

Management of *DadruKushtha* (Tinea corporis) by *ShamanaChikitsa* - A Case Study

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Abstract-

Skin disorders are often seen as a result of a change in lifestyle, a lack of physical activity, and inadequate nutrition, hygiene, emotional stress, and poor eating habits are also factors to consider. *Kushtha* is the term used in Ayurveda to describe all skin disorders which is classified as *MahaKushtha* and *KshudraKushtha*. *DadruKushtha* is a type of *KshudraKushtha* that is commonly seen in clinical practice. In Ayurveda, the signs of *DadruKushtha* are similar to those of Tinea corporis, which is explained in modern science. Tinea corporis has a wide range of clinical symptoms that are mostly dependent on the infective organisms. By treating the condition with Ayurveda's treatment therapy produces long term outcomes. **Aims & Objectives:** The aim of this study was to see how Ayurvedic modality *Shamana Chikitsa* works on *DadruKushtha*. **Material & Method:** A 27-year old male patient approached to Kayachikitsa OPD with complaints of blackish lesions with raised borders and itching over the chest and back (upper) region for 15 days having disturbed sleep which undergone treatment of *ShamanaChikitsa*. *DadruKushtha* can be dealt with *Shamana Chikitsa* using internally for 45 days. **Observation:** The Gradation Score was 8 before treatment, after 45 days it was nil. **Result:** The patient in this case study experienced relief in the symptoms. **Conclusion:** *DadruKushtha* obtained better results by *ShamanaChikitsa*.

Key word- *DadruKushtha*, Tinea corporis, *ShamanaChikitsa*

Introduction:

The skin is the body's largest and heaviest organ, covering an average of 20 square feet. The skin's most obvious role is to shield our internal organs from the elements, but it does so much more.¹ Dermatophytes are fungi that infect keratinized tissue (skin, hair and nails) by invading and multiplying inside them.² Dermatophytes are divided into three classes based on their genera: Trichophyton (which causes infections in the skin, hair and nails), Epidermophyton (which causes infections on skin and nails), and Microsporum (which causes infections in the skin and nails). These have been categorized as anthropophilic, zoophilic, or geophilic based on their mode of transmission. Finally, based on the individuals that have been impacted.³ The time of incubation is 1-3 weeks.⁴ Tinea corporis appears as a well defined, sharply circumscribed, oval or circular, slightly erythematous, scaly patch or plaque with a raised leading edge in the majority of cases.⁵ The lesion begins as a flat scaly spot that spreads centrifugally and clears centrally to form a distinctive annular lesion, hence the name "ringworm". When the active boundary moves outward, the central region becomes hypopigmented or brown, and less scaly. Often the borders are seen annular and irregular.⁶ Multiple lesions can coalesce into polycyclic patterns.⁷ *Dadrukushtha* (Tinea corporis) is one of the *Kshudrakushtha* (minor skin disease) having *Lakshanas* (symptoms) like *Kandu* (itching), *AtasipushpalikePidika*, *Varna* with *Mandal* (patches), *Unnata Mandala* (raised borders), *Dirghapratana* (macular rashes), *Tamra Varna Pidika* (copper coloured macular rashes).⁸

Due to vitiation of *Sapta Dhatus* (seven tissue) like three *Doshas* (bodily elements), *Twak*(skin), *Rakta*(blood), *Mamsa* (muscles) and *Lasika* (blood vessels) for manifestation of *Kushta*.⁹ So in present case, *DadruKushta* is managed by *Shamana Aushadhi*.

Case Report-

A 27- year male patient came with complaints of blackish lesions with raised borders and itching over the chest and back (upper)region for 15 days and having disturbed sleep because of itching.

Brief history of the patient-

Patient was symptomless before 15 days, after that he started complaining of multiple blackish lesions with raised borders and itching over chest and back, gradually it increased and spread over chest and back (upper)region. Patient approached to Dr.VandanataiJagannathraoDhone Gramin Ayurved Mahavidyalaya, Patur, Akola for ayurvedic management after examination he was advised for *ShamanaChikitsa*.

Patient had no significant past history. Sleep was disturbed due to itching. On examination vitals were within normal limits.

Personal History-

Ahar (diet) – Mixed (Veg-Non veg)

Nidra (sleep) – Disturbed sleep due to itching

Vyasan (habits) – no habit

Occupation – Farmer

AshtavidhaPariksha:

1. *Nadi* – 74/min
2. *Mala* – *Saam*
3. *Mutra* – *Samyak*
4. *Jivha*– *Saam*
5. *Shabda* – *Spashta*
6. *Sparsha* – *khara*
7. *Druka* – *Prakruta*
8. *Akruti* – *Madhyam*

Agni (digestive fire) = *Agnimandya*

Bala = *Madhyam*

Raktadaaba(B.P) = 130/80 mm/Hg.

Skin Examination:

1. Inspection:
 - Size shape – annular lesions
 - Color – blackish lesions
 - Lesions –scaly patch
2. Palpation:
 - Moisture – dryness
 - Temperature – warmth of the skin
 - Texture – rough

Laboratory Investigation:

Blood routine – Normal

Rest other system findings was normal.

Samprapti Ghataka¹⁰

- *Dosha* – Tridosha
- *Dushya* – *Twaka, Rakta, Mamsa, Lasika*
- *Ama* (undigested food particle) – *Jatharagnijanya Ama*
- *Agni* (digestive fire) – *Jatharagni*
- *Srotas*(inner transport system of the body) – *Rasavaha, Raktavaha*
- *Srotodushtiprakara* – *Sanga*
- *Rogmarga*(path of disease) – *Bahya*
- *Udhbhavasthana*(site of location) – *Amashaya*
- *Vyaktasthana* – *Twacha*
- *Rogaswabhaba* – *Chirakari*
- *Sadhyasadhyaata* – *Sadhya*

Materials and Methods:

Treatment Plan given: *ShamanaChikitsa* was given. In *ShamanaChikitsa* (Pacifying treatment) 15 days comprising *GandhakRasayana*, *PanchatiktaGhrita* which is to be given orally and *Fungiwin* cream, *Karanja Taila* and S-kin powder with *Gomutra* for local application (**Table no.1**). After 15 days patient was called for followup. All medicines were continued except *Gandhakrasayan*, it was temporarily stopped for period of 7 days. After 7 days, the patient was asked to continue *GandhakRasayan* for another 15 days with other medicines.

Table no. 1. Shamana Aushadhi and Bahir-parimarjanaChikitsa:

Sr.no	Medicine	Dose	Anupana	Route
1.	<i>GandhakRasayana</i>	500mg BD	Lukewarm Water	Orally
2.	<i>PanchatiktaGhrita</i>	10 mlBD	Lukewarm Water	Orally
3.	<i>Karanja Oil</i>	3 times a day	-----	Local application
4.	<i>Fungiwin Cream</i>	Two times a day	-----	Local application
5.	S-kin Powder	Apply it before bath	<i>Gomutra</i>	Local application

Observation:

Table no. 2- Showing gradation

Sr.no	Gradations	Grade 0	Grade 1	Grade 2	Grade 3
1.	<i>Utsanna mandala</i>	Absent	Mild elevated lesion	Moderate elevated lesion	Severe elevated lesion
2.	<i>Pidikas</i>	Absent	1-3 eruptions	4-7 eruptions	>7 eruptions
3.	<i>Kandu</i>	Absent	Mild or occasional itching	Moderate or frequent itching	Severe itching

Table no.3- Assessment done before, during and after treatment.

Gradation	Day 0	Day 15	Day 45
<i>Utsanna mandala</i>	2	1	0
<i>Pidika</i>	3	2	0
<i>Kandu</i>	3	2	0

Result:

Tinea corporis is a dermatophyte infection that causes either inflammatory or non inflammatory lesions on glabrous skin. After 15 days treatment, symptoms subsided in patient but there were still some annular lesions present hence *ShamanaChikitsa* was continued except *GandhakRasayan* with the gap of 7 days. After completion of *ShamanaChikitsa* patient was symptomatically improved and relieved.



Discussion:

In Ayurveda, *Kushtha* is the term used to denote different varieties of skin diseases which includes all major skin manifestations including Tinea. The symptomatic manifestation of tinea corporis resembles that of “*DadruKushtha*” mentioned in Ayurvedic Samhita. This skin condition adversely affect one’s own quality of life. Ayurveda offers a viable medication for Tinea corporis.

Mode of action of *GandhakRasayan*:

GandhakRasayan is primarily used in the treatment of *KushthaRoga*. It has antibacterial and antifungal properties. It primarily affects *Rakta Dhatu*, causing *Raktashodhana* (purification of blood). Its antifungal property aids in the reduction of infection. It also performs the role of *Rasayana*. Its *RaktaShodhaka*, *Vranaropak*, *Krumighna* and *Kushthagha* properties reduce the *Kandu*, *Pidika*, *Raaga* and *Daaha*.¹¹

Mode of action of *PanchatiktaGhrita*:

Ghrita is recommended in *KushthaChikitsa* in *Samhitas*. *Vata -Pitta Shamaka* and *Tvachya* (improves complexion) properties of *PanchatiktaGhrita* helps to alleviate *Kushthagha* (skin disease).¹²

Mode of action of *Karanja oil*:

Karanja oil is mentioned in *VisarpaChikitsa* in *BhaishajyaRatnavali*. It consists of *Krumighna* (antifungal and antibacterial activities), *Kandughana*, *Vranaropaka* and *Vranashodhaka* properties. It helps in reduction of the symptoms. Local application is beneficial for fast absorption and in reduction of roughness.¹³

Mode of action S-kin Powder:

Ingredients of this powder have *Krumighna* (antibacterial, antifungal and antimicrobial), *Raktashodhaka* (blood purifying) and *Vranaropak* (wound healing) properties. The powder is mixed with *Gomutra* before its application because *Gomutra* acts as an enhancer in absorption.

Conclusion:

On the basis of sign and symptoms, Tinea corporis can be correlated with *DadruKushtha*. In *Kushtharoga*, according to the severity of *Roga*, *Chikitsa* is planned. In *Alpadoshaavastha* (less severe) *ShamanaChikitsa* is given.

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