Clinical Evaluation of Shamana Chikitsa in the Management of Tinea Corporis: An Ayurvedic Case Study

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ABSTRACT

In recent years there is a notable rise in skin disorders which are attributed to various factors including poverty, inadequate sanitation, illiteracy, malnutrition and improper skin care practices. All the skin diseases in Ayurveda are considered under the broad heading of Kushta and they are of 2 types, Namely Maha Kushta and Kshudra Kushta. Dadru Kushta is one among the Kshudra Kushta and it is mainly of Kapha Pitta Pradhana Twak Vikara. It is characterised by Kandu, Raga, Daha, Pidaka, Utsanna Mandala. Based on the similar clinical features Dadru Kushta can be closely compared with Tinea Corporis which considered under the superficial fungal infection of the skin. Case: The present study was conducted on a 43-year-old male patient came with complaints of elevated circular lesions just below the umbilicus and lateral side of right thigh region with severe itching, burning sensation and reddish discoloration since 1 ½ year. **Materials and methods:** He was treated with *Navakashaya Ghana* Vati internally and Prapunnatadi Lepa externally for 30 days. After completion of treatment, significant improvement was observed in parameters like Kandu, Raga, Daha, Pidaka, Utsanna Mandala during the followup period of 40 days. The drug effect suggested a sustained impact on the Dadru Kushta. Results: Both Navakashaya Ghana Vati and Prapunnatadi Lepa having Kushtaghna, Kandughna, Krimighna properties helps in the elimination of aggravated Doshas. Thus breaks the Samprapti of Vyadhi. Conclusion: The patient in this case study experienced relief in the symptoms and obtained better results. So, in this article we are going to discuss a case study of Dadru Kushta successfully treated with Shamana line of treatment.

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KEYWORDS: Dadru Kushta, Tinea corporis, Shamana Chikitsa, Navakashaya Ghana Vati, Prapunnatadi Lepa.

INTRODUCTION

Dadru Kushta is one among the Kshudra Kushta¹ and it is mainly of Kapha Pitta Pradhana Twak Vikara². Due to Nidana Sevana there is a simultaneous vitiation of Tridoshas and Shaithilyata in Dhatus such as Twak, Asrik, Mamsa and Lasika which leads to manifestation of Dadru Kushta³. It is characterised by Kandu (Itching), Raga (Erythema), Daha (Burning sensation), Utsanna Mandala (Elevated circular lesions), and Pidakas (Papules)⁴. Based on the similar clinical features Dadru Kushta may be closely compared with Tinea Corporis. Tinea corporis is the ringworm infection of the glabrous skin (hairless skin of the body)⁵ and it includes lesions in the trunk and limbs excluding specialized sites such as scalp, feet

and groins⁶. The prevalence of tinea infection is ~2% among young adults and upto 20% among individuals 40-60 years of age. 30% worldwide population is suffering from Tinea. In india also 5 out of 1000 people are suffering from Tinea infection⁷. Acharya Charaka has mentioned, *Dadru Kushta* in *chikitsa Adhyaya* is one among *Kshudra Kushta* and occurs due to *Pitta Kapha Dosha*⁸. Acharya Vagbhata has mentioned that *Dadru Kushta* occurs due to *Kapha Pitta Dosha*⁹ and further *explains* about the *Lakshanas* of *Dadru Kushta like Atasi Pushpa Varna*¹⁰. Acharya Sushruta has mentioned, *Dadru Kushta* is *Kapha* type of *Kushta* and explained about *Lakshanas* of *Dadru Kushta* like *Tamra Varna* and

Atasi Pushpa Varna¹¹. Bhela Samhita has mentioned Dadru Kushta in Nidana Sthana and Chikista Sthana¹².In modern medicine Dadru Kushta (Tinea Corporis) can be managed with topical and systemic antifungal medications and use of corticosteroids¹³. In Ayurveda Shodhana, Shamana, Bahirparimarjana advised¹⁴.

CASE REPORT

A 43-year-old male patient working as a businessman with middle socioeconomic status came with c/o elevated circular lesions just below the umbilicus and lateral side of right thigh region with severe itching, burning sensation and reddish discoloration since 1 ½ year. The Patient also complaints of disturbed sleep due to severe itching especially in the night. He had received allopathic treatment from a local hospital for this (Tab. Atarax, Tab. Cetirizine, and Luliconazole ointment for local application). But had not received satisfying results, and there was a flaring of symptoms after discontinuation of treatment. So, with these same complaints patient approached to our OPD of *Kayachikitsa* department BVVS AMCH Bagalkot.

GENERAL EXAMINATION

Patient not having any major medical and surgical illness. There was also no related family history found. He used to consume mixed diet. He had a *Mala Baddhata* and intermittent sleep disturbance because of severe itching especially in the nighttime. Patient was a moderate built with BMI 22.8kg/m². Astavidha and Dashavidha Pareeksha were within normal limits except patient had *Mala Baddhata*. Vital parameters also within normal limits.

LOCAL EXAMINATION

- 1. Site: Below the umbilicus, Lateral side of right thigh region
- 2. Type of the lesion: Circular/Annular

3. Size of the lesion: Below the umbilicus- Grade 5 (More than 5cm), Lateral side of right thigh region-Grade 4 (4-5cm)

- 4. Shape of the lesion: Circular
- 5. Colour of the lesion: Erythematous
- 6. Border of lesions: Raised, Erythematous

NIDANA PANCHAKAS IN THIS PATIENT

- 1. *NIDANA*: If we consider *Nidana* in this patient, he is a businessman running his own wine shop. He used to wake up early in the morning to take bath and use to wear tight wet clothes frequently. He adopted for excess of tea intake and use to suppress nature calls during his busy schedule in the shop. If we consider *Manovaha Sroto Pareeksha* we found that he is having excess of *Chinta* and *Krodha*.
- **2.** *POORVAROOPA:* Ati Sweda and Twak Vaivarnyata seen in the mentioned areas.
- 3. ROOPA: Kandu, Raga, Daha, Utsanna Mandalayukta Pidakas.
- 4. SAMPRAPTI: Nidana Sevana → Kaphapitta
 Pradhana Tridosha Prakopa →
 Bhrajakagnimandhya → Amavisha Utpatti →
 Sthana Samshraya in Rasavaha, Raktavaha and
 Swedaovaha Srotas → Twak and Rakta Dushti
 → Dadru Kushta
- 5. UPASHAYA: Shamana Chikitsa and Bahirparimarjana Chikitsa advised in this patient like Navakashaya Ghana Vati and Prapunnatadi Lepa accordingly. Tikta Rasa Pradhana Ahara Sevana.
- **6.** *ANUPASHAYA:* Whatever the *Nidana* mentioned in this patient should be avoided. *Samanya Kushtakara Ahara Vihara* avoided.

TREATMENT PLAN

Aushadhi	Matra	Route of administration	Kala	Anupana	Duration
Nava Kashaya Ghana Vati	500mg BD	Oral route	Bhuktanta (After food)	Sukhoshna Jala	30 days
Prapunnatadi Lepa	1/4 th Angula	External application	Morning time once		30 days

ASSESSMENT

SUBJECTIVE PARAMETERS¹⁵

Complaints	Before treatment 1st day	During treatment 10 th day	During treatment 20 th day	After treatment 31st day	On follow up 40 th day
Kandu	Grade 3	Grade 3	Grade 2	Grade 1	Grade 1
Raga	Grade 3	Grade 3	Grade 2	Grade 1	Grade 1
Pidaka	Grade 2	Grade 2	Grade 2	Grade 0	Grade 0
Daha	Grade 2	Grade 2	Grade 1	Grade 1	Grade 0
Utsanna mandala	Grade 2	Grade 2	Grade 2	Grade 1	Grade 1

OBJECTIVE PARAMETERS¹⁵

	Before treatment 1st day	During treatment 10 th day	During treatment 20 th day	After treatment 31st day	On follow up 40 th day
Size of lesion	Grade 5	Grade 5	Grade 5	Grade 3	Grade 3
Number of lesions	02	02	02	02	02

PRECAUTIONS TO BE TAKEN

1. Patient advised to avoid usage of wet and tight clothes and wash clothes in hot water regularly. Advise not to drink tea in excess. Pertaining to *Manovikriti* patient advised to spend time in performing *Yoga*, *Dhyana*, *Pranamaya* to keep peace of mind.

BEFORE TREATMENT AFTER TREATMENT



Parameters	Before treatment	After treatment
Kandu	Severe (Disturbs the sleep)	Mild Kandu
Raga	Deep brown	Mild redness (Pinkish)
Pidaka	Eruptions in 25-50% of affected area	No eruptions
Daha	Moderate burning sensation	No burning sensation
Utsanna Mandala	Moderate elevation of the skin	No elevation of the skin
Size and number of lesions	Size > 5cm, lesions 2	Size 3-4cm, lesions 2

DISCUSSION ON DRUGS 1. NAVAKASHAYA GHANA VATI¹⁶:

As name itself says Navakashaya it is having 9 ingredients. Navakashaya mentioned in Vangasena Samhita Kushta Rogadhikara which is prepared in the form of Ghana Vati having ingredients like Triphala (Amalaki, Haritaki, Vibhitaki) does Agni Deepana and Tridoshahara Karma. Nimba, Patola dominantly possesses Tikta Rasa, Laghu, Ruksha Guna, and Katu Vipaka helps in pacifying Kapha Pitta Doshas and acts as Krimihara. Rohini, Vacha, Rajani all 3 collectively possesses Tikta Rasa, Ushna Virya, Katu Vipaka does Lekhana Karma. There by reducing Kapha Pitta Dosha and acts as a Kushtaghna, Kandughna, Krimighna. Manjishta acts Raktashodhaka and Varnya.

2. PRAPUNNATADI LEPA¹⁷:

Prapunnatadi Lepa mentioned in Basavarajeeyam Kushta Rogadhikara having ingredients Prapunnata (Chakramarda), Nisha, Nimba Patra, Abhaya Snuhi Patra. Here Prapunnata/chakramarda itself called as Dadrughna. It does Kapha Shamana by its Ushna Veerya. Remaining drugs like Nisha, Nimba Patra, Abhaya and Snuhi Patra are collectively having Katu, Tikta Rasa, Ushna Veerya and Katu Vipaka does Kapha Pitta Shamana and does Rechana, Anulomana,

DISCUSSION ON RESULTS

Dadru Kushta is considered under Kshudra Kushta. 100 [7] Recurrence chances will be there if *Chikitsa* stopped too soon without eradicating the fungus completely. So, re infection may occur if residual fungus found in the body. In this study patient was treated with oral medication and local application. Patient advised with specific Pathya and Apathya. So, the patient was treated successfully with period of 30 days. On 40th day of follow-up patient is completely free from the disease.

CONCLUSION:

In this case study marked improvement was seen. Drugs of Navakashaya Ghana Vati and Prapunnatadi Lepa together worked significantly by their Agnideepana, Anulomana, Kledahara, Kushtaghna, Kushtaghna, Kandughna and Krimighna properties followed by Raktashodhana and Raktaprasadana. Hence the treatment was found to be effective to relieve the Lakshanas of Dadru Kushta.

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