

A CLINICAL STUDY OF EDAGAJADI LEPA IN THE MANAGEMENT OF SANKRAMIKA DADRU KUSHTA

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ABSTRACT

Skin diseases are common in day to day life and *Dadru* is one of the commonest skin diseases found in the society. It is fungal disease caused due to the fungus *tinea*. *Acharya Charak* included *Dadru* in *kshudrakushtha*. On the other hand, *Acharya Sushrut* and *Vagbhat* included in *Mahakushtha*. It is identified by symptoms such as *Kandu*, *Raaga*, *Pidika*, *Utsanna mandala* with dominance of *Kapha pitta Dosha*. *Sankramika* or *Aupsargikarognidan* of *Kushtha* explained by *Acharya Sushrut*. Incidence of *Dadru* is gradually increasing day to day because improper *vihar* like uncleanliness of body, sharing clothes of other etc. These *Sankramikavyadhi* spreads from person to person by *Krimi* through *Sweda*. *Nidanparivarjana* is main aim to keeping yourself free from disease. So, the *Apakarshan*, *Prakrutivighata*, and *Nidannparivarjana* are 3 basic principles to cure *Sankramika Dadrukusha*. Present study was conducted on 20 diagnosed patients of *Dadru* in whom *Edagajadi Lepa* was applied. The ingredients of which are the drugs possessing *Shodhana & Kustahar* a property. The results revealed significant effect of *Lepa* in various subjective parameters like *Kandu*, colour of *Mandala*, *Pidika* after treatment.

Keywords: *Dadru*, *Bahiparimarjanchikitsa*, *Sankramika*, *Aupsargika*, *Bahya Mala*, *Sweda*, *Edagajadi Lepa*.

INTRODUCTION

Skin diseases are common in day to day life and *Dadru* is one of the commonest skin diseases found in the society.¹ *Acharya Charak* explained *Dadru* under *Kshudra Kushta* but *Acharya Sushruta* explained under *Mahakushta* and *Acharya Dalhana* classified *Dadru* into *Sitha* and *Asitha*. In another text, *Dadru* is mentioned as *Deergha Prathannadurvad* (long and wide like blade of *Durva* grass). *Atasi Kusum chavi Utsanna Mandal Dadru Kanduvat Utsangini*². *Acharya* not explained separate *Nidan* for *Dadrukushta* but *Dadrukushta* (*Sankramika*) spreads from one person to another by *Bahya Malaj Krimi* through *Sweda* (contact of skin, sharing clothes)³. *Dadru* is diagnosed by symptoms like *Kandu*, *Raaga*, *Pidika*, *Varna* (*Atasipushpa*) with *Mandal* (round patch)⁴. *Kushta* is *Raktapradoshaji Vyadhi* occurring as a result of predominance of *Pitta* along with *Rakta* and *Twak* as its *Adhistan*⁵. *Kushta* is also considered as one of the eight *Mahagad*^{6,7}. *Kushta* is of eighteen types out of these seven are *Mahakushta* – *Kapala*, *Audumbara*, *Mandala*, *Rishyajivha*, *Pundarika*, *Sidhma* and *Kakanaka*⁸. Other eleven are *Kshudrakushta*. They are *Eka*, *Chrama*, *Kitibha*, *Vipadika*, *Alasaka*, *Dadru*, *Charmadala*, *Pama*, *Sphota*, *Shataru*, *Vicharchika*⁹. *Bhiparimarjan* in the form of *Lepa* was selected which is easily done and act as a *Sthanik Chikitsa* for fast relief. The current study was taken with main aim is to evaluate the role of *Edagajadi Lepa* in the *DadruKushta*.

Material and Method –

Source of Data – 20 patients were selected from OPD of Y.M.T Medical College, Navi Mumbai

Source of Data – Open Randomized Clinical Study on Efficacy of *Edagajadi Lepa* On *Dadru*.

Criteria for Selection of Patient –

1) Inclusion Criteria –

1. Subjects of either gender
2. Subjects of more than 18 yrs of the age.
3. Subjects presenting either any all classical signs and symptoms of *Dadru* like itching (*Kandu*), Erythema (*Raga*), Papules (*Pidika*), Dryness (*Twak Rukshata*).

2) Exclusion Criteria –

1. Subjects having any acute systemic illness, uncontrolled DM, (HBA1C >7.5) etc.
2. Subjects having skin disorder other than *Dadru*.
3. K/C/O immuno compromising conditions or on immune suppressive drugs.

2) Intervention –

DRUG – *Edagajadi Lepa*

Time - Morning and Evening

Duration – 1 month

Follow Up – after every 7 days.

Preparation of Edgajadi Lepa–

Ingredients – *Edagaja Beeja Choorna* (*Chakramard*)

Kushta Choorna (*Saussrea Lapa*)

Vidanga Choorna (*Embelia Ribes*)

Sarshapa Choorna (*Brassica Campestris*)

Saidhav Lavana (*Sodium Chloride*)

Saveerkam Choorna (*Yava*)

Of all drugs are mixed together and applied by adding *Souvirkam* as per requirement.

Criteria for Assessment -

- 1) *Sakandu*
- 2) *Raaga*
- 3) *Pidika*
- 4) *Dadru Mandala*

Grading of Criteria -

Sr No	CRITERIA	G ¹	G ²	G ³	G ⁴
1	<i>Kandu</i>	No <i>Kandu</i>	<i>Ishat Kandu</i>	<i>Bahu Kandu</i>	<i>Ugra Kandu</i>
2	<i>Raaga</i>	Normal Skin Colour	Faint and Near to Normal	Blanching and Red Colour	Red Colour
3	<i>Pidika</i>	No <i>Pidika</i>	1-3 <i>Pidika</i>	4-6 <i>Pidika</i>	7 <i>Pidika</i>
4	No of <i>Mandal</i>	No <i>Mandal</i>	1-3 <i>Mandal</i>	4-6 <i>Mandala</i>	>7 <i>Manda</i>

Observation

Case History – A 40-year male patient was brought to the Y.M.T Medical college, kharghar, Navi Mumbai was healthy before 4 months. He gradually develops itching sensation, multiple erythematous papulovesic-

ular lesions with sharp border and central cleared round red colour big patches over B/L legs.

Skin Examination – Multiple erythematous papulo vesicular lesions with sharp border central cleared round big patches observed over B/L legs. Some patches with blackish discoloration.

Nidan Panchak –

Table 1: Nidana Panchaka

<i>Nidana</i>	<i>Sharing bed and clothes of infected person (Contagious disease)</i>
<i>Purvarupa</i>	<i>Kandu, Pidaka</i>
<i>Rupa</i>	<i>Kandu, Pidaka, Raaga, Matidala, Visarpini</i>
<i>Upasaya</i>	<i>Application of Ointments</i>
<i>Samprapti</i>	<i>Malaj – Bahya Krimi Kandu, Pidika, Raaga, Mandal, Utsangini</i>

Samprapthi Ghatakas

Table 2: Sampropti Ghotakas

<i>Nidana</i>	<i>Sankramika Bahya Malaja Krimi</i>
<i>Doshas</i>	<i>Tridosha [Kapha Pitta Pradhana]</i>
<i>Dushya</i>	<i>Twak, Rakta, Lasika {Ambu, Sweda}</i>
<i>Srotas</i>	<i>Rasa, Rakta</i>
<i>Adhishthan</i>	<i>Twacha</i>
<i>Rogamarga</i>	<i>Bahya</i>

RESULTS:

After administered of Edagajadi Lepa, statistically significant changes were observed in *Kandu*, colour of

Mandala and Number of *Mandala*. A mild change was observed in Number of *Pidika*.

BEFORE TREATMENT AND AFTER TREATMENT



DISCUSSION

The present study was aimed at finding a safe and effective method for managing *Dadru Kushta*. *Dadru* is manifested by appearance of discoid lesions within tractable itching. These diseases are chronic in nature, relapses after successful treatment is common & hence difficult to cure. It mostly occurs in those people who don't follow the hygienic norms or those who are immuno-compromised. *Dadru* is *Kapha* dominant disease besides its *Rasagata* manifestation. Hence considering this *Acharya Sushruta* has described their treatment as application of *Shodhana Lepa*. The disease mainly involves only *Rasavaha* & *Raktavaha Srotas* without further involvement of successive *Srotas*. *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*. Here *Chikitsa* was adopted i.e., *Apakarshanam*, *Prakrithi Vigatham*, *Nidana Parivarjanam*. *Apakarshanam* is considered as *Shodana Karma*, *Prakrithi Vigatham* is considered as *Ushna Tikshna*, *Katu*, *Tiktha*, *Kashaya Dravya Prayoga* externally and internally and *Nidan Parivarjana* considered as evidence of particular cause of disease.

The contents of *Edagajadi Lepa* viz. Seeds of *Chakramarda*, *Kushta*, *Sarshapa*, *Vidanga* and *Saindhavalavana* are mixed with *Sauveerkam* which possess *Ushna*, *Tikshna*, *Laghu*, *Ruksha*, *Vishada Guna*, *Ushna Virya* & *Katu Vipaka* properties. The *Lepa* is said to be *Sukshma* in nature as it is macerated with *Sauveerkam* for two times. Upon topical application, the active principles of the *Lepa* reach to the deeper tissues through *Siramukha* & *Swedavahi Srotas* & stain it with its *Sukshma* & *Tikshna* property. Due to its *Ushna*, *Tikshna*, *Vishada* & *Sukshma* properties it blocks the obstructions *Swedavahi Srotas* & allows the local toxins to flow out through the *Sweda*, thus clearing out the micro channels. The *Ushna Virya* of *Edagajadi Lepa* & *Snigdha Guna* of its vehicle i.e. *Sauveerkam* causes pacification of *Kapha* which forms the *Samprapti* thus alleviating the symptoms. In

most of the patients *Kandu* was relieved significantly was due to the *Kandughna* property of *Chakramarda* & *Kushta*. The abatement in scaling can be attributed to the Anti-scaling property of *Sauveerkam*. The effects of *Bahiparimarjana* (External application) were assessed on each cardinal symptoms of the disease. These symptoms were assessed on the basis of scoring pattern, which was given before, after and follow up of the treatment and were assessed statistically. After treatment in *Kandu* was reduced remarkably which was statistically significant the changes persisted even after follow up study. The colour, size, number of *Mandala*, was reduced remarkably which was statistically significant.

After the application of *Edagajadi Lepa*, number of *Pidika* was reduced remarkably and changes were more significant statistically even after follow up period. Tropical preparation applied might have acted by its *Ruksha* and *Lekhana* property for pacifying the *Kapha Doshas* locally and maintained the equilibrium the other *Doshas*. The *Sukshma* property of drugs used might have penetrated into deeper *Srotas* and dissolved the *Sanga*. After acting locally, the impaired *Dhatwagni* of *Rasa* and *Rakta* might be corrected to some extent by the *Agnideepana* property of the ingredients present in the *Lepa*. By this *Dhatu Shaitihya* might have resolved and provided nourishment to *Twacha*. When a *Lepa* is applied over the surface of skin opposite to the direction of hairs on it, through a proper base, the active principles of the ingredients of *Lepa* are released into that base. After that, this combination enters the *Romkupa* & further gets absorbed through the *Swedavahi Srotas* & *Siramukhit* does the Cutaneous Biotransformation and which will pacify the *Doshas* and leads to breaking of *Samprapti*. However, it should be kept in mind that the pilo sebaceous uptake i.e. absorption of *Lepa* differs as per the site variation, skin condition & more important is the base through which it is applied.

CONCLUSION

The results suggested that *Edagajadi Lepa* showed significant result after treatment in *Kandu*, color of *Mandala*, no of *Pidika*, no of *Mandala* variables and

the efficacy of the treatment was highly significant even during follow up. All the patients enrolled in the study completed the full course of treatment without any adverse reaction to drug. Hence it can be suggested that *Edagajadi Lepa* can be used in the patients suffering from *Dadru Kushta*

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