Ayurvedic Management of Dadru Kushta; A Single Case Study

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Abstract- In the current era of civilization, there has been a considerable increase in the incidence of skin disease due to unhygienic condition, poverty, certain types of infection, faulty food habits, etc. Out of the all skin diseases fungal infection is very common. This is opportunistic fungal infection dermatophytes species of fungi. This fungal infection is very common at hot and humid environment In Ayurveda majority of all Twak Vikaras classified under broad term "Kushtha Vikara" Symptoms of fungal infection closely resembles with Dadru Kustha. It has been observed in nowadays that there is increased resistance to antifungal drugs, tinea infection don't respond to routine antifungal medicines. For few days symptoms of tinea infection regresses but again it has tendency to flare up. So there is scope of intervention of Ayurvedic medicine which can control and irradicate tinea infection and prevents relapses. So in this article we are going to discuss a case study of Dadru Kushtha successfully treated with Ayurvedic principles.

Key Words- Dadru, lepa, shaman

INTRODUCTION

Skin is the biggest and heaviest organ in the body, spanning an average of 20 square feet. The most obvious function of the skin is to protect our internal organs from the environment, but it does so much more. Dermatophytes are fungi that invade and proliferate inside keratinized tissue (skin, hair, and nails). Trichophyton (which causes infections in the skin, hair, and nails), Epidermophyton (which causes infections on skin and nails), and Microsporum (which causes infections in the skin and nails) (which causes infections on skin and hair)

are the three classes of dermatophytes. Based on their route of transmission, they have been classified as anthropophilic, zoophilic, or geophilic. Finally, depending on the people who have been affected.³ Incubation period is 1-3 weeks.⁴

Tinea corporis often manifests as a well-defined, strongly delineated, oval or circular, moderately erythematous, scaly patch or plaque with a raised leading edge.⁵ As the active boundary extends outward, the centre region becomes hypopigmented or brown and less scaly. 6The margins are frequently circular and uneven. Multiple lesions gather to form polycyclic patterns.7 Ayurveda classifies all skin diseases as 'Kushtha,' which is further subdivided into two types: Mahakushtha (major skin disorders) and Kshudrakushtha (minor skin disorders). Dadru (Tinea corporis) is one of them.⁸ Acharya Charaka⁹ defines Dadru (Tinea corporis) as Kshudrakushtha (minor skin disorders), although Acharya Sushrut and Acharya Vagbhat define it as Mahakushtha. 10 Vishamashana (incompatible food), vega vidharana (suppression of natural urges), diwaswapa (daytime sleeping), atilavana, atitikshnaahar (excessive salty or spicy food), contaminated food, drinking cold water immediately after physical work, or atapsevana (exposure to sunlight) are all factors that contribute to Kushta.¹¹ Dadru's principal lakshanas are Kandu (itching), Utsanna (elevated circular lesions), Mandala (circular patches), Raaga (erythema), and Pidakas (papule). Dadru samprapti is characterised by Pitta-kapha dosha vitiation and rasavaha and raktavaha strota dushti.12 Dadru is associated with Tinea/Fungal Infections because to comparable

features. Tinea infections affect 5 persons out of every 1000.13 Tinea Cruris, often known as Jock Itch, is a fungal infection that affects the groin, perineum, and peri-anal region. It might appear unilaterally or bilaterally as a red, raised, and active border. The most prevalent organisms that cause 'Tinea cruris' are Trichophyton rubrum and Epidermophyton floccosum.¹⁴ The climate in India favours the acquisition and maintenance of mycotic infections. Dermatophyte infection is more frequent in people aged 16 to 45.15 Scalings in 'Tinea cruris' are varied, and vesiculation is uncommon. It frequently happens to individuals who are wearing garments made of synthetic materials, which tend to trap heat and humidity in the skin. 16 It is treated in modern medicine using topical and systemic antifungal medications, as well as corticosteroids. Shodhan, Shaman, and Bahirparimarjan (topical) Chikitsa are Ayurvedic remedies for Dadru. 17 In this case study, all these therapy techniques are applied. Dadrukushta (Tinea corporis) is one of the kshudrakushta (minor skin disease) having lakshanas (symptoms) like Kandu (itiching), Atasipushpa like Pidika, Varna with Mandal (patches), Unnata Mandala (raised borders), Dirghapratana (macular rashes), Tamra Pidika (copper coloured macular rashes). 18 Due to vitiation of sapta dhatus (seven tissue) like three Doshas (bodily elements), Twak (skin), Rakta Mamsa (muscles) and Lasika (blood (blood),

vessels) for manifestation of kushta. 19 Dadrukushta is having management with shamanachikitsa (pacification).

Case Report

50 years old female came to Kayachikitsa OPD with Chief complaints of round and reddish patches over abdominal region with severe itching for 20 days.

History of present illness

Patient was well before 20 days, and then she gradually developed the round and reddish patches over abdominal region with severe itching. For that she had taken Allopathic treatment from local practitioner but didn't get satisfactory result so, she came to Hospital for management.

Past History

There was no any past history of Diabetes mellitus, Hypertension, Asthma & Hypothyroidism. Family History - Husband had similar complaints.

Clinical Examination

Ashthavidh pariksha was within normal limit except patient had constipation. Patient had madhyam akruti.

Local examination- 4-5 circular erythematous, well demarcated patches with some vesicular eruption over abdominal area. No discharge from lesion.

Vital parameters- Vitals parameters were within normal limit

TREATMENT GIVEN

Durvadi Lepa-

Sr. No.	Drug Name	Latin Name	Ras	Virya	Vipaka
1.	Durva	Cynodon dactylon Pers.	Kashaya, Madhura	Shita	Madhura
2.	Haridra	Curcuma longa Linn.	Tikta, katu	Ushna	Katu

Laghumanjishthadi Kwatha

(Laghumanjishthadi Bharad 27gm/day was given to the patient and procedure of kwatha Nirman explained as per classical text. Advice given to take freshly prepared *kwatha* every time.)

Dose: 25 ml kwatha twice in a day

Aushadhi sevan kala: Adhobhakta (vyan udan

kala)

Route of Administration: oral

Duration: 30days Follow up: Every 10th day

Table Showing Pathyapathya

radic bilowing radifyapatifya					
Apathya					
Dadhi					
Dugdhakurchika					
Paryushit Ahara					
Harita shak					
Anupa Mamsa					
Masha					
Divaswapa					
Atapasevana					

OBSERVATION

Sr.No.	Parameter	Before Treatment	Follow Up	After Treatment
1	Kandu (Itching)	Intense and contineous. Disturbs routine work and sleep.	Disturbs routine Works, Don't disturbs sleep.	No itching
2	Raga (Erythema)	Black/ Vilolace black color	Red	No color change
3	Pidika (Erruptions)	>10	<10	No Pidika
4	Size of Mandala(Lesion)	>10cm	5-10cm	Below 0.5-1 cm
5	No. of Mandala	>7 lesions	4-6 Lesions	No Mandala

DISCUSSION

Dadru is Pittakapha dominant disease. It is one of the Aupsargik Roga. Pathyapathya was an important issue during treatment. Among these patient 2 patients shown early positive outcome, these patients followed proper Pathyapathya as per advice given to them. selected drugs for this study was 'Laghu Manjishthadi Kwatha' and 'Durvadi Lepa'. Highly significant result was observed in the symptom Kandu, this may be because of the Kandughna, Kusthaghna, Kaphashamaka, Ushna Virya which justifies the above result with regards to the Bahya Shaman Aushadha. As well internally the Kashaya has shown the effect on Kandu with its poperties of Tikta Pradhana Rasa, Ushna Virya, Kaphapittahara and Kushthaghna property. Raga is resultant of Pitta Prakopa. The Lepa as well as Kashaya have the properties of Pittashamana and Rakta Shodaka, Varnya hence put forth the observed above result. The Pidika are produced due to the Kapha Pitta Pradhana Tridosha . The Ushna, Ruksha, Tikshna Gunas of both Bahya and Abhyantara Shamana acts on reducing the Pidikas. Mandalas are resultant of Tridosha and four Dushya Dhatu. Kushthghna, Twakdoshara, Raktadoshahara, Laghu ruksha Guna, etc. Gunas of Lepa and Kashaya helped in reducing the Mandalas of Dadru. Probable mode of action of Laghu Manjistadi Kwatha and Durvadi Lepa

The ingredients of Laghu Manjisthadi Kwatha are Manjishtha, Haritaki, Vibhitaki, Amalaki, Katuki, Vacha, Daruhaidra and Nimba Twak which have the properties like Agnidipana, Raktashodana, Samsrana, Pitta Kaphahara, Kushthaghna, Kashaya, Tikta, Katu Rasa, Laghu, Ruksha Guna, Ushna virya etc. Dadru is Kapha Pradhana Vyadhi. Thus formulation which contains Katu, Tikta Rasa, Ushna Virya which acts as Kaphahara. In Dadru Kushtha Rasa, Rakta, Mamsa, Ambu are the main Dushya.

Rasa Dhatu Dushti is produced by Rasa Dhatvagnimandya and Jatharagnimandya. Karma like Deepana, Pachana produce proper Rasa Dhatu which correct Kapha as it is Aashraya of Rasa Dhatu the drugs like Vibhitaki and Amalaki having properties like Deepana. Drugs having Rakta Shodhaka poperties are Manjishtha, Daruharidra, Nimba. Kutaki causes Pittavirechana which helps in terms of Pittashodhana and Prakrit Pitta Nirman. Thus Laghumanjishthadi Kwatha acts as per Anshansha Samprapti of Dadru Kushtha leading to healthy skin. Durvadi Lepa act as Sthanika Varnaprasadaka, Kandughna and kushthaghna. Haridra leads to Krumighna, Kandughna as well as Varnya. It helps in reduction of Kandu, Raga mainly. Durva causes Dahaprashamana and sthanika bhrajaka pittashamana. In this way both these preparation act on each and every Sampraptighataka and cause Sampraptivighatana resulting in healthy

CONCLUSION

Dadru is among the Kushtha, is a very contagious rigid skin disorder which can be correlated to Tinea. In the present study both the Laghumanjisthadi Kwatha and Durvadi Lepa showed significant result during as well as at the end of the treatment. The maintenance of hygiene and Pathyapathya is a very important aspect during treatment on subjective parameters.

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