Ayurvedic Management of Yuvana Pidika (Acne Vulgaris) - A Case Report

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Abstract:
Acne consistently represents the top three most prevalent skin conditions in the general population. Acne Vulgaris is a common human skin disease, characterized by areas of skin with seborrhoea (scaly red skin), comedones (blackheads and whiteheads), papules (pinheads), pustules (large papules) and possibly scarring. Acne is found to have equality with the disease Yuvana pidika mentioned in Ayurvedic texts. The main localization of acne is in the face and then follows the neck, the upper part of the chest, shoulders and the back. Each of patients affected by acne tells that she or he will “do anything” to get rid of it. Typically, those with acne seek out Ayurvedic treatments because they have already tried “everything” or do not want to resort to isotretinoin, antibiotics, or oral contraceptives. A 29-year-old female patient reported to the outdoor, department of Sharir Kriya NIA, Jaipur, with complains of pimples on face for last 2 months. The patient was diagnosed as Yuvana pidika. Arjunatvak Lepa application with godugdha once daily for 30 days and Manjistha Ghan Vati 500mg (2*250mg) twice daily orally for 30 days were given. After 30 days of treatment a significant response was found in this case.

Keywords: Acne Vulgaris, Arjuntvak lepa, Manjishtha Ghan Vati, Yuvana pidika.
Introduction:
Acne is a disease of the pilosebaceous glands. Excessive sebum production, hyperkeratinization, proliferation of Propionibacterium acnes bacteria, and increased sebaceous gland sensitivity to androgens cause acne papules to develop. A great philosopher says that human faces express and represent their personality and wisdom. It is saying that “Face is the index of mind”. Any minor ailment may affect from unattractive look to a permanent disfigurement which may result in inferiority complex. Such a big effect is caused by disease Yuvana Pidika. Aacharaya Sushruta first described Yuvana Pidika in kshudra Roga in Nidaansthaan. It occurs due to vitiation of Kapha Dosha, Vata Dosha and Rakta Dhatu. Acharya Charaka described Pidika in Raktrapradoshaja Vikara. Acharya Vagbhatta recommends Lepa as first line of treatment. Lepa is beneficial in terms of its time duration, easy administration and cost effectiveness required for the treatment, during this current trend of busy schedule and fast life styles. So, the need of time is to find out an effective, potent and natural remedy to cure this disease. In this treatment regimen Arjunatvak lepa was selected as local application, and Manjishtha ghana vati as internal administration. Previous studies on acne with Ayurveda treatment showed relief in acne with shodhana and Shaman chikitsa.

Looking in to this limitation and prognosis of Acne vulgaris the above local and systemic management was done and found effective.

Case Report:
A 29-year-old married female patient visited in the outdoor department of Sharir Kriya of NIA, Jaipur with OPD no. 41314112018 for the chief complains of pimples and reddish spots on face for last 2 months and other associate complaints were vertigo, headache and pain in lumber region.

Personal history revealed that the patient is vegetarian and have normal food habit, normal sleep, frequency of micturition 6-7 times/day and patient have no addiction. The patient has clear bowel habit and normal menstrual cycle. There was past history of haemorrhoids.

The general examination of the patients showed paleness in conjunctiva and vitals being pulse rate 68/min, respiratory rate of 18/min, blood pressure of 100/60 mm of Hg and body weight is 52kg. Per-abdominal examination showed soft abdomen and no tenderness in abdomen.

Topical antibiotic therapy is recommended for its treatment but their chemical compounds creates adverse effects on the body. So natural nontoxic remedies should be used to bring the skin into normal state by treating problem like Yuvana Pidika. Acharya Vagbhata recommends Lepa as first line of treatment.
Clinical Images:

Before treatment

During treatment

After treatment (30 days)

Fig.-1 Arjuntvak lepa

Fig.-2 Manjishtha ghana vati
Treatment protocol:
The following medicines procured from NIA pharmacy and were administrated for 30 days.
*Arjunatvak Lepa* (*Terminalia arjuna* bark anointment) application once in morning daily with *godugdha* (cow milk) as per requirement for making paste like consistency and suggested normal water for cleaning the face after drying. She was suggested any herbal neem face wash and oil free moisturiser for apply on the face.

**Result and Discussion:**
*Arjuna* possess *Kashaya rasa* (astringent taste), *Laghu* (lightness) & *Ruksha* guna (dryness property), *Sheeta Virya* (cool potency) and *Katu Vipaka* (pungent biotransformation). *Arjuna* has *kapha-pitta shamaka* (kapha-pitta pacifying), *Hridya* (beneficial for heart), *Shothaghana* (inflammation reducing substance), *Vranaropaka* (wound healing action), *RaktaStambhaka* (check flow of blood), *Kandughna* (anti-pruritic), *Shonita sthapana* (normalizes blood) properties. [9] Due to these properties it reduces *Shotha* (inflammation or swelling), *Daha* (burning sensation), and *Vivarnata* (discolouration) and its local application of make significant effect on papules or eruptions. Cow milk also beneficial for skin. Previous studies on *Terminalia arjuna* bark shows it possess tannins and flavonoids which also effective on acne due to anti-inflammatory and antibacterial activity of them. [10, 11]

*Manjishtha* possesses *Madhura* (sweet), *Tikta* (bitter) & *Kashaya rasa* (astringent taste), *Guru* (heavy) and *Ruksha* (dry) guna (property), *Ushna Virya* (hot potency) and *Katu Vipaka* (pungent biotransformation). [12, 13] *Kapha-Pitta Ghan Vati* (concentrated tablet of *Rubia cordifolia* prepared at NIA pharmacy) 500mg (2*250mg) twice daily after meal was prescribed with water for 30 days.

Dietetic regimen: She was suggested wholesome diet according to availability and to avoid *amla katu tikshna ushna drayas* like pickles, street food.

Follow-up of the patient was done in every week. After 30 days of treatment a significant response was found.

Result and Discussion:

*Madhura Rasa* is *Shadhendriya Prasadaka* (cleansing all cognitive organs), *Twachya* (beneficial for skin). *Tikta Rasa* has property of *Kleda Meda Upashoshan* (drying up of wet, moisten medodhatu). *Usna veerya* (hot potency) is *Pachaka*. Due to its *Kaphahara* properties, it reduces the *Vaktra Mukha Snigdhata*. (External and internal unctuousness of face). Because of *Kapha-Pittahara* (*Kapha–pitta pacifying*) properties of *Manjishtha* along with its *Deepana* (digestion and metabolism enhancing) action, it prevents the vitiation of *Medoagni* (metabolic factor located in *Medodhatu*) resulting in eruption of less number of *Pidika* (papules).
So, it can be considered that Arjuntvak Lepa and Manjishthaghana vati by the above-mentioned properties, breaks down the Samprapti (pathogenesis) of the disease Yuvanpidika (showing in flow chart in figure no-1 (Arjuntvak Lepa) and figure no-2 (Manjishtha ghana vati) and improves the diseased condition.

Conclusion:
By above case study it can conclude that Manjishtha Ghana Vati orally and Arjuntvak Lepa locally found therapeutically effective in management of Yuvan Pidika (Acne vulgaris).

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Declaration of patient consent:
The authors declare that that they have obtained consent form from patient for publication of clinical information blinding the identity of individuals.

References:
11. Chowtal J., Sharada M.K2; A comparative clinical study on the efficacy of arjuna lepa in mukhadushika; International Ayurvedic Meical Journal, 2017; 5(11); 4034-4040.
12. Anonymous, Ayurvedic Pharmacopoeia of India, Ministry of


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