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### RESEARCH ARTICLE

# A VIEW ON CLASSICAL DIAGNOSTIC ADVANCE OF DADRU KUSHTHA (TYPE OF SKIN DISORDER)

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### **ABSTRACT**

Dadrukustha is a type of skin disorder, characterized by Sakandu (Itching in the site of lesion), Raga (Reddish discoloration of skin like blood), Pidaka (Papule over lesion), Mandalamudgata (Circular patches with elevated edge on skin) etc. Many scholars have opined that it can be correlated with the superficial fungal infections of the skin as per modern science. But for proper application of novel treatment principle of Ayurveda, the diagnosis of the diseases based classical thought is mandatory. On this context the present study aimed to make a preliminary arbitrary grading system for easy diagnosis of Dadru Kushtha in order to provide an accurate treatment therapy. All the features of Dadru were evaluated by the preliminary approach of arbitrary grading system and with the help of captured photography. Appropriate literary meanings of scrupulous words were used to make the grading. The upshot of the study can make vital fortitude for future through further validity and reliability.

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### INTRODUCTION

All the skin diseases in Ayurveda have been classified under the broad heading of *Kushtha*. Which are further categorized in to Mahakushtha (major variety) and Kshudrakushtha (minor variety) (Agnivesha, 2011). Dadru is one of the Kshudrakushtha where pitta and kapha are involved predominantly (Agnivesha, 2011). Due to its unyielding nature, proper classical diagnosis is very important in order to frame out the natural healing approach Ayurveda. Dadru is a disease, which is characterised by Sakandu (Itching in the site of lesion), Raga (Reddish discoloration of skin like blood), Pidaka (Papule over lesion), Mandalamudgata (Circular patches with elevated edge on skin). It is a type of Kushtha, which has capacity to invade the deeper dhatu (structural framework of human body) very quickly (Sushruta, 2008). Therefore Acharya Sushruta has described it under the heading of Mahakushtha. If it is neglected then the chance of recurrence and prognosis may be poor. According to various scholars, this disease can be correlated with the superficial fungal infections of the skin as per modern science. Dermatophytes or Ringworm is a very common skin problem throughout the world.

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Approximately 20% individuals are infected with one form or other ringworm (ITIS standard report, 2017). Worldwide the incidence of ringworm is under reported. The ringworm is also a disease, where many exaggerated persons may not inquire about medical awareness, particularly in rustic areas of underdeveloped and developing countries. Even in developed countries, many individuals with ringworm try to home remedies and may even disregard the disease, as it is not a life threatening disease. As a result drug resistance and recurrence rate of this disorder augmented very quickly in the modern society. On this background the present study has been carried out to diagnose the particular disease Dadru Kushtha and to understand the severity of disease with the help of its classical sign and symptoms mentioned in ancient Ayurveda transcripts. Literary resources were analyzed in this study with specific aim to practical application of these data in the field of Ayurveda clinics.

### **MATERIALS AND METHODS**

All the data relating to features of *Dadru Kushtha* mentioned in classical *Ayurveda* texts were collected and visualized features were recognized in the patients in order to document these in the form of photography which may aid to understand the manifestation of specific disease *Dadru Kushtha* as per classical *Ayurveda* thoughts. Written consent of the patients

was taken before capturing the photograph. Special attention has been provided for maintaining privacy of each patient. All the features of *Dadru* were evaluated by the preliminary approach of arbitrary grading system and with the help of captured photography. Appropriate literary meanings of meticulous words were used to make the grading.

### RESULT AND OBSERVATION

All the orthodox findings of *Dadru Kushtha* obtained from the classical *Ayurveda* texts have been formatted in the arbitrary grading system and summarized in bellow tabular form.

Table 1. Arbitrary grading of *Dadru Kushtha* on the feature *Kandu* 

Features	Score
a. Intense and constantly occurs, disturbs routine activity and sleep, duration is 10 to 12 minute, scratching very essential, recurs 8/10 times in 12 hours.	4
b. Which occurs frequently and disturbed the routine activity and disturbed sleep, duration is 7 to 9 minute, scratching every time is essential, recurs 3 to 4 times in 12 hours.	3
c. Which comes frequently, disturb routine activity but does not disturb sleep, duration is 4 to 6 minute; usually scratching is not required, recurs 1/2 times in 12 hours.	2
d. Which comes occasionally, does not disturb routine activity and sleep, duration is 1to3 minute; usually scratching is not required.	1
e. Itching not present.	0

Note: Kandu kharjh i.e Itching in the site of lesion] or Sakandu Raga Pidaka: [Sakanduragah Kandu Ragasamyuktah Pidaka yatra tat Sakandu Raga Pidaka (Vagbhata, 2014) i.e. Itching with red color papuler lesion over skin.

Table 2. Arbitrary grading of *Dadru Kushtha* on the feature *Raga* 

FEATURES	SCORE
a. Reddish coloration of skin like blood.	4
<ul> <li>B. Glittery red coloration of skin.</li> </ul>	3
<ul> <li>Blanching red coloration of skin.</li> </ul>	2
d. Faint normal coloration of skin	1
e. Normal coloration of skin	0

Note: Raga raktabhata (Agnivesha, 2009), i.e. Reddish discoloration of skin like blood.

Table 3. Arbitrary grading of *Dadru Kushtha* on the feature *Pidaka* 

Features	Score
a. More than 9 papule over lesion.	4
b. 7 to 9 papule over lesion.	3
c. 4 to 6 papule over lesion.	2
d. 1 to 3 papule over lesion.	1
e. No such papule over lesion.	0

Note: Pidaka vranosotha anu mamsayurah i.e. Papule like over lesion

Table 4. Arbitrary grading of *Dadru Kushtha* on the feature *Mandalamudgata* 

Features	Score	
a. More than 7 elevated circular patch on skin, size – more than 15	4	
cm.		
b. 6 to 7 elevated circular patch on skin, size - 10 to 15 cm.		
c. 3 to 5 elevated circular patch on skin, size - 5 to 10 cm.		
d. 1 to 2 elevated circular patch on skin, size - less than 5 cm.		
e. No such elevated circular patch on skin.	0	

Note: *Uudgatamutsannam evam mandalam yat* (Sushruta, 2008.) i.e Circular patches with elevated edge on skin] When lesions (*Mandala*) are multiple, the size of the largest lesion is to be considered.

Table 5. Shows assessment of all the grading and remarks

Grade	Grade of point	Sign (degree)	Remark
G4	4	++++	Very severe
G3	3	+++	Severe
G2	2	++	Moderate
G1	1	+	Mild
G0	0	Nil	Normal

Figure Photographic presentation of *Dadru kushtha*:



Figure 1. Raga (Blood like reddish discoloration of skin)



Figure 2. Raga (Blood like reddish discoloration of skin)



Figure 3. Pidaka (Papuler lofty lesion)



Figure 4. Pidaka (Papuler lofty lesion)



Figure 5. Mandalamutgata (Circular patches with elevated edge on skin)



Figure 6. Mandalamutgata (Circular patches with elevated edge on skin)



Figure 7. Raga, Pidaka with Mandalamutgatam (Gross manifestation)



Figure 8. *Dadru kushtha* (Typical) (Manifested with the typical features)



Figure 9. Dadru kushtha (General Presentation with classical features)

## **DISCUSSION**

For analysis of the diseases the appropriate comprehension concerning sign and symptoms are very imperative. In Ayurveda there is lack of modern standard parameter to indentify the severity of diseases. That's why the arbitrary grading is an important tool can be utilized for the purpose of identifying the severity of the disorder. In this present study every sign and symptoms of Dadrukustha were analyzed based on suitable literary meaning. All the interpreted meaning has been framed into a grading system (Table1-5) to justify the proper disease model as well as for prognostic purpose. Ancient Ayurveda scholars has opined, in a meticulous disease if all the sign and symptoms are present at a time, then it is fated as asadhya (incurable), but it can be justified when we comprehend the severity of sign and symptoms of a case. In the present article, Grade 0 is indicating the nonexistence of symptoms, Grade 1 is applicable for mild condition, Grade 2 for moderate condition and Grade 3 is applied for severe condition, similarly Grade 4 is applicable for very severe condition of the disease (Table 5). Visual evidence i.e. photography of all the analyzed sign and symptoms were documented here (Figure 1-9), as there is no such laboratorial parameters are recognized to identify the all such types of skin lesion.

#### Conclusion

Main objective of *Ayurveda* is to prevent the disease as well as cure the diseases. Approach of this present study is

groundwork to move towards the technique to provide a standard framework of the ancient treatment principle. The novel treatment principle of Ayurveda is applicable when the diagnosis of the diseases is appropriately made. This is possible when we have the proper knowledge regarding classical pathological processes and the severity of sign and symptoms of diseases. On this context small approaches like the present study can make vital fortitude for prospect. Further reliability and validity of all this arbitrary grading system should be justified with the help of standard scientific method.

### REFERENCES

- Agnivesha, 2009. Charaka Samhita Commentary by Gangadhara, Cikitsā Sthana, Ch.7, Ver.21. 3rd ed. Chaukhambha Prakashan, Varanasi, 2009.pp 2641.
- Agnivesha, 2011. Charaka Samhita Hindi commentary by Acharya YT, Cikitsa Sthana. Chapter-7, Verse no-10. Reprint ed., Chaukhambha Prakashan, Varanasi, pp 450.
- Agnivesha, 2011. Charaka Samhita Hindi commentary by Acharya YT, Cikitsa Sthana. Chapter-7, Verse no-30. Reprint ed., Chaukhambha Prakashan, Varanasi, pp 451.

- Agnivesha, 2011. Charaka Samhita Hindi commentary by Acharya YT, Cikitsa Sthana. Chapter-7, Verse no-23. Reprint ed., Chaukhambha Prakashan, Varanasi, pp 450.
- ITIS standard report, 2017. Prevalence of ringworm in worldwide: How common is ringworm. Available at http://healthyone.org/ how common is ringworm. Accessed 25<sup>th</sup> September 2017.
- Madhavakar, 2010. Madhava Nidana Commentary by Vacaspati, Chapter-49, Verse-20. Reprint ed., Chaukhamba Orientalia, Varanasi, pp 285.
- Sushruta, 2008. Sushruta Samhita Commentary by Dalhana, Sutra Sthana. Chapter-23, Verse-18.Reprint ed., Chaukhambha Surbharati Prakashan, Varanasi, pp 113.
- Susruta, 2008. Susrutasamhita with hindi commentary by Acharya YT, Chaukhambha Sanskrit Sansthan Varanasi, Nidana Sthana. Chapter-5, Verse no-7. Reprint ed., Chaukhambha Surbharati Prakashan, Varanasi, pp 284
- Vagbhata, 2014. Ashtanga Hridaya commentary by Arunadutta. Sutra Sthana. Chapter no.12, Verse no.53. Reprint ed. Chaukhamba Sanskrit Sansthan, Varanasi, pp 201.

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