Case Study of Role of Gandhakadi Malahara and Nishadi Kashaya in Dadru

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ABSTRACT

Skin is a stable yet flexible outer covering that act as a barrier, protecting your body from harmful things such as moisture, cold, sunrays, as well as germs and toxic substances. Changes in skin colour and texture can be a sign of a medical condition. In AyurvedaTwakSharir holds important place. Ayurvedic literatures have described TwakSharir with various types of Kushtha according to layers of skin. Dadru is a type of Kushtha which mainly affects the 4th layer among the six layers of the skin. In modern science the clinical manifestation of Dadru is closely related to local fungal/tinea infection which is affecting upto 15% of population. Tinea amongst all the skin disorders is the difficult to cureas it always has recurrence and also very obstinate. In regardless of quite excellent treatment options inmodern medicine, it bubbles up again when medication stops. Ayurveda has given health solutions tomankind since the ancient time. Patient of Dadru presented with elevated irregular patches like with severe itching, redness/discoloration andburning sensationat thegroin, over the inner thigh andunder the 3months.she breastfor hasalready takenmodernmedicine but there was recurrence. Patient treated with Gandhakadi Malahara for external application and Nishadi Kashaya to be used as decoction on OPD level and got relief. Noadjacent complaints were observedwith Ayurvedictherapy.

KEYWORD:Dadru, Twaka, Kushtha, tinea, Nishadi Kashaya, Gandhakadi Malahara

I. INTRODUCTION

A healthy skinreflects the health of the individual. Sometimes due to poor hygienic conditions, humid temperature, pollution and poor sanitization, in fections on the skin may occur, it seems to be a concern as it may lead to psychological disturbances like anger, stress,

depression andlack of confidence. And therefore, keeping your skin healthy has become a critical concern.Ayurvedabeing the most ancient life science, advocates a complete promotive, preventive and curative system of medicine. In AyurvedaTwak-Sharira holds important place. Ayurvedic literatures have described TwakSharira with various types of Kushtha according to layers of skin.Kushtha has been taken as the supreme word for all the skin diseases in Ayurveda. It can cover up all dermatological manifestations under 18 sub-types of Kushtha. Dadru is one of the subtypes among the eighteen types KushthaRogadescribed in Ayurveda classics which mainly affects the 4th layer among the 6 layers of skin described by Acharya Charaka. Dadru is Pitta Kapha Pradhan Vyadhi¹, it may be diagnosed with such itching(Kandu),erythema(Raga),exanthema,anddisc oidlesions(Pidika)withelevatedborders(Utsannaman dal)².In conventional dermatology, Dadru Kushtha alluded can he Ringworm/Tinea/Dermatophytosis.

Dermatophytosis infection is very common all over the world, especially in tropical and sub-tropical countries like India where heat and humidity are high. According to WHO, the prevalence rate of superficial mycotic infection worldwide has found to be 20-25%. In India prevalence of superficial fungal infection is 27.6%. Among this 75.6% is caused by Dermatophytosis. In Ayurvedic texts management of DadruincludesShodhana, Shamana BahirparimarjanaChikitsa. Among Shamana measures which includes Kashaya (internal remedies) and Lepa(topical applications) are widely prescribed. Topical applications are more useful in TwakVikara as they directly act on the affected parts or lesions and due to its physiological effect of heat on skin. Internal medicine is also necessary to bring homeostasis in vitiated Dosha and Dushya. In present study GandhakadiMalaharais selected as Topical application and Nishadi Kashayafor internal use as decoction. This Malahara is described as Dadruhar as per Rasatarangini andKashaya is Kapha-Pitta KushthaShamakaaccording to Ashtanga Hridaya.

AIMSAND OBJECTIVES:

Toprovide the safe and effective treatment for patients of Dadru.

II. CASE REPORT

35-year-old female came to Kayachikitsa OPD OPDno:1, Pt. Mukundilal Sharma Ayurvedic college and Hospital, Haridwar with chief complaints ofelevated irregular ring like patches with severe itching, redness/discoloration and burning sensation in groin, inner thighs.Patienthad abovecomplaintsfor3 months.

reddish patches extending from groin to inner thigh with itching for 3 months.

History of Present illness

Patient was well before 3 months, and then she gradually developed athe round and reddish patch in groin region which gradually increases in no. and area and extend over the thigh as a grouped annular lesion with severe itching. For that she had taken Allopathic treatment from local practitioner which got her relief from itching for timebeing but after quitting the medicine the patches reappeared with increased discoloration/redness.So, she came to Rishikul Ayurvedic Hospital, Haridwar for management.

Past History

There was no any past history of Diabetes mellitus, Hypertension, Asthma, & Hypothyroidism.

Family History

Husband had similar complaints.

Table1:Personalhistory:

S.no:	Feature			
1.	Name	Abc		
2.	Age	35		
3.	Sex	f		
4.	Maritalstatus	Married		
5.	Occupation	Private teacher		
6.	Appetite	Avg		
9.	Sleep	Disturbedduetoitching		
10.	B.P	110/80 mm of hg		
11.	Weight	70kg		
12.	Height	5'4"		
13.	Tongue	Coated		

Table2:Asthavidhapariksha³

s.no	Feature		
1.	Nadi	Kapha-paitik	
2.	Mala	Sama Mala	
3.	Mutra	SamanyaMatra,gandha,varanandprakriti	
4.	Jihva	Sama	
5.	Shabda	Spashta	
6.	Sparsha	Snigdha	
7.	Drika	Samanya	
8.	Akriti	Madhyama	

Table3:Localexamination:

s.no:	Feature			
1.	LesionSite	Groin region, Both the inner thighextending towards		
		theanterior thighs.		
2.	Distribution	Asymmetrical		
3.	Number	8-9		
4.	Colour	Atasipushpavarna(reddishbrown)		
5.	Bordersandshape	Well demarcatedbordersandIrregularshapes		
6.	Surfacefeatures	Scaly, crusts,dull,elevated		
7.	Typeoflesion	Grouped Patchy lesion over the thigh and annular lesion		
		under the breast		
8.	Flatvsraised	Vesicular Raised margins over the thigh		

DIAGNOSIS

From clinical features it was diagnosed as Dadru.

TREATMENT SUGGESTED

- Gandhakadi Malahara: -Shu.Gandhaka, Sphatika, Tankan, Saal Ki Raal, Nimbu Rasa
- Nishadi Kashaya: Haridra, Triphala, Vacha, Agaru, Katuki Patola, Yashtimadhu

DOSE OF MEDICINE-

- Malahara- Quantity sufficient for local application twice a day, advised tobeapplied locallyafter cleaning anddrying the affected part.
- Kahaya-40 ml. as decoction twice a day empty stomach.
- **DURATION OF TREATMENT:** 30 days then follow up on the 10th day after the completion of treatment

PATHYAAPATHYA:

1. Patient was advised to avoid Amla Rasa (curd pickles etc,)and Madhura Rasa Dravyas(tea/coffee)

- **2.** Patient was advised to avoid oily, fried, spicy, junk, heavy food including curd, milk, and non-vegetariandiet.
- **3.** Maintenance of local hygiene by washing the parts twice a day, keeping it dry and wearing cottonand loose-fitting clothes. Patient was also advised to sleep without undergarments to avoid rubbing of the surfaceing roin.
- **4.** Daytime sleepwasadvised tobeavoided.

INVESTIGATIONS: CBC and RBS were in normal limits.

ASSESSMENT CRITERIAIt was done at an interval of 10 days for three times. The Assessmentwas done on the basis of the Gradation of Subjective& Objective parameters. Subjective criteriawereKandu(itching), Raga (Redness), Daha (Burning sensation), Pidika (Pappulo-vesicle). Objective criteriawere Mandala (circular lesions), Area occupied by lesion.

Table:4: Criteria for gradation table:

s.no:	Feature	0	1	2		3	
1.	Kandu	Noitching	Mild/ infrequent	Moderate/	frequent	Severe	
			itching	itching,	compulsive	Itching/	Very
				scratching, do	not disturb	severe	itching
				sleep		disturbing	sleepand
						other activ	ities
2.	Raga	Normalskin Colour	Faintred colour	Red colour		Brownish	red color
3.	Mandal	Nomandal	1 to 3 mandal	4 to 6 mandal		Morethan mandal	6
4.	Sizeof mandal	-	Lessthan 5 cm	5 to 10 cm		Morethan 10cm	



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5.	No:of	NoPidika	1 to 3	4 to 6	Mo	orethan 6
	Pidika					
6.	Daha	Absent	Mild bu	ırningModerate	burningSe	vere burning
			sensation	aftersensation (No	disturbance Di	srupts
			itching	in sleep)	sle	eep

ASSESSMENT CRITERIA

Subjective criteria

Symptoms	Before Treatment	After 10 days	After 20 days	After 30 days
1.Kandu	3	2	1	0
2.Raga	3	2	1	1
3.Daha	2	2	1	0
4.Pidika	3	2	1	0

Objective criteria

Symptoms	Before Treatment	After 10 days	After 20 days	After 30 days
1.No. of Mandala	3	3	2	1
2.Area occupied by Mandala	3	3	2	2

Thus, marked improvement was observed in all the subjective parameters after the completion of treatment. Same can be seen in following picture taken before and after the treatment.



Before Treatment After 20 days



III. DISCUSSION

According to Acharya Charakand Vagbhata, Dadru is Pitta-Kapha pradhan skin disease, while according to Acharva Sushruta it is Kaphapradhan. Like Ekadash Kushtha patients ofDadru also have vitiations of Saptadhatu, and vitiation of RaktvahaSrotas .In Avurveda Shodhanaand Management includes Shodhana, Shaman and BahirparimarjanaChikitsa(Lepa/ Malahara)along with drugs having Kushtaghna, KrumighnaandKandughna properties.

PROBABLE MODE OF ACTION OF Malahara:-GandhakadiMalahara pacifies the Doshas and leads to the breaking of Samprapti, which helps in reducing the symptoms like Kandu, Pidika. Rasa and Raktashodhak, Varnya, Lekhan, Shothahara properties of Malahara pacifies Dushyas and which help in reducing the symptoms like Raga and Mandala.

The content of **Malahara** possesss Snigdha, Tikshna, Ruksha, Sara, Ushna, Tridoshahar properties. All the ingredients of Malahara have pharmacologically an antifungal, antimicrobial, antimicrobial, antioxidant action hence can effectively reduce the infection and prevent its recurrence by improving the immunity of skin by its antioxidant property.

Shudha Gandhakis Antifungal, Antimicrobial. Vital role in immune system, helps in detoxification. It helps in tissue repair and referred 'Nature's beauty as mineral'. SphatikaBhasmaisAntiseptic, Antipruritic, Antiinflammatory, regulates excessive sweating, Antimicrobial Shudha Tankanais Antifungal, antibacterial. Saal NiryasaUsed inAtisweda.The bark extract of Shorea robusta is widely used in preparation of antifungal drug. Nimbu Swarasa, is It has an antiseptic, antioxidant and antifungal abilities.

PROBABLE MODE OF ACTION OF NISHADI KASHAYAS:

Nishadi Kashayas containVibhitaki, Haritaki, Aamalki, Haridra, Patola, Manjistha, Kutaki, Vacha and Neem. Almost all the drugs are having Kushthaghna, Kandughna, Raktashodhak, Twagdoshahara, Krimighna,Vishaghnaproperties which clearly explain its mode of action in Dadru. These all drugs are having mostly Katu, Tikta, Kashaya, Madhur Rasa as well as Laghu, Ruksha Guna which act on vitiated Kapha Dosha. Dadru is Kapha-Pitta predominant disease so drugNishadi Kashayasworks as Doshapratyanika Chikitsa.

Effect on Dosha:

InNishadi Kashayas,Most of drugs have Katu and Tikta Rasa which are Kapha Shamaka. TiktaRasa also has the property of Rakta prasadana, Vishaghna, Kushthaghna,Kandughna and dahaprashamana. It also has Kaphaghna property. Thus, through these properties acts on Dadru. AlsoKatu Rasa possesses Deepana and Pachana properties through which it acts at level of Agni and stops Ama formation. One property of Katu Rasa described by Acharya Charak in Sutrasthana 26 is "Marganvivrunoti" which means it clears the Srotasa and stop pathogenesis by prevent DoshdushyaSamurchana.Most of drugs have Katu Vipaka, which are Kapha Shamaka

Effect on Dushya:

Twak, Rakta, Mamsa and Lasika are Dushya of Dadru (Kushtha). InNishadi Kashayas, most of drugs are Deepanaand Pachana.So, this Aushadha causes Rasa Shuddhi.

Most of drugs Raktashodhaka. Deepana and Pachana drugs of Nishadi Kashayas Pittarechaka. areYakrutauttejaka hence itcorrects vitiated Pachaka Pitta and helps in purifying Raktadhatu and thereby combating Rakta dushti. Pachaka Pitta controls the other Pitta in the body including Bhrajaka Pitta which is also vitiated in Dadru. In Nishadi Kashayas, drugs have Katu Rasa followed by Tikta Rasa which do Lekhana of Pravruddha Mamsa Dhatu.

Effect on Srotasa:

Most of drugs are Deepana, Pachana, Laghu, Ruksha, Ushna and Tikshna. So, they do Aampachan. So, the Srotorodha is removed and SrotoVishodhana is done.

Effect on Aam:

Most of drugs are Deepana, Pachana, Laghu, Ruksha, Ushna and Tikshna. So, they do aampachan.

IV. CONCLUSION

Dadru in its acute as well as chronic state istroublesome tothe human beingsphysically aswell asmentally. It is a contagious disease with Pitta-Kaphadominance. From this case study it can be concluded that the Samshaman Yogas like Malahara & Kashayas given in Ayurvedic text are really effective in management of Dadru. Moreover even after the discontinuation of treatment Patient had no complain for recurrence of symptoms, It clearly suggest that Ayurvedic management works

on the root cause, by focusing onSamprapti Vighatan of disease.

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