



Research Article

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ASSOCIATION OF DOOSHIVISHA IN KITIBHA KUSHTA (LICHEN PLANUS): A PREVALENCE STUDY

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ABSTRACT

Dooshivisha is the poison that vitiates the Dhatus (tissues) frequently when exposed to particular place, time, food and day sleep. This poison stays in the hidden form & is quiet difficult to distinguish, as the symptoms produced by it will be similar to any other systemic disorder. Kitibha Kushta is one among those diseases produced by Dooshivisha. In Kerala Kitibha Kushta is generally compared with Lichen planus because of its similar features. A first basic study on Dooshivisha was selected to observe the prevalence of history of Dooshivisha in Kitibha Kushta among 100 subjects during March 2006-February 2007. A semi-structured questionnaire was prepared & personal interview was done to observe whether there was any exposure to jangama (animal), sthavara (plant and metals) and kritrima (artificial) poison. Among them 11 subjects were exposed to jangama visha, all 100 to kritrimavisha and none were exposed to sthavaravisha. Chi square test was done to check the association between Dooshivisha & Kitibha Kushta. On referring Chi square table, as one degree freedom, the value of Chi Square under probability 0.05 was 3.84. The calculated Chi square value was 5.87 which are higher than the tabled value. Study was concluded that there is significant association between Dooshivisha & Kitibha Kushta.

Keywords: Dooshivisha, Kitibha Kushta, Lichen planus, Prevalence

INTRODUCTION

Agada Tantra is one among the Ashtanga of Ayurveda which deals with toxicology. In this system, toxins are mainly classified into jangam (animal), sthavara (plant and metal) and kritrima (artificial)¹ Any poison can become dooshivisha if it is subjected to time, denatured by antidotes, dried by fire, air or exposure to sunlight. Poisons those are naturally weak in potency also fall under this category². Dooshivisha are the toxins which are deposited in the body in the concealed form³. This vitiates the Dhatus (tissues) frequently when exposed to marshy land, rainy season, specific food like wine, sesame, horse gram etc and day sleep⁴. It will not kill a person due to its less potency but stays in the body for long duration due to kaphaavarana (concealed by humor kapha)⁵. If this poison stays in amashaya (upper gastro intestinal tract), it produces diseases of kapha and vaata and if it settles in pakwashaya (lower gastro intestinal tract), it results in diseases of anila and pitta. Many diseases manifests depending on the tissue in which it resides⁶, when it vitiates Rakthadhatu (blood) it produces Kitibha Kushta (lichen planus)⁷. It is one among the Kshudra Kushta (minor skin disease) which occurs due to the vitiation of vata and kaphadosha (humour)⁸. It is characterized by blackish discoloration, hard and rough skin lesion like a scar tissue⁹, Lichen planus is characterized by planar (flat-topped), purple, polygonal, pruritic, papules, and plaque. In Kerala Kitibha Kushta is generally compared with Lichen planus. Kushta (a broad term for skin diseases in Ayurveda) is a disease which persists for longer duration¹⁰ and in such condition body needs frequent cleansing and detoxification therapies¹¹. If this skin lesion becomes chronic, rough, stable, then detoxifying and anti poisonous treatment should be adopted¹². Literary review on

Lichen planus says that there is no cure for it¹³. If the prevalence of Dooshivisha is proved in Kitibha Kushta & if Dooshivisha hara Chikitsa (detoxifying treatment) is practiced then the prognosis may be better. A study on Dooshivisha in 2005 recommends doing a survey on dooshivisha¹⁴. So a descriptive study was selected to study the prevalence of history of Dooshivisha in Kitibha Kushta among 100 subjects.

MATERIALS AND METHODS

The study being the first to assess the severity of Dooshivisha & also due to feasibility only subjective parameters was included in the study to observe the prevalence of history of Dooshivisha. A semi-structured questionnaire was prepared & questions were asked to see whether there was any exposure to jangama visha that is snake, insects, spider, and scorpion. Under sthavaravisha exposure to any toxic plants / minerals was included. In kritrima visha exposure to savishadravya samyoga (combination of poisonous substances) i.e. whether the symptoms appeared after the intake of any specific food / medicine was noted. In nirvisha dravya samyoga (combination of nonpoisonous substances), viruddhahara (food incompatibility) was included.

Selection of the Subjects

Patients attending the outpatient unit of Vaidyaratnam. P.S. Varier Ayurveda College Hospital Kottakkal, who were suffering from Kitibha Kushta as per selection criteria, were selected for the study.

Inclusion Criteria

1. Patients irrespective of sex.
2. Age between 16 to 70 years.

3. Patients with classical symptoms of Kitibha Kushta i.e. blackish discoloration, itching, dryness, roughness.

Sampling: Convenient sampling
Sample Size: 100

Exclusion Criteria

1. Sushrutokta (mentioned by Sushruta) Kitibha Kushta.
2. High risk patients of any disease.
3. Pregnant lady, lactating mothers, ladies during menstruation.

Assessment Criteria: A separate proforma for Kitibha Kushta with proper grading was made based on the rating; the severity of the Kitibha Kushta was assessed. Dooshivisha was assessed for the state of mild, moderate, severe by equal distribution of rating. The Kitibha Kushta was compared with severity of Dooshivisha to search prevalence of history of Dooshivisha in Kitibha Kushta

Research Design: Descriptive study

Pattern: Semi structured – personal interview
Conducted- During Mar 2006 - Feb 2007

OBSERVATION AND RESULTS

Table 1: Duration of chief complaints of Kitibha Kushta

Duration	<1y	1y	2 y	3y	4y	5y	6y	7y	8 y	9 y	10y	>10 y
Subjects	22	16	26	9	2	8	4	1	3	0	3	6

The mean duration of chief complaints was 8 yrs.

Table 2: Severity of Kitibha Kushta

Severity	Subjects
Grade I	87
Grade II	13
Grade III	0

Table 3:Severity of Shyava Varna (Blackish Discoloration)

Severity	Subjects
Grade I	20
Grade II	49
Grade III	31

Table 4: Severity of Kandu (Itching)

Severity	Subjects
Grade I	42
Grade II	42
Grade III	16

Table 5: Severity of Rookshata (Dryness)

Severity	Subjects
Grade I	64
Grade II	29
Grade III	7

Table 6: Severity of Kharata (Roughness)

Severity	Subjects
Grade I	63
Grade II	31
Grade III	6

Table 7: Subjects exposed for Dooshivisha in the past

Dooshivisha	Subjects
Jangama Visha	11
Sthaavara Visha	0
Kritrima Visha	100

Table 8: Severity of Dooshivisha

Dooshivisha	Subjects
Grade I	22
Grade II	78
Grade III	0

Table 9: Associated Complaints of Dooshivisha

Associated Complaints	Subjects	Associated Complaints in Combination	Subjects
Bhinna purisha (loose stools)	1	Avipaaka+ Arochaka	10
Vigandhamukha (foul smelling breath)	6	Gurutwa+Angamarda	3
Vairasya(abnormal taste)	5	Gurutwa +Avipaaka	1
Swaravikriti (abnormal voice)	2	Gurutwa +Arochaka	1
Vishamajwara (recurrent fever)	7	Gurutwa +Aanaaha	1
Vishanna (grief)	2	Gurutwa+Angamarda+Avipaaka	3
Nidra (sleep)	7	Angamarda+Avipaaka+Arochaka	2
Gurutwa (heaviness)	25	Gurutwa +Avipaaka+Arochaka	1
Jhribbha (yawning)	2	Avipaaka+Arochaka+Aanaaha	1
Romaharsha (horripilation)	1	Arochaka+Aanaaha+Angamarda	1
Angamarda (malaise)	17	Gurutwa+Angamarda+ Arochaka	1
Trishna (thirst)	5	Gurutwa+Angamarda+ Arochaka+Aanaaha	2
Avipaka (indigestion)	31	Angamarda+ Arochaka+Aanaaha+Avipaaka	1
Arochaka (tastelessness)	34		
Shopa (oedema)	2		
Anaha (distension of abdomen)	20		

Table 12: Food stuffs aggravating Dooshivisha

Food Stuffs	Subjects
Non- vegetarian	19
Fish	8
Fish fry	7
Fish +Egg	2
Fish +Chicken	3
Fish fry +Egg	1
Egg + Chicken	1
Fish +Chicken +Egg	1
Egg+ Curds	1
Non- Veg+Ice-cream	1
Garammasala+Fish+Chicken	1

Table 13: Relation with Diwaaswapna (Day Sleep)

Diwaaswapna	Subjects
Yes	61
No	39

Table 14: History of Virudhaahara (Incompatible food)

Virudhaahara	Subjects
Desha Virudha (contrary to geographical area)	100
Kaala Virudha (contrary to season)	95
Agni Virudha (contrary to digestive ability)	79
Maatra Virudha (contrary to once own food quality)	0
Saatmya Virudha (contrary to habituation)	1
Dosha Virudha (contrary to humor)	28
Samskaara Virudha (contrary to processing)	84
Veerya Virudha (contrary to potency)	26
Koshta Virudha (contrary to viscera)	0
Avastha Virudha (contrary to body condition)	9
Krama Virudha (contrary to method of food consumption)	53
Parihaara Virudha (contrary to prescription)	43
Upachara Virudha (contrary to prescription)	82
Paaka Virudha (contrary to cooking)	58
Samyoga Virudha (contrary to combination)	43
Hridaya virudha (contrary to likes)	54
Sampad Virudha (contrary to attributes)	04
Vidhi Virudha (contrary to methodology to consuming food)	86

History of Prevalence of Dooshivisha in Kitibha Kushta

Here Chi square test was done to check the association between Dooshivisha & Kitibha Kushta. The following values were obtained.

Table 15: Observed Values

	Mild Kitibha	Moderate Kitibha	Total
Mild Dooshivisha	18	7	25
Moderate Dooshivisha	66	9	75
Total	84	16	100

Table 16: Expected Values

	Mild Kitibha	Moderate Kitibha	Total
Mild Dooshivisha	21	4	25
Moderate Dooshivisha	63	12	75
Total	84	16	100

On referring Chi square table, as one degree freedom, the value of Chi Square under probability 0.05 was 3.84. The calculated Chi square value was 5.87 which are higher than the tabled value. So there is significant relation between Dooshivisha & Kitibha Kushta.

DISCUSSION

The subjects who were having Kitibha Kushta also had the symptoms of Dooshivisha as associated complaints. The symptoms used to aggravate when exposed to marshy land, rainy season, after intake of specific foodstuffs and day sleep.

All 100 Subjects, had exposed to kritrimavisha, among them 11 subjects had exposure to jangamavisha also, but none were exposed to sthavaravisha.

Among the subjects exposed to jangamavisha, 4 subjects specified that it was the mosquito bite, one had leech bite, rest were not aware of the insect which had bitten them. All the subjects almost had the similar symptoms that, within a day of bite the itching started in that particular area & within a week complete manifestation of the disease had taken place.

Among the subjects exposed to kritrimavisha, intake of virudhaahara (incompatible food) was observed in all the subjects. These improper combinations of food may result in toxicity¹⁷ Among savisha dravya samyoga (contact of poison), one subject complained that symptoms occurred using a

particular slipper for three weeks and other complained that after working in a weaving industry for three years the symptoms appeared. One of the subjects had the symptoms after eating butter chicken at a restaurant while other had this after eating chilly beef. In all these cases may be the chemicals used in that particular thing has caused the problem. One subject complained that she used to get fever once in 3-4 weeks for two years, she used to take homeopathy & modern medicine frequently, and later the symptoms appeared. Subject was not aware of the names of the medicines she was taking. One subject complained that the symptoms appeared after the intake of peditis (drug for rheumatoid arthritis) 400mg b.d for three long years.

The toxic effects of these insects and chemicals are not strong enough to cause any mortality but however they are capable of producing cosmetically challengeable signs and irritable symptoms. The causative toxic elements stay in the body in small amounts for longer period and keep producing the signs and symptoms repeatedly and hence there is a need of anti-poisonous treatment after thorough purification to neutralize the remnant toxic elements in the body. This anti poisonous treatment may help to reduce reoccurrence of the disease.

CONCLUSION

In this study, among 100 subjects, 87 subjects had grade II and 13 subjects had grade I severity of Kitibha Kushta. Similarly 78 subjects had grade I and 22 had grade II severity of Dooshivisha. The mean duration of chief complaints was 8

years. The calculated Chi square value was 5.87 which are higher than the tabled value 3.84 at 0.05 probabilities. This proves that there is definite association between Dooshivisha and Kitibha Kushta. Even though this study was done ten years back, exposure to incompatible food is increasing day by day. Hence there is a need to adapt Dooshivishahara Chikitsa (antitoxic treatment) to remove remnant toxin from the body effectively. This study creates awareness that insect bite should not be neglected and treated at the earliest. This also provides a platform to take up further clinical study in terms of evaluating the efficacy of Dooshivishahara chikitsa in Kitibha Kushta (lichen planus).

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