

EFFICACY OF KARANJ BEEJADI LEP IN VICHARCHIKA

W.R.T.ECZEMA

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INTRODUCTION

Most of the skin disorders are developed from abnormal functioning of the agni, defective dietary habits like unsuited foods, irregular meals pattern and habits like smoking, alcohol, psychological stress & causing life style related skin diseases. Vicharchika is one of the disease mentioned in ancient science among the Kushtha. Vicharchika is categorized in different ways i.e. Kshudra kushtha and Kshudra roga. All Kushthas are having Tridoshaja origin, hence Vicharchika can be explained in similar manner i.e. Kapha is responsible for Kandu, Pitta is responsible for Srava and Shyava indicates the presence of Vata. even with its Tridosha origin, various Acharyas have

mentioned different dominances in Vicharchika i.e. Kapha, Pitta, Vata -pitta pradhana, which also suggest specific symptom complexes. As per the symptoms and pathogenesis, Vicharchika has been directly associated with eczema (dermatitis) in modern science, with symptoms kandu (excessive itching), Pidaka (papules, vesicles, pustules), Shyava (erythema with discolouration), Bahusrava (profuse discharge, oozing), Raji (thickening of skin), Arti (pain), Ruksha (dry lesion), etc. Dermatitis is being used as a synonyms of eczema by most of

the dermatologists. in recent days; modern science has reached the top by great advances, particularly when dermatology topic is concerned and also in regards to availability of powerful antibiotics, antifungal, antihistaminic, steroids, etc. But better management could not be searched out till today. Few drugs are available for symptomatic relief only. Skin diseases like eczema get a suitable atmosphere especially in developing countries, because of fast life style, industrial and occupational hazards, repeated use of chemical additives etc nowadays, whole world is gradually turning towards Ayurveda for safe and complete cure of diseases. Especially in the field of skin problems ayurveda can contribute remarkably. Topical application of Karanj Beejadi Lep is said to be very effective in the treatment of Vicharchika. But previously no study was carried out to evaluate the effect of this lepa. Hence this study was planned to evaluate the effect of Karanj Beejadi Lep. Topical use of Karanj Beejadi Lep with Gomutra were subjected to clinical trial in this study.

AIMS AND OBJECTIVES

1. To evaluate the effect of Karanj Beejadi Lep with Gomutra in management of Vicharchika and associated symptoms of Vicharchika like pruritus, papules and hyperpigmentation etc.
2. To make a follow up for any relapse of symptoms of Vicharchika or recurrence of Vicharchika etc.

MATERIAL AND METHOD

Source of Data

Total 30 Cases of Vicharchika were selected randomly from OPD of Kayachikitsa in Dr. D.Y. Patil Ayurved College, Pune (Maharashtra).

Diagnostic Criteria

Study Design: Single Blind Observational Clinical study

1. Subjective Criteria: Patients will be diagnosed on the basis of sign and symptoms of Vicharchika as per Ayurvedic symptomatology. The patients having following signs and symptoms were diagnosed as suffering with Vicharchika (Eczema).

- Kandu (Pruritus)
- Pidika (Pappules)
- Shyava (Hyperpigmentation)
- Bahusrava (Discharge)

- Ruja (Pain)
- Rukshata (Dryness)
- Shotha (Thickness of skin)

2. Objective criteria

- Routine hematological investigations like Hb %, TLC, DLC, ESR.
- Routine urine examination.

Inclusion Criteria

1. Patients suffering from vicharchika in between the age group of 15-70 years were selected.
2. Patients possessing signs and symptoms on the basis of diagnostic criteria were selected.

Collection, Tabulation and Statistical Tests: Around 30 patients were examined in which 24 Patient fulfilling diagnostic criteria and inclusion criteria were selected.

Exclusion Criteria

1. Patients above 70 years and below 15 year were excluded.
2. Patients suffering from AIDS, Cancer, TB, DM and severe systemic disorders were excluded.
3. Patients of Vicharchika having secondary infections were excluded.

Method for the Preparation of Drugs

1. Karanj beej Churna (Pongamia Pinnata) 3gm
2. Chakramard Churna (Cassia Tora) 3gm
3. Kustha Churna (Saussurea Lappa) 3gm
4. Gomutra 10 ml

All Churnas are mixed well which will be ready for one time lepan.

Dosage: To be applied topically/Q.S.

Duration: 30 days.

Follow-up: After 7th and 15th day of initiation of trial.

Method of Research

Assessment criteria

Each patient is overall assessed weekly after the onset of treatment and twice during follow up with one month gap in between. Relevant data is collected and documented on the detailed case proforma. Assessment of the condition is done adapting standard methods of scoring. Subjective parameters are analyzed statistically with Paired- t test.

Standard Visual analogue scale

The assessment of signs and symptoms are done using the standard visual analogue scale as; Cured- 0; Mild- 1.

OBSERVATIONS AND RESULTS

- 1. Kandu (Itching- Pruritus)**) The Mean score observed before the treatment was 3.50 After the treatment value of 7th day was reduced to 2.34, with effect of treatment showed 25% improvement, on 14th day reduced to 1.25, with effect of treatment showed 45.66% improvement, on 21st day reduced to 1.12, with effect of treatment showed 58.33% improvement, on 30th day reduced to 0.42, with effect of treatment showed 86% improvement, in '**kandu**' with statistically significant ($P < 0.0001$).
- 2. Pidika (Papules):** The Mean score observed before the treatment was 2.80 After the treatment value of 7th day was reduced to 1.90, with effect of treatment showed 28.62% improvement, on 14th day reduced to 1.36, with effect of treatment showed 49.51% improvement, on 21st day reduced to 0.81, with effect of treatment showed 67.25% improvement, on 30th day reduced to 0.33, with effect of treatment showed 86.40% improvement, in '**Pidika (Papules)**' with statistically significant ($P < 0.0001$).
- 3. Shyava (Hyper pigmentation):** Mean score observed before the treatment was 2.56 After the treatment value of 7th day was reduced to 2.44, with effect of treatment showed 5.10% improvement, with statistically significant (0.0351) on 14th day reduced to 1.53, with effect of treatment showed 40.63% improvement, on 21st day reduced to 1.22, with effect of treatment showed 54.51% improvement, on 30th day reduced to 0.85, with effect of treatment showed 63.91% improvement, in '**Shyava**' with statistically significant ($P < 0.0001$).
- 4. Srava (Oozing):** Mean score observed before the treatment was 2.53 After the treatment value of 7th day was reduced to 1.84, with effect of treatment showed 12.10% improvement, with statistically significant (0.041) on 14th day reduced to 1.43, with

effect of treatment showed 42.63% improvement, on 21st day reduced to 1.20, with effect of treatment showed 51.45% improvement, on 30th day reduced to 0.75, with effect of treatment showed 68.30% improvement, in **Srava (Oozing)**: with statistically significant ($P < 0.0001$).

5. **Ruja (Pain)**: Mean score observed before the treatment was 3.45 After the treatment value of 7th day was reduced to 2.44, with effect of treatment showed 15.10% improvement, with statistically significant (0.045) on 14th day reduced to 1.45, with effect of treatment showed 45.60% improvement, on 21st day reduced to 1.12, with effect of treatment showed 52.51% improvement, on 30th day reduced to 0.68, with effect of treatment showed 61.91% improvement, in '**Ruja**' with statistically significant ($P < 0.0001$).
6. **Rukshta (Dryness)**: The Mean score observed before the treatment was 3.50 After the treatment value of 7th day was reduced to 2.34, with effect of treatment showed 25% improvement, on 14th day reduced to 1.25, with effect of treatment showed 45.66% improvement, on 21st day reduced to 1.12, with effect of treatment showed 58.33% improvement, on 30th day reduced to 0.42, with effect of treatment showed 86% improvement, in '**Rukshata**' with statistically significant ($P < 0.0001$).
7. **Thickness (shotha)**: Mean score observed before the treatment was 3.45 After the treatment value of 7th day was reduced to 2.44, with effect of treatment showed 15.10% improvement, with statistically significant (0.045) on 14th day reduced to 1.45, with effect of treatment showed 45.60% improvement, on 21st day reduced to 1.12, with effect of treatment showed 52.51% improvement, on 30th day reduced to 0.68, with effect of treatment showed 61.91% improvement, in '**Thickness**' with statistically significant ($P < 0.0001$).

Table No 01: Viewing the Effect of Treatment.

S.N.	Symptoms	Mean Score		Difference D	% Relief
		BT	AT		
1	Pruritus	2.80	0.33	2.47	86.40%
2	Pappules	2.56	0.85	1.71	63.91%
3	Hyper pigmentation	3.45	0.68	2.77	61.91%
4	Discharge	3.5	0.42	3.08	86%
5	Pain	2.53	0.75	1.78	68.30%
6	Dryness	2.80	0.33	2.47	86.40%
7	Thickness	2.53	0.75	1.78	68.30%

Table No 02: Statistical Analysis.

S.N.	Symptoms	Paired Test				Significant
		SD	SEM	t Value	P Value	
1	Pruritus	0.67	0.06	36.94	<0.0001	Yes
2	Pappules	0.48	0.07	31.04	<0.0001	Yes
3	Hyper pigmentation	0.45	0.06	59.65	<0.0001	Yes
4	Discharge	0.45	0.07	30.82	<0.0001	Yes
5	Pain	0.37	0.03	29.30	<0.0001	Yes
6	Dryness	0.67	0.06	36.94	<0.0001	Yes
7	Thickness	0.37	0.03	29.30	<0.0001	Yes

DISCUSSION

The present study was completed to evaluate the efficacy of an Ayurvedic formulation on Vicharchika. Topical administration of drug appears to be superior therapy due to its action in reducing super infections and necrotic material via enhanced local defense systems and collagenolytic activity. As per anatomy of skin just below the top layer of skin a thicker dermis is present where nerves, hair follicles, sebaceous glands, sweat glands, blood vessels and lymph vessels are situated. Under the dermis is the subcutaneous fatty layer. Applying ointment to the skin is a quick and efficient way to introduce them into the blood, nerves and lymph. Many ointments are lipophilic, meaning that by their molecular design they want to jump into tissues containing protein, like our skin. In present study, Karanj Beejadi Lep with Gomutra were selected for local application. All drug are having having Tikta, katu, and Ushna Virya shows Vatkaphahara Karma, Krmighna, Kushtaghna Kandughna action. And also due to laghu and Ruksh guna helps to minimize the Srava. Hence all are useful in breaking of etiopathogenesis of Vicharchika. Topical drugs also enhance the skin metabolism, so healthy repairing may also take place. Gomutra which are also helpful media for cutaneous absorption by his Vatkaphaghna properties So all actions are favorable to break the etiopathogenesis of skin. In clinical experience, this lepa was found effective in wet lesion.

CONCLUSION

The present study conclude that the drugs are effective in relieving signs and symptoms of vicharchika. This therapy was found significantly effective in management of vicharchika. No improper effect was noted during treatment and follow up period, however, this is only a beginning study conducted as a part of educational research program with small number of patients, in fixed duration of time. Further multicentre, clinical studies are required with larger sample to establish vicharchikahara effect of these drugs. On the basis of the results of

this dissertation, Karanjbeejadi lepa may be recommended as one of the drugs for the treatment of Vicharchika.

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