

Ayurvedic Medicines For Psoriasis: A Comprehensive Review Integrating Agadtantra Perspectives

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Abstract

Introduction: Psoriasis is a chronic immune-mediated inflammatory dermatosis involving keratinocyte hyperproliferation and T-cell dysregulation. *Ayurveda* classifies it under *Kushtha*, mainly due to *Vata–Kapha* imbalance with vitiation of *Rakta dhatu*. Modern science links psoriasis to IL-17/IL-23 axis dysfunction, oxidative stress, microbiome alterations, and environmental triggers. *Agadtantra* introduces the concept of *Dushi Visha*, representing low-grade, bio-persistent toxins that parallel chronic inflammatory and immune disturbances.

Methodology: This narrative review integrates classical *Ayurvedic* descriptions, contemporary biomedical literature, and available research on *Ayurvedic* management of psoriasis. Classical texts, peer-reviewed dermatology articles, and evidence on traditional formulations and marketed *Ayurvedic* psoriasis preparations were analyzed to develop an integrated understanding of pathogenesis and therapeutic strategies. **Results:** Analysis indicates overlap between *Dushi Visha*–induced immune instability and modern mechanisms involving IL-17/IL-23 dysregulation, oxidative stress, and microbiome imbalance. Classical *Shodhana* therapies—*Vamana*, *Virechana*, and *Raktamokshana*—along with formulations such as *Mahatikta Ghrita* and *Kaishora Guggulu*, show potential in reducing inflammation and improving lesion severity. Reports on standardized herbal products suggest benefits in symptom reduction and immune modulation, although data remain limited. **Discussion:** *Ayurvedic* and

biomedical perspectives converge in viewing psoriasis as a systemic immune-metabolic disorder. The correlation between *Dushi Visha* and chronic inflammatory mediators support the rationale for combining detoxification-based therapies with herbal immunomodulators. Despite promising clinical observations, robust evidence is insufficient. Well-designed multi-center clinical trials, phytochemical standardization, and strengthened quality-assurance protocols are essential to validate *Ayurvedic* psoriasis therapies for global acceptance.

Keywords: Psoriasis, *Kushta*, *Dushi Visha*

Introduction

Psoriasis affects 2–4% of the global population and significantly impact social and psychological well-being [1,2]. It is strongly associated with systemic inflammation, metabolic syndrome, psoriatic arthritis, and psychosocial burden [3-6]. Modern dermatopathology implicates Th1 and Th17-driven cytokine pathways, particularly IL-17, IL-23, and TNF- α . [7-9] Ayurveda correlates psoriasis with *Eka-Kushtha* and *Kitibha Kushtha* [10-12], conditions of scaling, chronicity, discoloration, and itching. Etiological factors include *Viruddhahara* (incompatible diet), *Mandagni* (weak digestion), *Ama* (metabolic toxins), *Mansik Hetu* (psychological stress), and *Dushi Visha* (chronic endogenous toxins) [13-18].

Methodology

Sources reviewed:

- Charaka Samhita, Sushruta Samhita, Ashtanga Hridaya
- Ayurvedic Pharmacopoeia of India
- PubMed, Scopus, Web of Science articles (1990–2024)
- GMP/ISO certified Ayurvedic product monographs

Inclusion criteria:

1. Classical relevance to psoriasis/Kushtha
2. Clinical or pharmacological support for anti-inflammatory/immune-modulation
3. Availability in standardized or approved formulations

Ayurvedic Pathophysiology And Modern Correlations

Ayurvedic Concept	Clinical Interpretation	Modern Correlation
<i>Vata-Kapha Dushti</i> [31-33]	Dryness + scaling + thickness	Keratinocyte hyperproliferation [10-17]
<i>Rakta Dushti</i> [31-33]	Inflammatory diathesis	IL-17/TNF-alpha pathway activation [1,7,10,14]
<i>Mandagni & Ama</i> [31-33]	Metabolic waste accumulation	Oxidative stress & endotoxin load [27,29,30]
<i>Dushi Visha</i> [31-33]	Low-grade chronic toxin retention	Xenobiotic bioaccumulation & immune dysregulation [29-33]

Role Of *Shodhana* Therapy (Panchakarma)

Shodhana therapy is strongly emphasized for psoriasis due to its systemic inflammatory nature [31-33]. *Virechana* removes *Pitta-Kapha* accumulation, *Raktamokshana* clears inflammatory mediators from microcirculation, and *Basti* stabilizes *Vata* and neuro-immune signaling. Clinical improvements reported after *Shodhana* [38,46-60] include reduction in PASI score, pruritus and plaque thickness, though standardized multi-center RCT data are required [12,15,19].

Key Herbal Drugs In Psoriasis Management

<i>Bakuchi</i> (<i>Psoralea corylifolia</i>)	Stimulates melanogenesis, regulates epidermal turnover [39,46-60]
<i>Haridra</i> (<i>Curcuma longa</i>)	NF-κB inhibition antioxidant and anti-inflammatory actions [41]
<i>Neem</i> (<i>Azadirachta indica</i>)	Detoxifying immunomodulatory antimicrobial [34,37]
<i>Guduchi</i> (<i>Tinospora cordifolia</i>)	Cytokine suppression and immune stabilization [42]
<i>Manjishtha</i> (<i>Rubia cordifolia</i>)	<i>Raktashodhana</i> and antioxidant activity [44]
Indrajao (<i>Wrightia tinctoria</i>)	Effective in scaling and keratinocyte normalization [40]

Key Ayurvedic Formulations And Marketed Products For Psoriasis

Company	Product	Form	Therapeutic Role	Mechanism	reference
Kerala	Winsoria Oil	External	Reduces scaling	<i>Wrightia tinctoria</i>	[40]

Ayurveda Ltd			and inflammation [46-60]	normalizes keratinocyte turnover	
Dr JRK's Research	777 Oil	External	Psoriatic plaque care [46-60]	Modulates epidermal calcium signaling	
Kottakkal Arya Vaidya Sala	Psorakot	Tablet/Ge I/Oil	Systemic + topical control[46-60]	Polyherbal immune modulation	
Himalaya Wellness	Talekt	Tablet	Systemic detoxification[46-60]	Neem + Haridra immune clearance	[37,41]
Baidyanath	Tuvrak Taila	Oil	Chronic plaque softening[46-60]	Traditional Kushthaghna action	
Zandu	Gandhak Rasayan	Tablet	Reduces itching & scaling ^{46-60]}	Sulfur detox and Rasayana support	
Charak Pharma	Manjishthadi Kwath	Decoction	Blood purification ^{46-60]}	Antioxidant & microcirculation regulation	[44]
Dabur	Khadirarishta	Liquid	Rakta & Pitta balancing ^{46-60]}	Raktashodhana + antimicrobial	
Nagarjuna	Nimbadi Kwath	Decoction	Inflammatory lesion reduction ^{46-60]}	Neem immunoregulation	[37]
Vaidyaratnam	Tiktaka Ghrita	Ghrita	Pitta pacification ^{46-60]}	Bitter glycosides immunomodulation	
Unjha	Bakuchi Taila	Oil	Psoriatic hyperkeratosis reduction ^{46-60]}	Psoralen epidermal regulation	
Sri Sri Tattva	Psoralea Capsules	Capsule	Systemic support ^{46-60]}	Standardized Bakuchi extract	[39]
Sandu	Mahamanjisht hadi Kwath	Decoction	Raktashodhaka ^{46-60]}	Antioxidant & microvascular soothing	[44]
AVP Coimbatore	Bakuchi Taila	Oil	Chronic psoriasis lesions ^{46-60]}	Traditional formulation	[39]
Ban Labs	Psorid Cream	Cream	Anti-scaling topical relief ^{46-60]}	Moisturizing antimicrobial	
AIMIL	Psoraksha Tablets	Tablet	Immune-gut axis correction ^{46-60]}	Polyherbal immunomodulation	
Vasu Healthcare	Derma Treat Oil	Oil	Reduces redness & flaking ^{46-60]}	Antioxidant-rich herbal oil	
Organic India	Neem Capsules	Capsule	Detoxification support ^{46-60]}	Standardized neem extract	[37]

Patanjali	Kayakalp Vati	Tablet	Chronic skin disorders ^{46-60]}	Polyherbal antioxidant formulation	
Kerala Ayurveda	Tiktaka Ghrita Capsules	Capsule	Internal Pitta detox ^{46-60]}	Triterpenoid & bitter glycosides	
S.G Phyto	Sorajit Capsule	Capsule	Remove toxin, balance pitta-kapha, improve agni, support liver and metabolism	Polyherbal, antioxidant formulation	

Table: Ayurvedic Metal Formulations for Psoriasis

Product (Metal)	Company / Example	Type	Classical Ayurvedic Action	Modern Mechanism / Interpretation	Recommended Intake / Administration	Safety Notes / Contraindications	References
Swarna Bhasma	Baidyanath – Swarna Bhasma	Gold Bhasma	Rasayana, Balya, Jivant; rejuvenative, chronic disorder management	Immunomodulatory, antioxidant, anti-inflammatory	125–250 mg with honey/ghee/ milk under physician supervision	High potency; avoid self-medication; monitor heavy metals	62,63
Gandhak Rasayan	Baidyanath – Gandhak Rasayan	Purified Sulphur	Kushthagha (anti-kushtha), Raktashodhak (blood purifier), Rasayana	Antimicrobial, keratolytic, anti-inflammatory	1–2 tablets twice daily as per physician; oral or topical forms	Avoid overdose; use under supervision; monitor GI tolerance	64,65
Abhraka Bhasma	Planet Ayurveda – Abhrak Bhasma	Mica Bhasma	Tridosha-balancing, tissue rejuvenat	Adaptogenic, tissue-reparative,	125–250 mg once/twice daily with	High potency; avoid without physician;	66,67

	(Sahastrap uti)		or, Rasayana	immunomodul atory	water/honey/ ghee	monitor for heavy metals	
Loha Bhasma	Planet Ayurveda / Baidyanath – Loha Bhasma	Iron Bhasma	Raktavard hak (blood strengthe ning), supportiv e in Raktadi dhatu disorders	Hematopoietic, supports blood/tissue health	Small doses with honey/milk under physician supervision	Avoid in iron overload; monitor hematological parameters	68
Tamra Bhasma	Baidyanath / Dhootapap eshwar – Tamra Bhasma	Copper Bhasma	Kapha– Pitta balancing, used in skin and liver disorders	Hepatoprotecti ve, digestive stimulant, adjunctive skin health	Micro-doses under physician supervision with appropriate anupana	High potency; not for self- medication; monitor liver function	69

Discussion

The therapeutic model of psoriasis in Ayurveda aligns with contemporary immunology, microbiome science, and inflammatory pathology [1-30]. Key herbs demonstrate NF-κB inhibition, antioxidant defense activation, keratinocyte proliferation control, and microcirculatory improvements [10,17,27,41,44]. *Shodhana* therapies may reduce systemic inflammatory load, though standardized clinical trials with PASI scoring and cytokine biomarkers [31,33,46-60] are necessary. Commercial formulations offer practical accessibility but require phytochemical standardization and pharmacovigilance, especially for psoralen-containing agents like *Bakuchi* [12,15,19]

Conclusion

Ayurveda offers a comprehensive therapeutic framework integrating detoxification, immune modulation, and tissue-level regulation. Agadtantra concepts such as *Dushi Visha* provide a meaningful bridge to modern inflammatory and environmental toxicology [31-33] models of psoriasis. Future research must focus on high-quality clinical

trials, biomarker-based assessment, and global-quality manufacturing standards for broader acceptance [12,19,46-60].

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