A Comparative Clinical Study of Edagajadi Lepa and Bhallatakadi Lepa in the Management of Dadru W.S.R to Tinea Infection

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Abstract

Skin diseases are common manifestation in present era and more so frequent in the elder age. The patients of skin disease are additionally prone to experience physical, emotional & socio-economic embarrassment in the society due to disfigured appearance. Normally 10 - 15% of the general practitioners encounter with skin disorders in their day today practice. Kustha a type of skin disorder mentioned in Ayurveda is a Tridoshaja Vyadhi where Rasa, Rakta, Mamsa and Ambu are the main Dushyas. Dadru (Fungal skin infection), one of the most common but miserable variety of Kushta affects the population of all the age group and stands as a challenge to different medical systems in spite of many advances. Dadru, is a Kapha Pitta Pradhan Vyadhi and the management of which includes Shodhana, Shamana and Bahiparimarjana Chikitsa among them Shamana measure in the form of Lepa has shownappreciable result in many prior research studies. Present study was conducted on 40 diagnosed patients of Dadru in whom Edagajadi Lepa (Group A) & Bhallatakadi Lepa (Group B) 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 and number of Mandala, number of Pidika after treatment. The effect of the drug also continued during follow up period of 15 days which suggested the sustained effect of the combination

Keywords: Dadru Kushta, Edagajadi Lepa, Bhallatakadi Lepa.

Introduction

Dadru [1] (Ringworm) is one of the most

common but miserable Twak Vikar affecting all the ages of population still stands as a challenge to different med ical systems. Many research works have been done on skin disorders in modern medical science but no drug has yet been claimed to cure this skin disease completely and prevent its recurrence.

Dadru is a Kapha pitta pradhanavyadhi [2] which is managed by Shodhana, Shamana and Bahiparimarjana (topical)Chikitsa. Local application works faster due to physiological effect of heat on the skin. As per the need of fast life of today's society, Bahiparimarjana in the form of Lepa was selected which is easily done and act as Sthanika Chikitsa for fast relief [3]. Despite Edagajadi Lepa, being mentioned as 'Sadyah Siddhi Karaka' (immediate relief provider) by Acharya Charaka no scientific research work has been carried out to understand the efficacy of this Yoga [4]. The current study was undertaken with an aim to

evaluate the role of Ed- agajadi Lepa in Dadru Kushta.

Material And Methods Source Of Data

Study will be carried out on the patients suffering from Dadru attending O.P.D of RGES Ayurvedic Medical Collage, Hospital & PG Research Centre, Ron.

Method Of Collection Of Data

Study will be carried out in the patients fulfilling the criteria of Dadru.

The total number of patients taken for study will be 40, excluding dropouts.

Criteria For Selection OfPatients:

a) Inclusive Criteria:

- Patients with classical signs and symp-toms of Dadru.
- Patients of either sex.
- Patients of age group between 20 to 50 years.

b) Exclusive Criteria:

- > Patient aged below 20 & 50 above years.
- Patients with other systemic disorders like diabetes mellitus, obesity etc.

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- Pregnant & Lactating Mother.
- Patient taken immuno suppressant medications, Steroids
- Patient who undergone recent surgeries.

c) Intervention:

Drug : Edagajadi Lepa & Bhallatakadi Lepa Method : External application on affected area Time: Once a day Treatment duration : 15 days

Follow up during treatment: After every7 days

d) Preparation of Edagajadi Lepa: Ingredients: Edagajabeeja (Chakramarda) Choorna (Cassia tora Linn), Kushta Choorna (Saussurealappa), Vidanga Choorna (Embeliaribes Burm.), Sar-shapa Choorna (Brassica campestris Linn), Saindhavlavana (sodium chloride, impure rock salt) and Sauveerkam (Yavapreparation). Choorna of all the drugs were mixed together and applied by adding Souvirakam (as per requirement) as mentioned in the classics.

e) Assessment Of Variables: Clinical assessment was made for severity of diseases and for the clinical improvement.

f) Criteria For AssessmentAnd Grading:

Criteria for assessment:

- Kandu Raga
- Pidika Mandala 🖉
- Visarpana Tamra Varna

Observations And Results:

Maximum number of patients (42.50%) was 349-0 from the age group of 21-30 years. Highest incidence of Dadru was found in age group of 21-30 yrs. which represents the onset was more in youth and middle aged. 70% of patients were male and 30% were females. 22% of patients were from lower middle class, 46.5% were from semiurban area and remaining 31.5% were from rural area. Maximum patients i.e. 60% were vegetarian while the rest 40% were having mixed diet habit. In present study, majority of patients i.e., 42.5% were of Vata Pittaja Prakriti, 30% were of Vata Kaphaja and remaining 27.5% were of Pit- ta Kaphaja Prokriti. 42.5% of patients had Mandagni and 42.5% of them had Teekshanagni. 42.5% were from Kapha Dosha dominancy. Maximum patients i.e. 41.5% were children and 27.5% patients were labour worker 17.5 % housewives and 13.5% service persons were

occupa- tional wise dominancy. Majority patient 33.5% were from VA (Virudhaaahara)+ vishamashan 43.5% were from Va+Agantuja and 23% were Nidana wise dominancy.

Results:

After administered of Edagajadi Lepa and Bhallatakadi Lepa was statistically significant changes were observed in Kandu, colour of Mandala and Number of Mandala. A mild change was observed in Number of Pidika and Size of Mandala.

Overall Effect Of Therapy:

Result Assesment

Finally over all result is calculated by taking average of all Parameter results.

Table No.	1 – Overall	effect of	Edagajadi
	Lepa in G	roup A	

Sr	Paramet	Before	After	% of
•	ers	Treatme	Treatme	Improvem
Ν		nt	nt	ent
0			2	
1.	Kandu	2.3	0.3	86.9%
2.	Raga	1.9	0.8	73.68%
3.	Pidaka	1.35	0.35	74.07%
4.	Mandal	1.7	0.35	79.41%
5.	Lesion	0.5	0.1	80%
	(size)			

Table No. 2 – Overall effect of Bhallatakadi Lepa in Group B

CLepa in Group D						
Sr	Paramete rs	Before Treatme	After Treatme	% of Improvem		
Ν		nt	nt	ent		
0						
1.	Kandu	2.3	1	56.52%		
2.	Raga	2.05	1.15	43.90%		
3.	Pidaka	1	0.2	80%		
4.	Mandal	1.8	0.75	58.33%		
5.	Lesion(si	0.5	0.25	50%		
	ze)					

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Discussion

Discussion on comparing Overall effect of both the treatment on Dadru:

Comparing both the results, conclusion can be made that in Group A treated with Edagajadi Lepa, Marked improvement (good to very good) in the symptoms of Dadru was seen (75%-100%). Were as, in Group B treated with Bhallatakadi Lepa, Average improvement in the symptoms of Dadru was seen (40-60%). Considering Pidika Symptom, comparing both the groups, Bhallatakadi Lepa showed very good effect in treating the symptom.

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 immune 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.

Dermatophytoses is a clinical entity caused by the members of the imperfect genera. Trichophyton, Microsporum & Epidermophyton. The natural history of dermatophyte infection is the same initially in all types of disease. Colonization begins in the horny layer of the skin & the ultimate outcome depends on the host, strain, species variation & anatomic site. On the glabrous skin, the infection spreads centrifugally showing the classic 'Ringworm' pattern. The host reaction may be limited to patchy scaling or proceed to a toxic eczematous form eruption. Later an inflammatory reaction may occur.

The contents of Edagajadi Lepa Viz. seeds of Chakramarda, Kushta, Sarshapa, Vidanga and

Saindhava lavana are mixed with Sauveerkam which possess Ushna, Tikshna, Laghu, Ruksha, Vishada Guna, Ushna Virya & Katu Vipaka properties. The Lepa is said to be Sukshmain 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 obstruction in 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 cardi- nal 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 color, 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 Suskshma property of drugs used might have penetrated into deeper Srotas and dissolved the Sanga. After act ing locally, the impaired Dhatwagni of Ra sa and Rakta might be corrected to some extent by the Agnideepana property of the ingredients present in the Lepa By this Dhatu Shaithilya might have resolved and provided nourishment to Twacha. [11] When a Lepa is applied over the surface of skin opposite to the direction of hairs on it, through a

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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 & Siramukh it 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 piloseba- ceous 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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