

**TO EVALUATE THE EFFICACY OF KUSHTHADI CHURNA AS
AVCHURNAN & KUSHTHADI LEPA IN THE MANAGEMENT OF
VICHARCHIKA ALONG WITH NAVKASHAYA**

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ABSRTACT

Ayurveda is a clinical science and its concepts and principles are moulded in such a way that it becomes useful in clinical parlance. It is the duty of scholar of the Ayurveda to prove these Ayurveda principles in front of the world in better way to show its scientific utility in terms of countable objectivity rather than subjectivity. The agonizing skin ailments are hunting the mankind since ages past. Ayurveda reached the zenith of knowledge regarding skin diseases as depicted in classical description. Skin diseases are narrated in Ayurveda Samhitas under the heading of Kushtha and clear-cut description of the disease

Vicharchika is present. Vicharchika to a greater extent resembles Eczema. According to Charaka, the ancient medical authority Ayurveda is characterized by skin eruption with dark discoloration, itching and profuse discharge. Authors like Vagabhatta, Madhavkara and Bhavmishra are in agreement with him whereas Sushruta, 'the father of surgery' has mentioned the symptoms as dryness of the skin with intensive itching and marked innings. For desirable therapeutic drug concentration at the target site, local application of drug is essential part in the management of Vicharchika. It provides highest drug concentration at the target site. It can be frequently used. Skin has been considered as a promising route of drug administration due to its accessibility on larger surface area. Topical drug delivery system designed to deliver a variety of drugs to the body through diffusion across the skin layers. Charaka Samhita has described the formulation of KUSHTHADI CHURNA in Sutra Sthana

Ch 3/10-11. 2. Chakradatta has described the formulation of NAVKASHAYA in Ch.40/58. It is to be given internally. It has anti pruritic, anti-inflammatory, blood purification Property.

KEYWORDS: Vicharchika, Navkashaya, Kushthadi churna, Kushthadi Lepa, Skin, Kushtha.

INTRODUCTION

Ayurved is the most ancient science of life. Ayurvedic medicine is a system of hindu traditional medicine. The primary focus of ayurved is to promote good health, rather than fight disease.

Skin is the protective covering of body which covers the entire body surface. In Ayurved all skin disease have been described under the kushtha roga. Vicharchika has decribed as ksudra kushtha. Vesicular eruption, itching, discharge are the cardinal maifestation of Vicharchika. This is being compared to eczema in modern science.

LITERATURE REVIEW

Samhita Kala –

Charaka Samhita -Detail description of Kushtha have been described in Ni.-5 & Chi.-7.

Sushruta Samhita- Acharya Sushruta first time clearly described the Anuvansika and Krimija Nidan as a causative factor of Kushtha(Su.Ni.-5/5).

Astanga Hridaya- He has described Vicharchika under Shudra kushtha (A.H.Ni.14/18)

Nidana

Commonly the term Nidana is used for Nimitta Hetu of the disease. Nidana can be categorized under following headings as: -

1. Aharaj Nidana: - Virudha Ahara, Excessive and continuous use of Navanna, Dadhi, Guda, Tila, Mulak, Matsya, and excessive intake of Amla and Lavana Rasa Paradhan Dravya etc.
2. Viharaj Nidana:- Drinking cold water after fear, exhaustion or sunlight.
 - a. Suppression of urge of Mala, Mutra and Vamana.
 - b. Vyayam and Atap Sevan just after taking excessive amount of diet Divaswapna etc.
3. Mansik Nidan: - Atishoka, Krodha, Bhaya, Santap, Irshya, Dwesha etc.
4. Krimi: - Many Acharya accepted Raktaj Krimi as a etiological factor of Kushtha Roga.

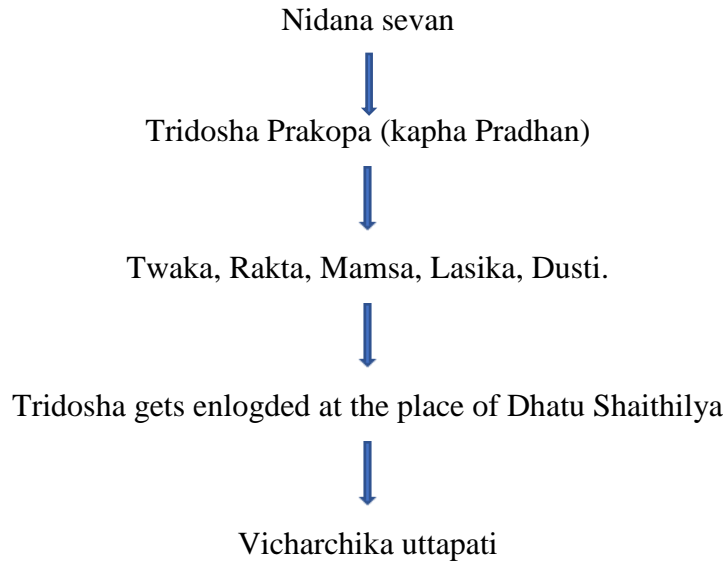
PURVA RUPA

The prodromal symptoms of Kushtha are – Atisalaksnta (excessive smoothness), roughness of skin, Aswednam or Atiswednam, Vaivarnyata, Daha, Kandu, Supti, Toda, Kothotpatti, Bhrama, shuladhikya and Vrana, early ulceration and late healing, after healing of ulcer or Vrana dryness or Ruksta, Lomharsha, Karsyarnam, Khartvam, Ushmayanam, Shavyathu, Shram, Klam, Visarpagammam etc.

RUPA

सकंडूपिटिका श्यावा लसीकाढया विचर्चिका || (अ.ह.नि.१४/१८)

सकण्डूः पिडका श्यावा बहुस्रावा विचर्चिका || (च.चि.७/२६)

SAMPRAPTI**AIMS AND OBJECTIVES**

1. To evaluate the aetiopathogenesis of Vicharchika.
2. To study the efficacy of Navkashaya with Kushthadi Lepa on Vicharchika.
3. To study the efficacy of Navkashaya with Kushthadi Churna as Avchurnan after applying Sarshap oil on Vicharchika.
4. To provide a reliable, safe and cost effective Ayurvedic treatment for Vicharchika.

DRUGS USED**कुष्ठादि चूर्ण (च.सू.३/१०-११)**

DRUG	PART USED	DRUG	PART USED
१.कूठ	1 part	८.लोध्र	1 part
२.गुडूची	1 part	९.गंधक	1 part
३.तुत्थ	1 part	१०.राल	1 part
४.दारुहरिद्रा	1 part	११.वायविडंग	1 part
५.कासीस	1 part	१२.मनःशिला	1 part
६.कम्पिलल्क	1 part	१३.हरताल	1 part

नवकषाय- (चक्र ४०/५८)

DRUG	PART USED	DRUG	PART USED
१.विभितकी	1 part	६.मंजिष्ठा	1 part
२.हरीतकी	1 part	७.कुटकी	1 part
३.आमलकी	1 part	८.वचा	1 part
४.हरिद्रा	1 part	९.नीम	1 part
५.पटोल	1 part		

PROBABLE PHARMCOLOGICAL ACTION OF THE DRUGS

By looking at the individual herbal constituents and their Pharmacological action as mentioned in Ayurvedic literatures as well as shown in recent studies, it appears that the most of the contents of “NAVKASHAYA” have Kapha-pitta Shamaka, Kushthghna, Kandughna property and “KUSHTHAGHNA CHURNA” have Raktashodhak, Vranshodhak, Vranaropaka, Shothnashak properties, thus this kind of study will definitely benefit the Vicharchika’s Patients with effective Ayurvedic remedies by diminishing the recurrence of episode of Vicharchika.

PLAN OF STUDY**A. SELECTION OF PATIENT**

30 Patient of Vicharchika will be Selected from the OPD/IPD of PG Department of Kayachikitsa, Uttarakhand Ayurved University, Rishikul Campus, Haridwar. The study will be conducted on randomly divided in two groups, 15 patients each on the basis of criteria of inclusion and exclusion with detailed clinical history and physical examination and other necessary investigations.

B. SELECTION OF DRUG

1. NAVKASHAYA
2. KUSHTHADI CHURNA
3. KUSHTHADI LEPA

C. DOSE OF DRUG

1. KUSHTHADI CHURNA – Local application twice a day.

First apply Sarshapa oil on the affected area then Kushthadi Churna Avchurnan over the area.

2. KUSHTHADI LEPA- Local application twice a day.

3. NAVKASHAYA- 10gm twice a day after meal freshly prepared as per instruction.

D. TYPE OF STUDY:- Single blind.

E. DURATION OF STUDY:-45 Days.

F. DRUG TRIAL SCHEDULE:- The Selected Patients for trial will be randomly divided into following two groups, 15 patients each.

GROUP I:- The selected patient will be subjected through NAVKASHAYA and KUSHTHADI CHURNA.

GROUP II:- The selected patient will be subjected through NAVKASHAYA and KUSHTHADI LEPA.

G. ASSESSMENT: -The assessment of the patient will be done for 3 times at the interval of 15 days.

H. FOLLOW UP-Follow up will be done 1month after the completion of the treatment.

I. INCLUSION CRITERIA

- Patients having the signs & Symptoms of Vicharchika.
- Age group between 16 to 60 years.
- Patient willing to participate in above mentioned trial with informed consent.

J. EXCLUSION CRITERIA

- Age group less than 16 year and more than 60 year.
- Pregnant and lactating women.
- Patient with other cutaneous symptoms of psoriasis, leprosy, local burn etc.

- Any other secondary skin diseases.
- Uncontrolled diabetic patients.

K. CRITERIA FOR WITHDRAWAL

1. Personal matters
2. Intercurrent illness
3. Aggravation of complaints
4. Any other difficulties.

L. CRITERIA FOR ASSESSMENT

The assessment of the trial will be done on the basis of following parameters-

1. Subjective
2. Objective

Subjective: The subjective assessment will be done on the basis of:

Improvement in following signs and symptoms of Vicharchika as described in classics-

- a. Kandu (Itching)
- b. Vedana (Pain)
- c. Daha (Burning sensation)
- d. Vivarnata (Discolouration)
- e. Srava (Discharge)

Objective: The objective assessment will be done on the basis of changes in clinical findings, relevant laboratory parameters assessments.

- a. Type of lesion
- b. No. of lesion
- c. Area occupied by the lesions

INVESTIGATIONS

- HB%, TLC, DLC, ESR, BLOOD SUGAR (Random), SGOT, SGPT, Blood urea, Serum creatinine, Serum Cholesterol.

OBSERVATION

- The observation of patients will be carried out before during and after completion of treatment.
- Little addition or exclusion may be done as per necessity of the study.

CONCLUSION

Conclusion will be made on the basis of the observation which is done on subjective and objective parameters. The result will be analysed statistically and discussed.

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