



## EFFECT OF MADANADI LEPA ON VIPADIKA – A CASE STUDY

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## ABSTRACT

According to *Ayurveda*, all skin diseases are classified into the category of *Kushta*. *Vipadika* is one of those ailments that has been classified under *Kshudra Kushta*. *Sphutanam* (fissures) in the palms, soles, or both, along with *Teevra vedana* (Severe pain), are the clinical features of this disease. The chronic skin condition palmar-plantar psoriasis, which mostly affects the palms and sole region, and *Vipadika* exhibit similar features. A case of a 44-year-old female patient with a complaint of dryness and cracking of both soles associated with bleeding, pain, and itching for 5 years, was diagnosed with *Vipadika*/Palmar plantar psoriasis. She is treated with *Madanadi lepa*, a formulation that is mentioned in *Besavarajeeyam*, *Kshudraroga chikitsa*. *Madanadi lepa* when applied over the affected areas was very effective in this case study.

**Keywords:** *Kushta*, *Vipadika*, Palmar plantar psoriasis, *Madanadi lepa*

## INTRODUCTION

The largest and most complex organ in the body, the skin is vital for life. All skin conditions were categorised by *Ayurveda* under a single category termed *Kushta*. *Kushta* is one of the eight dreadful diseases

or *Ashtamaharoga*.<sup>1</sup> Nearly all skin conditions in *Ayurveda* are mentioned under *Kushta* and it is classified as seven *Maha kushta* and eleven *Kshudra kushta*.<sup>2</sup> According to *Acharya Charaka*, *Vipadika* is clas-

sified as a *Kshudrakushta* with *Vata-Kaphadosha* involvement and is distinguished by *Pani-Padasphutana* (fissure in the palms and soles) and *Teevavedana* (extreme pain).<sup>3</sup> One feature which was mentioned by *Acharya Vagbhata* apart from *Acharya Charaka* was red patches over palms and soles.<sup>4</sup> *Acharya Susruta* mentions *Daha* in addition to *Kandu* and *Ruja*.<sup>5</sup> The causative factors for *Kushta* includes *Vidahi ahara*, *Viruddha ahara*, *Snigdha*, *Ushna*, *Guru*, *Drava ahara*, *Divaswapna*, etc.<sup>6</sup> *Palmoplantar psoriasis* can be correlated with *Vipadika*. It is a chronic form of psoriasis with hyperkeratotic, pustular, or mixed morphologies that typically affect the skin on the palms and soles and cause significant functional impairment. Environmental and genetic factors are the main causes of *Vipadika*. Human leukocyte antigen (HLA) Cw6 is the genetic variant that is most frequently associated with palmoplantar psoriasis. First-line therapy of *Vipadika* involves the use of potent topical corticosteroids twice a day. Light treatment, such as PUVA and NB-UVB or monochromatic excimer laser, is the first step in second-line therapy. Methotrexate and cyclosporine are two examples of second-line systemic medications.<sup>7</sup> *Madanadi lepa* is a formulation mentioned in *Besavarajeeyam Kshudra roga chikitsa* for the management of *Padadari* (Foot crack).<sup>8</sup> Keeping in view the properties of the ingredients present in *Madanadi lepa* a study has been planned to evaluate its efficacy in *Vipadika*.

#### PREPARATION OF TRIAL DRUG ie. MADANADI LEPA

The ingredients of *Madanadi lepa* are *Madanaphala*, *Saindhava lavana*, *Guggulu*, *Gairika*, *Ghritha*, *Madhu*, and *Ushira*. The procedures involved in the preparation of *Madanadi lepa* are *Madanaphala churna nirmana*, *Guggulu shodhana*, *Gairika shodhana*, and *Ushira churna nirmana*. *Madanaphala* and *Ushira*

were collected and made into *Churna* separately according to the reference mentioned in *Sarangadhara samhita madhyama khanda*.<sup>9</sup> The physical impurities were removed from *Guggulu* and taken in a *Khalva yantra* and pounded well. It was then tied in a cloth and made into a *Pottali*. *Guggulu shodhana* was done by *Dolayantra swedana* in *Triphala kashaya* for 3 hours. When *Guggulu* dissolves in *Triphala kashaya*, *Pottali* was removed and the liquid was further heated till evaporation and collected as purified *Guggulu*.<sup>10</sup> *Ashuddha Gairika* was taken in a clean *Khalva yantra* and pounded to make a fine powder. In a *loha darvi* sufficient quantity of *Go-ghritha* was taken and heated. Fine powder of *Gairika* was added to this. *Bharjana* (frying) procedure was carried out until *Gairika* attains *Istika varna* (brick red colour).<sup>11</sup> *Madanaphala churna*, *Saindhava lavana*, *Suddha Guggulu*, *Shuddha Gairika*, and *Ushira churna* were taken in a *Khalva yantra* one after the other and mixed well. Then a sufficient quantity of *Madhu* and *Ghritha* was added and mixed properly to form a paste-like consistency. This was stored in an airtight container as *Madanadi lepa*.

#### CASE-PRESENTATION

A 44-year-old female patient belonging to Tirupati, Andhra Pradesh attended P.G. (*Rasa Shastra*) OPD, in S.V Ayurvedic Hospital T.T.D., Tirupati, Andhra Pradesh with complaints of Cracks in the foot with bleeding, pain, itching for 5 years. Examination revealed numerous deep fissures on both soles, each of which was bleeding and painful to walk over. The itching was increased by the intake of *Amla lavana ahara*. The diagnosis was done as *Vipadika* according to the clinical features. Clinical manifestations showed *Vata* and *Kapha dosha* predominance. She took Homeopathic and Allopathic treatment before but there was no improvement in the condition, so she came to our hospital for better treatment.

Table 1: *Dashavidha Rogi Pareeksha*

<i>Prakriti</i>	<i>Vatakapha</i>
<i>Vikriti</i>	<i>Vatakapha</i>
<i>Sara</i>	<i>Madhyama</i>
<i>Samhanana</i>	<i>Madhyama</i>

<i>Pramana</i>	<i>Madhyama</i>
<i>Satmaya</i>	<i>Madhyama</i>
<i>Satva</i>	<i>Madhyama</i>
<i>Ahara Sakti</i>	<i>Madhyama</i>
<i>Vyayama sakti</i>	<i>Madhyama</i>
<i>Vaya</i>	<i>Madhya</i>

Table 2: Ashtasthana Pareeksha

<i>Nadi</i>	70 beats per minute
<i>Mutra</i>	Normal (regular)
<i>Mala</i>	Once in a day
<i>Jihva</i>	Normal
<i>Sabdha</i>	Normal
<i>Sparsha</i>	Anushna Sheetha (Normal)
<i>Drik</i>	<i>Prakrita</i>
<i>Aakruti</i>	<i>Madhyama</i>

**Local Examination: (Skin)**

Site - sole or dorsum of the foot

Distribution- Symmetrical (both soles)

Dryness, itching, and cracking (*Pada sphutana*), which is painful with bleeding from the cracked area seen on both soles.

Surface - Dry and rough

Margin- Irregular

**Treatment given:**

Application of *Madanadi lepa* on the affected parts daily at night for a period of 2 months. Follow-up was done every 15<sup>th</sup> day. Before applying the *lepa* legs should be washed and cleaned properly with water. *Nidana Parivarjana* (Abstain from causative factors like *Ahara-Vihara*). As the itching and bleeding were aggravating due to the intake of *Amla - lavana ahara*, the patient was advised to avoid those food items.

**Before treatment**



(a) Right sole



(b) Left sole

**Second follow-up**



(c) Right sole



(d) Left sole

**After treatment**



(e) Right sole



(f) Left sole

Figure 1: Images of the patient

**After two months**

After two months of application of *Madanadi lepa* on the soles of the foot the cracks in the foot associated with bleeding, discolouration, and itching were relieved.

**DISCUSSION**

Table 3: Differential diagnosis

<i>Vipadika</i>	<i>Padadari</i>
<i>Vatakaphaja</i>	<i>Vataja</i>
Seen in the foot and the palms	Seen in foot
<i>Srava, Kandu, Saruja</i>	<i>Saruja</i>

Medicines in the form of a paste used for external application are called *Lepa*.<sup>12</sup> For *Twakgatavikara Lepa* therapy is indicated and it comes under the *Bahir Parimarjanachikitsa*. *Lepa* pacifies the provoked

*dosha* by local application. It also has actions like *sodhana, utsadana, ropana*.<sup>13</sup>

### **Madanaphala**<sup>14</sup>

*Panipadasphutanam* and *Ruja* are mainly due to *Vata dosha*. *Kandu* is mainly due to *Kapha dosha*. *Madhura rasa* of *Madanaphala* helps to pacify *Vata*. *Tikta rasa*, *Laghu*, *Ruksha guna*, *Ushna virya* of *Madanaphala* helps to pacify *Kapha*. *Kustaghna* property helps in curing *Vipadika*. *Vranahara* and *Sophahara* property helps in wound healing.

### **Saindhava lavana**<sup>15</sup>

*Madhura rasa*, *Sheeta virya* of *Saindhava lavana* helps to pacify *Vata*. It helps to reduce dryness and cracking. *Laghu guna* of *Saindhava lavana* helps to pacify *Kapha*. *Vatakaphagna* property helps in curing *Vipadika*.

### **Guggulu**<sup>16</sup>

*Madhura rasa* of *Guggulu* helps to pacify *Vata*. *Daha* is mainly due to *Pitta dosha*. *Kashaya rasa* of *Guggulu* helps to pacify *Pitta*. *Tikta*, *Katu rasa*, *Ushna virya*, *Katu vipaka* helps to pacify *Kapha*. *Kustahara* and *Vranahara* properties help in cleansing and healing the wound. *Kashaya rasa* helps in *Ropana* and also removes the blackish discolouration.

### **Gairika**<sup>17</sup>

*Madhura rasa*, *Sheeta virya*, and *Madhura vipaka* of *Gairika* help to pacify *Vata*, so the Dryness, Itching gets reduced. *Kashaya rasa* of *Gairika* helps in *ropana*. *Kandughna*, *Vranaropana*, *Raktapittaprasamana*, and *Vahnidahanirbarhana* properties help in curing *Vipadika*.

### **Ghrita**<sup>18</sup>

*Ghrita* has *Pittavataghna* property. This helps to pacify *Daha* and *Panipadasphutanam*. *Madhura rasa* of *Ghrita* helps to pacify *Vata*. *The Varna prasdana* property of *Ghrita* helps in changing the discolouration and to attain normal *Varna*.

### **Madhu**<sup>19</sup>

*Madhura rasa* of *Madhu* helps to pacify *Vata*. *Kashaya rasa* of *Madhu* helps to pacify *Pitta*. *Raktapittakaphapaha* property helps to cure the symptoms of *Vipadika*. *Vrana shodhana* property helps in wound cleansing and *Vrana ropana* property in healing the wound. *Varnya* property helps in removing discolouration and restoring the normal color of the skin.

### **Ushira**<sup>20</sup>

*Madhura rasa* of *Ushira* helps to pacify *Vata*. *Tikta rasa* helps to pacify *kapha*. *Vranapaham* property helps in healing the wound, and the *Sthambana* property helps to arrest the bleeding.

## CONCLUSION

The *Vranahara* (*Shodhana*, *Ropana*), *Kustaghna*, *Varnya*, and *Kandughna* properties of the ingredients of *Madanadi lepa* help in curing this disease. During the treatment period, no side effects were reported. Even though the disease was chronic in this patient, with the application of *Madanadi lepa* drastic changes had been noticed. The efficacy of *Madanadi lepa* in the management of *Vipadika* can be understood by the present study. Hence, this drug can be tested in acute cases also and in a large sample to establish its efficacy.

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