EFFICACY OF VARNYADI MAHAKASHAYA & KANAK TAIL IN VYANGA ROGA 
W.S.R. TO MELASMA

Abineet Raina¹, Priya Puesh Pargotra², Vishal Khanna³, Poonam Bhojak⁴
¹ Assistant Professor, Department of Shalya Tantra, Saint Sahara Ayurved Medical College & Hospital, Kotshamir, Bathinda, Punjab, India
² Assistant Professor, Department of Roga Vijnana, Saint Sahara Ayurved Medical College & Hospital, Kotshamir, Bathinda, Punjab, India
³ Associate Professor, Department of Shalya Tantra, Jammu Institute of Ayurveda and Research, Nardani, Bantalab, Jammu, India
⁴ Assistant Professor, Department of Agad Tantra, Saint Sahara Ayurved Medical College & Hospital, Kotshamir, Bathinda, Punjab, India

ABSTRACT

Ayurveda is an ancient medical science which deals with the Swasthya. ‘Nidanas’ plays one of the most important roles. In day today life people are prone to many Cosmetic disorders likewise ‘Vyanga’ is one of such diseases explained in Ayurveda under the Kshudra Roga Prakaranam. Vyanga is not a major disease but it may be symptom of an underlying disease. People get depressed by their looks i.e. with black patches on the face and as the Personal appearance being the closest and immediately rewarding hence it is very important to study what factors actually cause this disease. In the Samhita vitiated Doshas for pathogenesis of Vyanga are mentioned as Vata, Kapha and Rakta Dushti. There is direct mention of Pitta, so here Rakta Dushti can be directly related to Pitta Dushti. So we have to consider Pittadusti along with Vata Kaph and Rakta Dushti. Now a days people are aware of the personality where face plays an important role. So keeping this in mind it is necessary to study the nidanas that is causative factors of Vyanga Vyadhi in detail.

Keywords: Vyanga, Varnyadi mahakashaya, Kanak Taila.

INTRODUCTION

Beauty is a subject of Socio-medical importance. The importance of Beauty and Personality is increasing now a day as it is a competitive era. Cosmetology is a science dealing with beautification and having certain definite principles. People are using cosmetics not only for curing their skin problems but in routine to maintain the skin appearance and Beauty. Ayurveda is an ancient science of indigenous medicine, being special in respect that, it is not only a medical science but it is an art of living for human beings. According to the concepts of Ayurveda, good health is based on the equilibrium state of Dosha, Agni, Dhatu and Mala. There is a great demand of Ayurveda in the field of cosmetology. As the field of cosmetology is so vast, to concentrate on one subject the disease Vyanga has been selected for present study. The disease ‘Vyanga’ is one such disease counted under Kshudra roga, which mainly affects the glowing complexion of a person by producing Shyava varnya mandalas on mukhapradesh. Vyanga is such a condition which affects the
Beauty as well as Personality of an individual. Now a days Vyanga becomes a biggest one problem of the society. Among them women are commonly found due to changes occurring during pregnancy and use of cosmetics supplements. Men are also suffered due to occupational causes. In Ayurvedic texts so many remedies are described as Pancha Karma therapy, internal medicine and external application. Local application is more useful in skin disorders as it directly act on lesion. Internal medicine is also necessary to balance the Dosha-Dooshya. According to Modern view, the mandalas can be taken under the heading of pigmental disorder. The disease Vyanga can be correlated with hyper pigmentation with special reference to Melasma. In this, the patches of hyper pigmentation are seen especially on cheeks, nose, forehead and chin. Their treatment varies according to the primary cause of the disease. But it includes an external application of creams containing hydroquinone and hydrocortisone, which is found to cause sensitivity in few patients. Sometimes frequent and long-term usage of these preparations may produce the irritation. The chances of reoccurrence are more after discontinuation of the treatment. So there is a definite need for treatment to overcome this problem. The general line of treatment of Vyanga includes Vamana, Virechana, Raktamokshana, Abhyang, Lepa and Abhyantaroushadhi.

AIMS AND OBJECTIVES OF THE STUDY

- To study about Ayurvedic approach in the field of cosmetology
- To study the disease vyanga with its Etiopathology and symptomatology according to Ayurvedic as well as modern literature
- To assess the efficacy of massage with Kanaka tailam and internal medicine Varnya Maha Kasaya in the management of disease Vyanga.

MATERIALS & METHODS:

The following materials were used in the Clinical Trial.

- Varnya Mahakashaya
- Kanaka Tail
- Measuring tape
- Fare and lovely colour index scale

Sample size:

- Total number of 60 patients were taken from the opd of Saint Shara Ayurvedic medical college, kotshamir , Bathinda, Punjab

Exclusion criteria:

- Age <10yrs and > 50yrs
- Hyper pigmentation caused since birth like nevus of ota.
- Hyper pigmentation caused by tumour like malignant melanoma.
- Patients suffering with other systemic disorders like renal failure, hepatic disorders etc
- Pregnant women are excluded because even though the drug composition is herbal and safe still may cross placental barrier and affect the foetus.
- Lactating mothers are excluded because even though the drug composition is herbal and safe still may have effect over food (milk) of infant.

Inclusion Criteria:

- Study carried out in the patients fulfilling the criteria of Vyanga.
- Patients presenting with the signs and symptoms of Vyanga are selected.

PARAMETERS OF STUDY

- Both signs and symptoms of Vyanga as well as Melasma explained in Ayurvedic and modern texts respectively will be the subjective parameters.
- 1. Mukhamaagatyam mandalam
2. Neerujam (Painless patches)
3. Tanukam (Light pigmentation)
4. Shyavam (Brownish pigment)

Objective Parameters:
- Fair and lovely graded scale is used to assess the change in the colour of the skin on affected area before and after the treatment, which is distributed rating from 01 to 26.

Investigations:
- No investigations were done

DRUG REVIEW
A. Ingredients of varnyadi mahakashaya
1. Shweta chandana
2. Tunga (Punnaga)
3. Padmaka
4. Ushira
5. Madhuka
6. Manjista
7. Sariva(sweta)
8. Payasya
9. Sita (Swetadurva)
10. Latha (Krishnadurva)

B. Ingredients of Kanaka Tail
1. Manjista
2. Rakta chandana
3. Nilottpal
4. Madhuka
5. Nagkesar
6. Priyangu
7. Tila

Interventions:
- A single group study
- Internal Yoga – Varnyadi mahakashaya 2 pala / day in divided doses of 50 ml twice a day.
- External yoga – Kanaka tail as 5 drops once a day

Method of application of Kanaka tail:
Patients were advised first to clean the face properly. Take 5 drops on finger tip and apply over the affected area of the face. Then massage it for 10 minutes which leads to oil to penetrate properly deep in the skin. Whole procedure had to be done once in a day.

Duration - One Month
Follow Up - Two Months

GRADING OF SUBJECTIVE SYMPTOMS

1- KANDU:
No itching 0
Mild itching 1
Moderate itching 2
Severe itching 3

2- DAHA
No Burning sensation 0
Mild Burning sensation 1
Moderate Burning sensation 2
Severe Burning sensation 3

3- Oily skin
Normal 0
Mild Oiliness 1
Moderate Oiliness 2
Severe Oiliness 3

4. DRY
Normal 0
Mild Dryness 1
Moderate Dryness 2
Severe Dryness 3

OBJECTIVE CRITERIA:

1) SIZE
1/2 2.5 sqcm 1
3-5 sqcm 2
More than 5 sqcm 3

When lesions or patches are multiple, the size of the largest lesion is taken into consideration.

2) COLOUR
Colour – fair and lovely stick which grades from 1 to 26

3) Number:
Absence of Maculae’s 0
1 to 2 Maculae’s 1
3 to 5 Maculae’s 2
5 Maculae’s 3
Table 1: Assessment of parameters

<table>
<thead>
<tr>
<th>Colour of Lesions</th>
<th>GR</th>
<th>MR</th>
<th>PR</th>
<th>NR</th>
<th>Total</th>
<th>Percentage</th>
<th>PR</th>
<th>NR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scale 1-8</td>
<td>00</td>
<td>00</td>
<td>00</td>
<td>00</td>
<td>00</td>
<td>00%</td>
<td>00</td>
<td>00</td>
</tr>
<tr>
<td>Scale 9-16</td>
<td>08</td>
<td>08</td>
<td>04</td>
<td>00</td>
<td>20</td>
<td>33.33%</td>
<td>04</td>
<td>00</td>
</tr>
<tr>
<td>Scale 17-26</td>
<td>14</td>
<td>10</td>
<td>16</td>
<td>00</td>
<td>40</td>
<td>66.67%</td>
<td>16</td>
<td>00</td>
</tr>
</tbody>
</table>

Table 2: Showing the distribution of patients by Number of patches

<table>
<thead>
<tr>
<th>Number of patches</th>
<th>GR</th>
<th>MR</th>
<th>PR</th>
<th>NR</th>
<th>Total</th>
<th>Percentage</th>
<th>Number of patches</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-3 Patches</td>
<td>17</td>
<td>6</td>
<td>17</td>
<td>00</td>
<td>40</td>
<td>66.67%</td>
<td>1-3 Patches</td>
</tr>
<tr>
<td>4-6 Patches</td>
<td>05</td>
<td>12</td>
<td>03</td>
<td>00</td>
<td>20</td>
<td>33.33%</td>
<td>4-6 Patches</td>
</tr>
<tr>
<td>More than 6 Patches</td>
<td>00</td>
<td>00</td>
<td>00</td>
<td>00</td>
<td>00</td>
<td>0%</td>
<td>More than 6 Patches</td>
</tr>
</tbody>
</table>

Table 3: Results by size of lesions

<table>
<thead>
<tr>
<th>Size of Lesions (sq.cm)</th>
<th>GR</th>
<th>MR</th>
<th>PR</th>
<th>NR</th>
<th>Total</th>
<th>Percentage</th>
<th>Size of Lesions (sq.cm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/2-2.5 sqcm</td>
<td>02</td>
<td>02</td>
<td>00</td>
<td>00</td>
<td>04</td>
<td>6.6%</td>
<td>1/2-2.5 sqcm</td>
</tr>
<tr>
<td>3-5 sq.cm</td>
<td>08</td>
<td>06</td>
<td>08</td>
<td>00</td>
<td>22</td>
<td>36.66%</td>
<td>3-5 sq.cm</td>
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<tr>
<td>More than 5 sq.cm</td>
<td>12</td>
<td>10</td>
<td>12</td>
<td>00</td>
<td>34</td>
<td>56.67%</td>
<td>More than 5 sq.cm</td>
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Table 4: Statistical analysis

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Mean</th>
<th>SD</th>
<th>SE</th>
<th>T-value</th>
<th>P-value</th>
<th>Remarks</th>
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</thead>
<tbody>
<tr>
<td>Paired t-test of</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>kandu BT-AT</td>
<td>0.1</td>
<td>0.302</td>
<td>0.039</td>
<td>2.56</td>
<td>&lt;0.01</td>
<td>H.S.</td>
</tr>
<tr>
<td>BT-AF</td>
<td>0.1</td>
<td>0.302</td>
<td>0.039</td>
<td>2.56</td>
<td>&lt;0.01</td>
<td>H.S.</td>
</tr>
<tr>
<td>Paired t-test of</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Daha BT-AT</td>
<td>0.2</td>
<td>0.546</td>
<td>0.0705</td>
<td>2.836</td>
<td>&lt;0.005</td>
<td>H.S.</td>
</tr>
<tr>
<td>BT-AF</td>
<td>0.2</td>
<td>0.546</td>
<td>0.0705</td>
<td>2.836</td>
<td>&lt;0.005</td>
<td>H.S.</td>
</tr>
<tr>
<td>Paired t-test of</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rukshata BT-AT</td>
<td>0.6</td>
<td>0.886</td>
<td>0.1145</td>
<td>5.24</td>
<td>&lt;0.001</td>
<td>H.S.</td>
</tr>
<tr>
<td>BT-AF</td>
<td>0.6</td>
<td>0.886</td>
<td>0.1145</td>
<td>5.24</td>
<td>&lt;0.001</td>
<td>H.S.</td>
</tr>
<tr>
<td>Paired t-test of</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Snigdhata BT-AT</td>
<td>0.166</td>
<td>0.375</td>
<td>0.048</td>
<td>3.434</td>
<td>&lt;0.001</td>
<td>H.S.</td>
</tr>
<tr>
<td>BT-AF</td>
<td>0.166</td>
<td>0.375</td>
<td>0.048</td>
<td>3.434</td>
<td>&lt;0.001</td>
<td>H.S.</td>
</tr>
<tr>
<td>Paired t-test of</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Colour of the BT-AT</td>
<td>4.2</td>
<td>2.04</td>
<td>0.263</td>
<td>15.943</td>
<td>&lt;0.0005</td>
<td>H.S.</td>
</tr>
<tr>
<td>BT-AF</td>
<td>6.466</td>
<td>3.11</td>
<td>0.401</td>
<td>16.100</td>
<td>&lt;0.0005</td>
<td>H.S.</td>
</tr>
<tr>
<td>Paired t-test of</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>BT-AT</td>
<td>1.533</td>
<td>1.466</td>
<td>0.189</td>
<td>8.096</td>
<td>&lt;0.0005</td>
<td>H.S.</td>
</tr>
<tr>
<td>BT-AF</td>
<td>1.866</td>
<td>1.578</td>
<td>0.203</td>
<td>9.161</td>
<td>&lt;0.0005</td>
<td>H.S.</td>
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</tbody>
</table>
DISCUSSION
Probable mode of action of Varnya yoga & Kanaka tail
Among the ingredients of Varnya yoga, all drugs have Varnya property out of which 5 drugs are having specially ‘Varnya’ property, while 1 is ‘Raktaprasadana’. By these properties it enhances prakruta varna of Twacha. One ingredient is Rasayana, which nourishes all the dhatus and thereby it gives nourishment to Twacha also. 7 drugs are Kapha pitta hara, 2 drugs are Tridosha shamaka and 1 drug is pitta shamaka. 2 drugs are Daahaprasamana, 9 drugs are having Sheeta veerya and 9 drugs are having Madhura rasa. Mainly the drugs are having the property of pitta shamana, which is mainly related with Varna of Twacha. 1 drug, i.e. Manjishtha contain coloring agent. Among the ingredients of Kanaka tail all drugs have Varnya property, while 1 is ‘Raktaprasadana’ One ingredient is Rasayana, which nourishes all the dhatus and 1 drug is Tridosha shamaka, 4 drugs are having Sheeta veerya and Katu Vipaka and 3 drugs are having Ushna Veerya and Madhura Vipaka So Varnya yoga and Kanaka tail were selected as a skin caring, protecting, preventing and enhancing beauty therapy.

ABHYANGA (Mode of action) (Hypothesis)
The probable mode of action of Lepa

<table>
<thead>
<tr>
<th>Number</th>
<th>Paired t-test of Size</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>BT-AT</td>
</tr>
<tr>
<td></td>
<td>BT-AF</td>
</tr>
</tbody>
</table>

**Abbreviations used**

<table>
<thead>
<tr>
<th>Response</th>
<th>Abbreviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good Response</td>
<td>GM</td>
</tr>
<tr>
<td>Moderate Response</td>
<td>MR</td>
</tr>
<tr>
<td>Poor Response</td>
<td>PR</td>
</tr>
<tr>
<td>No Response</td>
<td>NR</td>
</tr>
<tr>
<td>Before treatment</td>
<td>BT</td>
</tr>
<tr>
<td>After treatment</td>
<td>AT</td>
</tr>
<tr>
<td>After Follow up</td>
<td>AF</td>
</tr>
<tr>
<td>Highly significant</td>
<td>HS</td>
</tr>
</tbody>
</table>

nourishes all the dhatus and thereby it gives nourishment to Twacha also. 7 drugs are Kapha pitta hara, 2 drugs are Tridosha shamaka and 1 drug is pitta shamaka. 2 drugs are Daahaprasamana, 9 drugs are having Sheeta veerya and 9 drugs are having Madhura rasa. Mainly the drugs are having the property of pitta shamana, which is mainly related with Varna of Twacha. 1 drug, i.e. Manjishtha contain coloring agent. Among the ingredients of Kanaka tail all drugs have Varnya property, while 1 is ‘Raktaprasadana’ One ingredient is Rasayana, which nourishes all the dhatus and 1 drug is Tridosha shamaka, 4 drugs are having Sheeta veerya and Katu Vipaka and 3 drugs are having Ushna Veerya and Madhura Vipaka So Varnya yoga and Kanaka tail were selected as a skin caring, protecting, preventing and enhancing beauty therapy.
CONCLUSION

Overall effect of the therapy  All the parameters show highly significant results (as P< 0.001). The parameters kandu, daha and Rukshata do not have more effect in this study. The parameter size and colour shows more net mean effect than the other parameters. The parameter colour shows 3.366 of mean before the treatment, and was reduced to 1.833, after the treatment and 1.5 after the follow up where as the parameter size shows 6.7 mean before treatment and was reduced to 1.466 after the treatment and 0.8 after follow up, where as the parameter size is having more variations. The parameter Snigdhata can be considered for the study and the parameter shows highly significant results before treatment to after treatment and before treatment to follow-up as P<0.001.

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CORRESPONDING AUTHOR

Dr. Abineet Raina
Assistant Professor, Department of Shalya Tantra, Saint Sahara Ayurved Medical College & Hospital, Kotshamir, Bathinda, Punjab, India

Email: arpoonchi@gmail.com

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