Ayurvedic Management of Seborrheic Dermatitis

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ABSTRACT

Seborrheic dermatitis is a chronic disorder characterized by greasy scales overlying erythematous patches or plaques. Seborrheic dermatitis can affect scalp as well as other Seborrheic areas and involves itchy and flaking or scaling skin. Commonly patient experiences mild redness, scaly skin lesions and in some cases hair loss. Modern medical science treats Seborrheic dermatitis with corticosteroids. But these therapies give serious side effects like hepato and nephro toxicities, bone marrow depletion etc. Hence, It is need of time to find out safe and effective treatment for Seborrheic dermatitis and here ayurveda plays an important role. In ayurveda Seborrheic dermatitis can be correlated with *eka kushtha*, Due to very much similarities in their symptoms. The present article reviews the concept of Seborrheic dermatitis in ayurveda and role of Panchkarma and *shamana chikitsa* in the management of Seborrheic dermatitis.

**Keywords:** *Eka Kushtha*, Seborrheic dermatitis, Ayurveda, Panchkarma

INTRODUCTION

All the skin disorders are recounted under *kushtha rogadhikara* in Ayurveda. There are 7 *maha kushtha* (major variety of skin disorder) and 11 *Kshudra kushtha* (minor variety of skin disorders). *Eka Kushtha* is one among the 11 *kshudra kushtha*, which is characterized by *aswedanam* (dryness), *mahavastu* (which covers the entire body) and *matasyashakalawat tvacha* (skin resembles scales of fish) which means *Kushtha*. It is painless, which does not sweat, also extensively spreads over wide area and resembles fish scales. In this, the skin becomes black and pink in color. These features of *eka Kushtha* are similar to that of Seborrheic dermatitis explained in modern medicine. *Aswedana* which means dry and rough lesions, *matasyashakalawat* is well demarked raised patches with large silvery loose scaling (skin resembles scales of fish) and *krushna aruna varnata* (blackish in color).

As per Acharya Charaka, the vitiation of *tridosha* along with *twaka* (skin), *mamsa* (muscular tissue), *rakta* (blood) and *lasika* (fluid and lymph) have major role in the pathogenesis of *kushtha*. But still the sign and symptoms produced in *kushtha* depends on the type of predominance of the *dosha* in it. Thus, it is clear that *eka kushtha*, occurs mainly due to *rasa-rakta-mamsa dhatu*.
dushti. It indicates that remaining other dhatus are generally not involved. However, after long course of the disease nails and joints involvement also found. This indicates the involvement of deeper dhatus.

Seborrheic dermatitis consists of two incidence peaks. The first peak occurs during first three months of life and the second one during the beginning of puberty, reaching its apex at 30 to 40 years of age. The condition affects up to 70% of infants in the first 3 months of life and 3 to 5% of young adults. Seborrheic dermatitis is typically more common in males than females, presumably because androgens stimulate sebum production.

Although there is no specific mentioning of etiological determinants of ekakushtha yet considering it as a variety of kshudrakushtha, some of the etiological determinants of kushtha are to be accepted as the etiological determinants of the ekakushtha too.

MATERIAL AND METHOD

Seborrheic dermatitis is one of the most common dermatologic diseases and still stands as a challenge to different medical systems. Many research works have been done on Seborrheic dermatitis in Ayurveda and modern medical science but no drug has yet been claimed to cure Seborrheic dermatitis completely. Seborrheic dermatitis can be better managed by the Ayurvedic principles of management namely:

1. Nidana Parivarjana
2. Shodhana Chikitsa
3. Shamana Chikitsa

1. Nidana Parivarjana

संक्षेपतः क्रियायोगो निदानपरिवर्जनम् ।
बालाधीन्न प्रतीघातः प्रोक्तो विस्तरतः पुनः ।
(स० उ० 19 25)

This means avoidance of etiological factors like mithya ahara-vihara & viruddha ahara. Nidana parivarjana ceases the further continuation of the disease, by limiting the vitiation of doshas. Hence main objective of treatment is to resolve metabolic activities in dhatu level, to rectify srotoavrodha and to enhance nourishment to depleted dhatus.

2. Shodhana Chikitsa

बहुदोषः संशोध्यः कुष्ठी बहुशोवनुरक्षता
प्राणान् ।
दोषे हातितमात्रहते वापुर्न्यादबलमाणु ।।
चो
चि० ७/४१
As ekakushtha is chronic & relapsing in nature and also there is an involvement of tridosha & twaka, rakta, mamsa, lasika & kleda hence repeated shodhana is required for treatment.

**Mode of Action of Nitya Virechana in ekakushta:**

Aswedanam (absence of sweating) is due to the blockage in swedavaha srotas (channels carrying sweat). Srotoshodhak (channel purificatory), which is one of the properties of nitya virechana opens the microchannels and enhances circulation, that results in perspiration. Mahavastu (big lesions) are mainly due to dushita kapha dosha and rakta dushya, nitya virechana with pitta kaphahara property has its application in correcting rakta dhatu, thus reducing big lesions. Matsyashakalopamam (scaling), also known as hyperkeratinization, occurs due to vitiation of tridosha, nitya virechana works on all doshas and controls scaling. Rukshata (dryness) mainly because of vata dosha, nitya virechana corrects it by vatanulomana and hence reducing ruksha. Kandu (itching) indicates the involvement of kapha, rasa, and rakta dushya, nitya virechana has pitta shodhaka and rasa raktaprasadana property, which may be the reason behind reduced kandu. Daha (burning) is mainly due to pittadosha and raktadusti, nitya virechana removes vitiated pitta dosha and rakta, thus reducing daha. "Candle grease sign" denotes increased ruksha and khara guna in twaka caused by vata dosha, nitya virechana pacifies vata dosha and thus reduces candle grease sign. Auspitz sign is mainly due to pitta dosha and rakta dushti, nitya virechana is therapy for pitta dosha and rakta dushti. In this way, nitya virechana helps in restraining pathogenesis, results in controlling the symptoms of ekakushta.

**Mode of action of Takra dhara in eka kushtha:**

Takra has pancha-rasa except lavana rasa, amla vipaka, ushna virya & vata kaphaghna property. Eka kushtha is also having vata kapha dominant Disease. Takra (Buttermilk) contains largeamount of lactic acid. It is scientifically proved that lactic acid is used to moisten & lessen the appearance of thickened psoriatic scales. Lactic acid is a good for vehicle trance-dermal absorption of drugs. Lactic acid-containing products have ability to deliver it to specific skin strata. The penetration of L+ lactic acid to different skin layers of porcine skin from various emulsions was measured invitro using flow-through diffusion cells. As takradhara
contain amalaka & musta which has anti-inflammatory & antioxidant property, lactic acid in takra may help in the trance-dermal absorption of these drugs & systemic anti-inflammatory, antioxidant effects in Seborrheic Dermatitis.

3. Shamana Chikitsa
As Seborrheic Dermatitis is a disease of bahya rogamarga. So, both antahparimarjana and bahi parimarjana treatments should be used.

स्नेर्स्यपािक्रमष्टंशुद्धेकोष्ठेप्रवाक्रर्तेिक्ते। वायुक्रर्जशुद्धकोष्ठंकु क्रष्ठिमबलंक्रवशक्रतशीघ्रम्॥

चो चि० ७/४२

a. Antah-primarjana : Initially, deepana-pachana, anulomana was done to increase the agni-bala to bring dosha in nirama avastha. Deepana-pachana enhances metabolic activity by improving digestive system and helps to digest and eliminate the metabolic waste products accumulated in tissues and system. The mechanism of action of each drug is probably different but they all help to normalize skin cell proliferation and reduce inflammation by dosha shamana, raktashodhana and raktaprasadana.

Katu, tikta, kashaya rasa - kapha shamaka reduces kandu. Laghu snigdhaguna reduces scaling. Ushna virya which increases swedana by vata-kapha nashaka dravya, raktashodhaka, Immuno-modulator, kushtha-kandu nashaka property. For eg. guduchi, patola, gandhaka, aaragvadha, khadira etc.

मारुतकफकु ष्ठघ्नंकमोक्तंक्रपत्तकु क्रष्ठिांकायज म्। कफपितरकतहरणतितककषायःप्रशमनंच।

चचिति०/५८

b. Bahiye-Parimarjana : Eka Kushtha being exhibited through the skin, external applications are also advocated. For the external application, drug should be applied after elimination of all the doshas form the body by shodhana karma. Different varieties of local application are prescribed like udvartana, pralepa, parisheka, abhyanga etc.

CONCLUSION

Seborrheic dermatitis (ekakushtha) though it is difficult to manage, but if proper
diagnosis is made at proper time, many complications can be avoided. Various Panchkarma procedures doing with internal medicines can be best option of its management.

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