



Research Article

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ROLE OF KSHARAGAD IN DUSHIVISHA JANYA VIKAR WITH SPECIAL REFERENCE TO ALLERGIC SKIN DISEASES

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ABSTRACT

Context: Dushivisha shows various toxic symptoms and disorders in different body systems, including the skin. Skin problems caused by Dushivisha, described in Samhitas, are Kustha, Visarpa, Bhinna Varna, Shonitdusti, Shitapitta, Udarda, and Kotha. Udarda-Sheetapitta-Kotha has almost similar symptoms and causative factors as an allergic skin disease (Urticaria) characterized by erythematous and pruritic rashes and a burning sensation on the skin. Aim: To evaluate the effect of Ksharagad clinically as a trial group and Dushivishari agad as a standard group in managing Dushivisha twak janya vikar with special reference to Allergic skin Diseases and to compare the effects of both therapies clinically. Setting and design: Randomized selection of 60 patients was made according to the inclusion criteria. Material and Methods: For this study, only those signs and symptoms affecting the skin, like burning sensation, redness, and itching, were taken for analysis as they were the main symptoms of allergic skin diseases. Along with the patients who had a history of intake of Dushivisha and Virudhahar. For this purpose, patients were selected from OPD/IPD of Shri Khudadad Dungaji, Government Ayurvedic College Hospital, Raipur, C.G. Statistical analysis: Statistically analysis was done based on paired t-test. Results: According to collected data, it was concluded that the treatment effect of Ksharagad was better in the case of mandal, kandu, raga and daha, while in toda and lakshanik barambarta Dushivishari agad was better.

Keywords: Dushivisha, twak vikar, virudhahar, agnimandya, diwaswapna.

INTRODUCTION

Dushivisha is a unique concept in Ayurveda. It is not a type of poison but a transformational state of visha. Any kind of poison which is old or attenuated by anti-poisonous remedies, dried in fire, wind and the sun, or naturally deficient in properties shall attain a state of dushivisha¹. This low potent poison stays in the body for a long duration due to avarana by kapha and gets vitiated after a long time when favourable conditions like dushit desha (vulnerable habitat), kala (seasons), anna (diet), diwaswapna (daytime sleep) are available and will become more potent². In the present context, people are more exposed to various kinds of toxins in food and the environment, accumulating toxins in their bodies and vitiating dhatus. This state is considered under the concept of dushivisha, which could be manifested as various twak vikara.

Twak vikar or skin diseases are a major problem today because they disturb the patients' personal, family and social life. Skin is the protective barrier of the body³. Whenever the body attacks these external toxins, the protective mechanism of the immune system, which is quite stimulating and complex, gets changed, leading to skin-related problems like dushivisha janya twak vikar (allergic skin diseases), which can be correlated to Sheetapitta-Udarda-Kotha (Urticaria). Sheetapitta-Udarda-Kotha or Urticaria have similar symptomatology, i.e., Vartidastanstan Shotha means the wheals, Kandu means itching, and Todadhikya means excessive pain like pricking etc., these are not life-threatening disorders, but it makes the patient irritated due to its appearance, severe itching disturbing routine and its chronic nature. It is a

disease with no specific treatment; only symptomatic relief can be provided. So, it can be more effectively managed with vishahara drugs, and the uses of Agada had been prescribed in chronic Twak roga in classics. So, the present study was planned "Role of Ksharagad in Dushivisha janya vikar with special reference to Allergic skin diseases" to achieve maximum relief for Dushivisha janya twak vikar (allergic skin diseases). Here is an evaluation of the clinical effect of Ksharagad as a trial group and Dushivishari agad as a standard group in the management of Dushivisha janya twak vikar with special reference to Allergic skin, Diseases are done.

MATERIALS AND METHODS

Selection of patients: For this study, only those signs and symptoms affecting skin like burning sensation, redness, and itching were taken for analysis as they were the main symptoms of allergic skin diseases and the patients, those having a history of intake of Dushivisha and Virudhahar were included. For this purpose, the patient was selected from OPD/IPD of Shri Khudadad Dungaji, Government Ayurvedic College Hospital, Raipur, C.G., India. Informed consent was taken from the patient before participation in the study. The ethical clearance number was IEC/2018/54, dated 23/6/2018.

Assessment Criteria: Detailed proforma was prepared for the assessment of the effect of the trial and standard drugs in the patients by grading parameters and by comparing the presence of signs and symptoms before and after treatment. All the patients

were treated for 45 days, and two follow up were taken for this study.

For the assessment cardinal, signs and symptoms were given scores according to their severity before and after treatment.

Subjective Parameters

1. Kandu (Itching)
2. Daha (Burning sensation)
3. Toda (Pricking pain)
4. Raga (Erythema)

Objective Parameters

1. Wheal formation
2. Recurrence

Laboratory investigations

1. TLC
2. DLC
3. ESR

Criteria of assessment of patient

Criteria	Grading
Daha	
No burning sensation	0
Mild burning (Not affecting daily routine activity)	1
Moderate burning (Occasional, disturbing daily routine activity)	2
Severe (Continuously burning & even disturbing daily routine activity)	3

Criteria	Grading
Number and size of Wheal formation	
None	0
Mild (1-5 wheals, less than 5cm)	1
Moderate (5-10 wheals, 5-15cm)	2
Severe (more than 10 wheals, more than 15cm)	3

Criteria	Grading
Kandu (Itching)	
No itching	0
Mild (present but not annoying or troublesome)	1
Moderate (Troublesome but does not interfere with daily routine activity)	2
Severe (Severe Itching, occurs frequently, disturbs sleep)	3

Criteria	Grading
Toda (Pricking Pain)	
None	0
Mild (Not disturbing daily routine activity)	1
Moderate (Occasional, disturbing daily routine activity)	2
Severe (Continuously & even disturbing daily routine activity & sleep)	3

Criteria	Grading
Raag (Erythema)	
Absent	0
Mild (faint or near to normal)	1
Moderate (blanching + red)	2
Severe (no blanching + red)	3

Criteria	Grading
Lakshanik barambarta (Recurrence/ frequency of attack)	
Absent	0
Mild (In Hrs.)	1
Moderate (In Days)	2
Severe (In Weeks)	3

Inclusion criteria

1. Patients between 16-70 years, irrespective of sex, religion, and socioeconomic status, were considered.
2. This trial included all the patients of Dushivisha janya allergic skin disorders with symptoms like burning sensation, redness, and itching.

Exclusion criteria

1. Patients of burn, severe infective disease, psoriasis, leprosy, measles, herpes, chicken pox, leukoderma, carcinoma.
2. Patients suffering from severe or complicated systemic diseases like diabetes, renal disease, liver disease, and VDRL were excluded from the trial.

The group with Dose and Duration in Therapy

Patients were taken from OPD/IPD of Shri Khudadad Dungaji, Government Ayurved College & Hospital Raipur, C.G., India.

Groups	Medicine	Number of Patients	Duration of Study
Trial Group (Group A)	Ksharagad	30	45 Days
Standard Group (Group B)	Dushivishari Agad	30	45 Days

- Dose - 2 tablets twice a day.
- Duration – 45 days.
- Follow-up period – First, follow up on - 45th day, Second, follow up on - 60th day

Criteria for Thorough Result Assessment

The total effect of the therapy has been considered according to the following criteria-

- Complete Remission = 100% Relief
- Marked Improvement ≥ 75%
- Moderate Improvement ≥ 50%
- Mild Improvement ≥ 25%
- No Improvement < 25%

OBSERVATION

A maximum number of patients, i.e., 28.33%, belonged to the age group of 31-40 years, which means irrespective of age, it can occur at any age, but due to more stressful life, disturbed lifestyle and unwholesome dietary habits, the incidence was found more in middle age. Maximum numbers of patients were females, i.e., 70% and 45% were housewives; this was indicative of more incidence rate in female Adhyashana, Vishamashana and Diwaswapa are seen more in females, which causes Agnimandya and Tridosha Prakopa aggravating dushivisha and leading to allergic skin diseases, a total of 66.67% of the patients belonged to lower middle class. 83.33% of urban habitat areas are more polluted due to running automobiles and industries responsible for allergic diseases due to dushivisha. In this study, the maximum number of patients, i.e., 71.67%, were disturbed sleep. Diwaswapna and Ratrijagran leads to sarvadosha prakopa. About 46.67% of the patients had stress. Stress is responsible for vitiating pitta, causing rakta dusti leading to allergic diseases and aggravation of dushivisha janya twak vikar. In 50% of cases, mandagni was found Mandagni is the root cause of Agnimandya and Ama formation, which leads to various diseases. Symptoms of skin allergy were aggravated by diwaswapna in 31.67% of patients, pragvata in 21.67%, sheetabhra in 23.33%, ahitatan and ajirna in 15% and 8.33%, respectively. Area of involvement for allergic skin diseases shows that maximum patients, i.e., 48.34%

had whole body involvement while 21.66% of patients were involved of extremities.

RESULT

The result obtained was highly significant (p value < 0.000).

In the comparative percentage of improvement in various signs and symptoms in both the groups Group A and Group B, it was observed that in Group A, in the case of mandal, kandu, raga, daha, toda, and lakshanik barambarta relief was 56.06%, 64.38%, 54.39%, 43.59%, 67.57%, 46.97% respectively whereas, in Group-B patients improvement found in case of mandal, kandu, raga, daha, toda and lakshanik barambarta was 48.39%, 61.11%, 40.91%, 42.22%, 51.61%, 34.92% respectively. According to all the above data, it can be concluded that the treatment effect of Group A was better in the case of mandal, kandu, raga and daha, while in toda and lakshanik barambarta, Group B was better. An intergroup comparison showed a statistically non-significant result which states no significant difference between the efficacy of both groups. The overall result therapy in patients of both the group after completion of treatment, in Group A, Maximum improvement (above 75%) has been noticed in 13.33% of patients, Moderate improvement (50-75%) in 60% of patients, Mild improvement (25%-50%) in 23.33% patients and no improvement (less than 25%) in 3.33% patients while in Group B Maximum improvement (above 75%) has been noticed in 6.67% patients, Moderate improvement (50-75%) in 43.33% patients, Mild improvement (25%-50%) in 50% patients and no improvement (less than 25%) was found in none of the patients.

DISCUSSION

Dushivisha is an important concept in Vishatantra. It is a low potent poison that gets vitiated due to dushit Desh, Kala, Anna and Diwaswapna, like factors like industrialization, seasonal variation, synthetic food items, and changing lifestyles. Now a day's, due to this lifestyle of a modern man, the immune system of a person declines and leads to the evolution of various diseases out of which allergic skin diseases are most common. Dushivisha

shows various toxic symptoms and disorders in different body systems, including the skin. Skin problems caused by Dushivisha, described in Samhitas, are Kustha, Visarpa, Bhinna Varna, Shonitdusti, Shitapitta, Udarda, and Kotha. Udarda-Sheetapitta-Kotha has almost similar symptoms and causative factors as Urticaria, characterized by erythematous and pruritic rashes and a burning sensation on the skin. These diseases can be prevented, and if it occurs, they can be cured through Ayurvedic Agada's. Agada's are the countermeasures taken against the manifestation. So, Ksharagada was selected, which can provide excellent results in symptoms like Itching, redness, shotha (inflammation), wheal formation, shonit dustilakshan etc., by improving immunity and its actions like Kusthghna, Krimighna, Shothhar, Kandughna, Twachya, Tridosahar. The drug profile shows that the general properties are predominant of Madhura, Katu, Tikta, Kashaya Rasa, Laghu, Rooksha Guna, Sheetha Veerya and Katu Vipaka. Synergistic drug action can be assumed as a combination of drugs bearing similar qualities. Katu rasa possesses properties like Vishaghna, Kandughna, Vranaprasadana, shothahar, krimighna, kleda shoshan, deepan, pachan, lekhan, widens tissue pore, mitigates kapha, udardaprashman. Tikta rasa has the property of Raktaprasadana, krimighna, Vishaghna, Kushthaghna, Kandughna, dahaprashmana, skin diseases, kapha shoshan, deepan, pachan, shrotoshodhan. While kasaya rasa has properties like lekhan and kleda shoshan, it also restores the normal colour of skin and mitigates kapha, pitta and rakta. Madura rasa has vishghna and pitta-vata shamak properties and maintains healthy skin. Due to the properties mentioned above, Ksharagada shows Tridosahara, Twakdosahara, Shothaghna, Kandughna, Shoshaghna, and shooplprashman, dahaprashman Vishaghna and Rakthasodhaka qualities. Almost all the drugs of this yoga are Katu and Tikta rasa showing deepan-pachan properties and helping manage amavisha. Seetha Veerya can antagonize the adverse effect of Visha. Some of these drugs are individually Vishghna and would bring about miraculous results. The drugs are prominent in the rasas, which are said to be antitoxic, i.e., madhura, tikta, katu and kashaya. Almost all the drugs are laghu and rooksha. Thus, the combination is highly potent and can cure Dushivisha with signs and symptoms of allergic skin diseases, a major kapha vata disorder.

Table 1: Effect of Therapy on Various Signs and Symptoms in 30 Patients of Group A

SN	Symptoms	Mean		Mean Diff.	Relief %	SD (+/-)	SE $\frac{1}{4}++/-\frac{1}{2}$	T-Value (+/-)	P-Value	Remark
		BT	AT							
1	Mandal (Wheal Formation)	2.200	0.967	1.233	56.06%	0.568	0.104	11.886	0.000	HS
2	Kandu (Itching)	2.433	0.867	1.567	64.38%	0.626	0.114	13.706	0.000	HS
3	Raga (Erythema)	1.900	0.867	1.033	54.39%	0.556	0.102	10.179	0.000	HS
4	Daha (Burning Sensation)	1.300	0.733	0.567	43.59%	0.728	0.133	4.264	0.000	HS
5	Toda (Pricking Pain)	1.233	0.400	0.833	67.57%	0.699	0.128	6.530	0.000	HS
6	Lakshanik Barambarta (Recurrence)	2.200	1.167	1.033	46.97%	0.765	0.140	7.399	0.000	HS

BT: Before Treatment, AT: After Treatment

Table 2: Effect of Therapy on Various Sign and Symptoms in 30 Patients of Group B

SN	Symptoms	Mean		Mean Diff.	Relief %	SD (+/-)	SE $\frac{1}{4}++/-\frac{1}{2}$	T-Value (+/-)	P-Value	Remark
		BT	AT							
1	Mandal (Wheal Formation)	2.067	1.067	1.000	48.39%	0.568	0.104	11.886	0.000	HS
2	Kandu (Itching)	2.400	0.933	1.467	61.11%	0.626	0.114	13.706	0.000	HS
3	Raga (Erythema)	1.467	0.867	0.600	40.91%	0.556	0.102	10.179	0.000	HS
4	Daha (Burning Sensation)	1.500	0.867	0.633	42.22%	0.728	0.133	4.264	0.000	HS
5	Toda (Pricking Pain)	1.033	0.500	0.533	51.61%	0.699	0.128	6.530	0.000	HS
6	Lakshanik Barambarta (Recurrence)	2.100	1.367	0.733	34.92%	0.765	0.140	7.399	0.000	HS

BT: Before Treatment, AT: After Treatment

Table 3: Comparison of Effect of Therapy on Various Sign and Symptoms in 30 Patients of Group A and B

SN	Symptoms	Mean		Mean Diff.	SD (+/-)	SE $\frac{1}{4}++/-\frac{1}{2}$	T-Value (+/-)	P-Value	Remark
		Group A	Group B						
1	Wheal Formation (Mandal)	0.967	1.067	(0.100)	0.960	0.175	(0.571)	0.573	NS
2	Itching (Kandu)	0.867	0.933	(0.067)	0.828	0.151	(0.441)	0.662	NS
3	Raga (Erythema)	0.867	0.867	0.000	0.983	0.179	0.000	1.000	NS
4	Daha (Burning Sensation)	0.733	0.867	(0.133)	1.074	0.196	(0.680)	0.502	NS
5	Toda (Pricking Pain)	0.400	0.500	(0.100)	0.803	0.147	(0.682)	0.501	NS
6	Recurrence (Lakshanik Barambarta)	1.167	1.367	(0.200)	0.961	0.176	(1.140)	0.264	NS

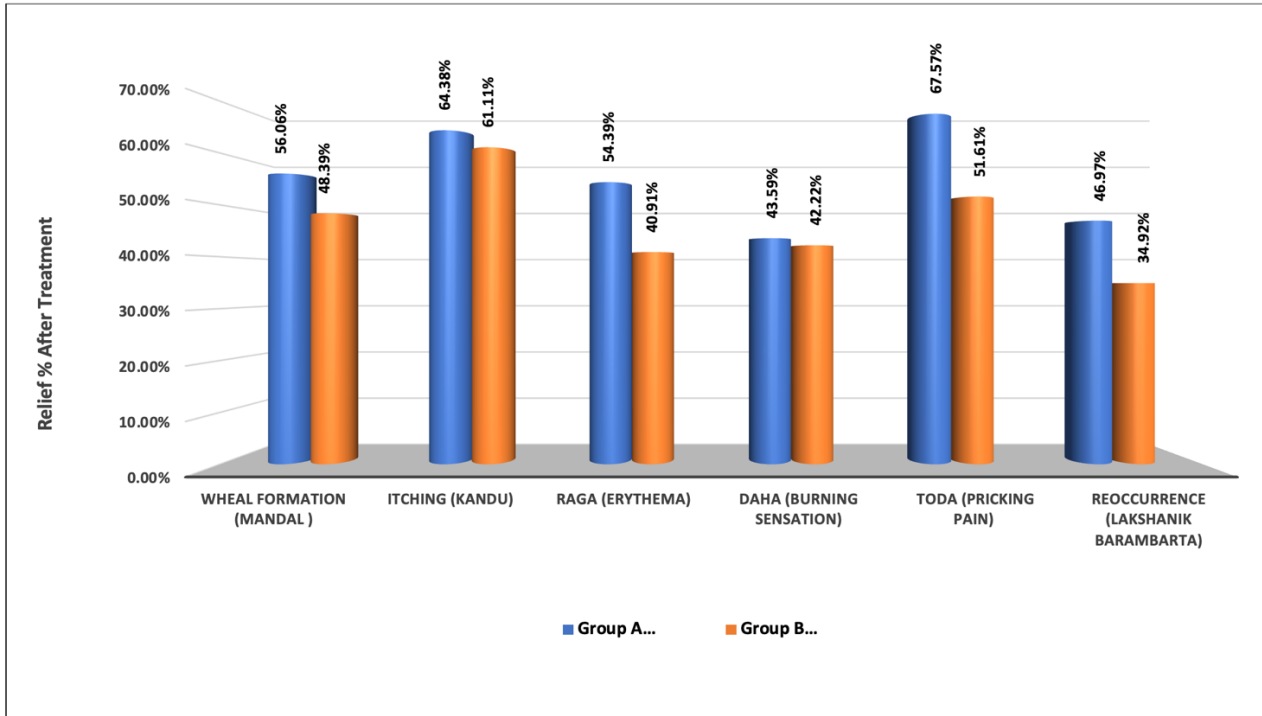


Figure 1: Comparative Graph of Results for Group A and B

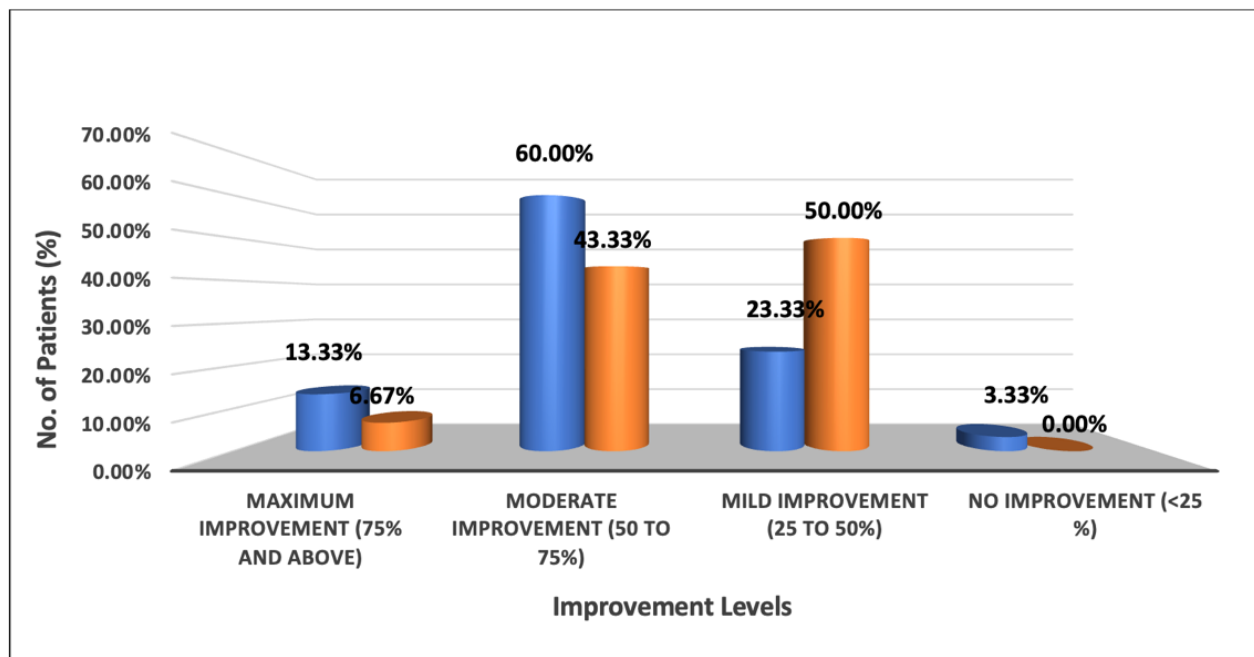


Figure 2: Overall Therapy Result Comparison

CONCLUSION

In the present context, people are more exposed to various kinds of toxins through unwholesome food due to environmental pollution, which in turn leads to the accumulation of toxins in our bodies. This state is considered under the concept of Dushivisha, which could be manifested as various twak vikar (allergic skin diseases). Now a day's, junk food, irregularity in food taking, use of cosmetics and other chemicals, sedentary lifestyle, mental stress, and emotional disturbances play a significant role in Dushivisha janya twak vikar. Diwaswapna results in agnimandya producing ama, which is the root cause of all the diseases. Tridosha Prakopa, Rasa-Rakta dusti, Viruddha ahar and Mandagni are the main culprits in skin disorders. Group A (Trial Drug-Ksharagad) showed a significant result in the case of mandal, kandu, raga and daha, while in toda and lakshanik barambarta, Group B (Standard Drug-Dushivishari Agad) was better. However, the intergroup comparison showed no major difference in efficacy between the trial drug (Ksharagad) and the standard drug (Dushivishari Agad). From the trial, we can conclude that Agada yogas can be effectively tried in dushivisha janya vikar and would be a sensible choice for its management.

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