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Role of Ayurveda intervention in *Indralupta* (~*Alopecia areata*): A Case Report

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ABSTRACT:

An autoimmune condition called Alopecia Areata causes short-term, non-scarring hair loss while keeping the hair follicles intact. Although any hair-bearing region may be affected, it often manifests as patchy baldness on the scalp. It affects almost 2% of people at some time in their lives. It is similar to *Indralupt*a in *Ayurveda*. Here, irritated *Pitta* and *Vata* concentrate in the hair follicles on the scalp, blocking nutrition and causing abrupt, patchy hair loss with stunted growth. *Ayurveda* provides an alternative therapeutic strategy because contemporary medicines may have drawbacks and adverse consequences. Here is the case of a 25-year-old male who presented with a complaint of patchy hair loss, with no associated dandruff, unresponsive to allopathic treatment. Patient is advised for *Brihat Manjisthadi Kwath* 40 ml twice a day, *Arogyavardhani Vati* 500 mg 1 tablet twice a day, *Krimimudgar Ras* 125 mg 1 tablet twice a day, *Sarivadhyasav* 20 ml twice a day with water, *Avipattikar Churna* 5gm during bedtime with lukewarm water and *Malatyadi Tailam* for scalp application on alternate days over 3 months with a diet regimen. *Significant* hair growth is observed. Thus, this case illustrates the role of *Ayurvedic* intervention in managing *Indra- lupta* (~Alopecia areata).

Keywords: Alopecia areata, *Apathya, Indralupta, Pathya*.

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INTRODUCTION:

Alopecia areata is a non-scarring autoimmune hair loss condition that is typified by persistent inflammation at the level of hair follicles. Clinical manifestations of patients range from complete body and scalp hair loss to patchy, limited scalp involvement.[1] The aetiology of Alopecia areata is unknown, although the majority of the data points to an autoimmune disease that is influenced by both environmental and genetic factors. Acute hair loss in genetically susceptible individuals is caused by a Th1-type T-cell autoimmune reaction that is mostly CD8-driven and targets the hair follicles.[2] Environmental triggers like bacteria, viruses, and other infectious pathogens are believed to be important in the development of autoimmune illnesses in addition to genetic variables.[2] Adults, children, and adolescents had overall age- and sex-standardised prevalences of 0.18% and 0.10%, respectively. Standardised prevalence ratios for Asian, Black, and Hispanic/Latino patients were 2.47, 1.35, and 1.26, respectively, compared to White patients; around 9% of patients with Alopecia areata had alopecia totalis and alopecia universalis.[3] Ayurveda approach for hair loss suggested various terminologies like *Indralupta, Khalitya* and *Rujya.* According to *Acharya Shushrut* these term having same meaning.[4] but as per *Ashtang Hridyam* these term quote different meaning such as *Indralupta,* which means total loss of hair and no regrowth of hair meanwhile *Khalitya* is gradual loss of hair.[5] Aetiology of hair loss is that when *Vāta* along with *Pitta* reaches the roots of the hair, it causes the hair to fall.Then *Kapha,* together with *Rakta* (blood) blocks the hair follicles, due to which new hair does not grow at that place.[6].Thus, *Vata, Pitta and Kapha Dosha*(~Three factor are in charge of every bodily physiological function) and *Rakta Dushye* (~one of the bodily locations where the illness manifests) are the causative factors of *Indralupta.* The present treatments available in modern medicine are divided into First-line, second-line, and third-line therapies, regardless of disease activity. Intralesional corticosteroids, topical corticosteroids, minoxidil, anthralin, topical immunotherapy, prostaglandin analogues, topical retinoids, bexarotene, and capsaicin make up first-line treatment. Sulfasalazine, photochemotherapy, excimer laser, and fractional photothermolysis laser make up the second-line treatment. Systemic corticosteroids, methotrexate, cyclosporine, azathioprine, and biologics make up third-line treatment.[7] There is no proven treatment that can alter the course of the condition or offer a significant long-term benefit.[8] Meanwhile in *Ayurveda* First line of treatment is *Shodhan* followed by *Shaman Chikitsa*. So the limitation of modern treatment there is need of a treatment which give promising result. Thus this case report describe usefulness of *Ayurvedic* management in the treatment of *Indralupta*(~Alopecia areata).

CASE HISTORY:

Patient information

A 25-year-old male patient presented to the outpatient department (OPD) of *Kayachikitsa* at Chaudhary Brahm Prakash Ayurved Charak Sansthan in Najafgarh, New Delhi, on July 3, 2025, with primary complaints of patchy hair loss from the scalp.

Chief Complaint with Clinical Findings

According to the patient, he gradually started losing hair from the occipital region; there are no associated symptoms such as dandruff, itchy scalp. There was no recorded history of diabetes mellitus, hypertension, tuberculosis, or asthma. No surgical history. No abnormality related to family history was found in this case. Appetite was normal, bowel was constipated, and there was sticky stool 2-3 times a day. Sleep - Sound sleep 8-9 hours. No history of any addiction was found. All vitals stable. Blood pressure – 122/72 mm of hg Pulse rate – 76/min Respiratory Rate –18/min Disease-specific examination Site- Multiple Patchy hair loss at the occipital region Size – Max size of 7*2 cm Shape – oval.

Timeline

A 25-year-old male patient presented to the outpatient department (OPD) of *Kayachikitsa* at Chaudhary Brahm Prakash Ayurveda Charak Sansthan in Najafgarh, New Delhi, on July 3, 2025, with primary complaints of patchy hair loss from the scalp. According to the patient, he gradually losing hair from the occipital region; there are no associated symptoms like dandruff, itchy scalp. After that patient is advised to *take Brihat Manjisthadi Kwath* 40 ml twice a day, *Arogyavardhani Vati* 500m*g* 1 tablet twice a day, *Krimimudgar Ras* 125mg 1tablet twice a day, *Sarivadhyasav* 20 ml twice a day with water, *Avipattikar Churna* 5gm during bedtime with lukewarm water and *Malatyadi Tailam* for scalp application on alternate days [Table no.1]

Diet and lifestyle Regime

The patient is advised to avoid food containing excess salt and *Kshara*(~Alkaline), such as fast food, junk food, and packaged food.[9] Washing hair in extremely hot or cold water is not recommended. Hair should be washed three times a week with mild, chemical-free shampoos. Hair is shielded from environmental elements, including dust, heat, and wind, by donning a turban or cap. [10]

Diagnostic Assessment

Based on the Severity of Alopecia Tool (SALT) score,[11] the presented case is characterised by significant hair loss on the back of the scalp.

Back of scalp: % hair loss x 0.24

Observation and Result

Before Treatment – The patient was presented with 40% hair loss at the time of the first visit [Figure 1]

Calculated score of first visit – 40% x 0.24 = 9.6.

After 1.5 months of treatment- the patient had some new growth in a 10% patch, and 30% scalp had no new growth. [Figure 2]

Calculated score of 1.5 months visit - 30% x 0.24 = 7.2

After 3 months of treatment- The hair got densely covered with normal growth.

Almost 35% of hair loss is covered with new growth, and only 5% of the hair patch is left. [Figure 3]

Calculated score of 3-month visit – 5% x 0.24 = 1.2.

Table 1: Timeline of Events

Duration	Particulars and interventions
03 July 2025	Patient visited *Kayachikitsa* OPD at CBPACS for the first took a detailed history and clinical examination, and advised of *shaman* therapy
17 July 2025	Bowel movement improved, constipation subsides
26 July 2025	Stopping of the hair fall
04 August 2025	Slight improvement in the patch, with the beginning of the hair growth
14 August 2025	Hair thinning in the patch turns black
21 August 2025	Noticeable improvement in hair growth on the patch
04 October 2025	The hair got densely covered with normal growth.

Table 2: Treatment plan

Drug	Dose	***Anupana***
Brihat Manjisthadi kwath	40 ml twice a day	-
Arogyavardhani vati	1 tab twice a day	Lukewarm water
Krimimudgar Ras	1 tab twice a day	Lukewarm water
Sarivadhyasav	20 ml twice a day	water
Avipattikar churna	5gm during bedtime	lukewarm water
Maltiyadi tailam	1 time a day	Local application

Figure 1: Before treatment

Figure 2: After 1.5 month treatment

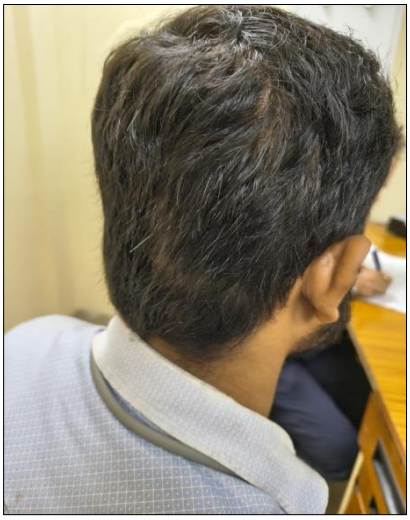

Figure 3: After 3 month treatment

DISCUSSION

Vata-Pitta Shamak and *Brimhana Chikitsa* can be performed at the first stage of *Indralupta,* when abrupt hair loss starts. However, it could result in the subsequent stage of *Samprapti,* where Doshas block hair pores. In order to encourage hair growth, our main goal at this stage is to unclog hair pores. *Ayurvedic* medicine and herbal oils applied externally can promote hair growth. Three essential methods are used to treat hair loss in *Indralupta Dosha:* balancing, mental quiet relief, and *Dhatu* replenishment. By eating a balanced diet and avoiding excessive salt*, Kshara*, acidic foods, smoking, tobacco, alcohol, heat, anger, and irregular eating habits, one can achieve *Dosha* equilibrium. For exacerbated *Pitta*, foods like sweet, bitter, astringent, *Ghee*, milk, sugar, etc., should be favoured. By this approach, with the help of *Ayurvedic* drugs and the treating principle, we can get promising results in the case of *Indralupta* patients

Probable mode of action *Br Manjishthadi Kwath*

The Manjishadi Kwatha mentioned in Ayurveda classics under the name *Brihat Manjisthadi Kwatha,* with main ingredients with *Manjistha* (Rubia Cordifolia). This Manjistha decoction is very beneficial in eighteen types of skin diseases, *Vatarakta* (gout), paralysis, ulcers, elephantiasis, Prasupti (which is a preliminary form of some diseases or the loss of a part), hemiplegia, fat disorders, and eye diseases.[12] Chemical constituents of *Manjistha* include glycosides. Properties include *Kapha-Pitta Shamak*, *Kushthaghna* (~Skin disease*), Varnya* (~enhance complexion*), Shonitsthapan, Rasayan* (~Rejuvenates) , *Shothagan* (~reduce inflammation).[13]

Probable mode of action *Arogya Vardhani Vati*

Rasaratnasamucchaya mentions the medication in relation to *Kustha* (skin condition) and calls it *Sarvarogaprashmani*(~can be used for all types of disorder).[14] and *Bhaishajyaratanavali* mentions it in *yakrit vikar* (~Liver disorder).[15] *Arogyavardhini Vati* has antioxidant properties[16], Hepatoprotective ,rejuvenation action[17]

Probable mode of action *Krimi Mudgar Ras*

Rasendrasarsangrah mentions the formulation in the context of *Agnimandaya*(~low digestive fire) and *Krimi Rog*(~worm manifestation)[18]

Probable mode of action: *Sarivadyasava*

Sarivadyasava is primarily recommended for *Pitta* and *Rakta dushti* (blood vitiation). *Sarivadyasava* plays a crucial supporting role since *Pitta* and *Rakta dushti* are linked to a number of hair problems in *Ayurveda*, including *Indralupta* (alopecia areata), *Khalitya* (hair fall), and *Palitya* (premature greying). The main components of *Sarivadyasava* are: *Sariva* (*Hemidesmus indicus*): *Rasa—Madhura-Kashaya* (sweet-astringent *Virya—Shita*(cooling),*Vipaka—Madhura*, *Prabhava*—blood cleanser, and). Hemidesmine, flavonoids, and saponins that scavenge free radicals are found in

its roots. *Trikatu* (Piper longum, Piper nigrum, Zingiber officinale): piperine facilitates the absorption of other active ingredients and enhances digestive fire (*Agni*). *Mustaka* (Cyperus rotundus): provides antispasmodic and analgesic effects through rotundone and cyperene, balancing *Vata*. In modest amounts, *Triphala* (Emblica officinalis, Terminalia chebula, Terminalia bellirica) promotes intestinal clearance and has a mild purgative effect. *Trikatu* increases *Virya* for quicker systemic dispersion, *Mustaka* offers *Vata*-balanced spasm alleviation, and *Sariva's* cooling sap strengthens *Rasa Dhatu* and purifies *Rakta Dhatu*.

Probable mode of action: *Avipattikara Churna*

Pitta-Shamana stops early greying and hair loss. *Khalitya* (hair loss), *Palitya* (early greying), and *Indralupta* (alopecia) are caused by *Pitta* aggravation in the scalp (*Rakta + Pitta dushti*). *Amalaki, Musta, Vidanga, Trivrit, Ela,* and *Patra* are among the cooling and *Pitta*-calming medications included in *Avipattikar Churna.* It helps to lessen follicular damage, reduce inflammation of the scalp, and delay premature greying by lowering systemic *Pitta.*

Probable mode of action: *Malatyadi tailam*

The *Malatyadi Taila* constituents (*Malati, Karaveera , Karanja* and *Chitraka*) have also been evaluated as a potential benefit in promoting hair growth. These contents are *ushna*, *teexn*a and *lekhana* properties which facilitate *avarana* and *medoharana. Malati* (*Jasmenium grandiflorum*) has shown antioxidant, antiulcer, antimicrobial and wound healing properties. Dey P et al. have demonstrated that *Nerium Indicum* (*Karaveera*) has demonstrated potent anti-inflammatory activity by inhibiting PGE2 expression in murine lymphocytes. This is possibly due to the suppression of NO, TNF-, and COX activity and an increase in IL-10 levels, as well as immunomodulatory activity by up-regulating IL-2, IFN-, and IL-10 expression and down-regulating IL-4, TNF.[21]Meanwhile, the results of this case study are based on a single patient and do not necessarily apply to all *Indralupta* patients. Individual differences in *Prakriti, Agni,* and *Dosha* state make it impossible to extrapolate the results to the entire community**.** It is challenging to ascribe hair regrowth exclusively to *Shaman Chikitsa* because of the spontaneous remission characteristic of alopecia areata and the utilisation of several *Ayurvedic* therapies. To verify these findings, long-term controlled clinical investigations with objective trichological evaluation are needed. This case study followed up to 4 months after the start of the treatment; no remission of the hairfall was reported. The case was addressed through a combination of internal and external Shaman therapies. *Brihat Manjisthadi Kwath* reported. The*sava* were administered for *Rakta-Pitta Shodhan* and anti-inflammatory action. *Arogyavardhani Vati* and *Avipattikar Churna* were used to correct *Agni,* eliminate *Pitta* aggravation, and improve metabolic function. *Krimimudgar Rasa* was prescribed considering the classical involvement of *krimi* in *Indralupta* pathogenesis. Local application of *Malatyadi Taila* was advised to stimulate

hair follicles and remove *Kapha* obstruction at the scalp level. With three months of therapy and dietary regulation aimed at *Pitta* pacification, progressive hair regrowth was observed in alopecic patches. The response supports the *Ayurvedic* principle that correction of *Dosha* imbalance and *Rakta duṣṭi* can restore hair follicle function in *Indralupta.*

Thus, Ayurvedic treatments are a viable option for anyone looking for all-encompassing methods of managing alopecia

CONCLUSION

By concentrating on both symptomatic alleviation and addressing the underlying cause of the problem through dosha balancing and blood purification techniques, this example illustrates the promise of Ayurvedic therapy in managing *Indralupta*. Significant hair growth, fewer symptoms, and an overall improvement in the patient's health were all made possible by the combination of food changes, hygiene practices, and medication applications. .

Consent of patient:

The written informed consent has been taken from the patients before stating the treatment and for publication of data without disclosing the identity.

Conflict of interest: The author declares that there is no conflict of interest.

Guarantor*:* The corresponding author is the guarantor of this article and its contents.

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