

Ayurvedic Intervention in Melasma (Vyanga): A Case-Based Study.

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Abstract—Ayurveda emphasizes holistic well-being of the body, mind, and soul, and describes healthy skin (Twak Sharir) through concepts such as Prabha and Kanti. Skin reflects the internal health of an individual, and disorders affecting its appearance can significantly impact confidence and quality of life. Hyperpigmentation disorders such as melasma are correlated with Vyanga in Ayurveda. Melasma is a common acquired hyper pigmentary disorder characterized by symmetrical brownish pigmentation, predominantly affecting the facial region. The condition is often associated with hormonal changes, pregnancy, stress, and prolonged sun exposure, and it may significantly impact psychological well-being. Contemporary management often provides temporary relief and recurrence is common, thereby highlighting the need for a holistic treatment approach. This article presents a case of melasma (Vyanga) managed through Ayurvedic principles with a treatment protocol including Panchakarma therapy and oral Ayurvedic medications. The treatment was continued for three months with regular follow-up. Significant improvement was observed in facial hyperpigmentation, skin texture, and overall well-being. The case demonstrates the potential role of Ayurvedic management in addressing melasma through a holistic approach targeting both physical and psychological aspects of health.

Index Terms—Melasma, Vyanga Ayurvedic management, Aushadhi

I. INTRODUCTION

Vyanga or Melasma is included under Kshudra roga in Ayurveda. It is distinguished by the Niruja Shavya Varna Mandal. Imbalance in Vata and Pitta Dosha is responsible for this skin discolouration in Vyanga, and they are exaggerated by Krodha, Aayasa, and Shoka. Vyanga or melasma is an illness that affects the appearance and overall confidence of a person due to

the presence of hyperpigmented patches on the face. Everyone wishes to have a beautiful, Flawless Skin that highlights from a distance. In today's era, unhealthy working hours, maximum use of mobile phones or screens, which results in a lack of sleep, is the biggest problem and one of the causative factors for melasma. With the oxidation of lipids (high fats and sugary junk foods), there is the darkening of the skin, which will lead to hyperpigmentation and uneven skin tone. Use of Skin whitening & brightening creams, Topical steroids, chemical peels and laser treatment are nowadays popular to treat melasma. On the other hand, it has the potential to cause skin irritations and persistent skin darkening. Since Ayurveda believes in treating the disease with the help of Nidaan panchak & Nidaan parivarjana is the first step in treating the same Case presentation: A 28-year-old female, diagnosed with a case of Melasma, came to our OPD with complaints of hyperpigmentation of skin over cheeks post pregnancy period from the last 6-8 months. She was tired of trying all kinds of medicine and was depressed. After a thorough examination, an ayurvedic treatment plan was designed in the form of Panchakarma and oral medicines. Outcomes: significant improvements were noticed in all symptoms; the duration of treatment was 3 months. And then a follow-up was done every month.

Nidian (Causes)	Manasika (Mental): Krodha (anger), Shoka (sorrow), Aavasa (mental exertion). Aupadhika (Environmental): Excessive sun/UV exposure, certain cosmetics, Aushadhi (Drugs). - Prakrutik Kulaj (Genetic): Genetic predisposition. Doshic: Aggravation of Vata, Pitta, Rakta. ^{1,2}
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Purvarupa (Prodromal Symptoms)	Classical texts lack specific symptoms; general precursors include excess body heat signalling skin imbalance. ³
Rupa (Clinical Features)	Shvavavarna Mandalas: Bluish-black, patchy discolouration on face. - Niruja: Painless- Tanu: Thin patches. ^{4,5}
Upashaya (Therapeutic Measures)	Shodhana: Raktamokshana (bloodletting). - Shamana: Lepa (herbal pastes), Abhyanga (oil massage), oral medications. ^{6,7}

A. Samprapti (Pathogenesis)

Vitiated Vata and Pitta doshas, along with vitiated Rakta dhatu, travel to the face through the Dhamanis (arteries). They cause the vitiation of Bhrajakapitta (a type of Pitta that governs skin complexion) and settle in the Mukha- Gatatwacha (skin of the face), producing the characteristic lesions of Vyanga.

B. Case Study

Information of patient

- Age – 28 years /female
- Religion- Hindu
- Socio-economic status- Middle

Chief complaints

- Hyperpigmentation of the skin over the cheeks

C. History of Present Illness:

The patient was having very little skin hyperpigmentation for 9 months, when she noticed hyperpigmentation on her cheeks becoming prominent over the last 4-6 months, and gradually the patches widened. Even after the use of some medications, she came to our OPD for further treatment.

1. Family History: Negative for HTN, DM and any skin diseases.

2. Personal history:

- Diet- Mixed: usually skip lunch/breakfast items intake curd + fish daily prefer Amla, Lavan, Madhura ahar prefer curd, pickles, fried item dishes, bakery items
- Bowel- Frequency-2/day
- evacuation- Complete
- Stool consistency- normal
- Appetite- Moderate
- Micturition- Regular

- Sleep- less than 4-5 hours
- Day sleep- present
- Allergy- Not yet detected
- Addiction- Nil
- Exercise- Poor

D. General examination

The vital signs were all within normal limits: body temperature at 98.0 °F, pulse rate at 82 beats per minute, and blood pressure measuring 120/82 mmHg.

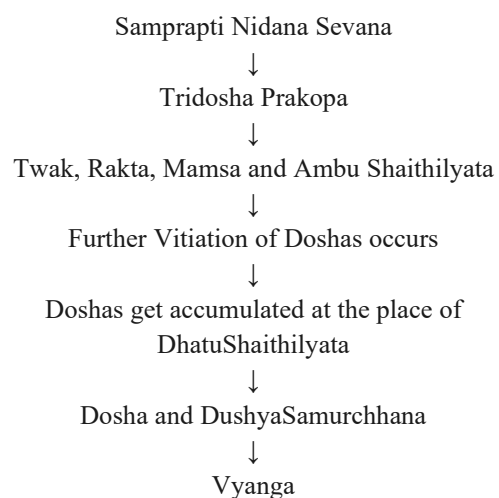
E. Systemic examination

In systemic examination, the respiratory rate was normal

F. Asthavidha pariksha

- Nadi (pulse) – Pittakaphaja;
- Mala (stool)– Sandra-picchila, bowel habit was regular;
- Mutra (urine) – Prakrita;
- Jivha (tongue)– Shveta-picchila, Sama (coated); Shabda – Prakrita;
- Sparsha (touch)– Ushna;
- Drika (vision) – Prakrita;
- Aakriti – Madhyam (medium built).

Samprapti⁸



G. Line of treatment

Yashtimadhu Churna pinda Sweda for 21 days

Sr. No.	Formulation	Dose, Adjuvant, frequency, and time	Duration
1	Kumkumadi Tailam	Local application All over face & neck	3 months
2	Kaishor guggulu (Tablet)	2 tablets (with lukewarm water), twice daily after food.	3 months
3	Sarivadi vati (Tablet)	2 tablets, containing 250 mg (with water), twice daily after having food.	3 months
4	Pushpadhanva (Tablet)	1 tablet, containing 250 mg (with lukewarm water), twice daily in between food.	3 months

Results: patient was reviewed after 7,14 and 21 days of Yashtimadhu churna pinda sweda and oral medication. She got excellent recovery. She was advised to continue with the same treatment.



II. DISCUSSION

Vyanga is classified under Rakta Pradoshaja Vikara, where Rakta Dhatu plays a key role in its development. Factors such as Krodha, Shoka, and Shrama primarily disturb the Manasika Dosha along with Pitta and Vata. This disturbance leads to vitiation of Agni, especially Pitta located in Rasa Dhatu, initiating the pathological process of Vyanga. Among the five types of Pittas,

Ranjaka Pitta is responsible for converting Rasa Dhatu into Rakta Dhatu and maintaining normal skin complexion (Varnotpatti). When Ranjaka Pitta becomes vitiated, the normal process of pigmentation is impaired, resulting in discolouration. According to the Ashraya–Ashrayee Bhava, vitiation of Pitta Dosha directly affects Rakta Dhatu. Excessive Shrama and Shoka further aggravate Udana Vata. The vitiated Ranjaka Pitta, Rakta Dhatu, and Udana Vata circulate through the Dhamanis and localise in the facial skin (Mukha-gata Twacha), where they disturb Bhrajaka Pitta, producing hyperpigmented patches. In the context of Pandukarma, Acharya Sushruta has described drugs like Yashtimadhu, which help in reducing skin discolouration when applied externally.

Kumkumadi tailam: The name comes from one of the key ingredients of Kumkumadi tailam, which is red-gold Saffron, known as Kumkuma in Sanskrit. Working as a natural skin illuminator by lightening the skin tone and improving skin texture,

- Repairing hyperpigmentation as well as signs of ageing,
- Getting rid of skin discolouration,
- Treating blemishes and scars,
- Revitalises skin's youthful brightness.
- Rejuvenates skin dullness.
- Suitable for all skin types.
- Corrects dark spots.
- Evens skin tone.
- Enhances skin defences against ageing stressors.

Kaishor guggul: Kaishore Guggul blends Commiphora mukul resin with supportive herbs such as Triphala, Trivrit, and purified sulphur (Shuddha Gandhak), creating a synergistic punch. Guggulu (Commiphora mukul resin) – Rich in guggulsterones (E- and Z-guggulsterones) that exhibit anti-inflammatory and lipid-lowering effects.

- Trivrit (Operculina turpethum): Acts as a mild purgative, increasing gut motility and assisting detoxification.
- Triphala: A trio of fruits (Haritaki, Amalaki, Bibhitaki) providing antioxidant tannins and gentle laxative action.
- Trikatu blend (Pippali, Maricha, Shunthi): Stimulates digestion (deepana), enhances metabolic rate, and aids bioavailability of other herbs.

- Shuddha Gandhak (purified sulphur): Traditional antimicrobial and skin-purifier.

Pushpadhanva Pushpadhanva (Pushpadhava) with herbs like Lodhra, Manjistha, Sariva, and Amalaki stabilises capillary permeability and reduces skin congestion, contributing to facial pigmentation. Its cooling, astringent properties calm Pitta-driven heat, suppressing melanocyte overstimulation, while antioxidants limit free-radical melanogenesis, and Rakta-prasadana improves blood quality and skin nourishment. Regular use gradually fades melasma patches, enhances texture and brightness, and maintains even complexion without harsh depigmentation.

Sarivadi vati: Sarivadi Vati primarily purifies vitiated Rakta Dhatu and pacifies aggravated Pitta Dosha, key factors in excessive melanin production causing melasma. Sariva and Manjistha improve microcirculation and regulate melanocyte activity to reduce abnormal pigmentation, while Haridra and Daruharidra offer anti-inflammatory and antioxidant protection against oxidative stress. Triphala and Guduchi enhance detoxification and skin regeneration, and Trikatu corrects digestion to prevent Ama accumulation. Overall, it gradually lightens hyperpigmented patches, evens skin tone, and prevents recurrence by addressing root causes.

Yashtimadhu churna pinda sweda: Yashtimadhu has Madura Rasa, Guru Snigda Guna, Sheeta Veerya, Vata-Pittahara, Vranaropana and Vranasodhana properties. In Charak Samhita, Yashtimadhu is included in Varnayaka mahakashay (group of herbs beneficial for enhancing complexion, improving skin tone, and promoting skin health). Yashtimadhu churna pinda sweda provides Snehana (massage), Swedan (hot fomentation) and Brihana (nourishment) simultaneously. It cleans the microchannels of the body and improves circulation. Improves skin complexion and lustres.⁹

III. CONCLUSION

Vyanga is described in Ayurveda under Kshudra Rogadhikara and is commonly seen in the present day, affecting an individual's quality of life. Ayurveda provides an effective, safe, and holistic approach for

the management of Vyanga (melasma) with minimal chances of recurrence and without adverse effects. Classical Ayurvedic texts mention a rich variety of single and compound formulations that help in breaking the Samprapti of the disease. The present case study concludes that Vyanga can be effectively managed through an Ayurvedic approach by pacifying the vitiated Vata, Pitta, and Rakta Doshas, resulting in significant improvement in facial hyperpigmented patches.

REFERENCES

- [1] Sushruta Samhita. Reprint ed. Ambikadatta Shastri (Ayurved Tatva Sandipika). Varanasi: Chaukhambha Surbharati Prakashan; Sutrasthana 13/45. p. 95.
- [2] Ashtanga Hridaya. Reprint ed. Brahmanand Tripathi (Nirmala Hindi Commentary). Delhi: Chaukhambha Sanskrit Pratishthan; Uttaratanttra 31/29. p. 1124.
- [3] Sushruta Samhita. Reprint ed. Ambikadatta Shastri. Varanasi: Chaukhambha Surbharati Prakashan; Nidanasthana 1/16. p. 234.
- [4] Sushruta Samhita. Reprint ed. Ambikadatta Shastri. Varanasi: Chaukhambha Surbharati Prakashan; Sutrasthana 13/45. p. 95.
- [5] Ashtanga Hridaya. Reprint ed. Brahmanand Tripathi. Delhi: Chaukhambha Sanskrit Pratishthan; Uttaratanttra 31/29. p. 1124.
- [6] Sushruta Samhita. Reprint ed. Ambikadatta Shastri. Varanasi: Chaukhambha Surbharati Prakashan; Sutrasthana 13. p. 96.
- [7] Sushruta Samhita. Reprint ed. Ambikadatta Shastri. Varanasi: Chaukhambha Surbharati Prakashan; Chikitsasthana 20. p. 485.
- [8] Charaka Samhita. Varanasi: Chaukhambha; Nidanasthana 1/7-8 p. 190.
- [9] Charaka Samhita, Ayurveda Dipika Commentary by Chakrapanidatta, edited by Vaidya Jadavji Trikamji Acharya. Reprint edition. Varanasi: Chaukhambha Sanskrit Sansthan; Sutrasthana 4/7-8 p. 29.