A Clinical study of *Amaritadi ghanvati* and *vishghan Lepa* in *Dushivishjanya vikaar* w.s.r. to allergic skin diseases

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Abstract

Life of modern man is far removed from the rules of nature. In fact, there has been a drastic change in his day to day activities including his life style, food habits, sexual life, medication and environment due to pollution. Nowadays skin diseases are very common. Skin is the first organ of the body interacting with the environmental agents like physical, chemical & biological agents. Variations in the environmental stimuli & natural ability of body to deal with these factors result in spontaneous remissions & relapses Ayurveda have described 'Kustha', which are further divided into Maha Kustha & Kshudra Kustha. There is no direct reference of allergy as such in classical ayurvedic literature, but Ayurveda has explained various types of diseases or symptoms (Asatmaya, Viruddha and dushivisha) that are similar to allergy. Altered immune response or ojovyapad finds intrinsic and extrinsic causes in Ayurveda. The concept of Dushivisha with special reference to allergic skin disorders are clearly mentioned in Charaka Samhita, Sushruta Samhita and other ancient ayurvedic texts. Some of the skin problems caused by Dushivisha, which are described in Samhitas are kustha, visharpa, bhinna varna (discoloration of skin), shonit dushti (Ch. Chi. 23/31), shitapitta, udarda and kotha. The present work was under taken with the objective to study the effect of Amaritadi ghanvati and vishghan Lepa in skin disorders, and to assess the efficacy of the prepared drug in curing the disease.

Keywords: Dushivisha, Kustha

Introduction

Due to deteriorating environment and use of intoxicating beverages, canned food, irregular eating and sleeping habits, usage of various synthetic drugs have taken modern man to a world, where immunity is declining day after day and many diseases are evolving. The pesticide residues in fruits and vegetables, adulterated food products, polished rice and pulses have added to the health concerns. The immune system declines when the body is formed of unwholesome (toxic) substances (*dushivisha*) and then the body attempts to eliminate these toxins. One of the routes of elimination of the unwanted product is the skin, so manifestation of skin disease occurs. The patients always experiences physical, emotional & socio-economic embarrassment in the society. Normally 10 - 15% of the General Practitioners works with skin disorders (Roxburgh's Common Skin Diseases) & it is the second commonest cause of loss of work. Majority of the skin diseases in *Ayurveda* have been described under the broad heading of '*Kustha*', which are further divided into *Maha Kustha* & *Kshudra Kustha*.

There is no direct reference of allergy as such in classical ayurvedic literature, but Ayurveda has explained various types of diseases or symptoms (*Asatmaya*, *Viruddha* and *dushivisha*) that are similar to allergy .Altered immune response or *ojovyapad* finds intrinsic and extrinsic causes in Ayurveda. One among is *dushivisha*. The references regarding *dushivisha* point out that it can generate similar harmful effects as

that of hypersensitivity reactions. ^^dkykUrjizdksfi fo"ka nw"khfo"ke~A**Ch.Su 21/45) Indicates the latent or subclinical allergy.

While the reference ; **[fi u izk.kgja rFkkfi cgqnks"kdje~ A (Ch.Chi. 23/140)** is indication of the harmful effects it can impart on the body. The peculiarity of *dushivisha* is that it remains latent in *dhatus* (tissues) and on vitiation it produces hazardous consequences on the body. Only *upasaya* and *anupasaya* can perceive this subclinical disease. Allergic disorder of the skin, which is very common, characterized by itchy red rashes, burning sensation, eruptive red rashes on skin on almost all over the body. *Shitapitta-Udarda-Kotha* is having similar symptomatology and causative factors as Urticaria. So, various types of 'Urticaria' can be taken as *Twak vikaara (Shitapitta-Udarda-Kotha)*. Though the disease, 'Urticaria' is not life threatening, it makes the patient worried due to its appearance, severe itching disturbing routine and its nature susceptible to be chronic. Urticaria affects 20% of people at some point in their lifetime. In some cases, the disorder is relatively mild, recurrent and frustrating for both the patient and the physician². In other cases, it manifests as part of a spectrum of systemic anaphylaxis, which may be life threatening. The disability and distress caused by skin disorders can lead to serious impairment of quality of life, almost comparable to that experienced by patients with cardiovascular disease. To further complicate the issue, a fairly extensive list of diseases can cause Urticaria. Patients often see medical attention with the hope that a reversible cause can be identified.

Therefore, the challenge for the physician is to try to identify a cause that could lead to a specific treatment or avoidance strategy. A carefully taken history, blood tests, cutaneous punch biopsy, and allergy skin testing may provide the clues to specific mechanisms in some cases. Often, however, it is impossible to pinpoint the exact cause. Modern medicine not having any remedy for permanent cure but remission of the disease can be achieved administering the medicine. Patients have to take those medicines for lifetime, which are having some unwanted side effects. Ayurveda can provide better and permanent management for 'Shitapitta'.

Need of Study

There are so many internal and external patent Ayurvedic drugs are available in market but still allergic skin diseases are not ended. Most of ingredients of *Amritadi ghanvati* having *raktshodhak* property *,dipan,pachan, krimighan, shothhar ,tridoshghan and immunomodulator properties*, along with *Vatasnabh* which *is vyavahi and vikasi* in nature which will be help to increase the action of drugs. As we know that if we use poison in control and proper way, we get its medicinal effects as said in Charak Samhita. The ingredients of *Vishghan lepa* are belonging to *mahakashya* of *Charak Samhita* having antitoxic effects along with *raktpittshamak ,tvachaya, krimighan ,kanduhar,udardprashman*, properties. Hence, these two Ayurvedic preparations are taken for clinical trial

The ingredients of *Vishghanlepa* are belonging to *mahakashya* of *Charak Samhita* having antitoxic effects along with *raktpittshamak* ,*tvachaya*, *krimighan* ,*kanduhar*,*udardprashman*, properties. Hence, these two Ayurvedic preparations are taken for clinical trial.

Material and method

A randomized clinical trial was conducted from January to april 2017. This paper highlights only the effect of these two drugs on 15 patients suffering from urticaria and after taking consent they were treated with these two medicines. Original grading scale as done to score the intensity of cardinal symptoms like itching redness, inflammation, burning sensation, toda, **Photosensitivity wheal formation**) scaly rashes.

Patients, their profile, the drug prepared in pharmacy would be the basic parameters of study. Methods of study will be adopted as in Rasa shastra Pharmacy and Rog Nidan department generally used for drug preparation and disease diagnosis. For study both males and females of all age groups would be selected.

Drug Profile a) *AMARITADI GHANAVATI* ³

The drug has been taken from "Sahestrayog

S.No.	Common name	Botanical name	Quantity			
1.	Amrita	Tinosporia cordifolia	1 part			
2.	Vish	Acotinum ferox	1 part			
3.	Patol	Trichosanthus dioica	1 part			
4.	Mustak	Cyperus rotundus	1 part			
5.	Saptparn	Alstonia scholaris	1 part			
6.	Khadir	Acacia catechu	1 part			
7.	Nimb Patra	Azadir <mark>achta in</mark> dica	1 part			
8.	Haridra	Curc <mark>uma long</mark> a	1 part			
9.	Daruharidra	Berberis aristata	1 part			

Dose of Amritaadi ghanvati=250mg BD

Route of admistration=Oral

Duration of treatment=60 days

b) Contents of "vishghan lep4" is clearly mentioned in charaksamhita sutra 4/16

S.No	Common name	Botanical name	Quantity
1.	Hardira	Curcoma longa	1 part
2.	Manjistha	Rubia cordifolia	1 part
3.	Subaha	Pluchea lanceolata	1 part
4.	Choti ela	Elettaria cardamomum	1 part
5.	Palindi(kalanishoth)	Operculina turpethem	1 part
6.	Chandan	Santalum album	1 part
7.	Katak	Strychnos potatorum	1 part
8.	Shirish	Allibizia lebbeck	1 part
9	Nirgundi	Vitex nigundo	1 part
10.	Lisoda	Cordia dichotoma	1 part

Dose=As per required

Route=External application

Duration=60 days

a)Diagnostic Criteria

- -History of long term ingestion of food having cumulative material in non-lethal dose.
- -History of exacergation of allergic skin diseases due to seasonal variations.
- -Patients having habit of sleep during day time.
- -Patients having clinical manifestations like itching, rashes, redness, Urticaria.

B)Inclusion criteria

- 1 Age groups of 16 70 years, either sex would be considered.
- 2. All patients of *dushivishjanit* allergic skin eruptive disorders with clinical features like itching ,urticaria, rashes will be included for this clinical trial.

c)Exclusion criteria

Following patients will not be considered

- 1. Patients of carcinoma, burns, Herpes, Eczema, Psoriasis, measles and chickenpox, leucoderma and leprosy
- 2. Patients having major illness like IHD, HTN, MI, TB, COPD, DM would be excluded from trial.
- 3. Patients having systemic pathogenesis due to allergy.

TABLE NO.1: SHOWING EFFECT OF THERAPY ON SUBJECTIVE PARAMETERS. (WILCOXON MATCHED PAIRS SINGLE RANKED TEST)

Chief Complaints	Mean		Mean	Relief	S.D.	S.E.	P	S
	BT	AT	diff.	%	±	±		
Itching	2.33	1.06	1.27	54.5%	0.9612	0.2482	0.0001	HS
Redness	1.6	0.4	1.28	75.1%	0.9904	0.2557	0.0010	HS
Daha	1.93	1.13	0.8	41.4%	0.8619	0.2225	0.0020	VS
Inflammation	1.21	0.73	0.47	39.1%	0.6399	0.1652	0.0156	S
Nodule formation	1.2	0.46	0.74	61.6%	0.5071	0.1309	0.0020	VS
Photosensitivity	1.13	0.86	0.27	23.8%	0.7988	0.2063	0.1464	NS

Scaly rashes	1.20	0.6	0.6	50%	0.6325	0.1633	0.0068	S
Hyperpigmentation	2.2	1.33	0.87	39.5%	0.3519	0.0908	0.0001	HS
Wheal formations	1.73	1.06	0.67	38.7%	0.4880	0.1268	0.0010	VS
Shonit dusti lakshan	2.13	1.8	0.33	15.4%	0.6172	0.1594	0.054	NS
Toda	0.93	0.6	0.33	35.4%	0.4880	0.1260	0.013	S

RESULTS

Observations were made before and after completion of treatment. Study showed following results

Effect of Therapy on Itching score Mean Score before treatment was 2.33 which lowered down to 1.06 after treatment, with SD± 0.96 giving a relief of 54.5% which was highly significant.(p =0.0001).Effect of Therapy on Redness score. Mean Score before treatment was 1.6 which lowered down to 0.4after treatment, with SD±0.99 giving a relief of 75.1% which was statistically highly significant.(p =0.001) Effect of Therapy on *DAHA* score Mean Score before treatment was 1.93 which lowered down to 1.13 after treatment, with SD±0.861 giving a relief of 41.4% which was statistically very significant. (p = 0.0020) Effect of Therapy on Inflammation score.Mean Score before treatment was 1.21 which lowered down to 0.73 after treatment, with SD±0.63 giving a relief of 39.1% which was statistically significant. (p =0.01) Effect of Therapy on Nodule formation score.Mean Score before treatment was 1.2 which lowered down to 0.46after treatment, with SD±0.50 giving a relief of 61.6% which was statistically very significant. (p = 0.002). Effect of Therapy on Photosensitivity score. Mean Score before treatment was 1.13 which lowered down to 0.86 after treatment, with SD±0.79 giving a relief of 23.8% which was statistically not significant. (p = 0.146) Effect of Therapy on Scaly rashes score. mean Score before treatment was 1.20 which lowered down to 0.6 after treatment, with SD± 0.638 giving a relief of 50% which was statistically significant. (p = 0.0068)

Effect of Therapy on Hyperpigmentation score, mean Score before treatment was 2.2 which lowered down to 1.33 after treatment, with SD \pm 0.35giving a relief of 39.5% which was statistically highly significant. (p = 0.0001) Effect of Therapy on Wheal formations mean Score before treatment was 1.73 which lowered down to 1.06 after treatment, with SD \pm 0.488 giving a relief of 38.7% which was statistically very significant. (p =0.0010) Effect of Therapy on *Shonit dusti lakshan* mean Score before treatment was 2.13 which lowered down to 1.8 after treatment, with SD \pm 0.61 giving a relief of 15.4% which was statistically non significant. (p =0.05) Effect of Therapy on *Toda* the mean Score before treatment was 0.93 which lowered down to 0.6 after treatment, with SD \pm 0.48 giving a relief of 35.4% which was statistically significant. (p = 0.013)

DISCUSSION

PROBABLE MODES OF ACTIONS OF THE DRUG:-

Amaritadi ghan vati-

Considering all above things in mind trial drug Amaritadi ghanvati Sahestrayog pratham prakran -3 was selected for this study. In the original form yoga is described as a ghanvati-kalpana was prepared by the method mentioned in Sharangdhara Samhita, was made in Rasayanshala, Rasashastra Dept., National Institute of Ayurveda, Jaipur. There are so many internal and external patent Ayurvedic drugs are available in market but still allergic skin diseases are not ended. Most of ingredients of Amaritadi ghanvati having raktshodhak property, dipan, pachan, krimighan, shothhar tridoshghan and immunomodulator properties, along with Vatasnabh which is vyavahi and vikasi in nature which helps to increase the action of drugs and also having rasavan property. As we know that if we use poison in control and proper way, we get its medicinal effects as said in Charak Samhita. Amaritadi ghan vati containing Amrita, Vish, Patol, Mustak, Saptparn, Khadir, Nimb Patra, Haridra, Daruharidra. These all drugs had mostly Katu, Tikta, Kashaya Rasa as well as Laghu Ruksha Guna which acted on vitiated tridosh especially kaph pitta as allergic skin disease has tridosh predominant vyadhi, so drug works as Doshapratyanika Chikitsa. Drug amrita, patola, haridra, nimb, khadir,act as Kushthghna,vishghan i.e. Vyadhipratyanika Chikitsa. It is believed that it must have anti-toxic activity and having curative effect on skin ailment, specially caused by Dushivisha known allergic skin disorders identified by the presence of elevated skin lesions or eruptions or visphot. For a layman it appears a small elevation as a result of Vartidansh Sadrishya shoth. As the Dushivisha has its specific effects to vitiate Shonit dhatu specially create Kandu, Shoth, Daha, Todaa etc. by its effects. So they also providing support to Dushivisha also situated, collected, manifested in the body system silently and waiting for further support, therefore by nature it is called Vishagunanubandhi. By the combined effect of Virudhahar, Ahitahar, Apathya, Dhatusaithilya, Dhatuvaigunya, Dosh prakopa and Utklesh Srotodaaushti and Manodushti occur respectively and prepare a suitable climate inside the *dhatu* where dosha with the help of *Dushivisha* and garvisha already create Shitpitta, udarda, koth, etc. which are basically common eruptive disorders. As described by Acharya Charak in Sutrasthana 26 TiktaRasa has the property of Deepana and Pachana and thus it helps in Amapachana formed due to Nidanasevana. Tikta Rasa the property of Raktaprasadana, Vishaghna, Kushthaghna, Kandughna dahaprashamana. It also has Kaphaghna property. Thus through these properties acts on disease. Also Katu Rasa possesses Deepana and Pachana properties through which it acts at level of Agni Other properties of Katu Rasa described by Acharya Charaka are Vishaghna, Kandughna, Krimighna and Vranaprasadana. As regards to Veerya, majority of the drugs have UshnaVirya. Ushna Veerya has Vatakaphashamaka property and it has Ashupaka property by which it acts quickly at micro channels. Looking to the Karmas, it is clear that almost all the drugs are having Kushthaghna, Kandughna, Raktashodhak, Twagdoshaahara, Krimighna, Vishaghna and Rasayana properties, which clearly explain its mode of action in skin diseases. It also helped in removing the effect of Virudhahar, Ahitahar by providing strength to Agni and treated agnimandaya by the use of deepana drugs like guduchi and mustaka.

Vishghan lepa

The ingredients of *Vishghan lepa* belongs to *mahakashaya* of *Charak Samhita* having antitoxic effects along with *raktpittshamak* ,*tvachaya*, *krimighan* ,*kanduhar*,*udardprashman*, properties.It contains *Hardira*, *Manjistha*, *Subaha*, *Choti ela*, *Palindi*(*kalanishoth*), *Chandan*, *Katak*, *Shirish*, *Nirgundi*, *Lisoda* having antitoxic property by virtue of which it is very useful in skin diseases caused due to any toxic effect.Most of drugs in *lepa* have *tikta*, *kashya ras*, *sheet veerya*, and *kaphpittaahara* property as whole. All these factors suggest the anti-inflammatory action of formulation as they help in detoxification of blood. These drugs possess various medicinal properties and hence used in the treatment of various disorders

especially skin disorders. In Ayurveda, allergic manifestation is mentioned under the concept of satmaya-asatmaya. It manifests due to exposure to asatmaya aahara-vihara and contact with different poisonous materials. In modern, allergy is type of hypersensitivity reaction based on the immune system of body. In modern, allergy is type of hypersensitivity reaction based on the immune system of body. Various drugs of vishghan mahakashaya like haridra acted as natural detoxifier (vishodhni), krimihar and antihistaminic properties, and also must worked as antiseptic. It must have antitoxic effect. Manjistha and Chandan acted as blood purifier anti toxic and helped in curing skin diseases by counteract the adverse effect of vish. Chandna also must worked by its coolant effect. Suvaha had tremendous effect on skin diseases due to its raktshodhak and vishghan property. Ela worked by relieving burning sensation .Pallindee helps in reducing the pruritis caused due to allergy and also works as anti-inflammatory and also by its shodhana property Shireesha acts as kandughna and reduces the allergy and has varnya property. Sindhuvaar(nirgundi) has kandughna property due to which it counteracts the allergy caused due to vish. The ingredients of Vishghan mahakashya of Charak Samhita having antitoxic effects along with raktpittshamak, tvachaya, krimighan, kanduhar, udardprashman, properties. Thus all the ingredients of vishghan mahakashaya worked together in reducing the adverse effect of skin allergy caused due to vish.

LIMITATIONS OF THE STUDY

The sample size was very small (for many symptoms there were just one patient each) to conclude the results statistically. Also, the present study was conducted during limited period of time. The facilities and techniques available to evaluate allergic skin disorders need to be upgraded. A collaborative research effort of different departments could provide better results.

CONCLUSION

In the present research work on the basis of facts, observations and results of drugs and clinical studies, the following can be concluded .Dushivisha is a distinctive concept of Ayurveda which can be one of the causative factors for twak vikaras. Dushivisha, because of its mild toxicity, generates diseases after a long period as most of the patients have chronic histories. Allergy and Concept of Dushivisha- this is a most important and unique concept of Ayurveda which can be directly co-related with allergy which mentioned in discussion part of present study. Tridosha Prakopa, Mandagni and Rasa dushti are the main culprits in the formation of eruptive disorders of the skin. The pathology could be due to excessive intake of beverages (especially tea and coffee), sedentary life style or Virudhahara. The middle class people are most prone to skin disorders. This could be because this socio-economic class of the society is the most affected by the modern life. Sleeping during day time (divaswapna) results in agnimandya, which is the root cause of all the diseases. It also leads to vitiation of kapha and pitta. The disease is prevalent in the age group 21-30 years which is also supported by modern literature. Skin disorders were mostly found in patients of pittakapha prakriti, hence patients with dominancy of pitta kapha prakriti are more likely to be affected by skin disorders. The twak vikaras (Shitpitta, udarda kotha) in modern science clearly resemble with Urticaria. The family history of the patients has no role to play in occurrence of skin disorders. No adverse effect of the drug was found during the trial.

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