

AN AYURVEDIC MANAGEMENT OF DADRU KUSHTH (FUNGAL INFECTION-TINEA CRURIS): A CASE STUDY

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Article Received on 02 Oct. 2025,
Article Revised on 23 Oct. 2025,
Article Published on 01 Nov. 2025,

<https://doi.org/10.5281/zenodo.17474087>

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How to cite this Article: *Fareeda Seraj Ahmed Khan, Sandeep Kale, Santosh Girbide. (2025). An Ayurvedic Management of Dadru Kushth (Fungal Infection-Tinea Cruris): A Case Study. World Journal of Pharmaceutical Research, 14(21), 849-856.

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ABSTRACT

In *Ayurveda*, the term *Kushtha* encompasses a broad spectrum of skin disorders, serving as an umbrella term for various dermatological conditions. *Acharyas* like *Charaka*, *Sushruta* and *Vagbhata* have extensively discussed *Kushtha* in their medical treatises, Highlighting its causes, symptoms, and treatments. *Kushtha* is considered a complex condition arising from imbalances in the three doshas i.e *Vata*, *Pitta*, *Kapha* and its categorized into various types. Further it is broadly classified into *Mahakushtha* and *Kshudrakushtha*. Skin diseases not only hampers patients day to day life but also take great toll on their psychology. Fungal infections can significantly affect a patients mental health and well being, leading to emotional distress, low self-esteem and social isolation. Addressing both the physical and psychological aspects of fungal infections is crucial for comprehensive care. This paper highlights a case study of *Dadru Kushtha*(Fungal infection) treated with the *Ayurvedic* principles. Here a case

report of 34 years old female having complaints of central cleared round macular patch with itching and dryness on both thighs and groin region since 6 month. She was treated with *Shaman Chikitsa*.

KEYWORDS: *Ayurveda, Dadru, Fungal Infection, Kushtha.*

INTRODUCTION

There has been a considerable increase in the incidence of skin problem 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 in to *Mahakushta* and *Kshudrakushta*. *Mahakushta* refers to more severe and chronic skin conditions whereas *kshudrakushta* includes milder and less severe skin conditions This classification helps in understanding the prognosis, treatment, and management of various skin diseases in Ayurveda. *Dadru* is one among the *Kushta* It is *kapha-pittaja* vyadhi coming under the *Kshudra-kushtha* according to Acharya Chara.^[1] It is *kaphaja*-vyadhi coming under the *Mahakushtha* which occurs in *Tamra* (4th layer) & *Vedini* (5th layer) of the skin, according to Acharya Sushruta Clinical features of *Dadru Kushtha* are *Raga* (erythema), *Kandu* (Itching), *Pidika* (Papule), *Utsanna Mandala* (elevated circular lesions).^[2] Itching sensation is due to *kapha dosha*, papules & erythema is attributed to *pitta dosha*. *Varna* (color) are described as red according to Acharya Charaka. 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, but slow in progress or chronic in nature with *kandu*.^[3] *Dadru* is *kapha* dominant *Vyadhi*. It involves *Rasavaha* and *Raktavaha Srotas*.

On the basis of clinical presentation of *Dadru*, it can be correlated with tinea infections in modern concept. Skin diseases are mainly caused by the involvement of several microorganism where tinea is one among them. Tinea infection is a group of contagious diseases caused by fungus, specially dermatophytes. Tinea infection is caused by a distinct class of fungi. They thrive in keratin layer of the epidermis, hairs and nails. Tinea Cruris is a superficial dermatophyte infection involving thighs and groin region of female patients, This infection is very common in humid and congested environment coupled with poor personal hygiene

The Case Study is as follow

A 34 year patient came to OPD of R.A. Podar Medical College with a chief complaints of

1. Central cleared round red colour patches on both thighs and groin region.
2. Severe itching, Patient had above mention complaints since 6 months.

Presenting Concern

A 34 year female patient was apparently asymptomatic before 6 Months. He gradually developed red patches over both thighs and groin region with intense itching sensation. she was also having a complaints of constipation and acidity, there was no history of Diabetes and Hypertension. She was not suffering from any systemic illness.

Table No 1: Personal history.

Name -XYZ	Age-34 years
Sex-Female	Marital status-Married
Occupation-Housewife	Diet-Non-vegetarian
Addiction-None	Sleep-Inadequate due to itching
Appetite-Average	Bowel-Irregular
Bladder-Regular	Religion-Hindu

Table No. 2: General Examination.

Height	160cm
Weight	53kg
BMI	20.7 kg/m ²
B.P	130/80mm hg
Temprature	Afebrile
Pulse Rate	80/min
Pallor	Not present
Pedal edema	Not present
Icterus	Not present
Lymphadenopathy	Not present
Clubbing	Not present
Cynosis	Not present

Local examination

On examination, there are large erythematous and infiltrated central cleared annular patch and well defined irregularly marked margins on both thighs. Periphery of the lesion was studded with minute pustules. No history of any other systemic diseases noted.

Ayurvedic Perspective

In Ayurveda, based on signs, symptoms, and pathology, fungal infection can be correlated with *Dadru kustha*. It can be diagnosed by clinical symptoms like *Raga* (erythema), *Kandu* (Itching), *Rookshata* (dryness), *Pidika* (Papule), *Utsanna Mandala* (elevated circular lesions). All *Kushtha* are *Tridoshaja*. But according to *Aacharya Sushruta Dadru* is *Kapha Pradhan*, and according to *Charaka* and *Vagbhata*.

Table No. 3: Ashtavidha Pareeksha.

Nadi- Pitta-kaphaja	Mala – Baddha
Mutra – Prakruta	Jivha- Ishat Saam
Shabda – Spashta	Sparsha – Prakruta
Druk – Prakruta	Aakruti – Krush

Table No. 4: Nidan Panchak.

Nidana	Sharing clothes, soap, towel of infected person, leaving in congested area, warm and humid environment.
Purvarupa	<i>Kandu, Pidaka</i>
Rupa	<i>Kandu, Pidaka, Raaga, Mandala,</i>
Upshaya	Application of Ointments
Samprapti	Sharing bed and clothes of infected person(Contagious disease) and <i>Sankramana</i> of <i>Krimi</i> from person to person (<i>Malaja-Bahya Krimi</i>) That <i>Krimi</i> entered into <i>Twak</i> through <i>Sweda</i> and vitiates <i>Tridosha</i> , <i>Twak</i> , <i>Rakta</i> and <i>Lasika</i> and create <i>Dadru Kustha</i> (Symptoms like <i>Kandu, Pidaka, Raaga, Mandala</i>)

Table 5: Samprapti Ghatak.

Nidana	<i>Bahya Malaja Krimi(Sankramika)</i>
Doshas	<i>Tridosha (Kapha Pitta Pradhana)</i>
Dushya	<i>Twak, Rakta, Lasika (Ambu), Sweda</i>
Srotas	<i>Rasa, Rakta</i>
Adhishthana	<i>Twacha</i>
Rogamarga	<i>Bahya</i>

Table No. 6: Differential Diagnosis.

Vicharchika (Eczema)	In <i>Vicharchika</i> Symptoms like <i>Pidika</i> with <i>Bahusraava</i> ^[4]
Paama (Scabies)	In <i>Paama</i> symptoms like Scattered <i>Pidika</i> with different <i>Varna</i> (white, red & black). ^[5]
Dadru (Tinea)	In <i>Dadru</i> symptoms like <i>Pidika</i> , <i>Varna</i> with <i>Mandala</i> (Round patch).

Table No. 7: Treatment Protocol.

SR.No	Medicines Given	Dose with Duration	Date	Route	Anupan
1	<i>Arogyavardhini Vati</i>	2 tab thrice a day after meal	15/07/25-30/09/25	Orally	<i>Koshana jala</i>
2	<i>Gandhak Rasayan</i>	2 tab thrice a day after meal	15/07/25-30/09/25	Orally	<i>Koshana jala</i>
3	<i>Mhamanjishthadi Kwath</i>	15ml thrice a day after meal	15/07/25-30/09/25	Orally	Water
4	<i>Araghvadh Kapila vati</i>	1 tab at night after meal	15/07/25-30/09/25	Orally	water
5	<i>Krimikuthar Ras</i>	2 tab twice day after meal	15/07/25-30/09/25	Orally	Water
6	<i>Nimadi Lepa</i>	Twice daily	15/07/25-30/09/25	External application on thigh	With water

Case follow up

Assessment of the skin lesions was done on first visit and patient follow up at the interval of 15 days was done up till complete remission of the clinical symptoms. During the treatment and follow-ups the patient was advised to avoid incompatible food items, junk/fast food, excessive oily-salty spicy food. Patient is advised to avoid day time sleep. Patient is suggested to maintain personal hygiene like wearing loose cotton cloth, keeping the area dry, bath with Nimba siddha jala.

Grading Criteria For Assesement

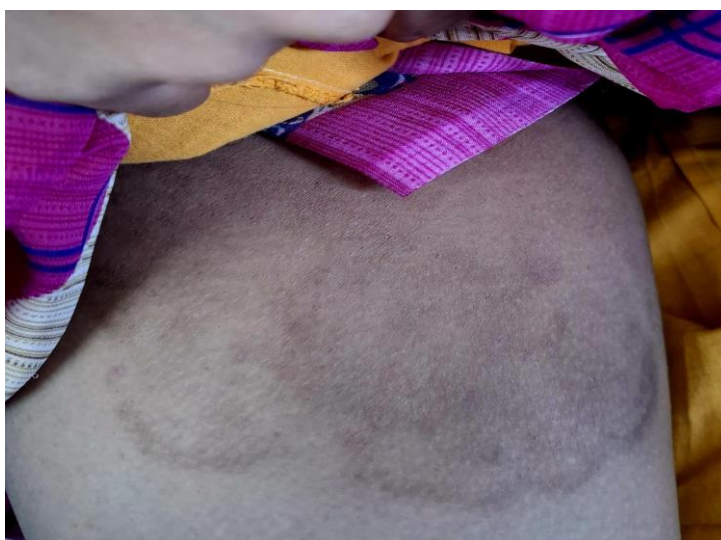
Table 8: Grading criteria.

Sr.No	Clinical features	Grade 0	Grade 1	Grade 2	Grade 3
1	Kandu(Itching)	Absent	Mild	Moderate	Severe
2	Raga(Erythema)	Absent	Mild-faint red	Blanching and red colour	Red colour
3	Utsanna Mandala (Elevated Patches)	Absent	Mild elevated	Moderate elevated	Severe elevated
4	Pidika(Papules)	Absent	1-3 papules	4-7 papules	More than 7
5	Rookshata(Dryness)	Absent	Mild dryness	Mild	Moderate

OBSERVATION AND RESULTS

Sr.No	Clinical features	Before Treatment	After 1 Month	After 2 Month
1	Kandu(Itching)	3	2	0
2	Raga(Erythema)	2	1	0
3	Utsanna Mandala (Elevated Patches)	2	1	0
4	Pidika(Papules)	2	1	0
5	Rookshata(Dryness)	3	2	1

Before Treatment



After 1 Month**After 2 Month****DISCUSSION**

In above mention case Patient was suffering from *Raga, Kandu, Pidika* and *Twak Rukshtha* for past six month. *Ayurvedic* principles like *Shaman* and *Nidan Parivarjan* was applied for treatment. In *Shaman Chikitsa* both *Bahiya* and *Abhyantar* treatment was given. For internal use *Arogyavardhini vati*, *Gandhak Rasayan*, *Mahamanjishthadi kwath*, *Krumikuthar rasa*, *Aragvadhkapila Vati* was used for *Kledahara*, *Krumighna*, *Rakt shodhan*. For external use *Nimbadi lepa* was given. It has reduced itching significantly. *Gandhak Rasayan* was used for its *Rakta Shodhak*(blood purifier), reduces *Kandu*, *Raga*, *Daha*, *Pidika*, anti inflammatory, antifungal, *Rasayan* properties.^[6] *Arogyavardhini Vati* is *Kushtaghna*, *Deepana*, *Pachan*, *Kandughna*, *Agni Vardhana*, *Bhedan*, *Malashodhan*, *Vatanuloman*.^[7] *Krumikuthar Rasa*

mainly contains *Karpura*, *Indrayava*, *Ajmoda*, *Vidanga*, *Shuddha Hingula*, *Shuddha Vatsnabh* etc these all are *Ushna*, *Tikshna* it contains *Krumihar* properties.^[8] *Mahamanjishthadi Kwath* is *Varnya*, *Pitta Shamak*, *Rakta Shodhaka*, *Vyadhi Shamak*.^[9] *Aragwadh Kapila Vati* is *Sukha Virechak*. It causes *Nitya Anulomana*. Maintaining the *Vata Pitta* balance. Removal of *Dushita Aama*, *Pitta Shamaka*.^[10] *Nimbadi Lepa*, contains *Nimba*, *Chakramard*, *Triphala*, *Vidang*, *Haridra*, *Musta* and *Khadir*. *Nimba* and *Chakramard* are effective in all types of skin disorders, it has *Kledaghna*, *Krumighna*, *Kapha Pittahara* properties. *Triphala* has *Kushtghna* effect, it pacifies *Kapha*, *Pitta* which is predominant in *Dadru*. *Musta* is *Tikta Kashay Rasatmak* thus reduces *Kleda*. *Khadir* is *Shreshtha Kushthghna Dravya*. *Vidanga* is *Kruminashan* in its *Prabhav*. *Haridra* is effective in *Twak Vikar*.

CONCLUSION

Dadru is a contagious, recurrently occurring skin disorder which can be potentially correlated to tinea infections. The maintenance of hygiene is a very important and should be taken care of during treatment like taking bath every day, keeping the area dry, wearing loose cotton clothes etc. Washing clothes in hot water is also plays a crucial role in preventing recurrence. It is very important to continue a treatment even after the cessation of symptoms to prevent its recurrence. In the present study *Shaman Chikitsa* has shown highly significant result. If *Abhyantar* and *Bahiya Chikitsa* is done along with patients compliance then it can give effective results. Further *Shodhan Chikitsa* could be done to prevent recurrence.

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