

AYURVEDIC MANAGEMENT OF TINEA CORPORIS W.S.R.TO DADRU: A CASE STUDY.

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ABSTRACT

Skin is the largest organ of human body. It is the protectional cover of all other body organs, and is exposed to number of external harmful and disease-causing factors. Most of the skin infections are very complicated, relapsing in nature and give tremendous emotional suffering as well. Ayurveda has a vast literature in this field. Major skin diseases are explained in detail in *Kushtha Vyadhi*. A precise picture of various types, signs and symptoms and treatment of skin diseases is available in Ayurvedic texts. Tinea corporis infection is very common in rural and urban areas. In Ayurvedic context, Tinea signs can be correlated with that of *Dadru vyadhi*. In Following Clinical Study, 29 years old of *Dadru* for 3 years with recurrence was treated firstly by *Shodhan Chikitsa* with *Siravedh* and *Virechana Karma*, *Ashwasan Chikitsa* was also useful which was given from time to time and followed by *Shaman Chikitsa*, and a good relief was observed.

KEYWORDS: *Kushtha Vyadhi*, *Dadru*, Tinea Corporis.

INTRODUCTION

Skin being largest organ it covers the entire body and serves as a protective shield to all internal vital parts against heat, cold, light, and chemical and mechanical injuries. According to World Health Organization (WHO), the prevalence rate of superficial mycotic infection of skin worldwide has been found to be 20-25%.^[1] Tinea corporis is a superficial fungal skin infection of the body caused by dermatophytes. Tinea corporis is defined by the location of the lesions that may involve the trunk, neck, arms, and legs. Alternative names exist for dermatophyte infections that affect the other areas of the body. These include the scalp (tinea capitis), the face (tinea faciei), hands (tinea manum), the groin (tinea cruris), and feet (tinea pedis).^[2] In Ayurvedic literature, a wide range of information about all variety of skin diseases is present under one term, "*Kushtha*". *Kushtha* is mainly grouped in two headings, *Mahakushtha* and *Kshudrakushtha*. *Dadru* is one type of

Kushtha which is included in *Kshudrakushtha* by Charaka with predominance of *Pitta* and *Kapha dosha*.^[3] Classic *lakshanas* of *Dadru* given by Charaka^[4] and clinical picture of Tinea Corporis is much similar. Following table describes the similarity between *Dadru* and Tinea Corporis.

Table 1:

Sr. No.	<i>Dadru</i> ^[4]	Tinea Corporis
1.	<i>Raga</i>	Erythema
2.	<i>Kandu</i>	Itching
3.	<i>Pidaka</i>	Granular surface
4.	<i>Udgata Mandal</i>	Circular rash

Dadru is included in *Mahakushtha* by Sushruta. ^[5] Acharya Sushruta describes the colour of the lesions in *Dadru*, copper or the flower of *Atasi* and mentions that its *Pidaka* are in the forms of *Parimandala* having spreading nature (*Visarpanshila*) but slow in progress or

chronic in nature (*Chirrottham*) with *Kandu*. It is *kapha pradhan vyadhi* according to *Sushruta*. Intake of incompatible and contaminated food, suppression of natural urges, drinking cold or chilled water just after exposure to sunlight or after doing physical work, daytime sleeping and excessive intake of salty or acidic food items are described as causative factors for the disease.^[6]

Present Case Study is about classical *Virechana* followed by *Shamana Chikitsa*.

CASE REPORT

A 29 years old female patient came to OPD dated on 02/10/20 with chief complaints of

1. Elevated ring like patch around neck region on right side, buttock and right thigh region,
2. Severe itching at the patches and aggravates at night,
3. Moderate discoloration/redness,
4. Mild burning after itching

Patient has been suffering from above complaints since past 3 years. The signs and symptoms worsened post pregnancy. Previously, she consulted an allopathic dermatologist for the same and was diagnosed with *tinea cruris*. She has taken allopathic treatment which includes both systemic & topical medication and also experienced significant relief initially. But after ceasing the medication relapse of all lesions with more severity has been observed. Patient has also been suffering improper bowel evacuation.

Past History

Patient suffered from pregnancy induced Hypothyroidism but now TSH, T3, T4 levels are normal. No H/O - DM/HTN, Accident, Operation.

Aahara- Intake of oily and junk food, *Nitya Dadhisevan* (daily eating curds), intake of excessive bakery products.

Vihara- Sedentary lifestyle.

On Examination

- General Condition-Moderate
- Pulse rate-82/min

Table 2:

Sr.no	Name of the medicine	Dose	Route
1.	<i>Aragvadhadi Kashaya</i>	15ml twice a day, after meals with lukewarm water	Oral
2.	<i>Avipattikar Churna</i>	5gms twice a day, before meals with lukewarm water	Oral
3.	<i>Edgajadi Lepa</i>	External application over lesions with takra, twice a day, morning and evening	External
4.	<i>Marichyadi tail</i>	Twice a day after lepa removal, and also whenever the itching aggravates.	External

After *Amapachana*, *Snehapana* was started for which *Mahatiktak Ghruta* was advised and *Sneha Siddhi Lakshanas* were observed after 6 days.

- BP- 110/80mm of Hg
- Weight- 56kg
- *Mala- Asamadhankaraka, Sakashta*
- *Mutra- Regular*
- *Nidra- Irregular*
- *Kshudha- Samyaka*
- *Jiwaha- Sama*

Local Examination

Irregular area over neck region on right side. 3 circular 8 cm in diameter erythematous plaque with some vesicular eruptions all over the buttock area. Another single circular raised erythematous lesion over right thigh, 3-4 cm in diameter, is present on the posterior aspect of left thigh.

Colour- Reddish Grey

Odour- No odour

Secretion- After Itching

Elevation- Present.

Inflammation – Mild Inflammation

Pain- Mild pain

Tendency to bleed- No

Loss of sensation -No

Samprapti Ghatak

- *Dosha- Pitta -Kapha Pradhan*
- *Dushya- Rasa, Rakta, Mansa, Ambu*
- *Srotasa- Raktavaha Srotas*
- *Sroto-Dushti -Sang*
- *Udhbhavsthana- Amashaya*
- *Vyakti Sthana- Jatru-urdhva Sphik-Parshva, dakshin Uru Pradesh,*

Management

Considering the Severity of disease, the patient was advised to undergo *Shodhana Chikitsa, Virechana karma. Virechana Karma Procedure* was explained to the patient and proper consent was taken. Prior to *Shodhana, Amapachana* and *sthanik dosha shamana* was very necessary for which following medicines were prescribed for 7days.

Table 3:

Date	No. of Day	Dose (For Anupana Luke warm water for whole day) daily between 7.00 to 7.15 am.	Kshudhapravrutti
18/10/20	Day 1	30ml	11.30 am
19/10/20	Day 2	60ml	1.00 pm
20/10/20	Day 3	90ml	1.00 pm
21/10/20	Day 4	120ml	2.30pm
22/10/20	Day 5	150ml	4.30 pm
23/10/20	Day 6	180ml	6.00 pm

Snehapana dose was gradually increased according to Agni and Koshta of the patient. Sneha Jiryaman and Jirna Lakshana were observed daily. On Day 6, Vata Anulomana Deeptagni Snigdha Varcha Mardava Klama Snigdhangha all these Samyak Sneha Laskhanas were observed. After achievement of Samyaka Sneha Lakshanas, 2 days of Gap i.e., Viramkala was given. On the day of Virechana Sarvanga Snehan and Bashpaswed was given in the early morning after evacuation of bowels.

For Virechana- Trivritta Avleha (100gms) + Triphala Kashaya (250ml) was given at 10.30am on date-26/10/20 was given to the patient. Anupana- Ushna jalapana. Table no. 4 describes the shodhana pramana as stated in classical texts.

Table 4:

Pariksha	Pramana
Vegiki	Madhyama shuddhi (14 vegas)
Laingiki	Madhyama
Maniki	Madhyama
Aantiki	Kaphant

Table 6:

Sr. no.	Medicine	Dose	Lakshana
1	Arogyavardhini	0-2-2	Itching over the patches +++ Redness over the patches +++ Dryness over patches +++
2	Gandhak rasayan	2-2-2	
3	Panchatitka ghruta Guggul	0-2-2	
4	MahaManjishthadi Kadha	15ml BD, after meals	
5	Edgajadi lepa	LA	
6	Jeevantyadi Yamakam	LA	

Shaman chiktsa with same medicine was continued for 3weeks and results were observed and follow-up was noted as given below.

Table 7:

1 st follow-up	9/11/2020	Itching over the patches +++ Redness over the patches ++ Dryness over patches ++
2 nd follow-up	16/11/2020	Itching over the patches ++ Redness over the patches ++ Dryness over patches +
3 rd follow-up	24/11/2020	Mild itching over the patches Mild discoloration present.

As it was Madhyam Shuddhi, Sansarjan krama of 5 days was advised as given in table no 5.

Table 5:

No. of days.	Morning	Evening
1	-	Peya
2	Peya	Vilepi
3	Vilepi	Akrita Yusha
4	Krita Yusha	Akrita Krushara
5	Krita Krushara	Normal Diet.

After the completion of Samsarjankram, once patient started feeling raised hunger and good appetite, Shaman Chikitsa was started. Following medicines given in table no. 6 were started from 2/11/20.

		No Dryness
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During *Shamana Chikitsa*, *Sthanik Raktamokshan* was also done by *jalaaukavacharana*. After *Jalaaukavacharana*, itching over the patches was absent.



DISCUSSION

Kushtha Vyadhi is very complicated and chronic disease, and requires continuous and repeated *shodhana* and *shamana*. *Shodhana Chikitsa* according to *Dosha pradhanya*, *bala-rakshan*, and *agni-deepan* are the main parameters to be taken care of.

1. *Aragvadhadi Kashaya*^[7] and *Avipattikar churna*^[8] was used initial for *Amapachana*, *Dosh Mala-shodhana*.
2. *Edgajadi Lepa*: The contents of *Edagajadi Lepa* Viz. seeds of *Chakramarda*, *Kushta*, *Sarshapa*, *Vidanga* and *Saindhava lavana* are mixed with *Sauveerkam* which possess *Ushna*, *Tikshna*, *Laghu*, *Ruksha*, *Vishada Guna*, *Ushna Virya* & *Katu Vipaka* properties. The *Lepa* is said to be *Sukshma* in nature as it is macerated with *Sauveerkam* for two times. Upon topical application, the active principles of the *Lepa* reach to the deeper tissues through *siramukha* & *swedavahi srotas* & stain it with its *Sukshma* & *Tikshna* property.^[9]

3. *Mahatiktak Ghrut*:^[10] *Mahatiktak Ghruta* is a preparation which includes vast range of *dravyas* of which majority are having *Tikta rasa*. *Tikta rasa* is *kledahara* and *kanduhara*. It also pacifies *Pitta*. *Tikta rasa* with *sheet veerya* are known for *Raktaprasadana*, such *dravyas* are also present in *ghruta*. *Mahatiktak ghruta* was used for *Snehapana*, so it acted as *vyadhi pratyani* i.e., disease specific *Snehan dravya*.
4. *Arogyavardhini*:^[11] *Arogyavardhini* is a great liver detoxifier, which helps to improve the quality of *raktadhatu*, liver or *yakruta* being the *moolasthan* of *Raktadhatu*. *Kutaja* in *Arogyavardhini* acts a *pittavirechaka*, and other *sukshma bhasma* of *abhrak*, *tamra*, *lauha* have potency to penetrate minute *strotasas* and do *samprapti vigahatana*. *Kajjali* is also well known for its *strotogamitva*.
5. *Gandhak Rasayan*:^[12] *Gandhak Rasayan* has powerful anti-bacterial, anti-microbial and anti-viral properties. A broad-spectrum medicine used to treat a many skin ailments such as psoriasis, scabies, eczema, itching etc. ^[13] *Gandhak*, *Haritaki*, *Amalaki*,

Bibhitaki, Detoxified ghee, Ginger and *Bhringraj* are the contents.

6. *Panchatikaghrut Guggul*:^[14] *Panchatikta Guggulu* have *Tikta Rasa*, *Ushna Virya*, and *Madhura, Katu Vipaka*. It increases *Dhatwagni*. Provides *Poshana* to all the *Dhatus*. *Tikta Rasa* is *Lekhana, Kleda, Meda, Pitta, Shleshma*, and *Shoshana*. *Ghrita* is *Vata-Pittashamaka, Balya, Agnivardhaka, Madhura, Saumya, Sheeta Virya, Shulahara, Jwarahara, Vrishya*, and *Vayasthapaka*. *Guggulu* possesses anti-inflammatory, immunomodulatory, and antilipidemic action.^[15] Considering all above properties, *Panchatikta Ghrut Guggulu* is an apt yoga for pachana of residual doshas, *Dhatu poshana*, and *Rakta-Pitta* Prasadana.
7. *Maha Manjishthadi Kadha*:^[16] All the *dravyas* in this *kwath* are having great results in all kinds of skin diseases. It is well known for its anti-inflammatory, anti-oxidant properties and also as a great blood purifier.
8. Due to the wide range of *dravyas*, it acts as a broad-spectrum medicine in all *Rakta, Pittta, Vata, Kapha* disorders.
9. *Jeevantiyadi Yamakam*:^[17] It is *Yamak Sneha* containing *Jivanti, Manjishtha, Darvi, Kampillak, Tuttha, Sarjarasa, Madhucchistha*. It has been used in this patient to treat the infection and post *shodhana* dryness as well. *Jeevantiyadi Yamakam* also helps in improving skin texture and complexion too.
10. Also, *Ashwasan Chikitsa* is an important aspect of treatment of *Kushtha*. Patient needs to be given hope and courage to continue the treatment rather than anticipating results earlier.

CONCLUSION

Dadru is a very chronic and tedious condition, and hampers routine life and mental well being of the patient. *Nidan-Parivarjan*, proper *pathya*, repeated *shodhana-shamana*, *ashwasan chikitsa* are the keypoints of treatment.

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