoshodhana*. *Manibhadra Gulam* balances *tridoshas* and it is *anulomana*, *sukhavirechaka*, *raktashodhaka* and have

deepana, and *pachana* actions, enhancing detoxification, digestion⁷. *Vaiswanara choornam* primarily acts as *agnideepaka, pachana,* and *vata-kaphahara,* promoting *anulomana* and addressing ama⁸.

Prior to performing *prachana* karma, *purva* karmas such as *snehapana*, *abhyanga*, and *ushmasweda* are essential to prepare the body for effective *sodhana*. *Snehapanam* with *tiktaka ghrita* is an ayurvedic formulation that pacifies *pitta* and *kapha doshas*, purifies all *dhatus*, strengthens and cleanses *rakta dhatu*, detoxifies the *amashaya*, and promotes regular *mala pravritti*⁹. *Abhyanga* with *eladi tailam* aids in toxin removal and detoxification, while *ushma sweda* enhances the overall cleansing process¹⁰. Virechana with *avipathy choornam* acts as a *deepana* and *pachana*, balancing *kapha*, *vata*, and *rakta pitta doshas*, and possesses *rechana* properties that support detoxification and promote healthy elimination¹¹.

Prachana one among *raktamoksha*, included in *panchashodhana*. So, before that *dehashodhanm* is done. Through *prachana karma*, the elimination of *kapha and raktha doshas* occurs, effectively removing the *avarana* within the hair follicles. This process purifies and revitalizes the follicles, thereby promoting the growth of new, healthy hair. The *teekshna guna* of *datura patra swarasa* allows it to deeply penetrate the *roma kupa* and effectively remove *avarana*. Additionally, *indralupta* mashi works synergistically by pacifying the *kapha and pitta* doshas, thereby creating an optimal environment for stimulating and promoting healthy hair growth.

Along with *prachana* and *lepana*, internal medications were administered to promote hair growth. *Manjishtadi kashayam*, with its *raktashodhaka* properties, detoxifies the body and improves circulation, nourishing the scalp and promoting healthy hair follicles. *Saptamrita louha* strengthens the *dhatus*, especially *rakta*, and acts as a *rasayana*, enhancing nourishment and rejuvenation for hair growth¹². *Triphala churna*, known for its *rasayana* qualities, supports overall vitality and balances the *doshas*, further encouraging healthy and strong hair growth¹³.

Conclusion

This case demonstrates the effectiveness of a comprehensive ayurvedic approach in treating *Indralupta* (Alopecia Areata). By focusing on dosha balance, detoxification, and nourishment, the treatment addressed the root cause of hair loss. Internal medications and external therapies, including *deepanapachana* and *shodhana*, helped restore dosha balance, purify the body, and revitalize hair follicles. This holistic approach provides a sustainable and individualized solution for Alopecia Areata, highlighting Ayurveda's potential in managing autoimmune and dermatological conditions when conventional treatments fall short.

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