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# A CASE STUDY ON THE ROLE OF VAMANA THERAPY IN TREATING DADRU (TINEA CORPORIS)

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## ABSTRACT

*The longest sense organ in the human body, the skin surrounds the other organs. It serves as a protective component of the human body. Numerous environmental elements cause early physiological changes as well as numerous pathological impacts on the skin. Infections with bacteria, fungus, etc., are the cause of skin illnesses. In Ayurveda, the general term "Kushta" refers to all skin conditions. Kshudrakushta and Mahakushta are the two primary forms of kusta. Among them is Dadru. It is kapha-pitta dominant and is Raktapradoshaja vyadhi. Dadru is comparable to Tinea corporis, a fungal infection brought on by unsanitary settings, because all of the symptoms are the same. The WHO estimates a 20–25% prevalence rate for superficial mycotic infections. Ayurveda uses fundamental concepts like Shodhana and Shamana chikitsa to give patients long-lasting benefits and a better, healthier life. Here, we report a 32-year-old female who has been experiencing Dadru kushta symptoms for the past three months. Her symptoms did not go away despite using allopathic therapy for three months. She had itching, dryness, and huge circular, erythematous, scaly areas over her buttocks and thoracoabdominal area. The patient has never had any prior chronic illnesses. The patient is treated with Shamana chikitsa, or conservative treatment, after receiving Panchakarma, also known as Vamana karma, or emesis therapy. Following the course of Vamana karma, the patient noticed a reduction in symptoms.*

**KEYWORDS:** *Panchakarma, Vamana, Dadru, Shodhana, Shamana, Tinea corporis.*

## INTRODUCTION

The human skin is said to be the largest organ in the integumentary system because of its exterior location and size, which render it vulnerable to a number of conditions. Skin conditions have become much more common in tropical and developing nations like India, where the year-round high temperatures and humidity have contributed to the rise in recent years. According to the survey, between 1-7 and 1-10 percent of all patient visits to primary care doctors are for skin issues [1]. Fungal infections can be anything from minor infections caused by Candida species to serious infections caused by Aspergillus species that can kill immunocompromised people[2]. Fungal infections can typically range from relatively superficial (stratum corneum, hair, and nails) to deep, affecting the skin by hematogenous dissemination. Drugs like Terbinafine and Miconazole cream are frequently used topically in synchronous science, whereas Griseofulvin and Itraconazole are utilized systemically[3]. However, there are significant adverse effects from this treatment, such as rashes, hair loss, an unpleasant taste, itching, etc[4]. Additionally, recurrences of the illness cause depression in sufferers. It interferes with the patient's normal life. In *Ayurveda*, all skin conditions are categorized under the general term "*Kushta*," which is regarded as one of the *Ashtamahagada.* These are further divided into *Mahakushta* and *Kshudrakushta*. Among them is *Dadru*[5,6]. *Dadru* has been explained by *Acharya Charaka* in *Kshudrakushta*[6] whereas *Mahakushta* has included *Acharya Vagbhata*[7] and *Acharya Susruta*[8]. *Kushta* can be caused by a number of factors, including *Vishamashana* (incompatible food), *Vegavidharana* (suppression of natural urges), *Diwaswapana* (sleeping during the day),*Atilavana* and *Atitikshna* ahara (consuming too much salty or spicy food), consuming contaminated food, drinking cold water after physical exertion or *Atapa* sevana (exposure to sunlight)[9]. The primary *Dadru lakshanas* are *Raaga* (erythema), *Mandala* (circular patches), *Utsanna* (higher circular lesions), *Pidakas* (papule), and *Kandu* (itching). The major purpose of *Dadru's samprapti* is to prevent *Pitta-kapha dosha* vitiation and *dushti* of *rasa* and *raktavaha srotas*[10]. The fungal skin condition Tinea corporis can be linked to *Dadru* because of the similarity in their symptoms. Dermatophytes, which are related fungi, can result in skin abnormalities such as Ringworm, Tinea, Dermatophytosis, or Mycosis[11]. In literal terms, *Panchakarma* means "Five Therapeutic Procedures": *Niruha* (therapeutic decoction enema), *Anuvaasana* (therapeutic oily enema), *Nasya* (therapeutic errhine), *Virechana* (purgation therapy), and *Vamana* (emesis therapy). *Panchakarma*, to put it another way, is a healing method or the foundation for many Ayurvedic practices[12]. The two main specialities of Ayurvedic medicine are *Samshamana Chikitsa* (conservative treatment) and *Samshodana Chikitsha* (bio-purification treatment). *Panchakarma* therapy is essentially a

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biocleansing regimen or process meant to rid the body of harmful substances. Following *Snehana* and *Swedana*, *Panchakarma* is a process wherein vitiated *Utklishta Doshas* are thrown out via the closest path[13]. *Vamana Karma* is one of them in *Panchakarma*. It is the process by which *Urdhvabhaga* expels *Doshas*. This process involves the medicine being taken orally acting on internally located doshas, particularly *Kapha doshas*, and then expelling them from the body through the mouth. In this case, the patient had *Vamana* treatment initially, followed by the administration of *Shamana* (conservative) medications. In this instance, there was a great sense of relief. An effort has been made to demonstrate the effectiveness of *Ayurvedic* treatment for *Dadru*.

**Case Study**

A 32-year-old female patient with O.P.D. number 31022 arrived at Ashwini Ayurveda Hospital's O.P.D. no. 1 on October 14, 2024, to receive *Shamana aushadhi*. After being informed about *Shodhana* therapy, she proceeded to the AAMC *Kayachikitsa* Department on an OPD basis for *shodhana chikitsa* on October 17, 2024. She brought up the following grievances:

- Scaly patches (*Matsyashakalopamam*) with a crimson border around the thoracoabdominal and buttocks with *Mandalotpatti.*
- Reddish circular or round patches on the back and breast (*Mandalotpatti*),
- The periphery of the lesions is elevated (*Utsanna Mandala*)
- The itching gets worse at night (*Kandu*)
- Reddish Discolorations (*Raaga*)
- Enduring pain for the past three months
- Had undergone contemporary therapy with little progress and recurrence.

**Associated Complaints-** an irregular bowel movement.

**Past History**

- No H/O- DM, HTN, TSH
- No F/H/O- Any skin disorder.

**On Examination**

- General condition: Moderate
- Pulse rate: 86/min
- B.P: 110/70 mm of Hg
- R.R: 20/min
- *Mala: Vibandha*
- *Koshtha: Madhyam*
- *Mutra*: Regular
- *Nidra*: Disturbed due to Itching
- *Kshudha*: *Samyak*
- *Jivha*: *ama*

**Systemic examination**

- Respiratory System: - NVBS heard.
- Cardiovascular System: - S1S2 heard.
- CNS: - All superficial reflexes are intact, Patient is conscious and well oriented
- GIT: - Soft Abdomen, Bowel sound heard, No Pain or any other symptoms.

**Local examination**

- Shape- Circular shaped lesion
- Size- Multiple Patches, no specific size. (Ranging from 5mm to 15cm too)
- Color- Blackish red
- Secretion-Absent (occasionally *lasika srava*)
- Elevation-Present (at periphery)
- Pain-Absent
- Inflammation-Absent
- Loss of Sensation- No

***Samprapti Ghataka***

- *Dosha- Pitta Pradhana Kapha*
- *Dushya- Rasa, Rakta, Mamsa, Ambu*
- *Srotas- Rasavaha, Raktavaha, Mamsavaha, Svedavaha*
- *Srotodushti- Sanga*
- *Ama- Sama*
- *Udbhavasthana- Amashaya*
- *Vyaktasthana*- Abdominal region, Chest region, both buttocks.

The patient received a diagnosis of *Dadru* following a thorough clinical evaluation, and Vamana Karma was recommended.

***A. Purva Karma***

- ***Deepana Pachana*****:** *Panchakola Choorna* - 3 gm three times a day mixed with half glass of lukewarm water before food was given until *Nirama Lakshana* manifested. *Snehapana* was then administered to the patient.
- ***Snehapana*****:** The patient is given *Shodhananga Snehapana* with *Mahatikta ghrita* in increasing dose patterns till *Samyak Snigdha Lakshana* manifests, which is from October 17, 2024,to October 20, 2024. During this time, daily *Jiryamana* and *Jirna Lakshana* of *Snehapana* are recorded.

***SNEHAPANA* DOSE**

| Day | Date | Dose | Time | Hunger Time |
|---|---|---|---|---|
| 1 | 17/10/2024 | 30 ml | 08:05 AM | 11:30 AM |
| 2 | 18/10/2024 | 50 ml | 07:55 AM | 01:05 PM |
| 3 | 19/10/2024 | 70 ml | 08:00 AM | 03:15 PM |
| 4 | 20/10/2024 | 80 ml | 07:55 AM | 04:50 PM |

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- ***Vishrama Kala*:** Two days of *Abhyanga* with *Nalpamaradi taila* and *Bhaspa Sweda* were performed on October 21 and 22, 2024, and the patient was administered *Kapha utklesha Ahara.*
- ***Pradhana Karma*:** On October 23, 2024, *Vamana Karma* Day, the patient received first *Abhyanga* with *Nalpamaradi Taila* and *Bhaspa Sweda*. The patient signed an informed consent form after being informed about the treatment and given counselling.
  - ***Vamana Dravya*:** *Madhanphala Pippali Yoga* (*madanaphala pippalichurna* 5gm, *yashtimadhu churna* 4gm, *vacha churna* 3gm, *saidhava lavana* 1gm, *madhu* 10ml) administered to the patient.
  - ***Vamanopagadravya*–** *Ksheera* (2000ml), *Yashtimadhuphanta* (1000ml), *Lavanajala* and *Koshnajala.*

| Time | Name of drug | *Matra* | *Vega* | *Upavega* | Output | Signs and symptoms | Vitals | Complications |
|---|---|---|---|---|---|---|---|---|
| 05:50 am | *Dugdha* | 5 glasses | | 1 | *Dugdha* | | BP:110/70 mm Hg PR:78/min | |
| 06:03 am | *Dugdha* | 3 glasses | 1 | 1 | *Dugdha+kapha* | | | |
| 06:10 | *Madhanphal Pippali Yoga(madana phalapippali churna* 5gm, *yashtimadhu churna* 4gm, *vacha churna* 3gm, *saidhava lavana* 1gm, *madhu* 10ml) | | | | | | BP:120/80 mm Hg PR:86/min | |
| 06:28 am | | | | | | *Sweda-pravarti , Lalasrava* | BP:110/70 mm Hg PR:92/min | |
| 06:35am | | | 1 | | *Dugdha+kapha+* medicine | | | |
| 06:38 am | *Yashtimadhu phanta* | 3 glasses | | 1 | *Dugdha+ Kapha+* medicine | | | |
| 06:40 am | | 2 glasses | | 1 | *Dugdha+ Kapha* | | | |
| 06:42 am | | 1 glasses | | 1 | *Kapha+phanta* | | | |
| 06:45 am | | 2 glasses | 2 | 1 | | *Sweda-pravarti* | BP:110/70 mm Hg PR:92/min | |
| 06:47 am | | 3 glasses | | 2 | *Kapha+phanta+* medicine | | | |
| 06:55 am | | 1glass | 1 | | *Phanta* | | | 1 episode of loose stools |
| 07:03 am | | 1 glass | | 1 | *Phanta+dugdh+kapha* | | | |
| 07:05 am | *Lavanodaka* | 2 glasses | | 2 | *Kapha+phanta* | | | |
| 07:12 am | | 3 glasses | 1 | | *Phanta* | | | |
| 07:15 am | | 1 glasses | 1 | 1 | *Phanta* | | BP:120/70 mm Hg PR:96/min | |
| 07:17 am | | 2 glasses | | 1 | *Udaka+phanta* | | | 1 episode of loose stools |
| 07:20 am | | 3 glasses | 2 | | *Udaka+kapha* | | | |
| 07:25 am | *Koshnajala* | 3 glasses | 1 | 1 | | | | |
| 07:28 am | | 2 glasses | | 1 | | | | |
| 07:32 am | | 2 glasses | | 1 | | | BP:120/80 mm Hg PR:98/min | |

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***Paschat Karma*:** *Dhumapana*, prepared by *Haridra*, *Trikatu Churna*, and *Murchita Goghrita*, is given at 7:40 AM after bed rest is requested. After *dhumapana*, the patient was told to do *Samsarjana Karma* for seven days, which includes three *Anna Kala*, in accordance with *Shuddhi's* obtained knowledge. *Anna Kala Peya* was initially recommended. Eventually, on the evening of the seventh day, the regular diet was administered after *Ahara* was gradually changed from *Laghu* to *Guru Guna Pradhana*. *Samsarjana krama* was finished, and on 31/11/2024, *shamana aushadi* was initiated to calm the residual vitiated *Pittadi Doshas*.

**OBSERVATION AND RESULT**

| Sl.No | Medicine | Dose and dosage | Duration |
|---|---|---|---|
| 1 | *Sariva Kalpa* | 15 ml-0-15 ml (A/F) | 7 Days |
| 2 | *Manjishtadi Kashyam* | 20 ml-0-20 ml (B/F) | 7 Days |
| 3 | *Panchatikta ghrita guggulu* | 2--2—2(B/F) | 7 Days |
| 4 | *Arogyavardhini vati* | 2—0—2( B/F) | 7 Days |
| 5 | *Gandhak rasayana* | 2 –0—2 (B/F) | 7 Days |

| Grade | Score |
|---|---|
| No Scaling | 0 |
| Mild Scaling by rubbing/by itching | 1 |
| Moderate scaling by rubbing/by itching | 2 |
| Severe scaling by rubbing/by itching | 3 |
| Scaling without rubbing/by itching | 4 |

Due to its *amavastha*, the patient required up to three days to do *deepana* and *pachana*.

The first *vega* began at 06:03 AM on *Vamana* Day, while the last one, the tenth *vega* at 7:25 AM. Based on observations made throughout the Vamana therapy, the following conclusions were drawn.

| Sl.No. | Vamana Karma | Remarks |
|---|---|---|
| 1. | *Vaigiki* | *Uttam shuddhi* i.e.10 *vega* |
| 2. | *Maniki* | Input: 9 litre Output :11.5litre |
| 3. | *Antiki* | *Kaphanta* |
| 4. | *Laingiki* | *Samyak Vamana Lakshana* observed |

**Observations on Signs and Symptoms**
**Gradation Scales**

***Kandu* (Itching)**

| Grade | Score |
|---|---|
| No Itching | 0 |
| Occasional Itching | 1 |
| Frequent but tolerate itching | 2 |
| Very severe itching disturbing sleep and activity | 3 |

***Vaivarna***

| Grade | Score |
|---|---|
| Normal discolouration | 0 |
| Slight discolouration | 1 |
| Reddish discolouration | 2 |
| Slight reddish black discolouration | 3 |
| Black discolouration | 4 |

***Pidaka***

| Grade | Score |
|---|---|
| Absent | 0 |
| Disappears but discolouration persists | 1 |
| *Pidaka* <5 sq.cm in whole of the affected area | 2 |
| *Pidaka* in between 5-10sq.cms. in whole affected area | 3 |
| Many or uncountable *pidaka* in whole of the affected area | 4 |

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***Utsanna Mandala***

| Grade | Score |
|---|---|
| Absent | 0 |
| Mild elevated lesion | 1 |
| Moderate elevated lesion | 2 |
| Severe elevated lesion | 3 |

The following observations were made based on the results of the treatment (gradation as per above tables).

| ***Lakshana*** | **Before *Snehapana* (14/10/2024)** | **After *Snehapana* (21/10/2024)** | **First follow up (08/11/2024)** |
|---|---|---|---|
| Scaling | 3 | 1 | 0 |
| *Kandu* | 3 | 1 | 0 |
| *Utsanna mandala* | 2 | 0 | 0 |
| *Pidaka* | 2 | 1 | 0 |
| *Vaivarna* | 3 | 1 | 0 |



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## DISCUSSION

*Acharya Charaka* had previously stated in *Kushta Chikitsa Adhyaya* in *Chikitsa sthana* that in *Vataja kushta, Ghritapana* should be administered initially, while in *Kaphaja Kushtha, Vamana* procedure should be performed and *Virechana* and *Raktamokshana* should be the first line of treatment in *Pittaja Kushtha*[14]. The *doshas* that are calmed by *shodhana* never reoccur, but those that are calmed by *langhana-pachana* might. *Shodhana* will cause the *doshas* to separate from their roots. As a result, there is no danger of disease developing[15]. *Acharya Charaka* has stated in *Kushtha Chikitsa* that it is not advisable to eradicate the vitiated *Doshas* all at once, because the patient might find *Shodhana* intolerable. Following *Shodhana* therapy, *Shamana* (Conservative) can be used for the remaining *Doshas*. This article discusses the function of medications used in *Panchakarma* treatment and the administration of *Shamana* medicine[16].

***Purva karma-****Deepana Pachana* and *Snehapana* are the forms in which *Purva Karma* is administered. *Purvakarma* plays a crucial part in distinguishing the body's vitiated Doshas from its *Dushyas*, or *Srotas (Dosha-dushya samurchana*). Also, it assists in moving the vitiated Dosha from *Shakha* to the body's *Koshta* region, where it can be eliminated from the body's closest root. *Deepana-Pachana* with *Panchakola churna* (*Pippali,Pippalioola,Chavya,Chitraka, Shunthi*) is always the drug of choice for *Deepana* and *Pachana*. It helps to convert *Ama* into *Niramavastha*. Also, this drug has *Kaphavatahara, Srotoshodaka* and *Pittakara* action. With *Srotoshadhana* it brings *Doshas* to *Koshta* [16].

***Abhyantra Snehapana*:** *Sneha* is administered internally for *Shodhana, Shamana,* and *Brimhana* purposes through a technique known as *Abhyantara Snehapana* (internal oleation). *Samyak snigdha lakshana*, which *Acharyas* have already explained, indicates *Snigdhata* (unctuousness), *Vishyandan* (liquefication), and *Vilayana* (dissolution or diffusion). *Dalhana Acharya*, in quoting *Vishyandanam Drava Srutihi*, says that *Mardavata* means softness. *Kleda* means moisture or moistness. *Kleda* in this context denotes the body's increased *Apya Guna* [17], and the evaluation of *Samyak Snigdha* was conducted based on these *Gunas* as its main characteristics. Unctuousness of the body, skin, and stool might be taken into consideration (*Pureesha Twak* and *Gatra Snigdhata*). *Vishyandana* is evaluated by stool excretion, either with or without *Sneha* (*Adhastat Snehadarsana* and *Snigdha Mala*). *Mardavata* is evaluated by *Gatra Mardava*. *Kledana* was evaluated using *Asamhat Varcha*, or stool consistency[17]. Each of the *Doshas* has its own *Gati* in the body. The *Doshas* will be exacerbated in *Vyadhi Avastha* and may manifest in *Shakhas*.

Using either *Urdhwamarga* or *Vamana karma* or *Adhomarga* or *Virechana karma*, *Shodhana Chikitsa* (purification therapy) seeks to eliminate these vitiated *Doshas* from the body[18]. Here, *snehapana* is performed using *Mahatikta ghrita* at progressively higher dosages. An acharya has detailed *Mahatikta Ghrita* in *Madhyama Khanda* in the *Sharangdhara Samhita*.

The *Acharya* has stated in the *phalashruti* of the *Mahatikta Ghrita* that it is primarily a cure for *kushta*. It was chosen for the treatment after the *guna* of the *Mahatikta Ghrita's* contents was examined. Because all of the *dravyas* in the *ghrita* are *Tikta rasatmak*a, *Madhura vipaka*, and *Ushna viryatmaka*, they are attracted to *Rasa dhatu* and, eventually, to skin[19].

***Pradhana karma-*** Here, *Vamana* was carried out as a *pradhana karma*. As *Udbhavasthana* is *Amashaya* and *Dadru* is *Pitta Pradhana Kapha* Predominant, the Vaman method is the most effective treatment. A *Vamana* expels out the aggravated *dosha* and pushing them towards the *Urdhvabhaga* through the oral route. *Vamana* is a treatment specifically for *KaphaDosha.* The morbid doshas are removed from the *Shakha* to the *Koshta* by the *Vamaka dravyas' guna* and the dominance of *Vayu* and *Aakasha Mahabhuta*, after which they are evacuated from the body orally. Soothened *Doshas* will get liquefied and reaches to *Koshta* by *Swedana*, which can be easily elected by action *Vamana*[20].

***Samsarjana krama-***According to three *Anna Kala, Samsarjan Krama* was recommended for seven days while taking the *Pravara Shuddhi* (Best *Shudhi*) into consideration. Because of *Shodhana, Agni* was hindered. Thus, *Samsarjana Krama* strengthens the body and improves *agni* after *Vamana*[20].The patient was therefore maintained on *laghu, pathya ahara*.

**Internal Medication**

1) ***Sariva Kalpa-***This medication is mostly used to treat *dadru* and other skin conditions. *Sarivadi kalpa* can be used to treat skin conditions.. It aids in *pitta shamaka*, blood cleansing, and anti-inflammatory properties.
2) ***Manjishtadi Kashayam-***The primary purpose of this medication is to treat different skin conditions. *Manjisthadi Kashaya* can be used to treat skin conditions since it aids in the natural purifying of blood. *Manjishtadi Kashayam* removes blood flow obstacles and aids in blood detoxification.
3) ***Panchatikta ghrita guggulu-***This is a highly effective medication that is recommended for *Kushta Adhikara*, which is indicated in *Vishama* and *Atiprabala Vata*. *Pancha tikta* contains the following: *Nimba, Kantakari, Vasa, Amruta,* and *Patola*. Although both *Kapha* and *Vata* are engaged in *Dadru*, *Vata* itself is responsible for spreading all of these *Doshas*. *Tikta Rasa* influences both the *Kapha* and *Vatadosha*. *Guggulu* is a *Yogavahi Dravya* serves as *Vranashodhaka*, *Kleda*, *Vikruta Meda upshoshana*, and *Kandughna*.
4) ***Arogyavardhini vati-***They are called herbomineral formulations. *Samprapti Vighatana* of *Kushta* greatly benefits from its possession of *Kushtahara*, *Durmedahara*, *Kledahara, Dhatu Gata Amapachana, Raktaprasadana,* as well as the *Deepana-Pachana* and *Kapha-Vata Shamaka* properties.

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5) ***Gandhaka rasayana***-It has qualities such as *Durmedhohara*, *Rasayana*, *Dhatubalya*, *Vishaghna*, *Vranasodhana*, *Ropana*, *Rakta-Tvakgata Vishahara*, *Kushtagna*, and *Rakta Doshahara*. In order to treat *Dadru*, all of these qualities are necessary.

## CONCLUSION

This case serves as documented proof of *Pittakapha* pradhana's effective treatment of *Dadru Kushta* through *Shamana* and *Shodhana Chikitsa*. *Shodhana* should be performed repeatedly to reduce the frequency of recurrence. This case's success raised the patient's optimism about *Ayurveda*. *Tridosha* vitiation is necessary for *kushta roga* to occur. The initial line of treatment should be *Nidana parivarjana* since the condition manifests itself beginning with the *nidana*. By limiting the vitiation of *doshas*, it prevents diseases from progressing further. If the *nidana parivarjana* is not followed, proceed with the appropriate *Yojana* of *Shodhana* and *Shamana* therapy, which aids in curing the illness from its root.

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