

IMPACT OF TUTTHADI PRADEH AND COUNSELING REGARDING LIFESTYLE MODIFICATION ON VICHARCHIKA

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Abstract

Vicharchika is one of the most common types of skin diseases. It is found in each age group and is not gender specific. The cause behind rising cases of the disease are increased pollution level, unawareness about the importance of lifestyle and reduced immunity due to the same. Keeping in view about the above said situation, a study was planned to assist the impact of external medicine along with counseling on lifestyle modification in vicharchika. The cases were registered from the Ayurvedic opd of A and U Tibbia College and hospital New Delhi. The inclusion criteria was diagnosed patients of vicharchika on the bases of symptoms provided in Brihattraai. Further it was assured that the patient was not suffering from any other chronic allergies, diabetes or other serious illnesses like cancer psoriasis. 2 groups of 15 patients each were selected randomly with lottery system irrespective of age, gender or socioeconomic status. Prakriti and sattva of the patient were also noted down. The medicine was chosen as Tutthadi pradeh for local application from third chapter of sutra sthan of charak samhita. A counseling session of around 45 mins. was conducted for patients in TC group. The contents included were compatible and incompatible diet role of exercise and personal hygiene, regulation of sleep and awake time. Rules of application of the medicine were described to both the groups. Written consent was taken from the patient to become the part of the study. Total trial time was one month and progress was noted on weekly bases. Symptomatic relief remained the bases of assessment for result. In the end of the study, it was found that about 70% of the patients got 100% relief in their symptoms. 15% could get rid of at least three symptoms. In other patients the results were not encouraging. The patients in TC group were benefited more as compared to the other group (i.e. T group)

Key words:

Vicharchika, Pradeh, Brihattraai, Lifestyle Modification

Introduction

In modern technical era, the people are having hectic schedules. In this life of hustles and bustles the individuals forget about following the daily routines, as described in the name of Dinacharya or Ritucharya in the ancient text of Ayurveda. Industrialization and urbanization have

further contributed in increasing the climatic pollutants. This external environment remains in constant touch with the skin so, many skin disorders are seen frequently. It's important to save skin from the diseases because it not only affects physically but also lowers down the confidence of the person facing it. The patient feels low and often suffers

episodes of depression or social withdrawal.

Keeping in view of the above facts, it was decided to work upon Vicharchika, one of the most common diseases of the skin found in Ayurveda opd. In Ayurveda diseases have been divided into three types according to the paths (trividhroghmarg): these are shakha(raktaadi dhatu)/ external, marmasthi sandhi/medium and koshttha/internal path. The diseases present in the external path normally reveal their symptoms upon skin. The medicines are prescribed both for internal and external use. However in this study, an externally applicable preparation naming Tutthaadi Pradeh was used. The reference of the medicine is charak samhita sutrasthan third chapter. A schedule of counseling was also designed upon Life Style modification. The sessions contained detailed history of the patient along with their style of living and daily regimes. Counseling was made on one to one individual session. It was done for the TC group (Tutthadi pradeh+counseling group) of patients. The objectives of the study were to see the impact of external applications and counseling upon vicharchika .

Materials and Methods

Research design: Experimental

Sampling Technique: Random selection with lottery system.

Sample size and classification: total 30 patients. The sample was classified into two equal groups of 15 patients each. These were heterogonous group. Every alternate patient was selected for counseling.

Inclusion criteria

1. Presence of symptoms of vicharchika according to brihattraai
2. Non-complicated case of vicharchika of less than one year of duration.

Exclusion criteria

1. Chronic vicharchika
2. Patient of diabetes mellitus
3. Patients of skin cancer, laprosy or any other chronic allergic condition.

Preparation and application of the drug

tutthadi pradeh the ingerdients were tuttha(Cuso₄), marich(Piper nigram), lodhra(Symplocos racemosa), pushtha(Saussurea lappa), manahshila(As₂s₂)

All these were taken in the form of powder in equal quantity and was mixed with sarshap tailam to make the pradeh(paste)

Application-

The patients were advised to apply it externally only. The general instructions related to the appliation were-not to be used when the affected area is not properly cleaned, gloves shoud be used while applying, remove the paste when it gets dried, the pradeh should be applied only once. The medicine should be kept away from children. Eyes and mouth should also be protected from the medicine.

The counseling was given about lifestyle modification. Counseling session contents were

1. Imparting knowledge about the disease including probable causes, prognosis and chances of relapse.
2. Dietary instructions- avoidance of incompatible diet like simultaneous consumption of hot and cold, oily and dry, ghrīt and honey in equal amount etc.
3. Try to regulate timing of food, sleep and sexual activities.
4. Maintain utmost of hygiene status.

Results

S.no.	BT. AT.	Kandu	Pidka	Shyawta	Srav	Rukshata	Dah	Ruja	Raji	AV. effect
1.	B.T.	+++	+++	+++	+++	-	-	-	-	100%
T	1st week	++	+++	+++	+++					
	2nd week	++	++	++	+++					
	3rd week	+	+	++	+					
	4th week	X	X	X	X					
2.	B.T.	++++	++++	+++	-	-	+++	-	-	100%
T	1st week	++++	++++	+++			+++			
	2nd week	++	+	++			++			
	3rd week	+	+	+			X			
	4th week	X	X	X			X			
3.	B.T.	++++	++++	++++		++++	++++			100%
T	1st week	+++	++++	++++		++++	+++			
	2nd week	++	++	++++		++	++			
	3rd	+	+	++		+	+			

Data collection

All the thirty patients were assessed for number and intensity of the symptoms of vicharchika present before and after the treatment. The intensity of symptoms was coded as + signs. Highest intensity was coded as ++++ and the lowest as + sign. X was the sign for resolved symptom.

Percentage of symptoms revealed was calculated to get the final result after four weeks. The progress was noted down at each week for four consecutive weeks.



	week									
	4th week	X	X	X		X	X			
4.	B.T.	++++	++++	++++	++++		++			100%
T	1st week	++++	++++	+++	+++		++			
	2nd week	+++	+++	++	++		+			
	3rd week	+	++	+	+		X			
	4th week	X	X	X	X		X			
5.	B.T.	+++	+++	+++	++++		+++	++		100%
T	1st week	++	+++	+++	+++		++	++		
	2nd week	+	++	++	++		+	+		
	3rd week	X	+	+	+		X	+		
	4th week	X	X	X	X		X	X		
6.	B.T.	++++	++++	++++	++++					100%
TC	1st week	++++	++++	++++	+++		++	++		
	2nd week	+++	++++	+++	X		+	+		
	3rd week	+	++	+	X		X	+		
	4th week	X	X	X	X		X	X		
7.	B.T.	++++	+++	-	++		+++			100%
TC	1st week	++	++		+		+++	++		
	2nd week	++	+		X		++	+		
	3rd week	+	X		X		++	+		
	4th week	X	X		X		X	X		
8.	B.T.	++++	++++	++++	+++		+++	+		100%
TC	1st week	++++	++++	++++	++		+++	+		
	2nd week	+++	+++	++	X		++	X		
	3rd	+	+	+	X		X	X		



	week									
	4th week	X	X	X	X		X	X		
9.	B.T.	+++	+++	++++		++++	++			100%
TC	1st week	+++	++	++++		++	++			
	2nd week	++	++	++		X	+			
	3rd week	+	X	+		X	+			
	4th week	X	X	X		X	X			
10.	B.T.	++++	++++	++++		+++		+++		
TC	1st week	+++	+++	++++		++		++		80%
	2nd week	++	++	++		++		++		
	3rd week	++	++	+		+		+		
	4th week	+	X	X		X		X		
11.	B.T.	++++	++++	++++	++++		++++			100%
TC	1st week	++++	++++	++++	+++		++			
	2nd week	++	+++	++++	++++		X			
	3rd week	+	+	+	X		X			
	4th week	X	X	X	X		X			
12.	B.T.	++++	++++	++	++++					100%
TC	1st week	++++	++++	++	++++					
	2nd week	++	++	++	++					
	3rd week	++	+	+	X					
	4th week	X	X	X	X					
13.	B.T.	++++	++++	++++	++++		++++	++++		83.34%
TC	1st week	+++	+++	++++	+++		++++	++		
	2nd week	+++	++	++	++		++	X		
	3rd week	++	+	++	X		X	X		
	4th week	X	X	++	X		X	X		



14.	B.T.	+++	+++			+++			+++	100%
TC	1st week	+++	+++			+++			+++	
	2nd week	++	++			++			++	
	3rd week	++	++			X			X	
	4th week	X	X			X			X	
15.	B.T.	++++	++++		++++		++			100%
TC	1st week	++	++++		++		++			
	2nd week	++	++		+		+			
	3rd week	++	+		X		X			
	4th week	X	X		X		X			
16.	B.T.	++++	++++		++++		++++			100%
TC	1st week	+++	+++		+++		++++			
	2nd week	++	++		++		++			
	3rd week	++	++		+		++			
	4th week	X	X		X		X			
17.	B.T.	++++	++++	++++		++++	++++	++++		
TC	1st week	+++	++	+++		++	++++	++		
	2nd week	++	++	+++		+	+++	+		
	3rd week	+	+	+		X	X	X		
	4th week	X	X	X		X	X	X		
18.	B.T.	++++	++++	++++	++					50%
T	1st week	++++	++++	++++	++					
	2nd week	+++	++	++++	+					
	3rd week	++	+	+++	+					
	4th week	+	X	++	X					
19.	B.T.	++++	++++	++++			+++			100%



TC	1st week	++	++	++++			++			
	2nd week	+	+	++			X			
	3rd week	X	+	X			X			
	4th week	X	X	X			X			
20.	B.T.	++++	++++	++++	++++		++			100%
TC	1st week	+++	+++	++++	++		++			
	2nd week	X	X	++++	X		X			
	3rd week	X	X	++	X		X			
	4th week	X	X	X	X		X			
21.	B.T.	++++	++++	+			+++			100%
TC	1st week	++	++	X			++			
	2nd week	+	+	X			+			
	3rd week	X	X	X			X			
	4th week	X	X	X			X			
22.	B.T.	++++	++++	++++	++++					75%
TC	1st week	+++	+++	++++	++++					
	2nd week	++	++	+++	+					
	3rd week	++	+	++	X					
	4th week	X	X	++	X					
23.	B.T.	+++	+++	+++		+				75%
TC	1st week	++	++	+++		+				
	2nd week	X	++	++		X				
	3rd week	X	X	++		X				
	4th week	X	X	++		X				
24.	B.T.	++++	++++	++++		++++	++++	++++		83.34



TC	1st week	+++	+++	+++		+++	+++	+++		
	2nd week	++	+++	+++		++	++	++		
	3rd week	+	+	++		+	+	+		
	4th week	X	X	++		X	X	X		
25.	B.T.	++++	+++	++	+		++			80%
TC	1st week	+++	+++	++	+		+++			
	2nd week	+++	++	++	X		++			
	3rd week	+	+	++	X		++			
	4th week	X	X	++	x		X			
26.	B.T.	++++	++++	+++	++++		++	+++		83.34%
TC	1st week	+++	+++	+++	+++		+	+++		
	2nd week	+++	+++	+++	+++		+	+++		
	3rd week	+	++	++	+		X	X		
	4th week	X	X	++	X		X	X		
27.	B.T.	+++	-	+++		+	+++	+++		100%
TC	1st week	++		++		+	++	++		
	2nd week	+		++		+	+	+		
	3rd week	X		+		X	+	+		
	4th week	X		X		X	X	X		
28.	B.T.	++++	++++		++		+++			50%
T	1st week	+++	+++		++		++			
	2nd week	++	++		+		+			
	3rd week	++	++		+		X			
	4th week	+	++		X		X			
29.	B.T.	++++	++++	++++	++++		+++			100%
TC	1st	++	++	++++	++		+			

	week									
	2nd week	++	X	++	X		X			
	3rd week	+	X	+	X		X			
	4th week	X	X	X	X		X			
30.	B.T.	++++	+++	++	++++		++	++++		100%
TC	1st week	++++	+++	++	++++		++	++++		
	2nd week	+++	+++	++	++		X	++		
	3rd week	+	++	+	X		X	X		
	4th week	X	X	X	X		X	X		

	Kandu	Pidika	Shyawat a	Srav	Rukshat a	Dah	Ruja	Raji
S.D.	3.8	3.71	3.4	3.25	3.11	2.95	3	3.11
S.E.	0.0742	0.32	0.144	0.224	0.342	0.1615	0.226	0.351
t valu e	20.55+ + P<0.00 1	9.44++ P<0.00 1	15.31++ P<0.001	3.34+ P<0.0 1	9.86++ P<0.001	18.27 P<0.00 1	8.860+ + P<0.00 1	could not be calculate d

+P<0.01 significant ; ++P<0.001 highly significant; P>0.01 not significant

As per the table above, 70% of the patients i.e. 21 out of 30 patients got complete resolution of the symptoms. Among these sixteen were those who applied the Tutthaadi pradeh and also undergone for counseling sessions. Five were from the other group who only applied the medicine. Out of remaining 30% patients 2 patients could get 50% relief from the symptoms. Other patients could get partial relief from the symptoms ranging from cure rate of 70-80%.

Among 2 patients who got 50% relief, one was from Tutthadi pradeh group and the other was from Tutthadi pradeh and counseling group.

Among 7 patients who got 70-80% relief, 5 were from Tutthadi pradeh and counseling group and 2 were from Tutthadi pradeh group.

Discussion

Vicharchika is a disease which effects both mind and body. It primarily effects body and in due course becomes the reason for Inculcating depression in the patient. For shakhagat diseases the aacharyas have suggested both internal and external medicines. In this study, external medicine was chosen to explore the efficacy of external application (bahiparimarjan chikitsa) and also impact of counseling for relief from mental agitation developed out of embarrassment about the effected external beauty. The study was conducted on thirty patients divided into two groups naming T and TC. It was found that the patients of young and middle age were benefitted more as compared to children or aged ones. The reason might be the immunity is stronger in these ages most of the times. Moreover it is difficult to follow the instructions and modifications of the lifestyle in the later group. The results were almost similar in male and female patients. There was significant difference in outcomes when it came to socioeconomic status. Patients lied in high and middle income group were benefitted more than the patients in the low income group or poors. The logic remained the same high and middle group could change their diet patterns and could manage the lifestyle while the other group had no choice but to adjust within the given circumstances.

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Maximum benefit was seen for vaatpaitik prakriti. It showed the results according to hetu viprit chikitsa. As vicharchika is a kafolvan roga. So according to siddhant of atulya prakriti, the impact of disease was lesser and was comparatively easier to cure. Sattva plays an important role in cure of the disease. The patients were also assessed on this criteria. The people with pravar sattva could get early and easy relief from the symptoms. It nourishes the principle that manasik and sharirik bala are interdependent and are directly proportionate to each other. This was also the logic behind finding more results in TC group than in T group due to counseling the sattava gets pacified and the patient feels motivated towards drug compliance and physical well-being.

Conclusion

Tutthadi pradeh as a bahiparimarjan chikitsa along with lifestyle modification counseling proved to be an effective treatment of vicharchika. It explored the scope of external medications described in charak samhita for further research. It must also be seen that if both internal purification methods of treatment are applied with bahiparimarjan, more encouraging results may be found. Counseling plays an important role as it improves the overall well-being. It helps the patient at emotion level too along with the improvement in the physical immunity.

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