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Case Study

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MANAGEMENT OF DADRU KUSHTA SR TINEA CAPITIS WITH AYURVEDIC MEDICINE AND JALAUKAVACHARANA (LEECH THERAPY).....A CASE STUDY

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ABSTRACT

Skin is the largest organ of human body. Its size and external location makes it susceptible to various disorders. Skin diseases are mostly caused by infections like bacteria, fungi etc. *Dadru* is described under *kushta vyadhi* having *kapha*, *pitta* dominance. Due to similarity of all symptoms *Dadru* can be very well correlated with Tinea infection which is a fungal infection which is main cause of alopecia due to tinea especially caused due to poor hygienic conditions. A 30 years female came in Ayurveda outpatient department with complaints of patchy hair loss over scalp region from 3 years. She was diagnosed with *Dadru kushta*(*Tinea capitis*) and *Shaman chikitsa* (Pacification therapy) was planned in the management. After Starting the *shaman aushadi* she was treated with *Raktmokshan with Jalaukavacharana*(leech therapy). After completion of treatment, significant improvement

in lesions was observed. From this case study it can be concluded that Ayurvedic formulations are effective in the management of *Dadru kushta*.

KEYWORDS: *Kushta*, *Kushtaghna*, *Dadru*, Tinea Infection.

INTRODUCTION

In recent years, there has been a considerable increase in the incidence of skin problems in the tropical and developing countries like India. All the skin diseases in Ayurveda have been classified under the broad heading of 'Kushta' which are further classified into Mahakushta and Kshudrakushta.

Acharya Charak has included Dadru in Kshudrakushta, whereas Acharya Sushruta and

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Acharya Vagbhata have explained under Mahakushta.

The main *lakshanas of Dadru* include *Kandu* (Itching), *Utsanna* (elevated circular lesions), *Mandala* (Circular Patches), *Raaga* (Erythema), and *Pidakas* (Papule). The *samprapti* of *Dadru* mainly involves vitiation of *Pitta-kapha doshas* and *dushti* of *rasa* and *raktavaha strotas*. Due to similarity of symptoms *Dadru* can be correlated with Tinea which is a fungal skin infection.

CASE REPORT

A 30 years old female came to Department of *Kayachikitsa* with chief complaints of patchy hair loss over scalp from 3 years.

History of present illness

Patient was well before 3 years, and then she gradually developed bald patches over scalp region. She had taken Allopathic treatment from LNJP Hospital for 3 weeks but didn't get satisfactory result.

Medicine History

Injection Tricort 10mg (Triamcinolone acetonide) for 3 weeks Betamethasone cream.

Past History

There was no any past history of Diabetes mellitus, Asthma, Any addiction, etc.

Personal History

Appetite and thirst were normal, sleep was disturbed, bowels were normal.

Clinical Examination

Ashthavidh pariksha (eight fold exa examination)

Nadi (~pulse) Vata pittaja,

Mutra (~urine) and Mala (~excreta) were normal,

Jiha was (~tongue) coated.

Sparsha (~touch) Anushna (~not too hot) and Mridu (~ mild) Shabd(~voice) – spaasht

Akriti - madhyam

Local examination- 2-3 circular bald patches(6*4cm,5*3cm) over scalp from 3 years with No discharge and no itching from lesions.

On examination - Pallor, icterus. Clubbing, cyanosis, and lymphadenopathy were absent. Examination of cardiovascular, respiratory, urinary, and central nervous system revealed no abnormality.

Vital Parameters

Bp- 100/70 mmhg

Pulse rate-90/min

Temperature-97.8 F

Respiration rate - 20/min

Investigations

CBC and RBS, BT, CT, KFT, LFT were within normal limits KOH test (Skin srap test) – positive.

Diagnosis

From clinical examination of lesions it was diagnosed as *Dadru* (Tinea capitis). KOH test (Skin scrap test) was positive After taking written informed consent from the patient, Ayurvedic internal medication with dietary restrictions (avoid spicy, junk and packaged food such as burgers, pizza, and carbonated beverages, and curd meat, fish etc) was prescribed for three months. She was advised to avoid day sleep and suggested to maintain personal hygiene.

Treatment suggested

Follow up- After 7 days

S. No	Drug given	Dose	Duration
1	Khadirarist	15ml bd with equal water	15 days -30 days
2	Haridrakhand	1/2 tsf bd with milk	15 days
3	Gandhak vati	1Tds	15 days
4	Kaishor guggul	2tds	15-30 days
5	Marichyadi +tankan	L/A	30 days
6	Raktmokshan with jalokavcharan	After 20-30 days	3 times

TIMELINE

		Observation	Duration
1)	1st leech therapy	No hairs	After 15 days of shaman aushadhi
2)	2nd leech therapy	Few small hairs seen	After 1 month
3)	3rd leech therapy	More black hairs seen	After 1 month

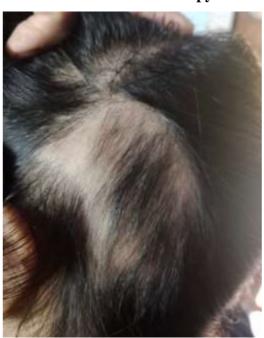
Procedure

Raktmokshan with jalokavcharan

Before treatment image.



After 1st leech therapy



After 2nd leech therapy.



After 3rd leech therapy.







Samprapti ghataka (~ Pathogenesis)

Doshik dominance was Pitta-kapha.

Dushya (~which gets vitiated) were Tvak (~skin), Rakta (~blood tissue), Mamsa (~ muscle tissue), Ambu (~ water or the watery element of the body);

Srotas (~structural or functional channels) involved were Rasa (~ channels carrying nutrient fluids) and Rakta vaha (~ channels carrying blood).

Rogadhisthana (~place of manifestation of diseases) of disease was Tvak; Agni (~ digestive/ metabolic factors) was Manda (~mildness/ slowness), Svabhava (~nature of disease) of disease was Chirakaala anubandhini (~persists for a long time).

DISCUSSION

In All the Ayurvedic *Samhitas* repeated *shodhana* is indicated in *Kushtha*. *Gandhak vati, khadirarisht, haridrakhan*d, internally and *marichyadi* oil help in elimination of aggravated *dosha* thus breaks the *samprapti* of the *vyadhi*.

Jalukawcharan was done which helps to overcome pitta and Raktadushti. Also, Acharya Charak in Vimansthan mentions that due to Raktaj krumi, keshshat occurs, so in krumighna chikitsa is also very useful.

From this case study it can be concluded that Ayurvedic formulations are effective in the management of *Dadru kushta*.

Probable mode of action for interventions Khadirarishta

Khadira (Acacia catechu) is mentioned under Kushthaghna Gana and also as the best drug for alleviating Kushtha. Most of the ingredients in Khadirarishta are Tikta, Katu (pungent) Rasatmaka, Katu Vipak and Ushna Viryatmaka (hot potency) pacify the Kapha along with Pitta. It has antioxidant properties.

Tankana

Tankana (Borax) is the salt of tetraboric acid, also known as sodium borate. It is described under Uparasa, and it has Katu Rasa, Amla Vipaka, Ushna Virya, Tikshna, Laghu, Sara, Sushma Guna, Kaphahara properties that can aid in the alleviation of itching by calming the Kapha dosha. The antifungal and antibacterial activity of Tankana is well documented in various studies.

Gandhak

It is mainly indicated in the management of Kushta Roga. It possesses antibacterial and antifungal properties. It mainly acts on Rakta Dhatu and causes Rakta shodhan (purification of blood). It also acts as Rasayana and helps in improving the digestion and skin complexion. Sulfur is used both internally and externally for treatment of diseases of skin. It reduces the Kandu, Pidika, Raaga and Daha by its Rakta shodhak, Vranaropak, Krumighna and Kushthaghna properties.

Haridrkhand

It is used for Anti allergic, Hives, Allergic rhinitis, Itching, Prupitis.

Kaishor Guggulu

It acts as blood purifier, anti-inflammatory & anti-bacterial. Its active ingredients are Triphala, Amrita, Guggulu, Guda, Guduci, Trayusana, Vidanga, Danti, Trivrt and indicated in Kushtha.

Marichyadi Tail

It is used for external application which contains Maricha, Haritala, Manahshila, Nagarmotha, Arkadugdha, Kanera Mula Twak, Nishoth, Gorasa, Indrayanamula, Kushtha, Haridra, Daruharidra, Devdaru, Raktachandana, Vatsanabha, Sarshap taila. Most of the drugs of Marichyadi tail are having Katu, Tikta, Kashaya Rasa and Ushna Virya causes Kaphavata Shamana, it reduces Kandu, Snigndha guna reduces dryness, kharatva (roughness), It has Raktashodhaka, Kushthaghna, and Kandunashaka property. These dravyas have Kashaya rasa, which helps in reducing Kleda. It has anti-fungal, antiseptic, anti- inflammatory, and immune modulator properties. It is used in all types of skin diseases where itching is present.

The probable mode of action of Jalaukavacharana

Ayurveda text suggests that it was due to its capacity of removing *Rakta Dhatu* along with vitiated *Doshas*. since the *Rakta Dhatu* is the prime carrier of vitiate *Pitta* in whole of the body. This suggests that the vitiated *Pitta Dhatu* may be the loads of metabolic waste that is carried along with this circulatory fluid. When this *Rakta Dhatu* is expelled from the body it carries the vitiated *Pitta* with itself and thus purifying the body by removal and further decreasing its quantum by compensatory production of healthy *Rakta Dhatu*, caused due to blood loss. It also states that the properly administered *Raktmokshan* causes *Prasada Manas* (normalization of physiology of the *Manas* or whole body with senses) and it prevents development of *Raktaja Rogas* like *Twaka Dosha* (skin disorders), *Granthi* (abnormal outgrowth) and *Shopha* (inflammation).

An important concept of Ayurveda that further glorifies the importance of *Raktmokshan* is that, if a disease condition was not been cured by adopting *Sheeta* (therapies causing decrease in metabolic activities by decreasing core temperature), *Ushana* (therapies promoting metabolic activities by increasing core temperature), *Snigdha* (therapies enhancing the metabolic activities by reducing resistance or *Vata Shamana*), *Rukshana* (therapies decreasing the metabolic activities by enhancing resistance or *Vata Prakopa*) treatments then it is a *Raktaja Roga* and under these circumstances treatment for *Raktaja Roga* should be adopted and among them prime is *Raktmokshan*.

The above description suggest about the specific properties of Leech that causes removal of Rakta Dhatu, that has its affinity towards the erythrocytes components of the blood, and its capacity of promoting blood loss through anticoagulation effect, inhibition of platelet aggregation and extracellular matrix degradation.

It was the most appropriate method of Raktmokshan in Nripa (delicate individuals), Bala (children), Sthavira (aged), Bhiru (fearful), Durbala (weak), Nari (females) and Sukumara (similar delicate individual) since it was the 'Parama Sukumara' (the extreme delicate) way of Raktmokshan.

These descriptions suggest the analgesic, antiinflammatory effects and antimicrobial action of Jalaukavacharana that makes the process least troublesome for delicate individuals. The mode of action of Jalaukavacharana was summarized by stating that it draws only impure blood. This signifies the removal of erythrocytes components of the blood which may be the prime source of Raktaja Roga.

CONCLUSION

From this case study it can be concluded that Ayurvedic formulations are effective in the management of Dadru kushta.

Patient suffering from alopecia due to tinea capitis successfully treated through Ayurveda. Still medicines are continued for few a more days.

Jalaukavacharana (Leech therapy) along with ayurvedic shaman chikitsa(pacification therapy) has a definite role in alopecia due to tinea capitis especially of recent origin This infection has a substantial recurrence rate, necessitating long- term treatment, and modern medicine has its own long-term toxicity The adopted treatment method is safe and costeffective.

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