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## Original Research Article

### NIDANATMAKA (EPIDEMIOLOGICAL) STUDY IN PATIENTS SUFFERING FROM KUSTHA W.S.R.TO CHRONIC PLAQUE PSORIASIS

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## ABSTRACT

In *Ayurveda* term '*Kustha*' is having a very broad spectrum; it is not a single disease entity at all but it covers all the aspects of skin disorders. Any disorder in which skin is affected is included under *Kustha*. *Sushruta* has termed it as '*Tvagamaya*'. & it is chronic in nature. The causative factors of *Kustha* can be categorized as – *Aharaja Nidana*, *Viharaja Nidana*, *Acharaja* & *Other Nidana*. This is a very important factor and has been mentioned by all the *Acharyas*. Behavioral misconduct, antisocial activities, sinful activities and other punishable activities are considered under this heading. "Unhealthy diet is one key cause of the growing global burden of disease"<sup>1</sup>*Virudha Ahara* is responsible for rising cases of skin diseases<sup>2</sup>. Thus above mentioned *Acharajanya* factors bring about psychogenic stress which is of prime importance in the pathogenesis of Psoriasis. In *Ayurveda*, psoriasis has been termed as '*Eka-kustha*', which is considered as subtype of *Kustha*. The treatment of *Kustha* is based on *Shodhana* (purification) and *Shamana* (conservative) treatment methods. *Nidanatmaka* study was conducted at NIA O.P.D, I.P.D., Bombaybala hospital and Satellite hospital in Jaipur,

Rajasthan. For this survey total 300 patients of various skin diseases were taken and diagnosed them as per Ayurvedic as well as modern perspective. Patients were surveyed on the basis of duly prepared survey proforma.

**KEYWORDS:** *Kustha* (Chronic Plaque Psoriasis), *eka-kustha*, *Kustha Nidana*, *Virudha Ahara* etc.

## INTRODUCTION

*Ayurveda* is essentially the science of life. It embraces in itself perfect principles for leading a healthy life. Our Ancient *Acharya's* mainly focused on the *Nidana* or etiological factors & described the detailed description of *Nidana* for all the diseases. According to *Acharya Sushruta* avoidance of *Nidana* or etiological factors is considered as *Kriya* or *Chikitsa* (treatment)<sup>3</sup>.

The name of the disease is derived from Greek word 'psora' which means 'itch'<sup>4</sup>. Psoriasis affects both sexes equally and can occur at any age but most commonly between 15-25 years. The most commonly affected sites are the scalp, tips of fingers and toes, palms, soles, umbilicus, gluteus, under the breasts and genitals, elbows, knees, shins and sacrum. The most typical lesion is a well demarcated, pink to salmon colored plaque covered by loosely adherent scales that are characteristically silver white in color<sup>5-6</sup>.

Psoriasis is one the most dreadful dermatological condition affecting up to 3.5% of the worlds<sup>7</sup> and approximately 0.44% to 2.8% in Indian population<sup>8</sup>. It is a common, chronic and non- infectious skin disease characterized by well-defined slightly raised, dry erythematous macules with silvery scales and typical extensor distribution affecting any sex and having incidence at any time throughout the life since incidence from childhood to aged one has been reported. In Ayurveda, psoriasis has been termed as '*Kiṭibha* or *eka-kustha* or *mandala Kustha*', which is considered as subtype of *Kustha*<sup>9</sup>.

**AIMS AND OBJECTIVE:** The aims and objectives of the survey study was-

To conduct a *Nidanatmaka* (Epidemiological) survey of *Kustha* (Chronic plaque psoriasis).

## SELECTION CRITERIA:-

### A. Inclusion criteria:-

Subjects meeting all of the following criteria was included in the trial-

1. Male or Female Subjects in the age group of 18 to 60 years, both inclusive.
2. Subjects with confirmed diagnosis of plaque psoriasis since at least 6 months
3. Subjects with plaque psoriasis having PASI score >10

4. Subjects of female gender or non-pregnant, non-lactating females. A urine pregnancy test is required for all female subjects of childbearing potential unless subject has had a hysterectomy, tubal ligation, or is > 2 years postmenopausal.
5. Subjects willing to follow the procedures as per the study protocol and voluntarily sign an informed consent form.

## B. Exclusion criteria:-

Following patients were registered for past clinical trial-

1. Subjects who have received systemic treatment for Psoriasis such as Methotrexate or Cyclosporine therapy or any conventional systemic treatment for more than 4 weeks one month prior to screening in the study.
2. Any laser dermatological procedure, 4 weeks prior to screening in this study
3. Known cases of Severe/Chronic hepatic or renal disease.
4. Known case of any active malignancy.
5. Subjects giving history of significant cardiovascular event < 12 weeks prior to recruitment.
6. Subjects having known chronic, contagious infectious disease, such as active tuberculosis, Hepatitis B or C, or HIV.
7. Subjects participating currently or 1 month prior to recruitment in any other clinical study
8. Known hypersensitivity to any of the ingredients used in study drug
9. Pregnant and Lactating females.
10. Any other condition due to which patients are deemed to be unsuitable by the investigator's opinion for reason(s) not specifically stated in the exclusion criteria.

## MATERIALS & METHOD-

### *Nidanatmaka* (Epidemiological) Survey

Survey of 300 patients done, who report to laboratory/ O.P.D. / I.P.D. of arogyashala NIA, Jaipur, SSB Hospital Jaipur and other camp sites. After randomly selecting the patients subsequent to informed consent, a comprehensive survey incorporating the *Ayurvedic Nidanatmaka* factors as well as modern medical parameters were conducted. To conduct a survey to evaluate the “*Nidana of Kustha w.s.r. to Chronic Plaque Psoriasis*” patients, a duly prepared proforma was made. For this survey total 300 skin disease patients were taken and diagnosed them as per Ayurvedic perspective.

The whole study can be divided in the following way-

- The first few questions were on demographic information of the patients and *Prakriti* assessment was done on the basis of specially prepared *Prakriti* proforma. In *survey* proforma also incorporate with Chronicity of disease, assessment of *Kustha*<sup>10</sup> etc.
- Prepared a set of Questionnaire to fulfil the above aims, a proforma was designed. Total 52 questions were made on to evaluate *Nidana of Kustha*<sup>11</sup> w.s.r. to *Chronic Plaque Psoriasis*” and 23 types of *Virudha Ahara*.<sup>12</sup> The first few questions were on demographic information of the patients and *Prakriti* assessment was done on the basis of specially prepared *Prakriti* proforma. In *survey* proforma also incorporate with Chronicity of disease, assessment of patient, and assessment of *Kustha* etc.

## OBSERVATIONS AND RESULTS-

**Table no. 1 Percentage Prevalence of patient disease wise:**

Disease	Total no. of patient	Percentage (%)	Number of patient diagnosed as Psoriasis
<i>Eka-Kustha</i>	33	11	10
<i>Kitibha Kustha</i>	18	6	8
<i>Dadru Kustha</i>	132	44	0
<i>Mandala Kustha</i>	9	3	5
<i>Sidm Kustha</i>	4	1.33	0
<i>Vyang</i>	4	1.33	0
<i>Pama</i>	5	1.66	0
<i>Vicharcika</i>	42	14	0
<i>Kotha</i>	13	4.33	0
<i>Vipadika</i>	11	3.66	0
<i>Shvitra</i>	17	5.6	0
<i>Shitpitta</i>	5	1.66	0
<i>Kandu</i>	2	0.66	0
<i>Nilika</i>	5	1.66	0
<b>Total</b>	<b>300</b>	<b>100</b>	<b>23</b>

Out of 300 patients, it is observed that maximum no. of patients i.e. 44% patients were of *Dadru*.

**Table No.2 - Percentage prevalence of Patients Age wise:**

Age in (yrs.)	Total no. of patients	%
18-24	97	32.34
25-31	63	21.00
32-38	42	14.00
39-45	44	14.66
46-52	18	6.00
53-60	36	12.00
<b>Total</b>	<b>300</b>	<b>100</b>

Out of 300 patients, maximum number of patients 32.34% was found in the age group of 18-24 years.

**Table No.3 -Percentage prevalence of Patients Gender wise:**

Gender	Total no. of patients	Percentage (%)
Male	203	67.67
Female	97	32.33
<b>Total</b>	<b>300</b>	<b>100</b>

Distribution of Gender in 300 patients revealed that 67.67% were male, 32.33% of patients followed by female.

**Table No.4 -Percentage prevalence of Patients occupation wise:**

Occupation	Total no. of patients	Percentage (%)
Service	60	20
Student	94	31.33
House-wife	63	21
Farmer	18	6
Business	14	4.66

Tailor, Jeweler, Driver, Mechanic, Computer Work, Fishery, Jariwork, Confectioner, Hair Dresser (Skilled Work)	46	15.34
Labor work(unskilled work)	5	1.67
<b>Total</b>	<b>300</b>	<b>100</b>

Out of 300 patients, maximum patients 31.33% were belonging student

**Table No. 5 Percentage prevalence of Patients Diet pattern wise:**

<b>Diet pattern</b>	<b>Total No. of patients</b>	<b>Percentage (%)</b>
Mixed	164	54.66
Vegetarian	136	45.34
<b>Total</b>	<b>300</b>	<b>100</b>

The above table shows that maximum patients 54.66% were vegetarian and 45.34% of patients were taking mixed diet.

**Table No.6 -Percentage prevalence of Patients *Saririka Prakriti* wise:**

<b><i>Saririka Prakriti</i></b>	<b>Total No. of Patients</b>	<b>Percentage (%)</b>
VP	102	34
VK	156	52
PK	42	14
<b>Total</b>	<b>300</b>	<b>100</b>

On considering the data of *Saririka Prakriti*, maximum i.e. 52% patients had *Vata-Kapha Prakriti*.

**Table No.7 - Percentage prevalence of Patients *Manashika Prakriti* wise:**

<b><i>Manashika Prakriti</i></b>	<b>Total no. of patients</b>	<b>Percentage (%)</b>
<i>Rajashika</i>	220	73.33
<i>Tamashika</i>	80	26.67
<b>Total</b>	<b>300</b>	<b>100</b>

On considering the data of *Manashika Prakriti* maximum i.e. 73.33% patients had *Rajashika Prakriti*

**Table No.8 - Percentage prevalence of Patients Religion wise**

Religion	Total no. of patients	Percentage (%)
Hindu	270	90
Muslim	30	10
<b>Total</b>	<b>300</b>	<b>100</b>

Out of 300 patients, Religion wise observed that the incidence of *Kustha* was more in patients of Hindu religion 90%.

**Table No. 9 -Percentage prevalence of Patients Habitat wise:**

Habitat	Total no. of patients	Percentage (%)
Urban	202	67.33
Rural	98	32.67
<b>Total</b>	<b>300</b>	<b>100</b>

In this study maximum 67.33% patients were from urban population.

**Table No.10- Percentage prevalence of Patients marital status wise:**

Marital status	Total no. of patients	Percentage (%)
Married	172	57.33
Unmarried	128	42.67
<b>Total</b>	<b>300</b>	<b>100</b>

Marital status observation in study showed maximum 172 (54%) patients were married.

**Table No.11- Percentage Prevalence of Skin Disease Patients according to Virudha Ahara (Kustha w.s.r Chronic Plaque Psoriasis)**

<i>Virudha Ahara</i>	Number of Patients (N=300)	%
Milk + <i>egg/fruits/legumes</i>	12	4.00
Milk + <i>Udada</i>	15	5.00
Milk + Banana	12	4.00

Milk + Salt	52	17.33
Milk + <i>Khichadi</i>	12	4.00
Milk + Fish	14	4.67
Milk + Sour fruits	13	4.33
Milk+ <i>Muli</i>	16	5.33
Milk + <i>Shaka</i>	39	13.00
Milk+Raddish/garlic	9	3.00
Milk Shake	137	45.66
Milk + Idle/ <i>Samosa</i>	109	36.33
Fruit- salad	106	35.33
Chicken/Kabab/(heated meat) + Curd	82	27.33
Alcohol + <i>Khichadi</i> + Milk	20	6.66
Uncooked food e.g. Uncooked rice & vegetables, <i>kacchi roti</i> , salad etc.	27	9.00
Over cooked food eg.burnt toast, burned roti etc.	136	45.33
Hot & boiled curd – <i>Kadhi /gate ki sabji</i>	217	72.33
Bakery product like cake, pastries, biscuit, cookies etc.	219	73.00
Street- foods like samosa, chaat, pani puri, dahi puri,	111	37.00
Magi and Chinese items	30	10.00
Intake of curd at night	108	36.00
<i>Virudha Ahara non consumer</i>	9	3.00

On considering data of *Virudha Ahara (Kustha w.s.r to chronic plaque psoriasis)* in 300 patients of *Kustha* maximum intake of of curd at night in 72.33% & 73% patients were taking Bakery product like cake, pastries, biscuit, cookies etc.



**Table No.12-Percentage prevalence of Skin diseases patients according to *Kustha Nidana* wise**

<i>Kustha Nidana</i>	Number of Patients (n =300)	%
Retain your urges (Vomiting)	27	9.00
Retain nature urges like <i>Muttra and Purisha Vega etc.</i>	81	27.00
Do physical exercise and after heavy meals	55	18.33
Take sun bath after heavy meals	13	4.33
Alternate and immediate [excessive] use of hot and cold	13	4.33
Enter into cold water or drinking cold water immediately after one is affected with fear , exhaustion and sunlight	82	27.33
Intake food before proper digestion of the previous food	164	54.66
Sexual intercourse before proper digestion of the previous food	54	18.00
Sleep in day time	13	4.33
Sleep just after taking meal	190	63.33
Do physical exercise just after taking meal	55	18.33
Any Sinful act in your life	7	2.33

On considering data of *Kustha Nidana* in 300 patients of *Kustha* (Skin disease), maximum 63.33% patients were Sleep just after taking meal and 54.66% patients were Intake food before proper digestion of the previous food.

**Table No.13- Percentage prevalence of Skin diseases patients according to *Kustha Nidana* wise.**

<i>Kustha Nidana</i>	Number of Patients (n =300)	%
Intake of <i>Godhum (Gehu)/, Masha (Udada daal, phaseolus redintus,)/vidala</i> (cereals)/excessively	5	1.67
Intake of <i>prathuka</i> (cipitaka like poha,chevda) excessively	5	1.67

Intake of <i>pishtanna</i> (cakes)/ <i>pinyaka</i> (oil cakes) excessively	6	2.00
Intake of <i>Kshira</i> (milk), <i>Dadhi</i> (curd) excessively	17	5.67
Intake of <i>Guda</i> (Treacle) excessively	16	5.33
Intake of <i>Sura</i> (Wine) excessively	16	5.33
Intake of <i>Sukta</i> (like Kanji) excessively.	16	5.33
Intake of <i>Takra</i> oftenly	273	91.00
Intake of <i>Rauksha</i> , <i>Laghu</i> , <i>Gunatmak Ahara</i>	163	54.33
Intake Excessive amounts of pickled or fermented foods.	30	10.00

On considering data of *Krimi Nidana* in 300 patients of *Kustha* (Skin disease) maximum in 91% Intake of *Takra* oftenly & Intake of *Snigdha*, *Guru*, *Picchila Gunatmak*, *Madura*, *Amla Rastamaka*, *Ahara* for example *kaccha taila*, *sabudana*, banana, *Udada*, milk, curd, cake, pizza, burger, butter, *paneer*, oily food and 54.33% intake of *Rauksha*, *Laghu*, *Gunatmak Ahara* respectively.

**Table No. 14-Percentage prevalence of Skin diseases patients according to *Kustha Nidana* wise.**

<b><i>Kustha Nidana</i> w.s.r chronic plaque psoriasis</b>	<b>Number of Patients N=300</b>	<b>Percentage</b>
Suffer from indigestion frequently	<b>190</b>	<b>63.33</b>
Intake <i>Putiklinna</i> , <i>Sankirna</i> excessively	<b>56</b>	<b>18.67</b>
Excessive intake of green, leafy vegetables or salads.	<b>136</b>	<b>45.33</b>
Excessive intake uncooked vegetables	<b>27</b>	<b>9</b>
Intake of food in public place / hotels.	<b>27</b>	<b>9</b>

Intake of food in front of patients in hospital, accidental place etc.	40	13.33
Food cooked for a week and refrigerated/ preserved /tinned foods.	55	18.33

On considering data of *Kustha Nidana* in 300 patients of *Kustha* (Skin disease). Maximum 63.33%, patients were suffer from indigestion frequently, 45.33% of patients were found Excessive intake of green, leafy vegetables.

## DISCUSSION-

### Discussion on *Nidan*:

The causative factors of *Kustha* can be categorized as – *Aharaja Nidan*, *Viharaja Nidan*, *Acharaja Nidan* other *Nidan*.

- ***Aharaja Nidan*** (*Atisevana*, *Mithya Ahara* like improper dietary habits, *Virudha Ahara* major role play produces *Ama*, produces *Dusi Visha*, Leads to *Srotodusti & Agni*).
- ***Viharaja Nidan*** (Excessive *Atapa Sevana*, Excessive *Anila Sevana*, *Divasayan*, *Ratrijagarana*).
- ***Acharaja Nidan*** (*Ayurveda* had defined *Kustha* as one of the *Karmaja Vyadhi*. So *Acharaja* has distinct place in manifestation of this disease. *Acharajanya* factors bring about psychogenic stress which is of prime importance in the pathogenesis of Psoriasis.

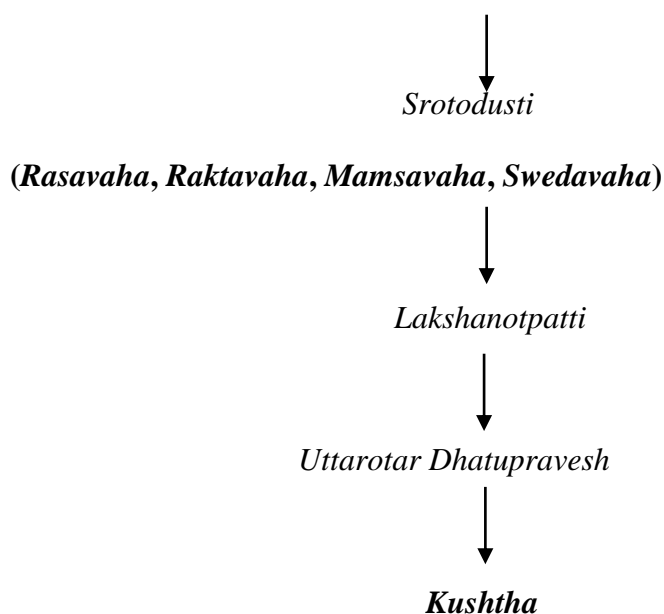
In modern science the *Nidana* are explained as triggering factors such as Junk food, Skipping breakfast, Fasting habits, menses, Addiction to tea or coffee, Sunlight, Emotional and Physical stress, Noise, etc. Most of the *Nidan* were seen in the present study.

The cause of Psoriasis is unknown. There is an undoubted genetic predisposition. The trigger factors include streptococcal infections, trauma, drug eruptions, endocrine factors and severe emotional upset. Incompatible and unwholesome diet plays an important role in the etiology of Psoriasis it is an accepted fact that the immunity of the body may be decreased due to such type of diet and regimen. *Ahita Dravya*, *Ama Dosha*, *Visha* and *Dushi Visha* cause vitiations of *Dosha* resulting in different allergic, hypersensitive reactions and ultimately lead to Psoriasis.

### Discussion on *Samprapti*:

The provoked *Dosha* reach to the *Tiryaga Sira* & then vitiate *Twaka*, *Rakta*, *Mamsa* and *Lasika* and by making them deranged & weak, then passes to the external surface of body, causing discoloration of the skin<sup>13</sup>. All





### Various type of *Kushtha*:

Out of 300 patients, it is observed that maximum no. of patients i.e. 0.66% patients were of *Kandu*. *Dadru*, *Eka-kushtha*, *Kiñibha* and *Vicharcika* were found in 44%, 11%, 6%, and 14% patients respectively. *Mandala*, *Shvitra* and *Vyanga* were found in 3%, 5.6% and 1.33 % patients respectively. *Sidm*, *Vipadika*, *Kotha* and *shitpitta* were found in 1.33%, 3.66%, 4.33%, and 3.6%, 1.66% patients respectively.

### Age:

Out of 300 patients, maximum number of patients (32.34%) was found in the age group of 18-24 years. The next common age group is 25-31 years (21%), followed by 14% patients in age group of 32, 14.66% patients in age group of 39-45 years, and then 12% patients in age group of 53-60 years. Rest 6% patient in age of 46-52. Eating junk food and outside fast food.

### Sex:

Out of 300 patients, Sex wise observations shows that maximum of 203 patients (76.67%) were reported to be males and 97 patients (32.33%) were females. Gender has no direct relation with *Kushtha*. But here reported data shows that male patients were more prone to *Kushtha*. Probable reason may be that males are more exposed to different types of contacts and environments. So they may be more affected by *Virudha Ahara* due to unavoidable conditions i.e. hostel, business and service schedule etc.

### Occupation:

Out of 300 patients, maximum patients 31.33% were belonging students, 21% patients were in House wife followed by Service class 20%, 15.34% patients were Tailor, Jeweller, Driver, Mechanic etc. 6% patients were

Farmer, 4.66% Patients were business occupation and 1.66% patients were unskilled. Reason is Eating junk food, not to eat timely and adequate food. Long time sitting with constipation.

### **Incidence of dietary habits:**

Dietary habit wise observations showed that 164 patients (54.66%) were having the habit of taking purely vegetarian diet whereas 136 patients (45.34%) were habituated for mixed diet. Vegetarian diet (Diet against) habit prone for the disease.

### **Prakriti:**

Out of 300 patients, On considering the data of *Saririka Prakriti*, maximum i.e. 52% patients had *Vata-Kapha Prakriti*, 34% had *Vata-Pitta Prakriti* and 14% patients had *Pitta-Kapha Prakriti*. All *Kustha* are *Tridoshaja*. However, in *eka-Kustha* (chronic plaque psoriasis) the dominance of *Vata- Kapha* is mentioned by *Charaka* and *Kapha* by *Sushruta*.

### **Manashika Prakriti:**

Out of 300 patient, on considering the data of *Manashika Prakriti* maximum i.e. 73.33% patients had *Rajashika Prakriti*, 26.27% had *Tamashika Prakriti*. *Kustha* Disease Is more prominent In *Rajashika Prakriti*.

### **Religion wise:**

Out of 300 patients, Religion wise observed that the incidence of *Kustha* was more in patients of Hindu religion 90%where as 10% belonged to *Muslim* community. It may be due to the hospital where study was carried out is situated in *Hindu* predominant community area.

### **Habitat wise:**

Out of 300 patients in this study 67.33%patients were from urban population and 32.67 % patients were belonging to rural areas. *Dadru-Kustha* was highest 132(44%) patients who belonged to urban and rural area.

### **Marital status wise**

Marital status observation in study showed maximum 162 (54%) patients Were married, 128 (42.67%) patient was unmarried. Improper diet and eating, stressful work, no physical work.

### **Virudha Ahara wise:**

Out of 300 patients, on considering data of *Virudha Ahara (Kuhtha w.s.r to chronic plaque psoriasis)* in 300 patients of *Kustha* maximum 73% Bakery product like cake, pastries, biscuit, cookies etc., 72.33% Hot & boiled curd –*Kadhi /gate ki sabji*, 37% Street- foods like samosa, chaat, pani puri, dahi puri,, 36% Intake of

curd at night, 36.33% Milk + Idle/*Samosa*, 35.33% Fruit- salad etc. Outside food, junk food, improper diet, curd in night are more prone to skin disease.

#### **Virudha Ahara wise:**

Out of 300 patients, on considering data of *Virudha Ahara (Kuhtha w.s.r to chronic plaque psoriasis)* in 300 patients of *Kustha* maximum 63.33% Sleep just after taking meal, 54.66% Intake food before proper digestion of the previous food, 27.33% Enter into cold water or drinking cold water immediately after one is affected with fear, exhaustion and sunlight, 27.00% Retain nature urges like *Muttra and Purisha Vega etc. Vata and Kapha increase due to the above reasons due to Kustha are born.*

#### **Virudha Ahara wise:**

Out of 300 patients, on considering data of *Virudha Ahara (Kuhtha w.s.r to chronic plaque psoriasis)* in 300 patients of *Kustha* maximum 91% Intake of *Takra* oftenly, 54.33% Intake of *Rauksha, Laghu, Gunatmak Ahara*, 10% Intake Excessive amounts of pickled or fermented foods etc. Due *Rauksha, Laghu* ahara and fermented diet is increase Vata and pitta Dosha so more prone to *Kuhtha w.s.r to chronic plaque psoriasis.*

#### **Virudha Ahara wise:**

Out of 300 patients, on considering data of *Virudha Ahara (Kuhtha w.s.r to chronic plaque psoriasis)* in 300 patients of *Kustha* maximum 63.33% Suffer from indigestion frequently, 45.33% Excessive intake of green, leafy vegetables or salads, 18.67% Intake *Putiklinna, Sankirna* excessively, 18.33% Food cooked for a week and refrigerated/ preserved /tinned foods etc. Due to indigestion increase Kapha Dosha that is more prone to *Kustha*.

### **CONCLUSION-**

*Virudha Ahara*, one of the most important *Nidana* of *Kustha* as well as Psoriasis. On considering data of *Virudha Ahara* users (*Kustha*) in 291patients (97%) out of 300 patients of *Kustha (Skin disorder)*.

In survey study on 300 patients of Skin disease categorized as per intake of *Nidan*, 45.33% of patients were found Excessive intake of green, leafy vegetables. Followed by 63.33% patients were suffering from indigestion frequently. 9% patients were Intake of food in public place / hotels etc., all are considered as the *nidanas* of *Kustha (skin disorder)*.

### **RECOMMENDATIONS FOR FUTURE STUDY**

- ✍ The study should be carried out with large sample size for better evidence on results.
- ✍ The treatment protocol is not effective in reducing the complete sign & symptoms. Thus it is proposed that the medicines should be administered for longer duration to provide better result to patients.

✍ Technology for mankind. Newer finest technology should be adapt to search out *Kustha roga (Psoriasis)* that mentioned by our Acharya's in the previous work

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