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EFFICACY OF VARNYA MAHAKASHAYAA GHANAVATI AND CHURNA IN "TOPICAL STEROID-DEPENDENT FACE -ACNE ROSACEA" – A CASE REPORT

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ABSTRACT

Ayurveda provide unique treatment modalities and medicaments for the disease conditions. In Charaka Samhita classifications of drugs are made based on *Karmas* (actions) called as *Mahakashayaa Dashemani* (group of ten drugs) and these are classified into 50 groups. *Varnya Dashemani* (group of complexion enhancing drugs) is one such group which is said to be more effective in curing the aliments related with skin complexion. In the present study a case of Topical steroid-dependent face - Acne rosacea was administered with *Varnya Mahakashaya Ghanavati* (250mg 4 tabs /BD) and *Varnya Mahakashaya churna* (powder) for 15 days and the formulation has provided significant relief in symptoms. Hence it can be considered that *Varnya Mahakashaya* drugs can be useful in treating Acne rosacea and can be taken for further clinical trials.

Key Words: Varnya mahakashayaa Dashemani, 'TSDF'- Acne rosacea.

INTRODUCTION

Importance of beauty and personality is at its bloom in this era of Aesthetics as it determines the social perception, value judgements and interpersonal relationships. Vaivarnya is one such personality determining Aesthetic disorder which is selected for the study. So here an attempt has been made to evaluate the *varnya* property of *Varnya dashemani*, in 'TSDF'- Acne rosacea.

CASE REPORT

The present case was taken on 8/10/15, aged 20yrs, female patient, Hindu religion, student of Degree College, unmarried, Date of commencement of treatment - 8/10/15 and Date of completion of treatment - 8/11/15.

Chief complaints of the patient were pimples, reddish spots and oiliness of the face since 6 months. In History of present illness Patient was said to be apparently normal 2years back. Then she got reddish pimples on the face which was increasing gradually. But since 6 months it got aggravated. She took allopathic treatment for 6 months, applied skin light cream for 1 month and Dermadue soap for 6 months as prescribed, got relief from pimples but she found an uneven surface on the face with reddish spots on the cheeks, chin, and nose and also few pimples were present. So she came to take Ayurveda treatment for the same complaint.

Regarding cosmetic history she use to apply Fair and lovely since 6 yrs., twice a day. Menstrual cycle was Normal and regular, 4-5 days/30day cycle, Menarche- At 12yrs.

Physical examination:

On inspection on *Varna* (complexion) - complexion was not uniform, pinkish hyperpigmentation over the cheeks, *Yuvanapidaka* (pimples) were present (+) and Texture was uneven and oily in nature. On palpation of Skin texture – excessive oiliness was present and uneven surface of the face was found. Hence the patient was diagnosed as "Topical steroid-dependent face" (TSDF) - Acne Rosacea.

Drugs

Chandana (Santalum album), *Tunga* (Calophyllum inophyllum), *Padmaka* (Prunus cerasoides), *Ushira* (Vetiveria zizanioides), Madhuka (Glycyrrhiz aglabra), *Manjistha* (Rubia cordifolia), *Sariva* (Hemidesmus indicus), *Payasya* (Ipomoea digitata), *Sita* (white variety of Cynodon dactylon) and *Lata* (Cynodon dactylon).

METHODS

Informed consent:

An informed written consent was obtained from the patient for reporting this case.

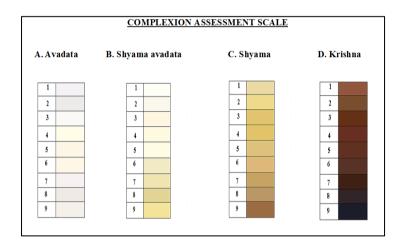
Assessment method:

Pre-test, post-test and follow up assessment by using high resolution camera, complexion assessment scale and texture by no.of tissue papers used on T zone area of the face.

Assessment tools:

Assessment of Colour- Colour of Skin were graded with the help of complexion assessment Scale. This scale was prepared based on reference given in *Charaka Samhita Indriya Sthana 1st chapter*, 8th verse and its reliability was checked but yet to be validated. There were 4 grades in the scale – A. *Avadata*, B. *Shyama Avadata*, C. *Shyama*, D. *Krishna* and each grade is again subdivided into 9 scores. So totally 1-36 scores. Shown in Figure no. 1

Figure no.1. Complexion assessment scale



Assessment of Texture- Based on difference in number of tissue papers used for wiping the 'T' zone of the face per day by the patient was recorded for pre-test assessment, post-test assessment and post follow up period and Improvement in texture (oiliness / dryness) was analysed. Shown in Figure no.2

Figure no.2 Number of tissues used in T zone area of the faces



Intervention

Varnya mahakashaya ghanavati ² was given orally at the dose of four tablets of 250 mg each (BD) with Luke warm water as Anupana after meals and Varnya Mahakashaya churna² externally for lepa on face in evening for 15 days. It was advised that quantity and thickness of Lepa was sufficient enough to cover the

lesions completely, until the *Lepa* gets dried and once it dries the person was asked to wash the face with warm water. Then Post treatment follow up was taken after 15 days.

Assessment Criteria

The improvement provided by the therapy was assessed on the basis of following parameters:-

- 1. Pre-test assessment
- 2. Post-test assessment
- 3. Post-Follow up after 15 days.

OBSERVATIONS:

Observations seen in patient in terms of complexion, Texture, Surface and pimples on the face- Right side, Left side and Front view during pre-test, post-test and post-follow up period -Shown in Table no. 1, Table no. 2, Fig no. 3, Fig no. 4, Fig no. 5 respectively.

Table no.1. Varna (complexion)

_	Pre-test		Post- test		Follow up 30th day	
Cheeks	Right	Left	Right	Left	Right	Left
	A-5	A-5	C-7	C-7	C-6	C-6
Chin	B-8		C-9		C-8	
Nose	B-4		C-6		C-8	
Around eyes	B-7		C-9		C-7	
Forehead	C-8		C-8		C-6	

Note: only Varna of affected part has been assessed.

A - Avadata, B- Shyama avadata, C- Shyama are the grades and 4 to 9 are the scores from the complexion assessment scale.

Table no.2. Texture - Snigdhata (oiliness)

No. of tissue papers used per day on T zone.

Before	After	follow-up
6	2	1

Figure no.3. Surface and pimples of Right side of the face



Figure no.4. Surface and pimples of Left side of the face



Figure no.5. Surface and pimples of Front view of the face



RESULTS

Overall results on 30th day in the patient were:

Change in *vaivarnya* (pinkish hyperpigmentation of cheeks, chin and nose) was found from grade A-B TO C that is from non- uniform *avadata Varna* to uniform *shyama Varna* which was the original skin tone of the patient. Reduction of *snigdhta* (excessive oiliness) was found, that is number of tissue papers was reduced from 6 to 1.Decrease in number of pimples was seen.

DISCUSSION

The term *Varna* refers to different components of the skin. They are Colour (*shyama*, *gauradi*), Texture (*ruksha*, *snigdha*), Lusture (*kanti*), Appearance / complexion (*prasanna Varna*), and Nourishment (*Harsha upachaya*), so any disturbance in any of the components of *Varna* leads to *vaivarnya*.³

Probable Mode of action of polyherbal formulation on "TSDF-Acne Rosacea":

According to contemporary science, anti-inflammatory and antibiotics drugs are being used for the treatment of Acne Rosacea. As the main aim is to reduce the redness and papulo pustular lesions since medications often produce a temporary remission of redness within a few weeks, the redness typically returns shortly after treatment is suspended. Long-term treatment, usually one to two years, may result in permanent control of the condition for some patients. Thus, Lifelong treatment is often necessary, although some cases resolve after a while and go into a permanent remission. Photo rejuvenation can also be used to improve the appearance of rosacea and reduce the redness associated with it. So, as the present case is steroid induced it can be treated if used for long term.

Thus the whole process of *Varṇya karma* and the probable mode of action of *Varṇya dravyas* can be understood in terms of their anti-inflammatory and anti-oxidant actions and also antimicrobial to some extent.⁵

Anti-inflammatory activity: in *Varnya Dashemani*, among 10 drugs -9 drugs are having *Sheeta virya* (cold potency), 6 are having *Madhura* (sweet) *vipaka* (post metabolic effect), *Madhura*, *Tikta* (bitter) and *Kashya* (Astringent) rasa and *kaphapittahara* property as a whole. All these factors suggest the anti-inflammatory action of the formulation as they help in detoxification of blood. ⁶

Anti-oxidant activity: *Sheetavirya* act as diuretics and antioxidant reducing the intracellular levels of reactive oxygen species. ⁶ As Photorejuvenation is also one of the method to improve the appearance of rosacea and reduce the redness associated with it.⁴

CONCLUSION:

The *Ghana vati* and *churna* of *Varnya dashemani* was administered which proved to be useful in relieving the "TSDF-Acne Rosacea "of the face i.e. the satisfactory results in terms of uniform pigmentation along with regaining the natural skin tone from *shyama avadata* to *krishna avadata*, significant reduction of oiliness from 6 to 1 tissue paper, and significant reduction of pimples were observed. Thus, the same study can be carried out in a larger sample size with an extended intervention period for better accuracy in results and also same formulation can be tried to evaluate its efficacy on other parameters of Varna such as, skin pigmentation, skin sensitivity, and skin wrinkling.

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