Ayurvedic Management of Yuvanpidika with Special Reference to Acne Vulgaris in Adolescence – A Case Report

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Abstract:- Yuvanpidika is mentioned in the Kshudra Rogas in Ayurved. Kshudra Rogas are the group of diseases which are diminutive in nature. Other synonym of Yuvanpidika is Mukhadushika. The first one means the eruptions occurring in young generation specifically adolescents. The latter means the barrier which disturbs the beauty of the face. Its modern equivalent is Acne Vulgaris. Acne is chronic inflammatory pilo-sebaceous glands derangement. The modern treatment is time taking and often produces adverse effects. The conscious younger generation in the need to get complete relief need proper counselling about the healthy lifestyle along with the treatment. Present study shows a case of a teenager girl of grade 3 Acne Vulgaris treated with Ayurvedic Shamana Chikitsa and Jalaaukavacharana along with Nidanaparivarjana over the course of 2 months only. However she was advised to follow proper lifestyle afterwards.

Keywords:- Yuvanpidika, Kshudra rogas, Mukhadushika, Acne Vulgaris, Shamana Chikitsa, Jalaaukavacharana, Nidanaparivarjana.

I. INTRODUCTION

Humans have engaged with the concept of beauty for ages. Everyone wants to look more beautiful and attractive. So, the smallest spot on the face might lessen the legacy of the beauty especially in adolescents. Adolescent age group is referred as ‘Youvanavastha’ in Ayurved. And the common culprit which disturbs the beauty of these adolescent teenagers is said to be Yuvanpidika. Another synonym of Yuvanpidika is ‘Mukhadushika’ which literally means barrier of the beauty of the face.

The diseases which are Kshudra or diminuitive in nature, which symptoms and signs are in less quantity and quality compared to other diseases and which are not life threatening are termed as ‘Kshudra-roga’ in Ayurved context. Yuvanpidika is one of the Kshudra-rogas. The main symptom of Yuvanpidika mentioned by Acharya Sushruta is – Pidika (eruption) which looks like Shalmali kantaka (Thorn of the herb named Shalmali malabarica). It is formed over face because of the vitiated Kapha-Vata and Rakta Doshas.  

If we compare all these symptoms of Yuvanpidika in modern context, it can be correlated with Acne Vulgaris. Acne is a chronic inflammation of pilo-sebaceous units. It has been estimated to affect over 90% of adolescents, most commonly between the ages of 12 to 20. Acne can have negative effects on self esteem. The consequences can be devastating leading to embarrassment, school avoidance and lifelong effects on ability to form friendships and acquire and keep employment.  

II. CASE REPORT

A 15 year old female patient reported in the in the OPD of Kaumarbhritya department of CSMSS Ayurved Hospital, Kanchanwadi, Aurangabad, Maharashtra complaining with acne papules and pustules over bilateral cheeks and forehead along with inflammation since last one year. The patient had very oily skin. The problem started when patient was 14 year old when reddish comedones started to erupt on both cheeks associated with tenderness and itching. The patient got very anxious and consulted dermatologist. The treatment she received was local retinoid application and oral antibiotics. She continued this treatment for two months. But only during the treatment would she get relief, after discontinuing the treatment the symptoms would exaggerate and worsen. She approached two more dermatologists for allopathic treatment but did not get sustained relief. Then she came to our hospital for seeking Ayurvedic treatment.

General Examination:
General condition- Good
Pulse- 78/min.
Respiratory System- Air Entry Bilaterally Equal
Cardiovascular System- S1 S2 Normal

Ashtavidha Parikhshana-
Nadi- Vatapradhana Kapha
Mutra- Samyak Pravritti
Mala- Samyak Pravritti
Jivha- Saama
Shabda- Prakrit (normal)
Sparsha- Samshhitoshna, Snigdha
Druk-Pракrit
Akriti- Madhyama
Prakriti Parikhshana- Vata-Kapha Pradhana
Koshtha- Madhyam
Local Examination - The skin of the face of the patient was very greasy. The eruptions were located at checks and forehead with multiple reddish inflamed papules and pustules. The eruptions were dense and associated with pain and severe itching.

Brief History –
Socioeconomic status - Higher middle class
Ahara titvita (Dietic history) - Excessive eating of curd, pickles, groundnuts, sesame, salty-fried food stuffs, junk foods on daily basis.
Vihara titvita (Lifestyle) - Irregular sleep and diet patterns due to stress and excess of the study.

Diagnosis – It was mainly based on Sushruta Samhita and Ashitangahridayam. The signs and symptoms of the patient were taken as per Acharya Sushruta and Vagbhata said e.g.- Shalmali thorn like Pidika (papules and pustules), Saruja (pain or tenderness), Ghana (dense-inflammed), and Kandu (itching).

Nidanapanchaka -
Nidan- Aiti-ama and lavana rasapradhana, Atisnigdha, Paryushita ahara, and stressful Vihara Poorvarupa- Reddish comedones and greasy skin.
Rupa- Shalmali kantaka Pidika (Shalmali thorn like Reddish papules and pustules), Ghana (inflammation), Saraja (pain and tenderness), Kandu (itching).

Shodhana Chikitsa - The patient was subjected to Jalaukavacharana (Leech application) twice in the 2 months course. The first sitting was on the second visit i.e. after 15 days of oral medicines started. And the second sitting was done on 45th day of the treatment. While each Leech application sitting, both the cheeks were applied with 2 – 2 leeches (considering the severity of pustules and papules) and this application continued uptill the Shuddha Rakta comes out. The Jalaukavacharana Vidhi and Leech care procedure was adopted from the Sushrut Samhita.

III. MATERIALS AND METHODS

First of all, Nidanaparivarjana (avoidance of cause) was advised. The patient was asked to stop eating of curd, pickles, groundnuts, sesame, salty-fried food stuffs and junk foods. Also she was advised to follow regular Dinacharya (regular diet and sleep pattern).

The patient was mainly subjected to Shamana chikitsa (pacification therapy) and Shodhana Chikitsa (Purification therapy). Throughout the therapy of 2 months, the patient was followed every 15 days at OPD of Dept. of Kaunarbhriya of CSMSS Ayurved Hospital, Aurangabad, Maharashtra.

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Medicines</th>
<th>Dose</th>
<th>Anupana</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Shankhabhasma Vati – 250 mg</td>
<td>2 tablets twice a day</td>
<td>With lukewarm water</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mor. – Eve. After meals</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Gandhaka Rasayana- 125 mg</td>
<td>2 tablets twice a day</td>
<td>With milk</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mor. - eve. After meals</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Triphala Guggula- 250 mg</td>
<td>2 tablets twice a day</td>
<td>With lukewarm water</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mor. – Eve. After meals</td>
<td></td>
</tr>
</tbody>
</table>

Table no. 1 showing Shamana Chikitsa

Table no. 2 showing remarkable effect of therapy on subjective criteria

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>BT</th>
<th>After 15 days</th>
<th>After 30 days</th>
<th>After 45 days</th>
<th>After 60 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shalamali Kantaka pidika</td>
<td>++++</td>
<td>+++</td>
<td>++</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>Saruja (painful)</td>
<td>+++</td>
<td>++</td>
<td>+</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>Shotha (inflammation)</td>
<td>+++</td>
<td>++</td>
<td>+</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>Kandu (pruritus)</td>
<td>+++</td>
<td>++</td>
<td>++</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>Ghana (denseness)</td>
<td>++++</td>
<td>+++</td>
<td>++</td>
<td>+</td>
<td>-</td>
</tr>
</tbody>
</table>

Table no. 3 showing Grades of Acne Vulgaris

<table>
<thead>
<tr>
<th></th>
<th>Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mild acne</td>
<td>1</td>
<td>Comedones and few papules</td>
</tr>
<tr>
<td>Moderate acne</td>
<td>2</td>
<td>Comedones, papules and few pustules</td>
</tr>
<tr>
<td>Severe acne</td>
<td>3</td>
<td>Mainly pustules, abscesses and few nodules</td>
</tr>
<tr>
<td>Cystic acne</td>
<td>4</td>
<td>Cysts, nodules and widespread scarring</td>
</tr>
</tbody>
</table>

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Table no. 4 showing effect of therapy on Grades of Acne Vulgaris

<table>
<thead>
<tr>
<th></th>
<th>BT</th>
<th>After 15 days</th>
<th>After 30 days</th>
<th>After 45 days</th>
<th>After 60 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 3</td>
<td>Grade 2</td>
<td>Grade 1</td>
<td>Grade 1</td>
<td>--</td>
<td></td>
</tr>
</tbody>
</table>

V. DISCUSSION

In modern point of view, Acne vulgaris generally treated with topical Retinoid, Azelaic acid, Salicylic acid, Benzoin peroxide which are very well known for the adverse effects like irritation, bleaching and resistance. The antibiotics used to treat Acne show side effects like gastrointestinal upset, pseudomotor cerebri etc. Hormonal agents like Spiranolactone etc used to treat Acne leads to irregular menstruation in girls.

In Ayurved context, Shankha Bhasma is specifically indicated to treat Yuwanpidika. It specifically acts on Rasa-Rakta Dhatu. So the first preference for internal medication in this patient was Shankha Bhasma. The powdered form of this drug was found to be difficult to ingest by the patient hence, modified form was used as tablets. Shankha bhasma Vati was given to the patient which purified Rakta dhatu.

The main impact of Gandhaka Rasayana is found to be on Rakta dhatu and Twacha which are main Dushya in Yuwanpidika. It is mentioned in Rasayana Prakarana of Yogaratnakara. It acts as Rasayana (rejuvenating factor) on the skin which might be resulting in less scarring in any skin ailments. Therefore Gandhaka Rasayana was selected for oral administration and it indeed helped in less scarring and early healing of Acne eruptions.

The Triphala Guggula mentioned in Vrana-Shotha adhikara is useful to reduce all types of Shotha which is a characteristic feature of Yuwanpidika. It is also useful in Medadushti which is essentially present in case of Yuwanpidika. Hence, Triphala Guggula was given orally to the patient which resulted in reducing the pain and inflammation of Acne.

Jalaukavacharana (Blood-letting with the help of leech) is a well accepted treatment for vitiated Rakta allah. It is painless and non-invasive way of bloodletting. Acharya Vagbhata mentioned bloodletting with Siravedha (venous puncture) in the management part of Mukhadushika, we opted Jalaukavacharana. Acharya Sushruta mentioned the Leech therapy as ‘Param Sukumara Raktamokshana’ (Blood-letting for weak people) and is useful in Balyavastha. Leech sucks vitiated blood from applied area. Leech’s saliva contains many enzymes viz- Hirudin, anti-inflammatory- Bdellin, anti-platelet aggregate factor-Apyrase, diffusion & antibiotic factor-Hyaluronidase and Vasodialator substances. So, considering the age of the patient we have done Leech therapy twice on the patient with the gap of 30 days and the patient showed excellent result without any problem.

After taking oral medications continuously for 2 months along with Leech application, patient got sustained relief. However, she was advised to avoid the Nidanas lifelong.
VI. CONCLUSION

Yuvanpidika is most common adolescent skin disease mainly seen over the face. It harasses the teenager physically and mentally. Oral Ayurvedic management aims to give blissful life to the patient by decreasing the vitiated Doshas. Leech therapy also found to be effective and non-invasive simple technique in relieving signs and symptoms.

From this study it can be concluded that Shamana Chikitsa along with Jalaaukavacharana and Nidanaparivarjana is very effective in the management of Yuvanpidika.

REFERENCES


