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	A Cli	inical Study to	Evaluate	the Efficacy of Lo	dhradi Churna Lepa	
		And Pa	thyapathy	a Ahara in Youvan	a Pidaka	
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#### Abstract

In today's modern era, different types of pollution, lack of proper diet, uses of various cosmetic, chemicals all this leads prevalence of skin diseases day by day. Nowadays acre vulgaris is one of the burning problem in adolescents. Acne vulgaris is self limited disorder primarily in teenagers and young adult, the permissive factor for this disease is the increase in sebum release by sebaceous gland after puberty.

In Ayurveda it is termed as Youvana Pidaka is described under the heading of Khudraroga, 'shalmalikantakprakhya: kaphamarutraktaja'- it's the one line unique identity of Youvana Pidaka. The Shalmalithron like eruption on the face deviation of kapha, vata and rakta which are found on the face of adolescent are called as Mukhadushika or Youvana Pidaka.

The present study was proposed to evaluate the role of efficacy of Lodhradi Churna Lepa and Pathyapathya Ahara in Youvana Pidaka with co-relating with Acne vulgaris.

For the present study 40 patients were selected randomly diagnosed as Youvana Pidaka & divided in to two groups. 20 Patients were treated with freshly prepared Lodhradi Lepa was applied on the affected area once in the morning for 30 days & 20 patients were treated with Pathya Ahara was given for 30 days. The effect of both therapy was assessed on the symptom like Size of Pidaka (In Group-A 80% & In Group-B 60%), Number of Pidaka (In Group-A 73% & In Group-B 58%), Paka of Pidaka (In Group-A 70% & In Group-B 68%), & Vivarnata (In Group-A 98% & In Group- B 85%) both the treatment shows good result on all symptom, but after comparison between both treatment the Lodhradi Lepa gives better results than Pathyapathya Ahara in Youvana Pidaka Key words: Youvana Pidaka, Acne Vulgaris, Lodhradi Lepa, Pathyapathya Ahara

#### Introduction

www aiirjou Jur health status is mirrored by the skin. Face is the most important and beautiful part of the body so beauty and personality of a person are the main tools to attract the people. There is an old saying that 'Face is the index of mind'. In Swasthavritta while

explaining about Dinacharya and Rutucharya all the Acharya explained how to maintain the body & beauty. Acharya Susruta was the first and foremost to mention a group of skin diseases under the one category as Kshudraroga<sup>1</sup>, and described various treatment procedures separately<sup>2</sup>. The diseases of which Nidana, Lakshana, Bheda and treatment are described less with respect to other diseases or which are comparatively less threatening than other diseases are named as Kshudraroga. Youvana Pidaka or Mukhadushika is also mentioned under the Kshudraroga.

According to Charaka Samhita<sup>3</sup>, vitiation of the Pitta located in the skin is causes for Pidaka. Youvana Pidaka is a one type of Pidaka which onset over the face especially in the age of Yuva.

Acne or Acne vulgaris found to have parity with the disease of Youvana Pidaka. It is a chronic inflammatory disease of the pilosebaceous units of the skin with formation of a papules/pustule eruption. Acne vulgaris is a nearly universal skin disease

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afflicting 79-95% of the adolescent population in westernized societies<sup>4</sup>. The prevalence in India is 50.6% of boys and 38.13% of girls in the age group 12-17 years.

Various systems of medicines come up with various remedies and therapeutic procedures starting from simple topical applications till the extensive management. A lot of remedies are mentioned in Avurveda texts to cure the disease. There are some remedies which are said not only to cure the disease but also to increase the beauty, complexion and luster of the face. Based on these findings this review study was designed with the following aims and objectives. Various Mukha Lepas are explained in different classics and so many studies were done in this regard Lodhradi Lepa and Pathyapathya Ahara was taken for the present study in the management of Youvana Pidaka. Pathya Ahara probably brings out the stability of the doshas as well nourishes the bodily tissues whereas avoiding Apathya vihara is must to break the Samprati of any disease in this case Youvana pidaka.

# Aims And Objectives

- 1. To study the efficacy of Lodhradi Churna Lepa in the management of Youvana Pidaka.
- 2. To study the roll of Pathyapathya Ahara in Youvana Pidaka.
- 3. To compare the efficacy of Lodhradi Churna Lepa and Pathyapathya Ahara in Youvana Pidaka
- 4. To review of Ayurvedic & Modern literature about Youvana Pidaka. www

#### Methodology

Study Design: Randomized comparative open clinical study. Patients were allocated in Group A and B respectively.

Sample Size: Total 40 Patients diagnosed with Youvana Pidaka attending O.P.D. of SDM trusts Ayurveda Medical College, Danigond Post Graduation Centre & Padma Ayurved Hospital and Research Centre, Terdal and other available sources.

## **Inclusion Criteria:**

1. Age groups of 15 - 30 yrs. irrespective of religion, sex, socio-economic status, occupation are included for the study.

- 2. Patients complaining of *Pidaka* over face with history of less than one year.
- 3. Pidakas associates with Ruja, Srava, Kandu, Vivarnata, features as explain are Daha. Included.

#### **Exclusion** Criteria

- 1. Age group below 15 yrs and above 30 years.
- 2. *Pidaka* produced due to side effect of cosmetics, chemicals applied earlier.
- 3. Patients suffering from Kushta and Patients associated with any Systemic and metabolic disorders are excluded.

#### **Assessment** Criteria

The parameters for diagnosis are completely based on classical signs and symptoms of Youvana *Pidaka*, the effect of treatment was assessed in relation to improvement in overall clinical signs and symptoms on the basis of grading and scoring system.

#### **Subjective Parameters**

	SI.	Subjective	Parameters	Grade
L	No			
Γ	1	Vedana of	No tenderness	0
		Pidaka	Pain on deep pressure	1
			over the Pidaka	
			Pain on touch over the	2
			Pidaka	
			Pain without touch over	3
			the Pidaka	
-	2	Shotha in	No Shotha	0
8		the	Mild Shotha	1
		Pidaka	Moderate Shotha	2
			Severe Shotha	3
	3	Srava in	No srava	0
		the	Lasika srava	1
		Pidaka	Puya srava	2
			Pinjara srava	3

#### **Objective Parameters**

SI.	Objective	<b>Objective Parameters</b>		
No.				
1.	Number No Pidaka		0	
	of	1 - 5 Pidakas	1	
	Pidakas	5 - 10 Pidakas	2	
		More than 10 Pidakas	3	

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2.	Size of	No Pidaka	0
	Pidaka	0 to 2mm	1
		In between 2 to 4 mm	2
		More than 4 mm	3
3.	Paka of	No Paka	0
	the	Mild Paka	1
	Pidaka	Moderate Paka	2
		Severe Paka	3
4.	Vivarnata	Normal skin colour	0
	of the	Black colour	1
	Pidaka	Brown colour	2
		Red colour	3 610
Note	: When <i>Pide</i>	akas are multiple, the size	

Note: When *Pidakas* are multiple, the size of the largest *pidaka* is considered.

#### **Treatment Schedule**

VOL

	Group-A	Group-B
Sample size	20 patients	20 patients
Procedure/Treatment	Lodhradi Churna Lepa for external application, Early morning 15- 20 min	Pathyapathya Ahara
Total duration	30 days	30 days
Follow up during treatment	On $15^{\text{th}}$ day and $30^{\text{th}}$ day.	On $15^{th}$ day and $30^{th}$ day.
Post treatment follow up	On 45 <sup>th</sup> day	On 45 <sup>th</sup> day

# Method of application of *Lepa*

Poorva karma

The patient was asked to wash the face with normal water prior to application of *Lepa*.

# Pradhana Karma

Required quantity of *choorna* was taken and normal water was added in sufficient amount to convert the *Churna* in to *Lepa* form.

The patients were advised to apply *Lepa* in the opposite direction to hair roots, all over the face.<sup>5</sup>

The *Lepa* was applied with a uniform thickness of one fourth of once own thumb width (about 1/4th of an inch).<sup>5</sup>

*Lepa* was applied in morning (between 7 and 10 am) and it should be applied over the face for at least forty five minutes to one hour or until *Lepa* gets dried up).

# Paschat Karma

After the drying up of the *Lepa*, the patients were asked to wash the face with normal water. **Statistical Analysis:** The observations were analysed by suitable statistical test between subjective and objective parameters with help of 't' test.

# **Observations And Results**

Table No. 1: Showing distribution of Patientsaccording to Age

Age	No. of	No. of	Total	Total
	Patients	Patients		%
	А	B		
15-20	10	8	18	45
20-25	4	6	10	25
25-30	6	6	12	30

	Gender	No. of	No. of	Total	Total
	ov	Patients	Patients		%
	-6385	Α	В		
1	Female	12	14	26	65
	Male	8	6	14	35
		0			

Table No. 3: Showing distribution of Patientsaccording to Vedana

Vedana	No. of Patients A	No. of Patients B	Total	Total %
Kandu	06	08	14	35
Daha	14	12	26	65
Shoola	00	00	00	00

Table No. 4: Showing distribution of Patientsaccording to Number of Pidika

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Pidika	No. of Patients A	No. of Patients B	Total	Total %	G	Broup-A ( <i>Lodhradi Churna Lepa</i> Broup-B ( <i>Pathyapathya Ahara</i> ) A <i>Vivarnata</i> there is a hig
1-5/mm2	0	0	0	0		ifference (p<0.001) between be nd comparing the percentage of
6- 10/mm2	7	8	15	37.5	G	Broup-A ( <i>Lodhradi Churna Lepa</i> Broup-B ( <i>Pathyapathya Ahara</i> )
11- 15/mm2	13	12	25	62.5	iii. Iı	n <i>Paka</i> of <i>Pidaka</i> there is ifference $(p<0.5)$ between bo
>15/mm2	0	0	0	0		which can be interpreted as there i

Age: The maximum patients belonged to 15 to 20 years of age (45%) and female 65% patients were more.

Gender: Out of 40 patients maximum patients i.e. 65% were Female followed by 35% Males.

Vedana: Out of 40 patients maximum. i.e., 65% patients complaint of Daha whereas 35% as Kandu and 0% as Shoola.

Number of Pidika: Out of 40 patients maximum. i.e., 0% patients were having 1-5

Pidika/mm2, followed by 37.5% were having 6-10 Pidika/mm2 and 62.5% were having 11-15/mm2 and 0% >15 *Pidika*/mm2

# Results

Table No. 4: Showing the Results of Comparison of both the Groups A & B in various parameters by 't' test.

Sympto	LL	PA	Dif	S.E	TSS	PIO	
ms	G	G	f			1 V 20	5
Size of	2.13	1.65	0.4	0.17	2.67	< 0.01	
the			8	9			
Pidika							
Number	1.97	1.50	0.4	0.17	2.63	< 0.01	0
of the			7	8			
Pidika							
Paka	1.90	1.80	0.1	0.16	0.61	<0.5	
			0	3	2		
Vivarnat	2.62	2.03	0.5	0.16	3.59	< 0.00	
a			9	4		1	

# Comparing of Result between both the Groups

i. In Size and Number of Pidakas there is significant difference (p<0. 01) between the both the groups, the percentage wise improvement in a) is better than

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- ghly significant ooth the Groups of improvement a) is better than
- no significant oth the groups is no significant difference between both the Groups and both the Groups are equally effective in treating *Paka or* Pakwata of the Pidakas.

# **Discussion On Results**

Youvana Pidaka is a most common disorder in the adolescent age because of the improper management of hygiene and diett. This causes disfiguration of the body especially on the face. This proves to be a major cosmetic problem. This can be compared with the disease Acne Vulgaris of the present medical literature.

*Lepa* is one of the bahir parimarjana chikitsa for twack vikaras. Acharya Vagbhata indicates that in the treatment of these Pidakas, Lepa should be applied first. A variety of *Lepas* are explained by Acharayas. The Shamana Aushadhi Kalpas Like Kashaya, Ghrita, Lepa are indicated in this vyadhi. These kalpas contain mainly Rakta Shoudhaka, and Varnyakara dravyas like Lodhra, Dhanyak, Vacha, A Haridra Amruta, Manjista, Chandan etc. The dravyas are mainly Kapha Vata Shamaka. Hence these Shamana Aushadhis act as Rakta Shodhaka, Vata Kapha Shamaka, Strotoshodhaka and Varnya.

Probable Mode of Action Lodhradi Churna Lepa

Lodhra, Dhanyak, Vacha Are Kashya Tikta Katu Rasa Pradhan Sheet and Ushan Virya, Laghu, Rukhsha Guna Pradhan, Sugandhi, Varnkar, Vata Prasadaka. Pitta. Kapha Shamaka. Rakta Aampachak, Meda Shodhak.

Dushya: Rasa (Twacha), Rakta, Meda Srotus: Rasavaha and Raktavaha.

# Probable Mode of Action of Pathyapathya Ahara

For the second group Pathya and Apthya ahara were selected. Under the heading of pathya and apthya following food items were been considered-

Pathya Ahara - Shashtika, Shali, Mudga, Saindhav, Amalaki, Rain water, Ghee, Madhu.

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proved to be significa Youvana Pidaka when Pathyapathya Ahara.	als, Dadhi. of the Lodhradi ( ant in the manage a compared to the n ch on large number is needed to prove ation in the cases	Churna Lepa ement of the results of the er of patients the positive of Youvana	Chaukha 544-554 2. Srikanth Chikitsa Chaukha	thana, 13th chapter. ambha Orientalia, Var a Murthy KR. S sthana, 20th chapter. ambha Orientalia, Var 0. RK. Caraka Samhita, 24. Third edition, Chov office, Varanasi, 1992, p L, Lindeberg S, Hun rand-Miller J. Acne vu ern civilization. Arch 4-90. Ambhikadutta Sha a sahmita, Cikitsa stana i; Chaukambha Sanskri	usruta Samhita Reprint edition anasi, 2010, pg usruta Samhita Reprint edition anasi, 2010, pg Sutrasthana, 18th wkhamba Sanskri og. 341. rtado M, Hill K ulgaris: A disease Dermatol 2002 astri. Sushruta' translation.