



RESEARCH UPDATES ON MUKHADOOSHIKA

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**ABSTRACT**

Mukhadooshika is a skin disorder among the *Kshudrarogas* as explained in Ayurvedic classics featuring the formation of *Shalamalikantakavat Pidaka*. The name of the disease itself suggests its nature and occurrence. In contemporary science, a disease named Acne Vulgaris has similar features. *Chikitsa* is mentioned in classics such as *Vamana*, *Lepa*, *Nasya* and *Raktamokshana*. **METHODS:** An extensive search was done for Ayurvedic research works on *Mukhadooshika* both in print and digital media. **RESULTS:** A total of thirteen clinical works on *Mukhadooshika* undertaken by different departments of Ayurveda were found, most of which are comparative studies. Among these 5 works only on *Lepa Yogas*, 3 works on *Lepa* along with internal medicine, 2 works on *Vamana Karma*, 2 works on *Nasya Karma* and 1 work on nature cure technique. **DISCUSSION:** The provided clinical research works compared different *Lepa Yogas* and *Lepa Yoga* along with internal medicine. *Shodhana Karma* such as *Vamana*, *Nasya*, have significant results in the management of *Mukhadooshika*. **CONCLUSION:** The different *Lepa* formulations, *Shodhana* procedure like *Vamana*, *Nasya* is indicated in *Mukhadooshika*. In this

study 13 research works on *Mukhadoooshika* have been compiled. It is to note that most of the research work has focused on *Lepa* formulations.

Keywords: *Mukhadoooshika*, Research work.

INTRODUCTION

Skin is the largest organ of the body which helps in proper functioning and protects the underlying body from the external environment such as shock, temperature, UV radiation, chemicals etc. *Mukhadoooshika* is a skin disorder among the *Kshudra rogas*. Acharya *Sushruta* is the first who explained *Mukhadoooshika* as a disease separately among 44 *Kshudra rogas*. *Mukhadoooshika* is *Kapha-Vata* and *Rakta pradha-navyadhi* with *lakshana* like *Shalmalikantaka-vatpidaka*,^[1] *Pidaka* are *Ghana*, *Saruja*, with *Medogarbhya*, present in the *Mukha pradasha* of younger populations. Mentioned *Chikitsa* such as *Vamana*, *Lepa*, *Nasya*, and *Raktamokshana*.^[2]

In contemporary science, a disease named Acne Vulgaris has similar features. It is a disease of the pilosebaceous unit that causes inflammatory and non-inflammatory lesions and various degrees of scarring caused due to hormonal imbalance, lifestyle changes, air pollution and regular use of cosmetics etc. It is a common condition with a lifetime prevalence of approximately 85% and occurs mostly during adolescence.^[3]

MATERIALS AND METHODS

An extensive search was done for Ayurvedic research works on *Mukhadoooshika* in both print and digital media.

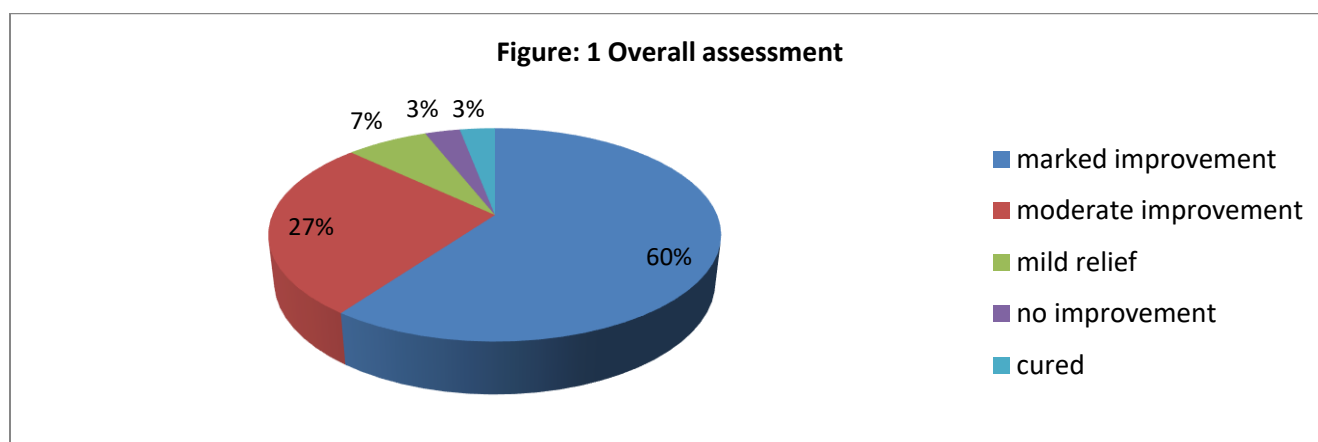
RESULTS

A total of thirteen clinical works on *Mukhadoooshika* undertaken by different departments of Ayurveda were found, most of which are comparative studies. Among these 5 works only on *Lepa Yogas*, 3 works on *Lepa* along with internal medicine, 2 works on *Vamana Karma*, 2 works on *Nasya Karma* and 1 work on nature cure technique. A summary of these thirteen-research works is given here.

1. Evaluation of the efficacy of *Panchavalkal Lepa* and *Kashaya* in the management of *Mukhadoooshika* W.S.R to Acne Vulgaris.^[4]

The objective of this study is to evaluate the efficacy of *Panchavalkal Lepa* and *Kashaya* internally in the management of *Mukhadoooshika*. A minimum of 30 patients were randomly selected into two groups, Group A contain 15 patients who were given *Panchavalkal Lepa* for 30 days. Group B contained 15 patients who were given *Panchavalkal Lepa* along with *Kashaya* internally for 30 days.

The assessment of the overall effect of both treatments revealed that 60% of patients showed marked improvement, 26.66% of patients showed moderate improvement, 6.66% patients got mild relief, 3.33% i.e. 1 patient showed complete relief and no improvement respectively.



2. A comparative clinical study to evaluate the efficacy of *Manjista Lepa* and *Vachadi Lepa* in the management of *Mukhadoooshika*.^[5]

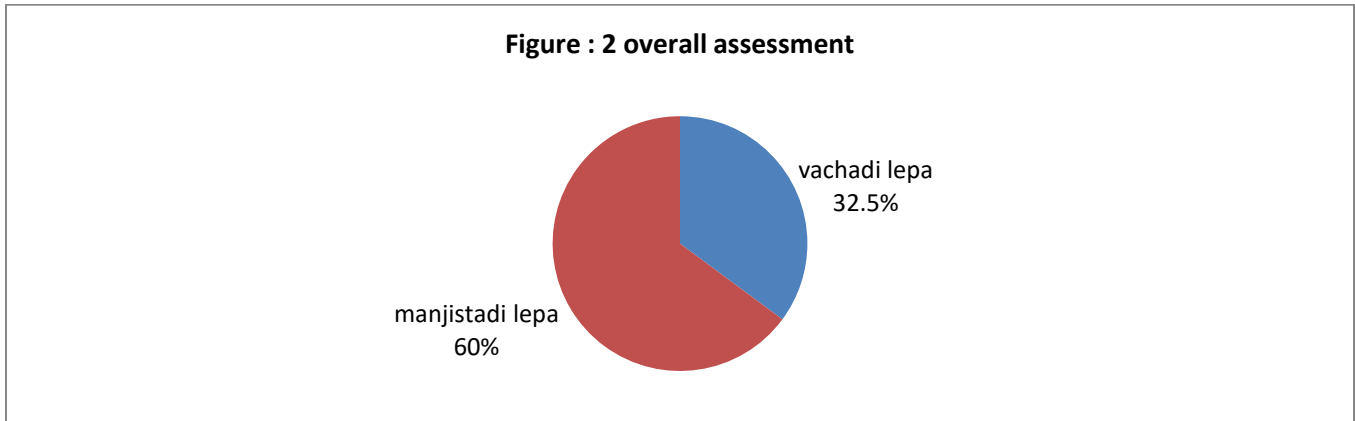
The objective of this study was to evaluate and compare the effect of *Vachadi Lepa* and *Manjista Lepa* in *Mukhadoooshika*. 80 patients were randomly selected and divided into 40 patients in each group. One group was given *Manjishtadi Lepa* for application daily morning for 28 days. Another group was adminis-

tered the *Vachadi Lepa* application in the morning once a day for 28 days.

The overall effect of *Vachadi Lepa* after 28 days of treatment- complete remission was observed in 32.50% of patients.

The overall effect of *Manjishtadi Lepa* after 28 days of treatment-moderate improvement was found in 60% of patients.

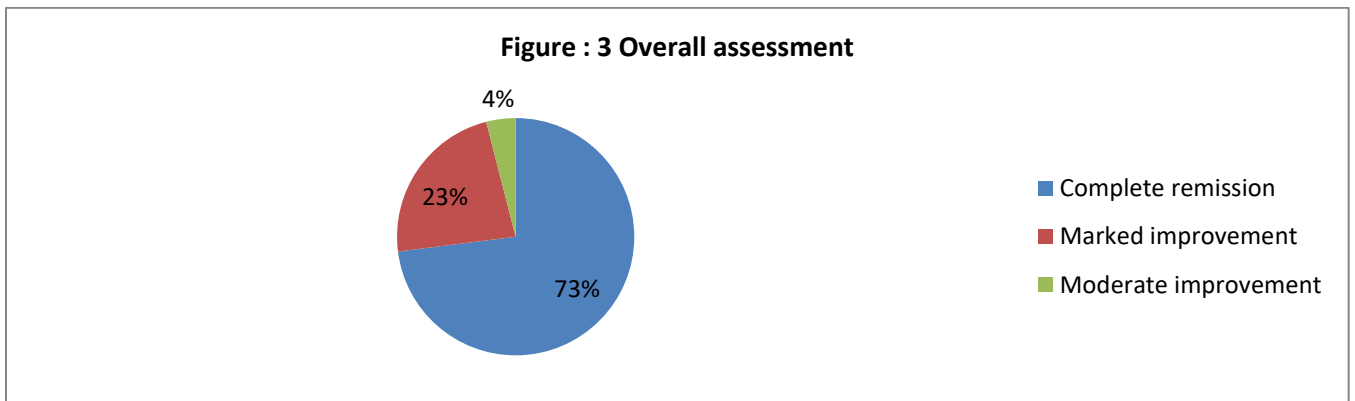
Vachadi Lepa has better relief than *Manjista Lepa* in the management of *Mukhadoooshika*.



3. A cosmetic approval on *Mukhadoooshika* and its management with *Pancha Nimba churna* internally and *Dhanyakadi lepa*.^[6]

This study was conducted to evaluate the efficacy of *Pancha Nimba churna* internally and *Dhanyakadi Lepa* external application in *Mukhadoooshika*. It is a single group study with pre and post-test design. 60

patients were randomly selected and given *Pancha nimbi churna* internally, 3gm in divided doses per day, with honey as *Anupana* for 30 days along with *Dhanyakadi lepa* as an external application on *Pidakas, Lepa* to be mixed with water and applied once daily for 30 days.



4. A comparative clinical study on *Vachadi Lepa* and *Vachadi Lepa* after *Vamanakarma* in *Mukhadoooshika* W.S.R to *Acne vulgaris*.^[7]

This study was undertaken to evaluate the therapeutic efficacy of *Vachadi Lepa* alone and *Vachadi Lepa* after *Vamana* karma in *Mukhadoooshika*. It is a randomized comparative clinical study where 40 patients of either sex were randomly assigned into 2 groups. Group A comprised 20 patients treated with *Vachadi Lepa* for 15 days and Group B was treated with *Vamana* karma followed by *Vachadi Lepa* for 15 days.

Result: Group B treated with *Vamana* karma followed by *Vachadi Lepa* has shown better results than group A treated with *Vachadi Lepa*.

Result: After treatment, it was observed that the result was more significant in group B than in group A.

Table: 1 Overall Result

| | No of patients | | % Of patients | |
|----------|----------------|---------|---------------|---------|
| | Group A | Group B | Group A | Group B |
| Good | 4 | 12 | 27% | 80% |
| Moderate | 11 | 3 | 73% | 20% |
| Poor | 0 | 0 | 0 | 0 |

6. Comparative clinical study on the effect of *Vamana* followed by *Lepa* and only *Lepa* in *Youvan pidika*.^[9]

The objective of this study was to evaluate and compare the effect of *Vamana* with *Lepa* and only *Lepa* in *Youvana pidika*. 30 patients were randomly selected and divided into 2 groups. In group A the patient was subjected to *Vamana* with *Kritavedhana* followed by *Manjista madhu lepa*. In group B patients were subjected to *Manjista madhu lepa*. The results obtained in group A were better than in group B after treatment as well as during subsequent follow-ups with minimal recurrence.

Table 2: Overall Result

| Effect of therapy | MP group | % | Kutaja group | % |
|----------------------|----------|------|--------------|------|
| Complete remission | 0 | 0 | 2 | 13.3 |
| Marked improvement | 8 | 53.3 | 6 | 40 |
| Moderate improvement | 5 | 33.3 | 6 | 40 |
| Mild improvement | 2 | 13.3 | 1 | 6.7 |
| No improvement | 0 | 0 | 0 | 0 |

5. Evaluation of effect of *Kumkumadi gritha nasya* in *Mukhadoooshika*.^[8]

This study was undertaken to evaluate the effect of *Kumkumadi gritha Marsha Nasya* in *Mukhadoooshika*. It is a Cross-sectional comparative clinical study, 30 patients were selected and divided into 2 groups. Group A was given *Nasyakarma*, and Group B was given *Nasya* along with *Pralapa*. Patients were subjected to *Abhyanga* with *Manjishtadi taila*, *Mridu swedana* and *Marsha nasya* with *Kumkumadi gritha* for 7 days continuously. In the second group after *Nasya* karma patients were given *Vachadi Lepa* for application. The assessment was done before treatment, after treatment and follow up.

7. A clinical evaluation of the efficacy of *Vamana* with *Kutaja yoga* and *Madana phalayoga* in *Mukhadoooshika* a comparative study.^[10]

This study was done to compare the efficacy of *Kutaja* as *Vamana* drug with that of *Madana phala*. 30 patients of *Mukhadoooshika* were randomly recruited to the standard group and trial group. The standard group patients received *Vamana* with *Madana phala* while trial group patients received *Vamana* with *Kutaja yoga*. *Vamana* showed highly significant improvement in all the parameters taken for *Mukhadoooshika* in both the groups, hence proving it is the best line of *shodhana* modality in treating stubborn diseases like *Mukhadoooshika*.

8. A clinical study on the therapeutic effect of *Jalaukavacharana* in *Mukhadoooshika*.^[11]

This study was undertaken to evaluate the clinical efficacy of *Jalaukavacharana* in the management of *Mukhadoooshika*. In this study, *Jalaukavacharana* has been done for 20 patients on *Mukha pradesha* thrice with an interval of four days. Before and after treatment assessments were recorded in a specially prepared proforma along with photographs. All data were analyzed clinically as well as statistically, which has shown a significant result. *Jalaukavacharana* has shown good results in reducing the symptoms of *Mukhadoooshika*.

9. A clinical Evaluation of the *Jatiphaladi Lepa* and *Lodradi Lepa* in management of *Mukhadoooshika*.^[12]

This study was undertaken to compare the action of *Jatiphaladi Lepa* and *LodradiLepa* in *Mukhadoooshika*. Patients were randomly allocated into two groups in group A with 20 patients where *Jatiphaladi Lepa* was given to apply and in group B with 20 patients where *Lodradi lepa* was given to apply. The signs and symptoms of *Mukhadoooshika* like pain, burning, itching, comedones, inflammation, lesion, scar and erythema were assessed before, during and after the completion of treatment. In groups, A and B after completion of application of lepa significant result is found. Out of 40 cases taken for study group A cases showed the better result as compared to group B.

Table 3: Overall assessment of each therapy

| Response in percentages | Group A | | Group B | |
|-------------------------|---------|------------|---------|------------|
| | No | Percentage | No | Percentage |
| Poor improvement | 3 | 15 | 4 | 20 |
| Average improvement | 3 | 15 | 5 | 25 |
| Good improvement | 4 | 20 | 6 | 30 |
| Excellent improvement | 10 | 20 | 5 | 25 |

10. A comparative study of internal and external administration of *Eladi churna* in the management of *Yauvan pidika*.^[13]

The objective of this was to evaluate and compare the effect of *Eladi lepa* external and *Eladi churna* internal in *Yauvan pidaka*. 40 patients of *Youvan pidaka* were randomly selected and divided into *Eladi lepa* (Gr. Ext) and *Eladi churna* (Gr. Int) containing 20 patients in one group advised for *lepa* application daily in the morning for 15 days. In another group will be administered *Eladi churna* internally in the

dose of 4 gram three times a day with water for 15 days after food.

The overall effect of *Eladi lepa* after 15 days of treatment- mild improvement was found in 60% of patients.

The overall effect of *Eladi churna* (internal) after 15 days of treatment- mild improvement was found in 25% of patients.

The effect of *Eladi lepa* was better than *Eladi churna* (internally) during subsequent follow-ups with minimal recurrence rate was found.

Figure 4: Overall assessment



11. A comparative clinical study to evaluate the efficacy of *Virechana Nasya* and *Shaman* therapy in the management of *Mukhadoooshika*.^[14]

This study was undertaken to compare the efficacy of Shaman therapy with *Virechana Nasya*. 30 patients were randomly selected and divided into 2 groups. Group A was treated with *Apamarga taila nasya 8 bindhu* for 7 days and in group B *Shamana* group, *Lodhraka lepana* was applied on the affected area for 15 days and internally *Manjishatadi kashaya* 15ml BD was given. Pre - and post - assessment of symptoms were done. Results showed *Virechana nasya* is more effective than *Shamana* therapy.

12. A study on the effect of nature cure technique and Ayurvedic compound in Acne Vulgaris (*Mukhadoooshika*).^[15]

This study was undertaken to evaluate the effectiveness and compare nature cure techniques and Ayurvedic preparation in Acne Vulgaris. 40 patients were randomly selected and divided into 2 groups. Group A was treated with an Ayurvedic compound. The patients were advised to undergo *Virechana* therapy with *Avipattikar churna* for *Kostha shodhana*, and the next day onwards patients were advised to apply the paste of *Shalamalikantakachurna* and milk. Group B was treated with Nature cure techniques. In this patient were given fomentation on the face using *Swedanayantra* once a week for 4 weeks and external application, clay pack was given to apply once a day for 28days. The result was found to be significant in both groups.

13. Comparative study of *Mruttika Lepa* and *Vachadi Lepa* in *Mukhadoooshika* with special reference to Acne Vulgaris.^[16]

The objective of this study was to evaluate the effect of *Mruttika Lepa* in *Mukhadoooshika*. 30 patients were selected and divided into 2 groups i.e. *Mruttika Lepa* group and *Vachadi Lepa* group and each consisted of 15 patients. The patients in *Vachadi Lepa* were taken as a control group. *Lepa* mixed with water and applied before sunset once daily for 15 days.

Result: *Mruttika Lepa* significantly reduced size, number, and oiliness of skin and *Vedana* of *pidaka* compared to *Vachadi Lepa*. There was no significant improvement in scars.

DISCUSSION

After reviewing research works, it was observed that different *Lepas* along with internal medicine and *Shodhana karma* are effective in the management of *Mukhadoooshika*. The role of *Lepa* has its significance in the treatment of *Kshudra rogas*, first, *lepa yogas* are mentioned in the treatment of *Mukhadoooshika*. Acharya Vagbhata has mentioned that first *lepa yogas* has to be administered, if it does not get subsided one has to go for *Shodhana* like *Vamana, Nasya*. If then also it does not get subsided, then one has to go for *Raktamokshana*. In the above-mentioned studies, *Lepa* formulations were used, which has *Kapha pit-tahara, Vranaropana* and *Shothahara* properties. Which showed a significant result in *Mukhadoooshika*. *Vamana* is a systemic line of management, especially said by *Sushruta* in the management of *Youvan pida-*

ka. Vamana has got a prime role to combat the physio-pathological consequences of *Youvan pidaka*. Vamana drugs possess properties such as *Ushna*, *Teekshna*, *Sukshma*, *Vyavayi*, *Vikasi* and *Urdwabha-gahara*. The above-mentioned vamana yogas along with these properties have shown successful results in the management of *Mukhadooshika*.

Nasya karma is one among the *shodhana* procedure indicated in *Urdhwajatrugata rogas*, *Nasya* is the gateway to *Shiras*. As in *Mukhadooshika* the vitiated *Doshas* gets aggravated into the *Mukha* hence by *Nasya Shodhana* can be done. The drugs used for *Nasya* contain *Vatakapha hara* and *Varnaprasadana* property. Hence above-mentioned studies with *Nasya karma* showed a significant result.

CONCLUSION

All the above-mentioned clinical works obtained significant results with internal and external therapy in the management of *Mukhadooshika*. This gives confidence in the clinical practice of different *Lepa yogas*, *Vamana* and *Nasyakarma* in the successful management of *Mukhadooshika*.

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