Ayurvedic Management of Yuvanpidika: A Case Report

*Dr Manoj Singh Baghel, **Dr Punam Sawarkar, #Dr J P Chourasia

*Assistant Professor, #Professor & HOD

Panchakarma Department, Govt. Dhanvantari Ayurveda College, Ujjain

#Associate Professor, Panchakarma Dept., Mahatma Gandhi Ayurveda College Hospital & Research Centre, Datta Meghe Institute of Medical Sciences, Wardha, Maharashtra

Paper Received: 04 June 2022; Paper Accepted: 26 July 2022; Paper Published: 04 August 2022

How to cite the article:

Dr Manoj Singh Baghel, Dr Punam Sawarkar, Dr J P Chourasia, Ayurvedic Management of Yuvanpidika: A Case Report, IJR MST, July-December 2022, Vol 14, 15-20, DOI:

http://doi.org/10.37648/ijrmst.v14i01.003
ABSTRACT
The face is an essential part of the body, and who does not want to have a glowing face as we know the first impression is the last impression, and the face is the mirror image which shows the mental and physical status of the body. Yuvapidika is a burning issue in youngsters and due to hormonal derangements, unhealthy food habits and deranged routine and occurs mainly in the age group between 15 – 30 years. Acharya Susruta has advised Vamana procedure along with Bahya Lepa and some Shaman Oousadhis, which really works in alleviating the disease and helps in regaining the fair complexion of the face. Acharya Vagabhatta added, showing resemblance with Salmali Kantaka Pitika having pain with Ghana pidika filled with Meda and named it Mukhadushika or Yuvanapidika. In the current single case study 25 Years old female patient, Vamana, along with Nasya, followed by Siravedha from Lalatapradesha, was advised. Shamana Chikitsa (Kaishor Guggulu, Mahamanjisthadi kwath¹, Sarivadyasava and Local application with Vacha, Lodhra, Saindhava, Kustha and Kustumbru (Dhaniya) was also prescribed after Shodhana Chikitsa. In follow-up after six months, it was observed that there was no recurrence. In contrast, in modern counterparts, recurrence frequently occurs, so for the treatment of Mukhdushika, multifaceted Ayurveda treatment is found to have the upper hand with much fewer chances of recurrence.

Keywords: Yuvanapidika, Acne Vulgaris, SalmaliKantak, Vamana, Nasya, Siravedha, Shamana Chikitsa

INTRODUCTION
Acne Vulgaris is a self-limited disorder primarily in teenagers and young adults. However, perhaps 10 -20 % of adults may continue to experience some form of the disease.¹ The clinical hallmark of Acne Vulgaris².¹ The most common location for Acne is the face, but the involvement of the chest and back is also common. Acharya Susruta² has mentioned its resemblance with Salmalikantak, and the doshas involved are Kapha, Vata and Rakta². Chikitsa has recommended that Vamana and Lepa of Vacha, Lodhra, Saindhava, kusha, and Sarshapa should be mixed in Kapha prevailing conditions, and kustumbru (dhaniya) should be mixed in Pitta and Rakta prevailing conditions³. In modern treatment, the recurrence of the disease is widespread. In contrast, after proper Shodhana, i.e. Vamana followed by Raktamokshana and Shamanausadha along with Bahyalepeq⁴. If Nidanaparivarjanas is followed strictly, it is observed that there is complete remission of disease with significantly fewer chances of recurrence.
PATIENT INFORMATION

A Female patient aged 22 years is a graduate student from Ujjain and is unmarried, lives with her parents is Hindu by religion. She is from a middle-class family approached in O.P.D. of govt. Dhanvantari Ayurveda college Ujjain complained of pimples in both cheeks & forehead on 28/10/2021 with comedones closed(whitehead) and open(blackhead). They were very irritating and painful, and her face appeared dull for 14 months after taking modern treatment with symptomatic relief.

There is no significant family history, past history.

Personal history

Diet - Irregular food habits, Bowel – irregular, Menstrual History - Scanty irregular, Sleep – irregular

Diagnostic Assessment

*SalmalikantakaPidika*(Acne), *Ruja*(Pain), *Ghana*(Nodules formation), *Kandu, Daha*

<table>
<thead>
<tr>
<th>Grade</th>
<th>Signs</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Clear face with no marks</td>
</tr>
<tr>
<td>2.</td>
<td>Clear face with mild patchy marks of comedones, no <em>Ruja</em>, no <em>Daha</em></td>
</tr>
<tr>
<td>3.</td>
<td>Comedones, occasional papules , <em>Ruja</em>, <em>Daha</em></td>
</tr>
<tr>
<td>4.</td>
<td>Papules, Comedones, few pustules, <em>Ruja</em>, <em>Daha</em></td>
</tr>
<tr>
<td>5.</td>
<td>Predominant pustule, nodules, Abscesses, <em>Ruja</em>, <em>Daha</em></td>
</tr>
<tr>
<td>6.</td>
<td>Mainly cysts, abscesses, widespread scarring</td>
</tr>
</tbody>
</table>

Table no. 1 (Diagnostic Assessment)\(^5\).

Therapeutic Intervention

*Table no. 2: Therapeutic Intervention*

<table>
<thead>
<tr>
<th>Type of treatment</th>
<th>Drug</th>
<th>Dose</th>
<th>Time of Administration</th>
<th>Duration</th>
<th>Anupana</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deepana Pachana</td>
<td>Shivakshara Pachana Churna</td>
<td>5 gm with the first bite of food</td>
<td>Twice daily</td>
<td>Five days</td>
<td>Lukewarm water</td>
</tr>
<tr>
<td></td>
<td>Aarogyavardhini vati</td>
<td>250 mg</td>
<td>Twice daily</td>
<td>Five days</td>
<td>Lukewarm water</td>
</tr>
<tr>
<td>Snehapanas</td>
<td>Panchatikta Ghrita</td>
<td>Vardhamana matra</td>
<td>Sodhanarthasneha kala</td>
<td>7 days</td>
<td>Lukewarm water</td>
</tr>
<tr>
<td>Vamana</td>
<td>Madanaphala</td>
<td>As per Roga and RogiBala</td>
<td>KaphaPraseka Kala</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>
SamsarjanaKrama | Peyaadikrama | As per Suddhi Sayampratah and whenever Kshudhapravritti is there. | As per Suddhi Seven even days | Lukewarm water
---|---|---|---|---
Raktamokshana | 50 ml of rakta was let out from the medial cubital vein (cubital fossa)
Samana Ousadhi | Kaishor Guggulu | 250 mg | Twice daily | 14 days | Lukewarm water
Mahamanjisthadi kwath | Sarivadyasava | 20 ml | Twice daily | 14 days | Lukewarm water
Bahya lepa | Vacha, LodhraSaindhava, kustha and kustumbru(dhaniya) | 20 ml | Once daily | 14 days

So in total, 36 days of treatment were given

**OBSERVATION & RESULTS**

The appearance and nature of the clinical appearance of acne lesions were turned from grade 4 to grade 1 after treatment, i.e. 37th day. The improvement in the clinical presentations was given in image no.1. (Before R.X.) and image no.2(After R.X.).

**DISCUSSION**

Causative factor – due to irregular food habits and stress, Agni was deranged, causing Kapha and Rakta Dushti, which causes vitiation of Vata, and this deranged Vayu aids in lodging Dusta Rakta and Kapha beneath the facial skin and also in the shoulder, chest and back thus causing Mukhadushika. So we can infer that this Vyadhi is Santarpanajanya and Sodhana, i.e. Vamana will be best suited for Kapha.
dushti followed by Raktamokshana for Rakta Dushti along with Bahya Lepa followed by Samana chikitsa to pacify the remanant Doshas.

Shivakshara Pachana Churna – Agni Pradeepak, Amapachaka, Yakrita uttejaka, Saraka, Apana Vayu Anulomaka.\(^{[6]}\).

Aarogyavardhini Vati – All types Kushta, Pachana, Deepana, Pathya, Hridya, Medanasaka, Malasodhaka, Kshudhavardhaka.\(^{[7]}\).

Panchatikta Ghrita – 18 types Kushta, 80 type Vatavyadhi, 40 types Pitta Vyadhi, 20 types Kapha Vyadhi, Dushta Vrana, Krimijanya Roga, Arsha, five kinds of Kas.\(^{[8,9]}\).

Raktamokshana - Sodhana of dushta rakta along with dushta pitta.\(^{[10,11]}\).

Kaishore Guggulu - pacifies the Raktaj vikara and amavishaja vikara.\(^{[12,13]}\).

Mahamanjisthadi Kwatha - Raktasodhaka, Saraka, Dushi Vishas Pratirodhaka, anti-microbial action.\(^{[14]}\).

Sarivadyasav – Uttam Rasayana for skin, diuretic action, balances the malfunctioning of deranged hormones, Vatarakta samaka.\(^{[15]}\).

Bahya Lepa - Twachya and Varnya action.\(^{[16]}\).

CONCLUSION

The patient got relief from signs and symptoms such as Ruja, Daha, open and closed comedones, and papules with some Daurbalyata in the body, which was later pacified with these nine weeks of treatment.

Financial support and sponsorship

Nil

Conflict of Interest: None

REFERENCES

7. Sri Nageendas Chaganlal Shah Bharat bhasajya ratnakar part1 edition 2012
Aakaradi Rasa Prakarana B Jain publishers New Delhi page. 154
13. Dr Punam Sawarkar, Dr. Gaurav Sawarkar. Management of Siraj Granthi (varicose vein) through Ayurveda. *International Journal of Medical Sciences and Innovative Research (IJMSIR)*. 2018 September, 3;5: 131 – 141
15. *Kaviraja Ambikadatta Sashtri Bhaïsajya Ratnavali* Chapter 38 Prameha Chikitsa Prakarana by Chaukembha Sanskrit Sansthan Page no. 524