



### Ayurvedic management of *mukhadushika* with *shamana aushadhis*: a case study

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#### Abstract:

**Background:** Skin diseases are one among the most common health problems worldwide. The burden of skin disease adversely affects the person's psyche and social interactions apart from the physical difficulties caused by the disease. *Mukhadushika*, which can be clinically correlated with acne vulgaris is a common condition seen among the youth. **Method:** A female patient aged 21 came to our institute with the complaint of skin lesions over her face from past 6 months along with occasional occurrence of pustules. The patient was treated with *shamana aushadis* on opd level. **Result:** After two months of treatment, it was noted that there were remarkable changes in the lesions such as reduction in the number of active acnes, acne scars and spots, reduction in the hyperpigmentation over acne spots. **Conclusion:** The treatment with *shamana aushadhis* were effective in the management of *mukhadushika*. In this case study, effect of *shamana aushadhis* such as *Arogya*

*vardhini*, *Gandhak rasayana*, *Manjishtadi kwatha*, etc are evaluated.

**Keywords-** *mukha dushika*, *shamana aushadhi*

#### Introduction:

*Mukhadooshika* is one among *kshudra roga*. The disease is termed '*mukhadooshika*' as it causes disfigurement of the face. It is a *twak roga* and is caused due to the vitiation of *kapha*, *vata* and *rakta*. The clinical features of this disease can be correlated to the acne vulgaris mentioned in modern medical science.

Acne vulgaris is a disease of the pilosebaceous units, clinically characterized by seborrhea, comedos, papules, pustules, nodules and, in some cases, scarring.<sup>[1]</sup> Mainly, there are three pathologic factors behind the etiology of the disease. They are – (i) increased sebum excretion, (ii) occlusion of blockage of pilosebaceous unit (iii) bacterial colonization in the pilosebaceous ducts that acts on lipids to produce a number of proinflammatory factors.<sup>[2]</sup> Acne vulgaris mostly affects the areas of skin with densest population of

sebaceous follicles, which include – face, upper part of chest and back region.

*Ayurveda* put forwards two modalities of management for *mukhadushika* – *shamana* and *shodhana*.

### Case report:

A 21-year-old female consulted in outpatient department, with the complaints of reddish maculo-papular skin lesion widely distributed over her face and chin. There was associated irritation prompting the patient to rub over the lesions frequently. Gradually the number of eruptions increased.

On physical examination, the general condition of the patient was good. No relevant hereditary, congenital diseases or surgical history were found. Her pulse was 76/ min regular; BP was 120/80 mm of Hg; respiratory rate was 16/ min regular and the

patient was afebrile. The tongue was coated, voice was clear, bowel and bladder habits were normal. She had *pitta-kapha prakriti* in *Madhya vayah* (medium age), *Madhyama sara* (medium purity of body tissue), *Madhyama satva* (medium mental strength), *madhyama satmya* (homologation), *sama pramana* (equal body proportions), *madhyama vyayama shakthi* (medium physical strength).

Personal history –

Bowel – once/ day

Appetite – low

Micturition – normal (5-6 times/day)

Sleep – reduced and keeping awake at night

Addiction – nil

Diet – fast foods, spicy and oily foods

Occupation - student

**Assessment of acne vulgaris:**

### Assessment scale (Comprehensive Acne vulgaris Severity Scale- CASS)

Grade	Severity	Description
0	Clear skin	No lesions to barely noticeable ones, very few scattered comedos and papules
1	Almost clear skin	Hardly visible from 2.5 meters away, a few scattered comedones, small papules, very few pustules
2	Mild	Easily recognizable, less than half of the affected area is involved, many small comedones, papules or/and pustules
3	Moderate	More than half of the affected area is involved, numerous comedones, papules or/and pustules
4	Severe	Entire area is involved, covered with comedones, numerous papules and pustules, very few nodules and cysts
5	Very severe	Highly inflammatory acne covering the affected area, nodules and cysts present

CASS was used to assess the severity of the disease before and after the treatment. Before treatment it was found to be **grade 3**.

### **Samprapti Ghatak**

- *Nidana:*  
*Aaharaja- madhura, amla, lavana, fast food (burgers, pizza) aahara ati sevana.*  
*Viharaja- ratri jagarana*
- *Dosha – kapha, pitta, vata*
- *Dushya – rasa, rakta*
- *Agni – mandagni*
- *Srotodushti – sanga*
- *Udbhava sthana - amashaya*
- *Vyaktha sthana – mukha*
- *Rogamarga – bahya*

### **Management:**

OPD visits & treatment given –

- ❖ First visit:
  - *Arogya vardhini* tablet (250 mg) – 2 tablets bd.
  - *Gandhaka rasayana* (250 mg) – 2 tablets bd.
  - *Avipathikar choorna* 3 g at night in lukewarm water.
- ❖ First follow-up- (after 7 days):
  - *Arogya vardhini* tablet (250 mg) – 2 tablets bd.
  - *Gandhaka rasayana* (250 mg) – 2 tablets bd.
  - *Avipathikar choorna* 3 g at night in lukewarm water.
  - *Manjishtadi kwath* (30 ml) twice a day in 20 ml lukewarm water.
- ❖ Second follow-up (after 7 days):
  - *Arogya vardhini* tablet (250 mg) – 2 tablets bd.
  - *Gandhaka rasayana* (250 mg) – 2 tablets bd.

- *Avipathikar choorna* 3 g at night in lukewarm water.
- *Manjishtadi kwath* (30 ml) twice a day in 20 ml lukewarm water.
- ❖ Third follow-up (after 7 days):
  - *Arogya vardhini* tablet (250 mg) – 2 tablets bd.
  - *Gandhaka rasayana* (250 mg) – 2 tablets bd.
  - *Avipathikar choorna* 3 g at night in lukewarm water.
  - *Manjishtadi kwath* (30 ml) twice a day in 20 ml lukewarm water.
- ❖ Fourth follow-up (after 14 days):
  - *Gandhaka rasayana* (250 mg) – 2 tablets bd.
  - *Avipathikar choorna* 3 g at night in lukewarm water.
  - *Manjishtadi kwath* (20 ml) twice a day in 20 ml lukewarm water.
- ❖ Fifth follow-up (after 14 days):
  - *Manjishtadi kwath* (20 ml) twice a day in 20 ml lukewarm water.
  - *Gandhaka rasayana* (250 mg) – 2 tablets bd.

### **Advice on diet**

Patient was also advised to avoid *apathya aharas – dadhi, fast foods, katu, lavana, madhura rasa pradhana aharas*. Patient was advised to take more of *kashaya – tikta pradhana aharas*.

### **Observations & result:**

After the treatment, the signs were considerably reduced. The treatment after 2 months showed **grade 0** (no lesions to barely noticeable ones, very few scattered comedos and papules) form of the acne vulgaris.

### **Discussion:**

*Arogya vardhini rasa*<sup>[3]</sup> : by the virtue of its properties like - *deepana, pachana,*

*medohara*, '*malashudhikari nityam*', *yakrut uttejaka*, it was effective in breaking the pathology of *srothorodha*, *agnimandya*, *amadosha*. It is especially indicated in skin diseases '*hanti kushtani asheshan*'.

*Gandhaka rasayana*<sup>[4]</sup> : it is helpful in *ama shoshana*, *ama pachana*, *vishahara*, *krimihara*, *kledahara*, induces *shudhi* to *rasa dhatu*.

*Avipathikar choorna*<sup>[5]</sup> it helps in eliminating vitiated *pitta dosha*.

*Manjishtadi kashaya*<sup>[6]</sup> : it is useful in all types of *kushta* and has *medohara* property.

### Conclusion:

*Shamana chikitsa* was found to be effective in the management of *mukhadushika*. Significant changes were evident after two months of treatment with the above-mentioned medicines. This could be attributed to the correction of *agni*, removal of *srothorodha*, correction of *dhatu parinaman* and *dosha shamana*.

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