

MEDICAL MANAGEMENT OF TINEA INFECTION THROUGH SHODHANA AND SHAMANA – A CASE SERIES**[Asha A Bhat](#)¹, Prashanth A S²**¹Final Year PG Scholar, Department of Kayachikitsa²MD, PhD, Professor and HOD Department of Kayachikitsa
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**ABSTRACT**

Skin is one of the most beautiful organs God has ever blessed to anyone. Everyone craves for beautiful skin and makes all possible efforts to make it glow. To achieve this, they are engaged in continuous use of creams, moisturizers and other cosmetic articles which lead to immediate or long-term skin issues. Itching being the predominant symptom of these cosmetic issues make people highly embarrassed in society. In Ayurveda, almost all skin conditions are explained under one umbrella called *Kushta*. It is broadly classified into *Mahakushta* and *Kshudra-kushta*¹. *Dadru Kushta* one among the *Kshudra Kushta* is the most common skin condition accounts for 20% in all consultation in general practice². North Karnataka is well known for its hot and humid conditions making its population at risk of many Tinea infections. *Kandu*, *Raga* and *Atasi Pushpa Sankashavat Mandala* are the cardinal features of *Dadru*³. In the present case study, 40 patients of *Dadru Kushta* were taken according to inclusion criteria. The combined effect of both *Shodhana* and *Shamana* was assessed.

Keywords: *Dadru Kushta*, *Aupasargika*, *Anushangi*, Wilcoxon Rank Sum Test

INTRODUCTION

Dadru Kushta is a *Kapha Pitta Pradhana Kushta* which has been considered as one of the *Mahakushta* by Acharya Sushruta under the context of *Aupasargika Roga*⁴ and Vagbhata as *Anushangi*⁵ whereas *Kshudra Kushta* by Acharya Charaka which closely resembles with Tinea infection commonly called Ringworm infection. Worldwide 39% and in India 5 out of 1000 people are suffering from Tinea infection. The main cause of this infection is Dermatophyte which spreads by contact because of improper lifestyle, uncleanliness of body, sharing clothes of others etc. The fungi often tend to linger on clothes, towels, surfaces and within brushes or combs. *Dadravyadhi* is a commonly recurring skin disease and is *Anushangi*. Hence *Shodhana* and *Shamana Chikitsa* give a better result when compared to only *Shamanoushadhis*. Hence in the present study, an attempt was made to manage *Dadru Kushta* through *Shodhana*, *Shamana* and *Bahirparimarjana Chikitsa* in a single group of 40 patients through various observations and statistical methods.

MATERIALS AND METHODS

Aims and Objectives- To evaluate the combined effect of *Snehapana*, *Virechana* and *Shamana* in the management of *Dadru Kushta*

Centre of Study- Ayurveda Mahavidyalaya Hubballi (Karnataka)

INCLUSION CRITERIA

- ❖ Subjects with classical symptoms of *Dadru* as *Twak Kandu*, *Raga*, *Pidaka* and *Mandala*.
- ❖ Subjects of both genders, irrespective of socio-economic status, belonging to the age group between 20- 60 years of age.
- ❖ Subjects fit for *Snehapana* and *Virechana*.

EXCLUSION CRITERIA

- ❖ Subjects suffering from any chronic illness, HIV/ HBsAg/VDRL/STDs and other metabolic disorders will be excluded.
- ❖ Pregnant and Lactating women
- ❖ Other skin conditions like Psoriasis, Urticaria, except fungal infections of the skin.

TABLE 1: ASSESSMENT CRITERIA

Sl. No.	Parameter	Grade 0	Grade 1	Grade 2	Grade 3
1.	<i>Kandu</i>	No itching	Mild Itching but not disturbing normal activity	Moderate itching disturbing normal activity	Itching present continuously and even disturbs the sleep
2.	<i>Raga</i>	Normal skin	Light-Dark pink appearance	Red appearance	Deep Red to Purple appearance
3.	<i>Vaivarnyata</i>	Normal skin color	Reddish discoloration	Reddish Black discoloration	Blackish discoloration
4.	Size of lesion	Absence of lesion	>0-10cms	>10-20 cm	Above 20 cm
5.	No. of lesion	No lesion	1	2	3 and >3
6.	Characteristics of lesion	No lesion	Annular lesion	Annular Erythematic lesion	Annular Erythematic Plaques

TABLE 2: INTERVENTION OF THE STUDY

Sl. no	Procedure	Dravya	Matra	Duration
1.	<i>AmaPachana</i>	<i>Ajamodadi choorna with Ushnajala as Anupana</i>	5 gms twice daily Before food	3-5days/till <i>Nirama Lakshanas</i> seen
2.	<i>Sadyosnehapana</i>	<i>Patolady Ghrita</i>	<i>Roga</i> and <i>Rogi balanusara</i> and <i>Ko-shta</i> and <i>Agni</i> (70-100ml)	1-3 days
3.	<i>Sarvanga abhyanga</i>	<i>ChakramardaTaila</i>	Quantity Sufficient	1 day
4.	<i>Virechana</i>	<i>Trivrut Lehya</i>	30-40 gms	1 day
5.	<i>Shamanoushadhi</i>	<i>Dadrughna Kashaya</i>	30 ml twice a day Before Food	45 days
6.	<i>Bahirparimarjana chikitsa as Lepa</i>	<i>VidangadiLepa</i>	Quantity Sufficient	45 days

RESULTS

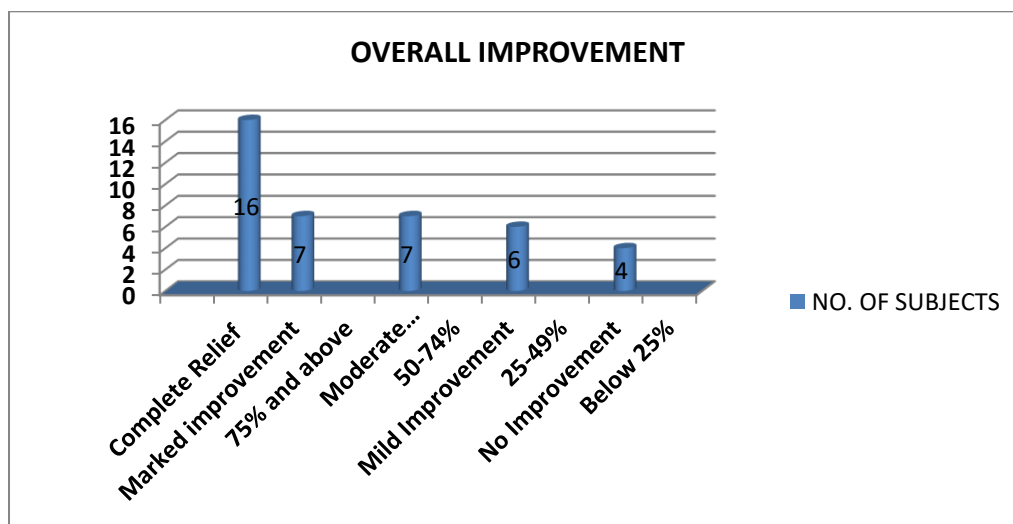
Wilcoxon Rank Sum Test was applied to see the significant change before and after treatment in the symptoms and other data.

There was a statistically highly significant difference on *Kandu* (Z=4.72, p<0.001), *Raga* (Z= 0.109, p<0.001), *Vaivarnyata* (Z=0.80, p<0.001), size of the lesion (Z=3.99, p<0.001), Number of the lesion (Z=3.77, P<0.001),

characteristics of lesion (Z=4.23, P<0.001) respectively.

FOLLOW-UPS AND OUTCOME

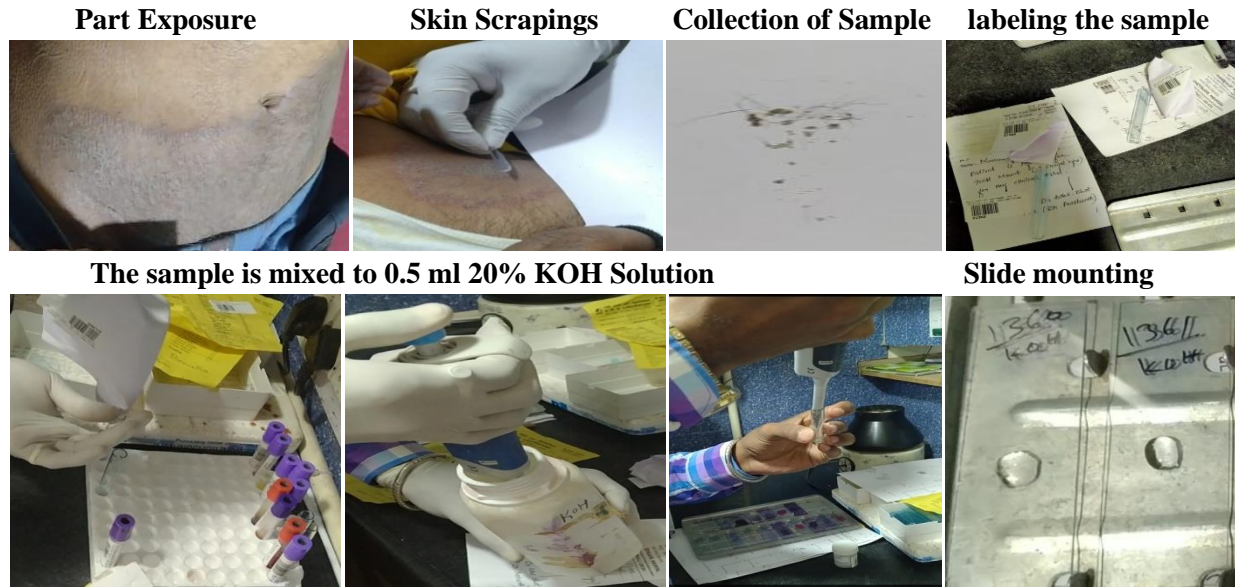
After completion of treatment, there was a marked improvement in symptoms like *Kandu* (Itching), *Raga* (Erythema), *Utsanna Mandala* (Lesions). There were no complications in any of the subjects during and after treatment. Follow up was done for 60 days. There was about 90% relief in the symptoms.



In this study out of 40 subjects of *Dadru Kushta* (Tinea), a total of 16 subjects had got complete relief. 7 subjects had marked improvement, 7 subjects in a

group had moderate improvement, 6 subjects had mild improvement and the remaining 4 subjects had no improvement after the treatment.

Figure 1: KOH MOUNT



SAMPLE WITH POSITIVE FUNGAL ELEMENTS

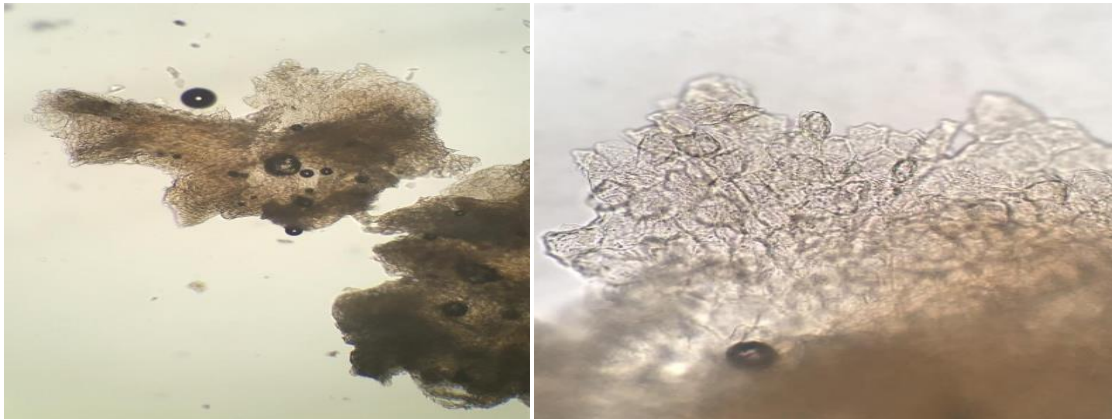


FIGURE 2: PHOTOGRAPHY OF SUBJECTS OF PRESENT CLINICAL STUDY BEFORE TREATMENT AFTER TREATMENT





DISCUSSION

Cosmetic problems are the burning issues in today's time and a lot of attention has been made towards such problems in the past few years. Fungal infections are very common among day-to-day OPD practices. North Karnataka has a hot and humid climate which is very favorable for this infection and hence the study was undertaken.

Ajamodadi Churna was used for *Amapachana* which is best *Kaphahara*, *Kandughna* and *Krimighna* and *Amapachana*. *Sadyosnehapana* was done for 1-3 days according to *Agni* and *Koshta* of a person with *Patoladya Ghrita* which mainly contains *Patola*, *Nimba*, *Vasa*, *Draksha*, *Triphala* etc *Dravyas* which are mainly *Tikta Dravyas*, *Ushna Veerya*; indicated in

Kushta, *Timira*, *Vruna*. So, the intensity of choosing this *Ghrta* as *Snehapana* before *Virechana Karma* in *Dadru Samprapti* is mainly due to *Kapha Pitta Dosha Dushti* and *Rakta dushti*. *Chakramarda Taila* is the best *Krimighna* and proved as best *Dadrughni* (antifungal) was used for *Abhyangartha*. *Virechana-Trivrut* is mainly having *Tikta*, *Katu Rasa*, *Ushna Veerya*, *Kaphapittahara* and *Kushtaghna* property. It is a *Sukha Virechaka*. *Katu Rasa* "Margan Vivrunoti" means it dilates the *Srotas* and thus acts at the cellular level and stops the uncontrolled production of cells which cause *Utsanna Mandala*. By its *Srotoshodhana* property, it acts on minute channels and does *Twak Prasadana*. *Dadrughna Kashaya Pana-Dadrughna Kashaya* contains *Aragwadha*, *Nimba*, *Kutaja*, *Mus-*

ta, Guduchi, Karanja, Haridra, Maricha, Vidanga, Bhunimba, Amalaki, Khadira and all were taken in equal proportions. Most of the ingredients are having *Kushtaghna*, *Kandughna*, *Krimighna*, *Kaphapittahara*, *Tikta Rasa Pradhana*, *Ushna Veerya*, *Katu Vipaka* which helps in breaking *Samprapti of Dadru*.

Vidangadi Lepa for external Application—It is a kind of *Pradeha* because most of the drugs are having *Ushna Veerya*. *Lepa* imparts *Ushnata* in the body. The ingredients like *Vidanga*, *Chakramarda*, *Sarshapa* are best *Kandughna* and *Krimighna*. *Haridra* is *Varna Prasadana*. This helps in normalizing the skin colour.

Discussion on Observations

In the present clinical trial, most of the subjects were students and were hostilities hence there were more chances of transmission of fungal spores and were from urban areas hence use of washing machines for clothes there are more chances of mixing contaminated clothes with a healthy one. Most of them had a family history this may be due to transmission and not merely a genetic predisposition. Most of them were having a mixed diet which is *Abhishyandi* leading to *Mandagni*, and continuous usage leads to *Raktadushti*. Junk foods are very common. Most of them rely on them even for Lunch and Dinner which hampers *Koshta* and leads to *Malabaddhata* and leads to *Ama*. The inbuilt toxins do *Srotodushti* and *Kushta utpatti*. *Ratrijagarana* is one common thing among students this also hampers the *Dosha* which does *Agni Dushti*.

Discussion on Results

Kandu occur either due to excessive accumulation of dust, sweat, *Rakta Dushti* and *Kapha Vruddhi*. The line of treatment is to correct the *Rakta Dushti*, decrease the *Kapha Dosha* and accumulation of dust, and sweat on the skin. Drugs of *Dadrughna Kashaya* are having *Kaphaghna*, *Kandughna*, *Krimighna*, *Raktashodhaka* and *Raktaprasadaka* properties. Here *Vidangadi Lepa* on external application helps in the reduction of *Kandu*.

Raga and Vaivarnyata—*Raga* is a *Prakopa Lakshana* of *Pitta* and *Vata Dosha*; *Rakta dushti* and *Pitta vikruti* leads to *Vaivarnyata*. *Lepa* helps in reducing

Pitta and *Vata Doshas*. Most of the drugs used in *Shamana* are having *Rakta Shodhaka*, *Rakta prasadana* and *Varnya* property and *Lepa* mainly act locally in correcting *Bhrajaka Pitta* hence normalizing the color of skin.

Size, Number of lesion and characteristics of lesion—Spreading of disease or extended area of involvement is due to *Vata Prakopa* as well as *Rasa* and *Rakta Dushti*. These entities reach every part of the body due to their *Chala*, *Sara*, *Sukshma Guna*. *Trivrut* is mainly having *Kaphapittahara* action and thus helps in the reduction of **size and number of the lesion**. Due to increased *Rukshata* there will be an accumulation of *Kleda* and *Mala* in *Twak* it results in thickening of the skin. *Twak* being the *Sthana* of *Vata*, *Prakupita Vata* causes overproduction of skin. Thickening of skin is due to increased production of cells especially *Keratinocytes*. *Lekhaniya* property of *Musta* and *Karanja*, *Twachya* property of *Haridra*, *Yashti* and *Chandana* helps in the reduction of inflammation and thickening of the skin. *Triphala*, *Musta*, *Bhunimba*. *Katuki* are *Srotoshodhaka* and are *Pittahara*.

CONCLUSION

Dadru is a *Kapha Pitta Pradhana Rasa* and *Rakta Dhatu Pradoshaja Vikara*. Being *Aupasargika Vyadhi* it is highly contagious hence a proper *Pathyapathya* and lifestyle modifications are the point of concern along with the main treatment course. In the present study, the combined effect of *Sneha Virechana* and *Shamana* gave a highly significant result in symptoms of *Kandu*, *Raga* and *Mandala* during as well as follow up of the treatment.

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