Importance of hetu and nidan parivarjan in chikitsa of akala palita-a case study.

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Abstract-

Akala palita is a common burning problem particularly in youth resulting in cosmetic , mental and social issues. The incidence of premature aging along with akalapalita is on increase particularly in tropical and developing countries. Many factors are responsible for akalapalita like stress, improper dietary habits, not following healthy lifestyle, packed food etc. apart from these, many new hetu have to be considered and treated because treatment cannot be completed without nidan parivarjan.

This case deals with a young boy of age 12 years having premature graying of hairs, since 6 months. Intensity increased over last 2 months and patient came for consultation.

This case was managed successfully with nidanparivarjan, shaman nasya and bruhan snehapan for 2 months on opd basis.

Keywords: *akala palita, hetu, shaman nasya.*

Introduction-

Premature graying of hair is a burning problem, as large percentage of population especially young men and women are affected. Around the world, men spend about one million dollars yearly for caring of hair, whereas women spend 500 billion dollars, without having awareness about the role of improper diet in causation of grey hair.

Even though heredity is one of the causes of premature graying of hair, Ahara and regimens also cause, which includes

excessive intake of spicy and salty food, tea, Lacks of sleep, exercise, stress etc. are possibly the most common and important causes for the condition. There is evidence that people with premature graying of hair might develop low bone density and osteopenia later in life along with cardiac disorders.

It is a well known fact that the colour of human hair depends on melanogenesis through a process of synthesis of melanin and its subsequent distribution from melanocyte to keratinocyte. However, the process is thought to be regulated genetically at various levels. The human hair follicles contain two type of melanin, the black brown pigment eumelanins mainly present in black and brown hair and the yellow or red pheomelanins in red and blonde hair.[1]

Ayurveda, the richest heritage of India long back highlighted this burning problem and categorized the same under the heading of Palitya. Which mainly focus on Palitya due to various internal and external causes. The disease Palitya is mentioned under the heading of Kshudraroga and Sirogataroga in Sushruta Samhita[2] . The main etiology of Palitya is vitiation of Dehoshma and Ushna Guna of Pitta which circulates to Romakoopa and causes Paka of hair[3.]

Material and methods-

Aims and objective-

To study the Nidanas of Akala Palitya and their role in manifestation of disease, as mentioned in Ayurvedic Samhitas in view of present scenario.

Case history-

This case deals with a young boy of age 12 years having premature graying of hairs, since 6 months. Intensity increased over last 2 months and patient came for consultation.

- Name- X.Y.Z.
- Age- 12 years
- Sex-male
- C/O- akala palita- 6 months
- Trushnadhikya
- Daurbalya
- Netradaha } since 15 days
- No history of any major medical or surgical illness.
- Personal history- football player (used to take ORS and packed fruit juices very often, daily.)
- Kulaja itihas- NA
- Astavidha pariksha-
- Nadi- pitta vata
- Mal – asamhat, odour
- Mutra- samyak (frequency +++)
- Jivha- niram
- Kshuda-samyak (vishamagni)
- Trushna- +++ adhikya
- Nidra- samyak
- Aakruti-madhyam
- Prakruti- pittapradhan kaphanubandhi
- Sara –mansa, asthi, majjasar
- Sanhanan- uttam

After taking detailed history it was come to know that patient was having so much intake of ORS and packed juices to combat increased thirst since last 2 months also being a football player he had lots of stress, exertion, competitive nature and anger produced from that so all these factors were involved in pittavriddhi.

Assessment criteria-

1. Akala kesh vaivarnyata-

   Grade-

   0(N)- no grey hairs
   1(M)- one area of scalp affected
   2(M)- two areas of scalp affected
   3(S)- 3 or more areas of scalp affected

2. Hair texture-

   a) Dryness of hair
      1- Absent
      2- Present
   b) Oily hair
      0-absent
      1-present

c) Roughness of hair
   0-absent
   1-present

3. Random hair count-
   Two sites of scalp were chosen where more grey hairs were present. One sqcm was chosen from those sites and no. of grey hairs was counted.

   Grade 0(N)- no grey hairs
   Grade 1(M)- 1-10 grey hairs in 1 sqcm
   Grade 2(M)- >10 & <25grey hairs in 1 sq cm
   Grade 3(S)->25 grey hairs in 1 sq cm

Treatment given-

Sr no.	Treatment	Dose	Duration	Drug
1	Nidan parivarjan	-	-	-
2	Shaman nasya	6,8,10drops (cycles)	Daily (1 month)	Ksheeradi taila
3	Bruhan snehapan	10 -15ml	1 month	Goghruta

Assessment of symptoms-

Sr no.	Criteria	BT	AT (1 month)	AT(2 months)
1	Kesh vaivarnya	Grade (2)	Grade (1)	Grade (0)
2	Hair texture (dryness, roughness)	Present (1)	Present (1)	Absent (0)
3	Random hair count	Grade (2)	Grade (2)	Grade (0)

Result-

From the assessment of symptoms before and after treatment , it can be concluded that

nidanparivarjan, shaman nasya with ksheeradi taila for one month and bruhan sneha with goghruta for one month proved significant in relation with akala palita .

Similarly it can be said that nidanparivarjan was important part of this treatment as recurrence of symptoms was not occurred after 6 months of treatment also.

Discussion-

The increased heat or Ushanatwa of the body reaches to the Shsiropradesha or scalp area by certain psychosomatic causes like grief, fatigue, anger etc, and gets mixed with vitiated Pitta Doshas and further afflicts the hair and ripens the hairs and causes Palitya (gray colour of the hair)[4] . Although for the disease of Palitya, no specific Nidana are mentioned, but still on basis of Samprapti, Pitta Prakopaka Nidana[5] , Rasadushti[6] and Asthidushti[7] pathology can be understood. Child consuming the diet with dominantly, Ushna (hot), Tikshna (Spicy) properties and Rasas like, Lavana (salt), Amla (acid), are more prone to Palitya.

Theses vitiate Pitta and affect Rasa Dhatu Poshana karma. Rasa Dhatu and AsthiDhatu dushti is the cause of Palitya. When Ahararasa is not digested properly it results in improper formation of Dhatus leading to Palitya[8]. Excessive use of Pippali (long pepper), Lavana (salt), and Kshara (alkaline materials) also causes of Palitya [9]. Further, certain idiopathic causes (Adibalapravrita) will also contribute for development of premature graying of hairs especially in child with Pitta Prakriti.[10]

Acharya Susharuta and Madhavakara have emphasized pathogenesis with the increase of Vayu especially due to excess of Shoka, Krodha and Shrama. At the same time the Pitta is being increased in its Ushna Guna. This provokated Pitta circulates throughout the body through Rasayana is by the virtue of Vikshepana Guna of provokated Vata to increase the Sharira Ushma. This Sharirika Ushma reaches to Shiras and vitiates Sthanika Vatakarya and Shleshma Karya. The Sthanika Pitta and Kapha Dushana happen, causing Bhranjakagni Dushti. Bhrajaka Pitta works are hindered and causing Vikrita Kesha Varna Utpatti. This Samprapti emphasizes the involvement of Dehoshma in the disease pathology.

SAMPRAPTI GHATAKA: [11]

(Samprapti Ghataka of Palitya) Dosha-Tridosha

- Pitta- Bharajaka pitta pradhana
- Dushya- Rasa,AsthiDhatu
- Agni- Jatharagni,Dhatwagni
- Strotus -Rasavaha, Asthivaha
- Strotodusti -Sanga, Vimarga gamana
- Udbhavasthana -Aamashaya
- Vyadhiadhisthana- Keshabhumi
- Rogamarga -BahyaRogaMarga
- SadhyaAsadhyata- Ekdoshaja Sadhya, Sannipataja Asadhya

Contemporary views on etiopathogenesis-

The pigmentation of hair follicles is due to melanin. Melanin is two types: eumelanin and pheomelanin. The colour of human hair depends on melanogenesis, the process of synthesis of melanin and its subsequent distribution from the melanocyte to

keratinocyte. The biological process of gray hair appears to be associated with the progressive loss of pigment producing cells. Depletion of melanocytes leads to premature graying of hair .[12]

Discussion on drug selection-

The treatment given in this case was chosen after the complete examination of patient and disease.

First and foremost important part is nidanparivarjan which was long term use of ORS and packed fruit juices, in this case. It lead to lavan rasa atiyog lakshan resulting in palitya. And in addition to this stress, anger ,competitive nature were also contributing to pitta and vata vruddhi.

Then ksheeradi taila shaman nasya given for about a month with 7 days nasya then 7 days gap in this pattern with dose of 6,8,10 bindu. Nasa is the dwar to shiras so ksheeradi taila[13] was useful in pacifying shirogata pitta dosha and helped in sampraptibhanga.

After shaman nasyam, bruhan ghrut pan was given to patient with goghruta in dose of 10-20 ml. It helped in generalized vata pitta shaman and saravan dhatu nirmiti also balya to asthi dhatu , as kesh is considered as mala of asthi.

No sufficient treatment modalities are helpful for palitya inspite of so many are described in samhitas, probably the main cause behind this is hetu satatya. We do all type of shodhan , shaman chikitsa but as nidanparivarjan not done properly by identifying pin point hetu that's why chances of recurrence are more in case of akala palita.

So this case emphasizes on importance of finding proper hetu and nidanparivarjan for complete and shuddha chikitsa.

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