

**A CLINICAL STUDY ON THE EFFICACY OF *PRACCHANNA KARMA*
WITH *ARAGWADHA KSHAAR* IN THE MANAGEMENT OF *SHWITRA***



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ABSTRACT

A Clinical Study on The Efficacy Of *Prachhanna Karma* With *Aragwadha Kshaar* In The Management of *Shwitra*

Introduction:

The major or primary reasons for skin diseases are faulty habits. *Shwitra* is one of the ailments in which colour of the skin is changed to *Aruna*, *Tamra* or *Shweta Varna*. *Shwitra* is not a systemic or infective disease according to modern science, but still act as a social stigma as it is cosmetic in nature and distorts the body image .Incidence of vitiligo occurs is about 1% of the world population. *Shwitra* treatment in the classics is explained as the *shodhana* therapy followed by *lepa* application. Which helps in correcting the *vitiated dosha*, and *samprapti vighatana* of the disease. For *shodhana* purpose, *prachhanna karma* was taken to do *sthanik shodhana* of *shwitra*. *Shwitra* can be correlated with Vitiligo. In which there is Depigmented or Hypopigmented patches that result from absence or reduction of melanocytes due to unknown cause. The treatment modalities mentioned in modern science has side effects. So, it is really needed to find a safe, easier, less complicated, cost effective and fruitful approach for the management of disease.

Materials and methods:

In comparative clinical study conducted on 40 patients of *Shwitra* from O.P.D and I.P.D of Parul *Ayurveda* Hospital, dividing them into 2 groups having 20 patients each as; Group 1 as *prachhanna karma* followed by *Avalguja lepa* and Group 2 as *prachhanna karma* followed by *Aragwadha kshara pratisarana*, 4 sitting of *Prachhanna karma* was done in one month (once a week) followed by daily drug application of regarding group. Before and after the treatment results were assessed on the parameters decided for the study.

Results:

In both Group 1 and Group 2, all 20 patients had a reduced VETI score in A.T. when compared with B.T. The P value < 0.001 and therefore, we can conclude that there is a very high significant difference between the VETI scores of BT and AT, in both Group 1 and Group 2.

Discussion:

Shwitra is a skin distressing disease which is characterized by the depigmented patch of skin due lack of melanocytes functioning or loss of melanocytes. The study conducted for evaluating the results of *prachhanna karma* followed by *Aragwadha kshara pratisarana* had shown that there is no significant difference in the end results of both the groups (*Avalguja* 83% and *Aragwadha kshara* 81.44%) it can be predictable that *prachhanna karma* has got main role in the *shwitra* irrespective of the *lepa* used.

Conclusion:

Aragwadha kshara pratisarana can be considered better compared to *Avalguja lepa* as, the common complication of appearance of blisters secondary to *Avalguja lepa* is absent with the *Aragwadha kshara pratisarana*.

Key words:

Shwitra, prachhanna karma, Aragwadha kshara, Avalguja