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Research Article

### TO STUDY EFFICACY OF ARKA-TAILA IN MANAGEMENT OF VICHARCHIKA

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#### ABSTRACT

Today's present life style is tremendously altered from last decade. Every-one in society has set the goal of his/her life. To achieve the same no one conscious about their own health, result to development various diseases. *Vicharchika* (Eczema) is one of them & it is big challenge due to its recurrence. Due to lack of physical exercise, unhygienic, mental stress, overeating, sedentary lifestyle *Vicharchika* is commonly observed. This study is helpful for *Ayurvedic* as well as Modern physicians to treat patients of *Vicharchika*. The aim of study was to analyze efficacy of *ArkaTaila* in *Vicharchika* patients. Observational study was conducted in 30 randomly diagnosed patients of *Vicharchika* in OPD/IPD from August 2010 to August 2013 by using a well-designed case record form. All patients were treated with *Arka Taila* application for 90 day & recovery of patients was assessed with clinical symptoms at 0<sup>th</sup>, 15<sup>th</sup>, 30<sup>th</sup>, 60<sup>th</sup>, 90<sup>th</sup> day. Data thus generated was neatly arranged and assessed statistically for results and represented. From this study it can be concluded that application of *ArkaTaila* is effective treatment modality for *Vicharchika*.

**Keywords:** *Vicharchika*, *ArkaTaila*, Application, Eczema.

#### INTRODUCTION

Appearance carries a lot in modern world. Usually 10-15% cases present before general practitioners pertaining to skin diseases and about 30% of all the skin diseases are eczematous.<sup>1</sup> In *Ayurveda*, *Kushta* (Skin disease) is divided into two groups namely *Mahakushta* & *Kshudrakushta*. All *Kushtas* have a *Tridoshaja* origin.<sup>2</sup> hence *Vicharchika* can be assumed in same way i.e. *Kapha* being responsible for *Kandu* (itching), *Pitta* responsible for *Srava* (discharge), and *Shyavata* (discoloration) indicate the presence of *Vata*. Despite its *Tridosha* origin various *Acharyas* have mentioned different dominancy in *Vicharchika* i.e. *Kapha*<sup>3</sup>, *Pitta*<sup>4</sup>, and *Vata-Pitta*<sup>5</sup> *Pradhana*. As per the symptoms and pathogenesis, *Vicharchika* has been directly correlated with Eczema (Dermatitis) by most of scholars in modern science. *Sharangdhara* mentioned *Arkapatra* (*Calotropisprocera*) *Taila*<sup>6</sup> (for external application). *Vicharchika* is one of the type of *Kshudrakushta*<sup>7</sup> which is a chronic disease & difficult to cure.

Today's present life style is tremendously altered from last decade. Every-one in society has set the goal of his/her life. To achieve the same no one conscious about their own health, result to development various diseases. *Vicharchika* (Eczema) is one of them & it is big challenge due to its recurrence. Due to lack of physical exercise, unhygienic, mental stress, overeating, sedentary lifestyle *Vicharchika* is commonly observed. This study is helpful for *Ayurvedic* as well as Modern physicians to treat patients of *Vicharchika*. So an effort is being made in present study to know efficacy of *Arkapatrataila* in the management of *Vicharchika* w.s. r. to Eczema & this study is successfully shown that it is effective in the management of *Vicharchika* w.s. r. to Eczema.

#### AIM AND OBJECTIVES:

1. To know the efficacy of *Arkataila* in the management of *Vicharchika* w.s.r. to Eczema.
2. To find out an easily available and considerably low cost, safe and effective remedy for the treatment of *Vicharchika*.
3. To educate the people to decrease the rising trend of skin diseases in India.

## METHODOLOGY

### Selection of drug:

Trial drug *ArkaTaila* is poly herbal formulation in the form of *Taila*.

Name of drug	<i>Arka</i>	<i>Sarshap</i>	<i>Haridra</i>
Family	Asclepiadaceae	Crucifereae	Zingiberaceae
Latin name	Calotropisprocera	Brassica Compestris	Curcuma longa
<i>Upayukanga</i>	<i>Patra</i>	<i>Bija-taila</i>	<i>Mula</i>
<i>Rasa</i>	<i>Katu-Tikta</i>	<i>Katu-Tikta</i>	<i>Tikta-Katu</i>
<i>Vipaka</i>	<i>Katu</i>	<i>Katu</i>	<i>Katu</i>
<i>Virya</i>	<i>Ushna</i>	<i>Ushna</i>	<i>Ushna</i>
<i>Guna karma</i>	<i>Laghu, Ruksha, Tikshna</i>	<i>Snigdha</i>	<i>Ruksha-Laghu</i>
<i>Doshaghnatas</i>	<i>Kapha-vatashamak</i>	<i>Kapha-vatanashak</i>	<i>Kapha-vatashamak</i>

All drugs were first identified & authenticated from Dravyaguna department of SSAM & H Ayurved College, Nashik Maharashtra.

### Method of Preparation of Drug:

The trial drug which is in the form of *Tail* was prepared according to described in classics.

### Standardization of investigational drug:

Trial drug was sent for Standardization to department of pharmaceutics of SMBT College of Pharmacy Dhamanagaon Nashik Maharashtra.

### Research design:

#### Study Population:

The patients with sign & symptoms of *Vicharchika* (eczema) visiting to O.P.D. in Muktai clinic, shop no.1, Ruhi apartment, beside Saptshrungi apartment, Tarawalanagar, Dindori road, Meri, Nasik region were included in study.

#### Sampling:

Simple random sampling technique.

#### Study Sample:

The patient from periphery area of Tarawalanagar, Dindori road, Meri, Nasik region Maharashtra having clinical manifestation of *Vicharchika* (eczema) were enrolled.

#### Sample Size:

30 patients were randomly selected irrespective of their socio-economic, educational or religious status having clinical features of *Vicharchika* (eczema)

#### Study Setting:

The study was carried out at Muktai clinic, shop no.1, Ruhi apartment, beside Saptshrungi apartment, Tarawalanagar, Dindori road, Meri, Nasik with due consent of patient from August 2010 to August 2013.

#### Diagnostic Criteria:

A Special proforma was prepared including sign & symptoms of *Vicharchika* (eczema). Every patient was subjected to physical examinations. Patient of *Vicharchika* (eczema) were only enrolled. Other necessary investigations were carried out to exclude the other pathology.

#### Inclusion Criteria:

Patients of age group between 16-70 years with sign & symptoms of *Vicharchika* (eczema) & willing for treatment with written consent in study.

#### Exclusion Criteria:

Patients with disorders like DM, IHD, Endocrine disorders, Tuberculosis, HIV, skin disorders other than *Vicharchika* were excluded.

### Criteria of withdrawal:

Increase in symptoms, any allergic reaction or not willing to continue.

### Time & duration of study:

The total study period was 36 months from August 2010 to August 2013.

### TECHNIQUE OF DATA COLLECTION:

The patients suffering from *Vicharchika* (eczema) with clinical manifestation were included in this study. As per inclusion criteria patient were enrolled. The enrolled patients were thoroughly interrogated; history & facts were noted in a specialised structural clinical proforma based on *Ayurvedic* Classical frame work incorporating physical status examination. General information of patients & its family, chief complaints to know manifestations of disease, past history, history of present illness, family history, personal history to get information on diet, appetite, *nidra* (sleep), *vyasan* (addiction), allergies if any. Systemic as well as *Dashvidh* examination also done. *Asthavidh* examination also included in proforma. Patients were treated with *Arkataila*. *Arkapatrataila* is used externally for application two times a day for 90 day. The feedback obtained from patients which included graded responses. The information of effect of trial drug obtained after every week.

### TREATMENT METHODOLOGY & SCHEDULE:

As per inclusion criteria patients were selected by simple randomized method. Methodology of treatment for the patients as follows

1. *Taila* was prepared according to classical method.
2. All patients were treated with *ArkaTaila* application for 90 day & recovery of patients was assessed with clinical symptoms at 0<sup>th</sup>, 15<sup>th</sup>, 30<sup>th</sup>, 60<sup>th</sup>, 90<sup>th</sup> day.
3. Patients were advised to follow the *Pathyapathya* available in *Ayurvedic* literature on *Vicharchika*. They were also advised to use less quantity of salt in their diet.
4. Follow up was done after every week.

### ASSESSMENT CRITERIA

All the patients were examined weekly 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:

1. *Kandu*

Sr. No	Symptoms	Grade
1	No <i>Kandu</i> .	0
2	Mild or occasional <i>Kandu</i> .	1
3	<i>Kandu</i> off and on	2
4	Continuous <i>Kandu</i> without disturbed sleep	3
5	Continuous <i>Kandu</i> with disturbed sleep	4

2. *Pidika*

Sr. No	Symptoms	Grade
1	No <i>Pidika</i> .	0
2	<i>Pidika</i> disappears but discoloration persists.	1
3	<i>Pidika</i> in less than 5 square cms. In whole affected area	2
4	<i>Pidika</i> in between 5-10 square cms. in whole affected area	3
5	Many or uncountable <i>Pidika</i> in the whole affected area	4

3. *Daha*

Sr. No	Symptoms	Grade
1	No <i>Daha</i> .	0
2	Sometimes <i>Daha</i>	1
3	Often <i>Daha</i>	2
4	Continuous <i>Daha</i> without disturbed sleep	3
5	Continuous <i>Daha</i> with disturbed sleep.	4

4. *Srava*

Sr. No	Symptoms	Grade
1	No <i>Srava</i>	0
2	Occasional <i>Srava</i> after itching	1
3	Mild <i>Srava</i> after itching	2
4	Moderate <i>Srava</i>	3
5	Profuse <i>Srava</i> making clothes wet	4

5. *Vedana*

Sr. No	Symptoms	Grade
1	No <i>Vedana</i>	0
2	Mild <i>Vedana</i>	1
3	Moderate <i>Vedana</i>	2
4	Severe <i>Vedana</i>	3

Considering the overall improvement shown by patients in signs & symptoms the total effect of therapy was assessed in terms of complete remission, improved, moderately improved, mildly improved, & unchanged as follows

1. Complete remission: Complete relief 100% in sign & symptoms was taken as complete remission
2. Markedly improved: patient showing improvement more than 75% in sign & symptoms was taken as markedly improved
3. Moderately improved: patient showing improvement upto 50 to 75% in sign & symptoms was taken as moderately improved

4. Mildly improved: patient showing improvement upto 25 to 50% in sign & symptoms was taken as mildly improved.
5. Unchanged: below 25% relief in signs & symptoms of *Vicharchika*.

**ADVERSE EFFECT OF EVALUATION CRITERIA:**

Evaluation & reporting of adverse effect was done as per guidelines of National Pharmacovigilance Programme for Ayurveda, Siddha, & Unani (ASU) drugs.

**STATISTICAL ANALYSIS:**

1. Effect of *Arkatailaon Vicharchika (Eczema)* w. s. r to *Kandu, Pidika, Daha, Srava, Vedana*

Symptoms	Before treatment score		After treatment score		t test	P value
	Mean	SD	Mean	SD		
Kandu	2.33	0.80	1.00	0.95	-7.10	P<0.01
Pidika	1.43	0.77	0.77	0.63	-6.68	P<0.01
Daha	1.67	0.80	0.87	0.78	-10.77	P<0.01
Srava	1.60	0.67	0.97	0.81	-7.08	P<0.01
Vedana	1.50	0.68	0.73	0.64	-9.76	P<0.01

Statistically highly significant relief observed in symptoms of patient after treatment (p<0.01)

#### 6. Overall effect of *Arkatailaon Vicharchika (Eczema)*

Results	Number of patients	Percentage
Completeremission	00	00%
Markedlyimproved	02	6.666667
Moderatelyimproved	14	46.66667
Mildlyimproved	08	26.66667
Unchanged	06	20

Above table shows that *Arkataila* moderately effective on *Vicharchika (Eczema)*

## DISCUSSION

*Vicharchika* may be defined as a clinical entity, in which the lesion is *Shyava* coloured, *Pidikotpatti* with profuse itching or *Ruja*, which may develop any here in the body. It may be *Sravi* or *Sushka*. The disease *Vicharchika* has been correlated by the modern disease eczema by many *Ayurvedic* scholars. *Ayurveda* has described the skin diseases under the chapter on *Kushtha* and *Vicharchika* has been mentioned under *Kshudra Kushtha*. In this study 30 patients were registered, all patients have completed their full course of treatment in the previous chapter a record & statistical data of 30 patients of *Vicharchika* has been presented. The findings have been critically discussed as under – The maximum no. of patients were from the age group 30-65 years. Majority of the patients in the present study were males. Maximum number of patients were from the Poor class. Amongst these people different unhygienic habits were detected. Most of the patients were having non vegetarian dietetic habits. Amongst them the irregular food habits, wrong combinations of food may be the contributory factor for occurrence of *Vicharchika*. On the basis of habituation of particular Rasa, it was found that maximum numbers of patients were consuming *MadhuraRasa* dominant food, followed by *Katu*, *Amla* and *LavanaRasas*. *MadhuraRasa* vitiate *RasaDhatu* and *KaphaDoshas*. While *Katu*, *Amla* & *LavanaRasa* vitiate *RaktaDhatu* and *PittaDoshas*, which is the cause of the disease. Most of the given the history of recurrence of the disease. Recurrence is common among the Skin disorder. The observation of cardinal features manifested reveals that *Kandu* (itching) was found in every patient, *Pidika* was found in 90% patient, followed by *Daha*, *Vedana*, *Srava*. Effect of *Arkataila* externally on the cardinal signs & symptoms of *Vicharchika* was found to be statistically highly significant at the level of p<0.001 in *Kandu*, *Daha*, *Vedanta*, *Srava* & *Pidika*.

## CONCLUSION

The extensive study of *Nidanpanchaka* (Pathogenesis) & treatment of *Vicharchika*, it is revealed that unhygienic condition is prime factor & sedentary lifestyle is leads to *Vicharchika*. From observation & statistical analysis it is proved that *Arkataila* is moderately effective on *Vicharchika*. *Vicharchika* is a clinical entity categorized under *kshudra* and *sadhyakushta*, also correlated with disease eczema. After present study it can be concluded that *Arkataila* is effective in management of *Vicharchika*. It reduces various symptoms of *Vicharchika*. The main *nidana* in patients of *Vicharchika* was found *Garishta-ahara*, followed by *asatmya-ahara*, *mithyavihara*. Clinically no adverse drug reactions were seen due to drug. *Arkataila* is well tolerated by patients of different types of *prakruti*. The drug therefore deserves intensive pharmacological study.

### LIMITATIONS

The study was limited to single geographical area. Sample size was very small.

### SCOPE FOR FURTHER RESEARCH:

The present study has shown good results. It is recommended that the study should be carried out in large number of patients to confirm findings on wider scale. As eczema is an atopic disease and further research can be carried to analyze the immune modulator effect.

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