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Research Article

A CLINICAL STUDY ON THE MANAGEMENT OF VICHARCHIKA BY GANDHAKA RASAYANA & EXTERNAL APPLICATION OF VICHARCHIKARI TAILA

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ABSTRACT

Ayurveda has dealt with the disease in all its aspects elaborately. All dermatological disorders are coming under the term *Kushtha* as per *Ayurvedic* texts. The present study was aimed to evaluate efficacy of *Gandhaka Rasayana* and *Vicharchikari Taila* in the management of *Vicharchika*. For this study, selected 30 patients were divided into two groups. In Group (A) total 15 patients were registered with the administration of *Gandhaka Rasayana* and *anupana* of *Khadira kwatha* & *Vicharchikari Taila* for external application has been given and in Group (B) remaining 15 patients were registered and taking *Gandhaka Rasayana* & water (*Sukhoshna Jala*) was used in place of *anupana* and *Vicharchikari Taila* used for external application has been given. Patients were taken from O.P.D. of *Kaya Chikitsa* department of Shri N.P.A. Govt. Ayurvedic College Raipur (C.G.), Study duration was 2 months with the follow up of 7 days. Among the 15 patients of Group A, 66.6% are markedly, 26.6% are moderate and only 6.66% is mildly improved. Thus 15 patients of Group B, 66.6% are markedly, 13.3% are moderate and 20% are mildly improved. Respectively all 30 patients are Mild, Moderate, markedly improved. It was concluded that *Gandhaka Rasayana* with the *anupana* of *Khadira kwatha* and external application of *Vicharchikari Taila* has a significant result in the management of *Vicharchika*.

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INTRODUCTION

Skin complains affects all ages from the neonates to the elderly & cause harm in a number of ways, such as discomfort, mutilation, disability etc. Skin disease in *Ayurveda* has been described under the caption of *Kushtha*. The description of *Kushtha* under 'Raktaj vikara'^[1] and also it has been described in 'Mahagada'^[2,3]. In *Sushruta Samhita*, *Kushtha* is recount as 'Aoupsargika Roga'^[4]. *Vicharchika* is skin disease found in all age group. It may cause various problems like uneasiness, interrupted sleep due to itching, discomfort and withdrawal from society due to disfigurement. Modern medical science has no specific treatment for *Vicharchika* (Eczema) that's why this topic is selected to provide effective and safe treatment through *Ayurvedic* medicine. According to *Acharya Charaka* all *Kushtha* are having *tridoshaja* origin^[5]. So *Vicharchika* can be said in same way i.e. *Kapha* is responsible for *Kandu*, *Pitta* for *Srava*, and *Shyavata* indicate the presence of *Vata*. regardless of its *tridoshaja* origin various *acharyas* mentioned different dominancy in *Vicharchika* i.e. *Kapha*, *Pitta*, *Vata-Pitta*. *Vicharchika* analogues with Eczema which is a form of

dermatitis, inflammation, persistent or reoccurring skin rashes, oedema, itching, dryness, cracking, oozing etc. Detailed description of *Ayurvedic* concept of *Vicharchika* with modern aspect of Eczema has been discussed earlier.

Aims and Objectives

To clinically assess *Vicharchika roga* and evaluate the efficacy of *Gandhaka Rasayana* & *Vicharchikari Taila* in its management.

MATERIAL AND METHODS

It includes

Selection of Patients

Patients were taken from O.P.D. of *Kaya Chikitsa* department of Shri N.P.A. Govt. Ayurvedic College Raipur (C.G.), were selected for the present study irrespective of their Sex, Religion, Occupation etc. Detailed history was taken and a special research Proforma was prepared for the study.

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Criteria for the selection of patients**Inclusion criteria**

- Classical sign & symptoms of *Vicharchika* according to *Ayurveda*.
- Patients between the ages of 12 years to 60 years.

Exclusion criteria

- Age below 12 years and above 60 years.
- Patient associated with any other systemic disease e.g. Diabetes, Hypertension etc. and not given to the patients having sensitivity due to Sulpha drugs.
- Pregnancy and lactating mother.

Management of the Patients

In total, 30 patients of *Vicharchika* fulfilling the diagnostic criteria were selected for present study. The patients were randomly categorized into the following two groups:

Table 1 Assessment criteria for *Vicharchika*

Symptom	Score	Grade
<i>Kandu</i> (Itching)	0	No itching
	1	Mild itching not disturbing normal activity
	2	Occasional itching disturbing normal activity
	3	Itching present continuously & even disturbing sleep
<i>Pidika</i> (Eruption)	0	No eruption
	1	Scanty eruption in few lesion
	2	Scanty eruption in at least half of the lesion
	3	All the lesion full of eruption
<i>Shyava</i> (Depigmentation)	0	Normal skin
	1	Red discolouration
	2	Blackish red in colour
	3	Blackish discolouration
<i>Srava</i> (Discharge)	0	No discharge
	1	Moisture present in the skin
	2	Weeping from skin lesion
	3	Weeping from the skin lesion followed by crusting
<i>Rukshta</i> (Dryness)	0	No rukshta
	1	Dryness with rough skin
	2	Dryness with scaling
	3	Dryness with cracking
<i>Ruja</i>	0	Absent ruja
	1	Mild ruja
	2	Moderate ruja
	3	Severe ruja

Group 1(A)

Total 15 patients were registered under this group. In this group, the patients were administered *Gandhaka Rasayana* 250 mg (in cap form) twice a day after meals with *anupana* of *Khadira kwatha*. The total duration of the treatment was two month.

Group 2(B)

Remaining 15 patients were registered under this group. In this group, the patients were administered *Gandhaka Rasayana* 250mg (in cap form) twice a day after meals and water (*Sukhoshna Jala*) was used in the place of *Khadira kwatha anupana* along with external application of *Vicharchikari Taila*. The duration of the treatment was two month. Patients of both groups had taken *Triphala churna* (3gm) at bed time for the purpose of *Koshtha shuddhi* before 3 days starting of main medicament.

Criteria for assessment

All the patients were examined during the treatment. Criteria of assessment were kept on the basis of relief in the signs & symptoms of the disease *Vicharchika*. For this purpose, cardinal signs & symptoms were given scores according to their severity before and after the treatment. Details of scores adopted of the main signs and symptoms in this study were as follows:

Statistical analysis

The information gathered on the basis of observation made about various parameters was subjected to statistical analysis in terms of Mean, Standard Deviation (SD), and Standard Error (SE). Paired t-test was carried out at $P > 0.05$, $P < 0.05$, $P < 0.001$. The obtained result was interpreted as;

- Insignificant : $P > 0.05$
- Significant : $P < 0.05$
- Highly Significant : $P < 0.001$

Criteria for assessing the total effect:

Considering the overall improvement had shown by the patient in sign and symptoms, the total effect of the therapy has been assess as below:

Table 2 This table can show Statistical analysis after the treatment of 2 month in 15 Patients of Group A

No	Symptoms	Mean		Mean Diff.	Relief	SD $\frac{1}{4}+/-\frac{1}{2}$	SE $\frac{1}{4}+/-\frac{1}{2}$	T-Value $\frac{1}{4}+/-\frac{1}{2}$	P-Value	Remark
		BT	AT							
1	<i>Kandu</i>	2.5	0.4	2.1	84%	1.12	0.29	7.34	0.00	HS
2	<i>Pidika</i>	1.7	0.2	1.5	88.23%	1.18	0.30	4.78	0.00	HS
3	<i>Shyava</i>	1	0.2	0.8	80%	0.79	0.20	3.55	0.00	HS
4	<i>Srava</i>	0.93	0.06	0.87	93.54%	1.18	0.30	2.82	0.01	S
5	<i>Ruja</i>	0.66	0.06	0.6	90.90%	0.73	.19	3.14	0.07	NS
6	<i>Rukshta</i>	0.93	0.13	0.8	86.02	0.86	0.22	3.59	0.00	HS

Table 3 This table can show Statistical analysis after the treatment of 2 month in 15 Patients of Group B

No.	Symptoms	Mean		Mean Diff.	Relief	SD $\frac{1}{4}+/-\frac{1}{2}$	SE $\frac{1}{4}+/-\frac{1}{2}$	T-Value $\frac{1}{4}+/-\frac{1}{2}$	P-Value	Remark
		BT	AT							
1	<i>Kandu</i>	2.6	0.2	2	92.30%	0.82	0.21	11.74	0.00	HS
2	<i>Pidika</i>	1	0.13	0.87	87%	0.99	0.25	3.38	0.00	HS
3	<i>Shyava</i>	1.6	0.73	0.87	54.37%	0.91	0.23	3.66	0.00	HS
4	<i>Srava</i>	0.8	0.3	0.5	62.5%	.99	0.30	1.96	0.89	NS
5	<i>Ruja</i>	1.06	0.33	0.73	68.86%	0.88	0.22	3.21	0.00	HS
6	<i>Rukshta</i>	1.8	0.53	1.27	70.55%	0.88	0.22	5.55	0.00	HS

- Control of the disease: 100% relief
- Marked improvement: $\geq 75\%$ relief
- Moderate improvement $\geq 50\%$ up to 75% relief
- Mild improvement $\geq 25\%$ up to 50% relief
- No improvement $\geq 25\%$ relief

Observation

In present study 30 individual were registered to evaluate the efficacy of *Gandhaka Rasayana & Vicharchikari taila* in *Vicharchika*. The prevalence of age, sex, socioeconomic status etc.were observed. The observed data recorded in proforma before and after treatment for better understandings.

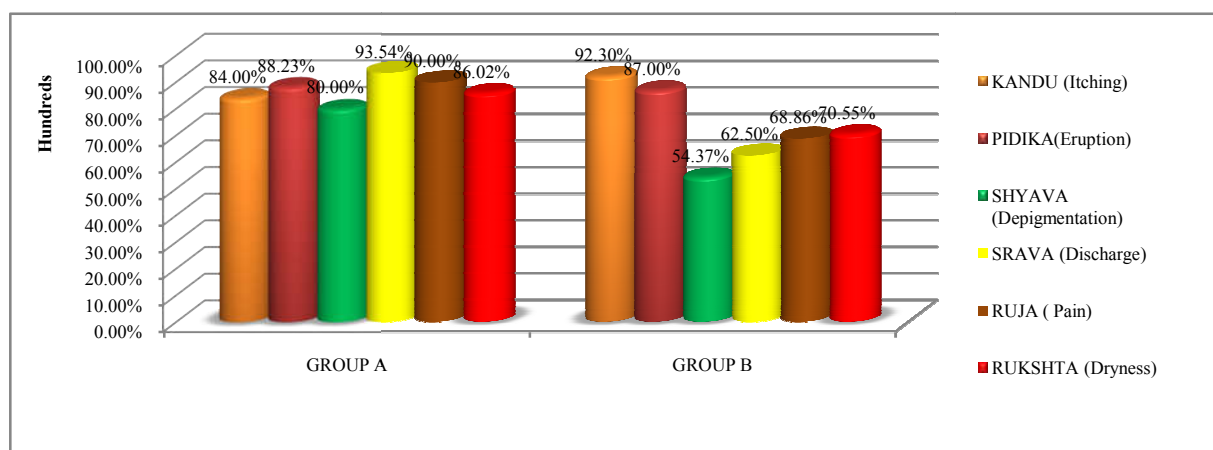


Figure 1 This chart show the percentage of relief after the treatment of both group A & B

Table 4 This table show the group of percentage after the treatment of 2 month in Group A & Group B

No.	Relief	GROUP A		GROUP B	
		No. of Pts	Relief %	No. of Pts	Relief %
1.	No relief < 25 %	00	00%	0	00%
2.	Mild relief < 25-50 %	01	6.66%	03	20%
3.	Moderate relief < 50-75 %	04	26.66%	02	13.3%
4.	Marked relief < 75-100 %	10	66.6%	10	66.6%
Total		15	100%	15	100%

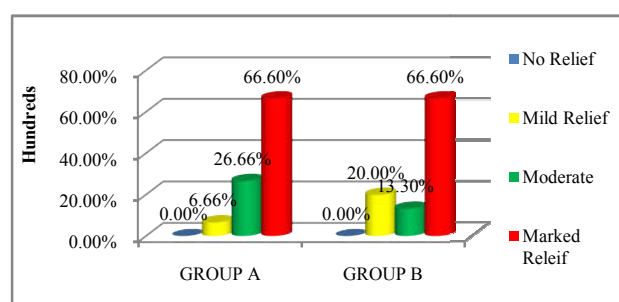


Figure 2 This chart show the Group of percentage relief after the treatment of both group A & B

RESULT

In both group *Gandhaka Rasayan* and *Vicharchikari taila* are play a very effective role because I found Highly significant result in all classical symptoms except *Ruja* in Group A and *Srava* in Group B because of patients are not found with symptoms rest all symptoms are cure safely and result is batter found in Group B due to both medicine are much effective as compare to single preparation on this particular disease.

DISCUSSION

According to above statistical calculation we have seen all the sign & symptoms in 15 patients of **group A** and observe after treatment of 2 month:-

Itching: - In itching the mean difference of BT & AT is 2.1, P-Value is 0.00 which is highly significant at the 1% level and Percentage of relief is 84%.

Eruption: - In eruption the mean difference of BT & AT is 1.5, P-Value is 0.00 which is highly significant at the 1% level and Percentage of relief is 88.23%.

De-Pigmentation:- In de pigmentation the mean difference of BT & AT is 0.8, P-Value is 0.00 which is highly significant at the 1% level and Percentage of relief is 80%.

Discharge: - In discharge the mean difference of BT & AT is 0.87, P-Value is 0.01 which is significant at the 5% level and Percentage of relief is 93.54%.

Pain: - In Pain the mean difference of BT & AT is 0.6, P-Value is 0.07 which is Non significant at the 10% level and Percentage of relief is 90.90%.

Dryness: - In dryness the mean difference of BT & AT is 0.8, P-Value is 0.00 which is highly significant at the 1% level and Percentage of relief is 86.02%.

For Group B :- According to above statistical calculation we have seen all the sign & symptoms in 15 patients of group B and observe after treatment of 2 month:-

Itching: - In itching the mean difference of BT & AT is 2, P-Value is 0.00 which is highly significant at the 1% level and Percentage of relief is 92.30%.

Eruption: - In eruption the mean difference of BT & AT is 0.87, P-Value is 0.00 which is highly significant at the 1% level and Percentage of relief is 87%.

Depigmentation: - In depigmentation the mean difference of BT & AT is 0.87, P-Value is 0.00 which is highly significant at the 1% level and Percentage of relief is 54.37%.

Discharge: - In de pigmentation the mean difference of BT & AT is 0.5, P-Value is 0.89 which is non significant at the 10% level and Percentage of relief is 62.5%.

Pain: - In Pain the mean difference of BT & AT is 0.73, P-Value is 0.00 which is highly significant at the 1% level and Percentage of relief is 68.86%.

Dryness: - In dryness the mean difference of BT & AT is 1.27, P-Value is 0.00 which is highly significant at the 1% level and Percentage of relief is 70.55%.

CONCLUSION

Among the 15 patients of group A, 10 patients (66.6%) are markedly improved, 4 patients (26.6%) are moderate and only 1 patient (6.66%) is mildly improved. Thus 15 patients of group B, 10 patients (66.6%) are markedly improved, 2 patients (13.3%) are moderate and 3 patients (20%) is mildly improved. We found in both group no anyone patients who will not improved. Respectively all 30 patients are Mild, Moderate, Markedly improved. The patients of Group A are more improved then Group B because of in Group A we are used *Gandhak Rasayana* and *Vicharchikari Taila* with the *anupana* of *Khadira kwatha*

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