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Case Study

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A CASE STUDY: EVALUATION OF THE EFFICACY OF VIRECHANA KARMA & SHAMANA YOGA IN THE MANAGEMENT OF DADRU (T. CRURIS & T. CORPORIS)

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ABSTRACT

Skin health is important not only for one's appearance, but more importantly because skin performs many essential tasks for our body & is one of the most powerful indicators of health. Tinea cruris & corporis are the most common dermatophytes infection worldwide. 5 out of 1000 people are suffering from Tinea infection. In *Ayurveda*, *Kushtha* is the broad spectrum word used to describe all the skin diseases under one heading and classified into *mahakhustha* & *kshudrakushtha*. *Dadru* (tinea) is one among the *Kushtha Roga* & is *kapha-pitta pradhana vyadhi*, affecting both sex & all the age groups. Ringworm (Tinea cruris & corporis) is compared with *Dadru* due to its maximum resemblance. According to ayurvedic principles, *Shodhana purvak shamana chikitsa* is generally considered as the best line of treatment for the management of many chronic diseases. For the

present study, a known case of *Dadru* - Ringworm (T.cruris & T.corporis) was undertaken to evaluate the efficacy of *Shodhana purvaka shaman chikitsa*. Patient found remarkable improvement in all signs & symptoms during and after course of the treatment.

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KEYWORDS: Dadru, Tinea cruris & corporis, Virechana Karma, Trivrit Avaleha, Shodhana, Shamana yoga.

INTRODUCTION

Dadru is one of the Kushtha Roga (chronic skin disorder) and is included under rakta pradoshaja vikara. Being a type of kushtha, recurrences and chronic course is common for this disease. It is kapha-pittaja vyadhi coming under the Kshudra-kushtha according to Acharya Charaka & Vagbhata; and it is kaphaja-vyadhi coming under the Maha-kushtha which occurs in tamra (4th layer) & vedini (5th layer) of the skin, according to Acharva Sushruta. Signs and symptoms being *kandu* (itching), *pidaka* (redness with papules), *mandala* (circular patches with elevated edges).^[1] Its itching sensation is attributed to kapha dosha, papules & erythema is attributed to pitta dosha. Varna (color) are described as red, dark brown & wide spread according to Acharya Charaka, Sushruta & Vagbhata respectively. Acharya Sushruta describes the color of the lesions in dadru more specifically like that of copper or the flower of Atasi and mentions that its pidaka are in the form of parimandala having spreading nature (visarpanshila) but slow in progress or chronic in nature (chirrottham) with kandu. [2] Due to indulgence of incompatible diets and regimens, the dosha (kapha-pitta) gets aggravated causing vitiation of dhatu like tvak, rasa, rakta & mamsa thereby causing rasavaha & raktavaha strotodushti resulting in the clinical manifestations of Dadru. While selecting regimen for its total eradication, in addition to its own treatment, it is necessary to take care of its recurrences also. In Ayurveda, as all the skin diseases are considered under the Kushtha, the treatment depends upon the symptom and condition of the dosha which is more predominant and the anubandhita dosha is treated consequently. Dadru is kapha dominant vyadhi. It mainly involves Rasavaha and Raktavaha Srotas. Measures includes pacifying both pitta-kapha doshas first. The treatment should be on the principles of Raktavaha srota-dushti. Acharya Charaka mentioned that the treatment of Raktavahasrotas (Ca.Su.24/18) should be Virechana (purgation), Langhana (fasting) & Raktamokshana (bloodletting), Raktapittavat chikitsa. Among shodhana chikitsa, virechana karma is generally employed for the management of skin diseases.

On the basis of clinical presentation of *Dadru*, it can be compared with ringworm (tinea infections) in modern concept. Tinea infections are fungal infections of the skin manifested by appearance of discoid lesions within tractable itching, caused by dermatophytes & is mostly occurs in those people who don't follow the hygienic norms or those who are having

weakened immune system. Superficial fungal infections of the skin are caused by three dermatophytes; Trichophyton, Epidermophyton and Microsporum which use the keratin layer of the epidermis as their source of nutrition. It is estimated that 10% to 20% of the world population is affected by fungal skin infections. Sites of infection vary according to geographical location, the organism involved, and environmental and cultural differences. [3] Types includes tinea cruris (jock itch), tinea corporis, tinea capitis & tinea pedis (athlete's foot). Tinea cruris is extremely common worldwide & is usually caused by Trichophyton rubrum. Itchy erythematous plaques develop in the groins & extend on to the thighs, with a raised active edge. Tinea corporis lesions are erythematous, annular, scaly, asymmetrical & may be single or multiple with well-defined edge and central clearing. There may also be pustules at the active edge. [4] The pathogenesis of dermatophytes infection involves complex interaction between the host, agent and the environment. Several new techniques such as polymerase chain reaction (PCR) and mass spectroscopy can help to diagnose the different dermatophytes strains. The diagnosis can be made on clinical appearance and can be confirmed by microscopy or culture. A wide range of topical antifungal drugs are used to treat these superficial dermatomycoses, but it is unclear which are the most effective. [5] These are tolnaftate (Aftate or Tinactin), clotrimazole, miconazole nitrate (Micatin products), econazole, ketoconazole, ciclopirox, naftifine, itraconazole, terbinafine, fluconazole, or Whitfield's tincture made of salicylic acid and benzoic acid. Oral antifungal drug such as ketoconazole or griseofulvin. Certain infections may require surgery. These treatments usually responds within several weeks. Infections may spread, and secondary bacterial infections may develop. Medications are often strong, and their use may cause such undesirable side effects as headache, dizziness, nausea, vomiting, or abdominal pain. [6] These modern treatment modalities are not devoid from grave complications mainly in long term use and chances of recurrence are more. Owing to these reasons, there is a need for treatment having good efficacy and no toxicity profile. So this case study was conducted considering Ringworm (Tinea cruris & corporis) as Dadru and Ayurvedic management was planned accordingly. Positive results were witnessed by Shodhana purvaka (Virechana Karma by *Trivrita Avaleha*) *Shamana chikitsa* (internal herbal medications).

CASE PRESENTATION

A 25 years old female, having a diagnosed case of Ringworm (Tinea cruris & corporis) with symptoms of *kandu* (extreme itching), *pidaka* (red colour rashes), *raga* (color changes), *daha* (burning sensation over body), *vibandha* (constipation) & *anidra* (disturbed sleep) since last

812

7 months reported the Kayachikitsa OPD of Patanjali Ayurvedic Hospital, Haridwar on dated 18th April, 2017. According to patient, she was asymptomatic 7 months back & started these symptoms gradually which went on increasing day by day and was also having family history. She took allopathic treatment for the above mentioned complaints for 7 months but didn't get any significant relief and long term intake of steroids by her resulted in her weight gain and further worsening of her skin condition. With these complaints she was admitted to our hospital for better management.

Treatment Plan

Dadru is kapha-pittaja vyadhi involving Rasavaha and Raktavaha Srotas and thus treatment relies on the principles of Rasa & Raktavaha srota-dushti i.e., Raktapittavat chikitsa, Kriminashak chikitsa, Virechana (purgation), Langhana (fasting) & Raktamokshana (bloodletting). Thereby, considering the Ringworm (Tinea cruris & corporis) as Dadru; ayurvedic management was planned accordingly, whose stepwise plan is as follows-

	1.	Dipana-Pachana	3 days	Trikatu Churna (3-5gm twice daily with lukewarm water)	
Purva Karma	2.	Snehapana	7 days	Panchatikta Ghrita (30ml to 220ml in increasing order)	
	3.	Sarvanga Abhyanga + Swedana	3 days	Kayakalpa Taila (Abhyanga) & Kayakalpa Kwatha (Swedana)	
Pradhana Karma	4.	Virecana Karma	On 13 th day	Trivrit Avaleha (2tsf) & Eranda Taila (10ml	
Paschat Karma	5.	Samsarjana Krama (Ca.Si1/11, A.H.Su18/29)	7 days	with Triphala Kwath (100ml)	

On discharge patient was given following treatment plan for 2 months duration-

- ➤ Kaishor Guggulu + Aarogyavardhani Vati + Neem Ghan Vati + Kayakalpa Vati [2tab. twice daily with water after meal.]
- ➤ Kasisa bhasma(10g) + Pravala pishti(20g) + Moti pishti(8g) + Rasamanikya(4g) + Godanti bhasma (20g) + Giloy sat (40g) + Trikatu churna (200g) [120 doses; 1 dose twice daily with honey before meal]
- ➤ Mahamanjistharishta + Khadirarishtha (450ml) [4tsp. twice daily with equal amount of water after meal.]
- ➤ Kayakalpa Taila [for local application.]
- Avipattikara churna(200g) + Shankha bhasma(20g) [1/2 tsf.twice daily before meal]
- ➤ Aloevera + Giloy Juice [25ml twice daily empty stomach]

OBSERVATION AND RESULTS

Vaigiki Lakshana	28 vega (Pravara Shuddhi)		
Laingiki Lakshana	Samyak virechana lakshana (srotavishuddhi, indriyasamprasad,		
	laghutvam, urjaskara, anamayatvam)		
Aantiki Lakshana	Kaphanta		

Rogi parikshana, vega nirikshana, samyak virechana lakshanas & other vital parameters of the patient like B.P., pulse, temp., were assessed before, during & after the course of the treatment accordingly and were found to be stable. The following lakshana were observed after the course of Virechana karma-

After *Virechana Karma* and 2 months of *shamana chikitsa*, the patient was reviewed. She got marked improvement in itching, size of the patches of lesions, and on other associated complaints. She was advised to continue the *shamana chikitsa* for next two more months. She got 100% recovery after 4 months of treatment.

Symptoms	Before treatment	During course of snehpana	After course of virechana karma	After 2 months of shamana chikitsa	After 4 months of shamana chikitsa
Kandu	4+	3+	2+	1+	-
Pidaka	4+	3+	2+	1+	-
Daha	4+	4+	2+	-	-
Vibandha	3+	2+	-	-	-
Anidra	3+	3+	2+	-	-
Raaga	Red color	Pale-red color	Pinkish-red color	Pink color	-
Nature of lesions	Prominently visible	Moderate visible	Moderate visible	Minimally visible	Not visible

DISCUSSION

The present study was aimed at finding a safe and effective method for managing *Dadru*. It is manifested by appearance of discoid lesions within tractable itching & mostly occurs in those people who don't follow the hygienic norms or those who are immune-compromised. *Dadru* is *kapha* dominant disease which involves *rasavaha* & *raktavaha srotas*. Above mentioned *shodhana purvaka shamana chikitsa* helped patient symptomatically. Probable mode of action of indicated drugs are described below.

Probable Mode of Action of the Treatment Given

(Purva Karma)

Dipana-Pachana

Deepana and pachana are the langhana chikitsa which are mainly indicated in the diseases which are caused due to the vitiation of kapha and pitta. Deepana and pachana are aimed in correcting the agni & are the treatment modalities which are used either as the Purvakarma - before any shodhana chikitsa or adopted as the main treatment modality in many of the diseases. In either of the situations, it is the agni and ama being corrected. The most probable cause for the manifestation of disease is mandagni, which leads to improper digestion thereby leading to the formation of ama. In Dadru, due to the improper dietary intake, kaphapitta dosha gets aggravated leading to mandagni & thereby formation of ama. Thus the treatment was mainly targeted towards the agni thereby correcting the ama for which Trikatu Churna was given as it is amapachaka & its intake results in production of heat in the body and increase digestive juices and bile salt secretion.

Snehapana

The importance of *Snehanapana* as *Purva Karma* for *Shodhana* is well known. *Snehapana* is the basis to make a smooth platform for *Shodhana*, i.e. to attain the *Utkleshavastha* of *Dosha*. After exploring the *dashavidha parikshya bhavas* of the patient *Panchatikta ghrita* was choosen for the purpose of *Snehapana* in *hrisiyasi matra* as it is *tridosha-shamaka*, possess more *tikta*, *kasaya* which may attribute to its *kusthaghana* and *krimighna* properties; and then its dose increased accordingly till the *samyak lakshanas* of *snehapana* were found. The symptoms of *rasa-vridhi* like *hrillasa*, *praseka* signifies the increase of *apyamsha* in the body which is the action of *snehana* i.e., *vriddhi* for bringing the doshas from *shakha* into the *koshtha* from where they can be easily expelled out. '*Adhastat Sneha Darshanam*' suggests that there is no need for further *snehapana*. The features produced after *Snehana* suggest that there is loosening of morbid doshas which were adherent to the walls of transforming channels and which in turn will help in the *Shodhana Karma*, performed afterwards. *Snehodvega* suggests the *Sanchayavastha* by "*Chayakarane Vidvesha*" as per *Sushruta*.

Abhyanga-Swedana

Innumerable dhamani covers the body & their openings are attached to romakupa. Through these, Abhyanga enter into the body after undergoing paka of bhrajaka pitta in skin & produces desired therapeutic action. *Kayakalpa Taila & Kwath* has *amla*, *haridra*, *nimbatvak*,

chandan, etc. as its ingredients, which have actions like kushthaghna, dadrunashaka, kandughna, etc. Abhyanga (by Kayakalpa Taila) does utkleshana (excitation) of dosha and Swedana (by Kayakalpa Kwatha) brings the dosha from shakha to koshtha. Swedana dravya possess ushna & tikshna guna, thus capable of penetrating into minute channels (srotas) where they activates sweat gland causing vasodilatation. Its laghu & sara guna acts on dosha, making the sticky contents mobile directing them to excrete through sweating or dosha brought into koshtha- expelled out through virechana.

(Pradhana Karma): Virechana Karma

Virechana is indicated in paittika-vyadhi & kushtha-roga in brihatrayi. Effect of Virechana Karma depends upon Snehana process. After that, Aushadha (Trivrit Avaleha- Shrestha Virechana dravya) was given in jirnanna & after kaphakala in empty stomach. According to Vagbhata, as dadru is pitta-kaphaja vikara; Trivrit Avaleha purges pitta and kapha & its lehya formula is given in Ashtanga Hridayam (Kalpasthana 2/9). Trivrit-mula is considered best among Virechana dravya. It is kapha-pittaghna. Shyama trivrit useful in krura-koshtha & Aruna tivrit useful in mridu-koshtha. Virechana karma is highly beneficial for the elimination of excessive pitta dosha from the body & cleanses body toxins. As aquatic mobile & unmobile entities get destroyed when water is removed, the complications of paittika origin are alleviated on elimination of pitta. As per the modern concept, laxatives induce limited low-grade inflammation in the small & large bowel facilitating quick absorption of the given drugs & stimulate intestinal motility. Basically, water content of faecal matter gets increased. Due to this changes in membrane permeability of capillaries, absorption as well as excretion of substances occurs.

Before Treatment









After Treatment









817

(Paschat Karma): Samsarjana Krama

After the completion of *Shodhana karma*, normal diet is not given immediately as the *Agni* is hampered & sudden increase in diet will damage the mucosa and digest the organ muscles leading to gastritis and ulcers. Its benefits, [12,13] are to bring renaissance to impaired *kosthagni* by giving time to the stomach/ intestine to replenish the mucosa, which is lost during the *shodhana* procedures & by arranging such plan *tridosha* becomes normal. So, by keeping in mind the status of *agni* in *samyak-virikta* patient, the sequence, [14,15] allowed for the patient was for consecutive 7 days. After the *Samsarjana krama*, internal medications were given from Divya Pharmacy Haridwar whose indications are described below.

Internal Medication

Medicines	Indication ^[16,17]			
Kaishor Guggulu	Kushtha, Rasayana, Raktagata action, Tvachavikara.			
2. Kayakalpa Vati	Tvak vikara, antiseptic properties, cures skin ailments, kushthaghna.			
3. Neem Ghan Vati	Raktaprasadanam, Tvak vikara.			
4. Aarogyavardhani Vati	Kushtha, Pachani-dipani, Pathya.			
5. Khadirarishtha, Mahamanjistharistha	Kushtha, Mahakushtha, Raktaprasadanam.			
6. Kasisa Bhasma	Vata-kaphahar, raktavardhaka, kanduhara			
7. Pravala Pishti	Pittahara, kantikara, deepana-pachana.			
8. Moti Pishti	Balances rakta & pitta.			
9. Rasamanikya	Balances vata & kapha, kushthaghna			
10. Godanti Bhasma	Anti-inflammatory			
11. Giloy Sat	Pittashamaka, anti-inflammatory, haematogenic			
12. Shankha Bhasma	Balances vata & kapha.			
13. Trikatu Churna	Amapachaka, anti-allergic			
14. Avipattikara Churna	Pittashamaka.			
15. Aloevera Juice	Anti-inflammatory, kanduhara, Tridosha-shamaka			
16. Giloy Juice	Tridosha-shamaka, daha-prashamana.			

CONCLUSION

Ayurvedic medicines have great potential in management of skin disease manifestations like Tinea cruris & corporis. In this study, patient completed the full course of treatment without any adverse effects. After treatment, *kandu* was reduced remarkably & changes persisted even after follow up study. The colour, size, number of patches were also reduced remarkably which was statistically significant. Hence, it can be suggested that *shodhana purvaka shaman chikitsa* proved to be a successful remedy for the treatment of skin disease like *Dadru*. And thus helps patients to improve their quality of life.

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