



INTERNATIONAL JOURNAL OF CREATIVE RESEARCH THOUGHTS (IJCRT)

An International Open Access, Peer-reviewed, Refereed Journal

“A COMPARATIVE CLINICAL STUDY ON THE COMBINED EFFECT OF VIRECHANA ALONG WITH LODHRADILEPA AND VIRECHANA ALONG WITH VACHADILEPA IN THE MANAGEMENT OF YUVANAPIDIKA W.S.R TO ACNE VULGARIS”

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ABSTRACT

Yuvanapidika is one among those diseases in adolescent age which occurs in the golden period of life and then may affect the self esteem of particular affected individual. Taking in account, the signs and symptoms of *Yauvan Pidika*, it can be taken as “Acne vulgaris” according to modern view. Vitiating of *Vata* and *Kapha dosha* along with *Rakta dhatu* is seen in *Yauvan Pidika*. In the present study the efficacy of Virechana with Lodhradi Lepa is compared with Virechana with Vachadi Lepa in the management of Yuvanapidika. It was a comparative clinical study wherein 40 patients were selected and divided into two Groups namely, Group A, and Group B each consisting of 20 patients. Group A was treated with Virechana along with Lodhradi Lepa. Group B was treated with Virechana along with Vachadi Lepa. Treatment procedure for 16 days each was followed, Follow up was done on 16th day and 48th day of the course. For the assessment of the results grading of 1st day, 16th day and 48th day was used. Vedana, Daaha and Kandu were the subjective parameters. Objective parameters were Pidaka, Medogarbha Pidaka, Ghana Pidaka, Ruja and IGA. These were suitably graded to assess the results based on the clinical observations. Statistical tests were applied to analyze the results. It was observed in the present study that both the groups are having equal effect

with p value >0.05 . However Group B Virechana along with Vachadi Lepa showed better results compared to Group A Virechana along with Lodhradi Lepa. But statistically both the Groups have shown significant result in the management of Yuvanapidika.

Keywords: Yuvanapidika, Lodhradi Lepa, Vachadi Lepa, Virechana, Acne Vulgaris

INTRODUCTION:

Yuvanapidika or Mukadushika is one among those diseases in adolescent age which occurs in the golden period of life and then may affect the self esteem of particular affected individual. *Acharya Sushruta* has mentioned whole group of such disease of the skin which have an adverse effect on the appearance and personality of an individual, under the heading of “*Kshudra Roga*”. “*Yauvan Pidika*” is one of them.

Taking in account, the signs and symptoms of *Yauvan Pidika*, it can be taken as “Acne vulgaris” according to modern view. Vitiating of *Vata* and *Kapha dosha* along with *Rakta dhatu* is seen in *Yauvan Pidika*.

Due to changes in life style, sedentary life, and food habits, people are unable to follow *Dinacharya* and *Ritucharya* which may lead to diseases. Acne vulgaris is one of the most common dermatosis, which develop at puberty and young age, which are the wonder years of an individual's life and when they are more conscious about the beauty. It leads to unattractive look and permanent disfigurement of the face, which may result in inferiority complex and sometimes isolation in the social life.

Acne ranked 8th in the list of most prevalent diseases in the world with global prevalence of 645 million by the end of 2026. The number of people affected by acne in India is estimated to reach 23 millions. Females are more prone to acne as compared to males in India. Change in annual year of healthy life lost since 1990 to 2013 due to acne is 0.2 percent ¹.

Since more and more young adults are being affected by Acne and prevalence of the disease is increasing and also limited treatment methods are available in other contemporary medical sciences, it is best to administer Ayurvedic treatment which is not only therapeutic but also for the well being of human.

There are two types of *chikitsa* described in *Ayurveda* i.e *samshodhana* and *samshamana chikitsa*. So here in this study an attempt is made to evaluate the efficacy of Virechana (as *samshodhana chikitsa*) and lepa as (*samshamana chikitsa*). *Panchakarma* is a unique therapeutic procedure and Virechana being one among them is applicable for most of the skin diseases. Virechana in skin disease is mentioned in *Charaka Samhita*², *Sushruta Samhita*³, *Ashtanga sangraha*⁴, *Ashtanga hrudaya*⁵. The drug used for Virechana here in the study is *TrivritaLehya*⁶. The Lepas used in this study are *Lodhradilepa*⁷ and *Vachadilepa*⁸.

OBJECTIVE:

- To evaluate the efficacy of Virechana along with Lodhradilepa in Yuvanapidiaka.
- To evaluate the efficacy of Virechana along with Vachadilepa in Yuvanapidiaka.
- To compare the combined effect of Virechana along with Lodhradilepa and Vachadilepa in the management of Yuvanapidiaka.

MATERIALS AND METHODS:**Drugs:**

- Trivrit lehya
- Lodhradi Lepa Churna
- Vachadi Lepa Churna

Study Design: A comprehensive, comparative clinical study.

Sample:

40 patients (2 groups of 20 each) with clinical lakshanas of Yuvanapidiaka fulfilling the diagnostic criteria and inclusion criteria were selected for clinical study.

GROUP	TREATMENT	Duration	Follow Up	Total Duration	Study
A	Virechana with Trivritalehya and Lodhradilepa application	16 days	32 days	48 days	
B	Virechana with Trivritalehya and Vachadilepa application	16 days	32 days	48 days	

SELECTION CRITERIA: The cases are selected as per classical lakshana of Yuvanapidiaka.

(a) Diagnostic Criteria :

- 1) PITIKA- eruption.
- 2) Saruja- painful
- 3) Ghana- solid
- 4) Medogarbha- filled with meda.

(b) Inclusion Criteria:

- 1) Patients having the classical lakshana of Yuvanapidiaka like Pitika, Saruja, Ghana and Medhogarbha are taken.

2) Patients of both the genders who are Virechana yogyas according to Ayurveda classics.

3) Patients are selected irrespective of occupation and socio economic status.

4) Patient in between 16 to 25 years of age.

(c) Exclusion Criteria:

1) Patients who are Virechana ayogya according to ayurvedic classics.

2) Patients with the association of other systemic disorders such as Diabetes, any kind of fever, Pregnant ladies and lactating ladies.

INTERVENTION:

- In Group A Virechana with Trivritalehya is administered and Lodhradilepa is applied from day 1 to day 16.
- In Group B Virechana with Trivritalehya is administered and Vachadilepa is applied from day 1 to day 16.

1. LEPA (Lodhradi Lepa and Vachadi Lepa)

PURVA KARMA-

The required quantity lepa powder is mixed with sufficient quantity of milk and applied on the face after the wash.

PRADHAN KARMA-

After cleaning face paste the powder on affected area and leave it up to drying of the paste.

PASCHAT KARMA-

After drying of powder remove the paste with water. And repeat this daily up to onemonth.

2. VIRECHANA

PURVA KARMA: The preparatory procedure was performed before the main therapy which includes:

(1) Snehapana, oral administration of Murchitghrita for 3 to 7 days as per the kosta (nature of bowel) till samyak snigdha lakshana are seen (patient achieves the features of adequate oleation)

(2) This was followed by 3 days of visharamakaala in which abhyanga with Murchita taila and Mrudusweda were administered.

(3) On the previous day of Virechana, laghuahara, phalamla and ushnodaka was given.

PRADHANA KARMA: 4th Day of Virechana was administered.

SAMSARJANA KARMA: After the procedure of Virechanakarma , the samsarjana krama or specific diet indications were advised to follow.

This consists of peya (thick rice water), vilepi yusha (thick gruel), mamsarasa, Laghu(light), ahara and ushna qualities.

METHOD OF ASSESSMENT OF TREATMENT:

Assessment was made on the basis of improvement in signs and symptoms for which suitable scores were assigned. Then the data were analyzed statistically.

1) Subjective criteria: vedana (painful), kandu(itching), daha (burning).

2) Objective criteria: pidika formation and srava (oozing of sebum and blood) with gradings.

IGA Scale (Investigators Global Assessment scale) as referred by <http://www.medscape.com>

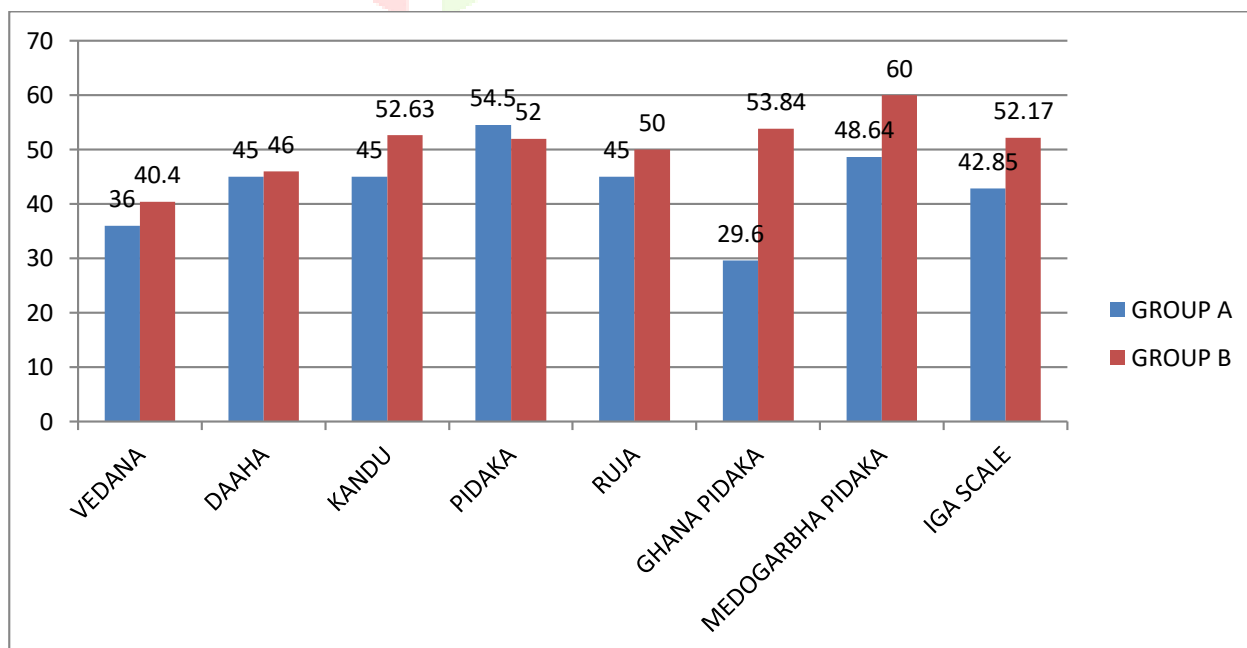
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0	Clear residual hyper pigmentation and erythema may be seen.
1	Almost clear, A few scattered comedones and a few small papules.
2	Mild easily recognizable less than half the face is involved. some comedones and some papules and pustules.
3	Moderate more than half the face is involved. Many comedones, papules and pustules.
4	Severe, entire face is involved, covered with comedones, numerous papules and pustules.

assessment of the result was done based on the data collected on 1st day (BT) and 48th day (AF) of the treatment course.

RESULTS:

PARAMETER	GROUP	Mean (BT-AF)	% of improvement	SD	T-Value	P-Value	Remarks
Vedana	A	0.8	35.5	0.523	1.14	>0.05	NS
	B	0.95	40.4	0.223			
Daaha	A	0.8	45.71	0.52	1.16	>0.05	NS
	B	1	45.94	0.45			
Kandu	A	0.65	44.82	0.48	1.92	>0.05	NS
	B	1	52.63	0.56			
Pidaka	A	0.9	54.5	0.64	2.04	>0.05	NS
	B	1.2	52.17	0.41			
Ruja	A	0.95	45.23	0.60	0.718	>0.05	NS
	B	1.1	50	0.55			
Ghana Pidaka	A	0.35	29.6	0.48	2.10	<0.05	S
	B	0.7	53.84	0.47			
Medogarbha Pidaka	A	0.9	48.64	0.71	0.90	>0.05	NS
	B	1.05	60	0.39			
IGA Scale	A	0.9	42.85	0.78	1.67	>0.05	NS
	B	1.2	52.17	0.61			



For comparison between Group A and Group B, Un paired t test was used. From above table we can observe that P-Values for all parameters are more than 0.05 except for Ghana Pidaka. Hence we conclude that statistically there is no significant difference between Group A and Group B in the management of Yuvanapidika.

Further we can observe that Average percentage of improvement of Group B is 47.46% which is greater than Average percentage of improvement of Group A- 40.12%. Hence we conclude that effect observed in Group B is more than Group A.

DISCUSSION:

The role of Lepa has its own significance in the treatment of Kshudra rogas. In all most all Kshudra rogas, first Lepa yogas are mentioned. In treatment of Yuvanapidika, Acharya Vagbhata has mentioned that first Lepa yogas has to be administered, if it does not get subsided then one has to go for Shodhana like Virechana, Nasya. If then also it does not get subsided then one has to go for Rakthamokshana.

In the study, Lodhradi Lepa and Vachadi lepa were taken. The patients were advised to apply a thin paste of lepa at morning time once a day and two to three times in severe conditions also advised to remove the lepa when it is still shushka.

PROBABLE MODE OF ACTION OF LEPA

The Lodhradi Lepa comprises of Lodhra, Vacha and Dhaniya. The yuvanapidika occurs mainly due to vitiation of Kapha, vata and Rakta doshas, it is understood that the drugs should possess the Kapha Vatahara and Pitta (Rakta) Shamaka effect.

The Shita Viryatva of Lodhra is subside the aggravation of Rakta and Pitta. Vacha and Dhanyaka are having Ushna Virya property to counteract the aggravation of Vata and Kapha. Moreover, Dhanyaka is Tridosha Shamaka, Shothahara, and Shulahara properties, Vacha have Kapha Vata Shamaka, Lekhana and Swedajanana properties along with Vedana Sthapaka and Shothahara. Lodhra has Kapha Pittahara, Shothahara, Kushthaghna, Ropana, Rakta Stambhaka and Srava Stambhka properties and the Shotha hara and Vedana sthapana action of almost all the drugs proved beneficial in swelling and pain. Srotoshodhana is done by Vacha by its Lekhana property, while drying up vitiated Kapha, Whereas Vrana Ropana and Vrana Prakshalana property of Lodhra. If rakta has stagnated to avoid pus formation lepa is beneficial, and lepa brings it back to normal color it relive from daha, toda and kandu. Lepa does prahladana, sodhan, sothaharan, utsadana, and ropana of vrana. Thus all this joint action of the drugs ceases the production of pimples and subside the production of further pimples at the site.

CONCLUSION:

- In the present study, Virechana along with Lodhradilepa and Virechana along with Vachadilepa both the groups are having significant result in managing the Yuvanapidika with p value < 0.05.
- Statistically there is no significant difference in the mean effect of Group A Virechana along with Lodhradilepa and Group B Virechana along with Vachadilepa in the management of Yuvanapidika with p value >0.05 in all the assessment parameters except Ghana pidaka.
- Comparatively, Virechana along with Vachadi Lepa (Group B) (overall effect 47.46%) has shown better results than Virechana along with Lodhradi Lepa (Group A) (overall effect 40.12%).

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