

A Case Report: Management of *Mukhadushika* (Acne Vulgaris) with Ayurveda

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ABSTRACT

The most prevalent skin condition affecting people today is acne, which affects 80% of adolescents. Acne vulgaris is a skin condition that shares similarities with the *Ayurvedic* texts' descriptions of the diseases *Mukhadushika* or *Yuvanpidika*. The condition known as acne vulgaris affects the pilosebaceous follicle and is characterised by both non-inflammatory (open and closed comedones) and inflammatory lesions (papules, pustules, and nodules). Sebum production, pilosebaceous duct cornification, microbial involvement, and inflammation are the four main elements that contribute to the development of the disease. Acharya Sushruta has mentioned the skin disease under "*Kshudra Rogas*" & *Mukhadushika* is one of them. These facial eruptions resemble thorns like that of *Shalmali*. Due to its tendency to influence a person's personality and diminish one's facial beauty, it is known as *Mukhadushika*. *Kapha*, *Vata*, *Meda*, and *Rakta* are the *Doshas* and *Dushyas* involved in *Mukhadushika*, and these have a localised impact on the person's face. Treatment of *Mukhadushika* involves both *Shamana* and *Shodhan Chikitsa*. Acharya Sushruta believed *Raktamokshana* to be *Shodhan Chikitsa* as well as regarded it as *Chikitsaardha*. In this case study the patient was administered various *Shamana Yogas* along with *Raktamokshana* by *Jaulaukaavacharan* as *Shodhan Chikitsa*. The outcome of the combination therapy was highly encouraging and free of any side effect.

KEYWORDS: Acne vulgaris, *Ayurveda*, *Jaulaukaavacharan*, *Kshudra Rogas*, *Mukhadushika*, *Raktamokshana*, *Yuvanpidika*.

INTRODUCTION

The largest organ in our body is the skin. Human skin is a window into a person's wellbeing. The face reflects the body and the intellect. *Tvak*(skin) according to *Ayurveda* is not only the outer covering of body, but it is a *Gyanendriya* which encompass the body from within also. Any skin condition can have an impact on a person's psychological well-being and social life. As stated by *Ayurveda* in its definition of *Swastha*, a person must be free from physical illness in addition to being joyful mental state to be considered healthy.^[1] Acne is the most prevalent skin condition encountered globally. Almost

80% of individuals are affected by the disease known as acne vulgaris. Between 16 and 17 years old, this condition affects 95% to 100% of adolescent boys and 83% to 85% of adolescent girls.^[2] They primarily affect young people or *Yuva*, and as they resemble little pustules, boils, or *Pidika*, they are also known as "*Yuvan Pidika*." Because this condition deteriorates the appearance of the face, it is known as "*Mukhadushika*." The disease comes under the *Ksudra Roga* according to Acharya Sushruta.^[3]

The symptoms of *Mukhadushika* closely resembles to those of acne vulgaris, according to allopathic science. Acne is a

persistent inflammatory condition that affects the pilosebaceous glands that are found in the skin of the face. The development of comedones (blackheads), erythematous papules, and, rarely, nodules or cysts as well as scarring are the hallmarks of this condition. This condition is primarily influenced by four factors: elevated sebum production, cornification of the pilosebaceous ducts, microbial involvement, and inflammation. This condition is frequently seen during puberty. Topical therapies, antimicrobials, hormones, surgery, ultraviolet radiation, intralesional injections, and other allopathic treatments for acne are also available, but they all have some adverse effects. Although antibiotic resistance in acne patients to tetracycline, doxycycline, azithromycin, and clindamycin is also a growing issue. These however, only work temporarily and have a very high relapse rate. None of them permanently cure the condition.

Here, the role of *Ayurveda* comes to ensure a treatment regimen which can have predictable efficacy with lesser to no side effects in this condition. The main purificatory techniques (*Shodhan Chikitsa*) for treating *Mukhadushika* are *Vamana Karma* and *Raktamokshana*, according to *Ayurvedic* scriptures. In comparison to various methods of *Raktamokshana*, *Jalaukavacharana* is a lot safer, simpler, and nearly painless.^[4] Hence, this study aims to describe the plan of management of *Mukhdushika* with *Ayurvedic* modalities like *Jalaukavacharan* along with internal medication.

MATERIAL AND METHODS

Case Report

A 20 years old Male Patient reported to OPD (OPD NO.120, CR NO.397) of Department of kayachikitsa, Ayurvedic and Unani Tibbia Hospital on 03 Jan 2022., with classical sign and symptoms of *Mukhdushika*.

Chief Complaints

- Acne over cheeks B/L (*Pidika*)
- Burning sensation over cheeks B/L (*Daha*)
- Itching over cheeks B/L (*Kandu*)
- Discolouration of skin (*Vaivarnya*) etc.

History of Present Illness: For the previous 1.5 years, the patient had the aforementioned problems. During this time, he developed little pustules on both side of his cheeks. Also, he felt a burning and itching feeling over these sites. The patient tried a number of allopathic local and systemic medications, but none were able to stop the acne from returning. In order to receive *Ayurvedic* treatment, he came to the Kayachikitsa OPD at A & U Tibbia College and Hospital.

Past History: Not any relevant history found.

Personal History: (Table-1)

Age	20	B.P.	124/82 mm hg
Sex	Male	Pulse	70 bpm
Occupation	Student	Bowel Habits	Constipated
Sleep	Irregular	Appetite	Low

Ashtavidha Pariksha: (Table-2)

Sr no.	Pariksha	Pramana
1	Pulse (<i>Nadi</i>)	70/min
2	Stool (<i>Mala</i>)	Constipated
3	Urine (<i>Mutra</i>)	Normal
4	Tongue (<i>Jihva</i>)	Coated (<i>Saam</i>)
5	Speech (<i>Shabda</i>)	Clear
6	Skin (<i>Sparsha</i>)	Rough (<i>Khar</i>)
7	Eyes (<i>Drika</i>)	Normal
8	Built (<i>Akriti</i>)	Medium (<i>Madhyama</i>)

Material with Daily treatment & Prognosis

Patient was given 4 sittings of *Jalaukavacharan* on 7 days interval along with internal medicines. Regular follow up was made at every 15 days interval. (Table-3)

Treatment timeline of the patient is described in (Table-4).

S. No.	Drug	Dose	Anupana	Duration
1	<i>Panchnimba Churna</i>	3 gm BD	Lukewarm water	4 months
2	<i>Mahamanjishthadi kwath</i>	20 ml BD	1 cup lukewarm water	4 months
3	<i>Haridra khand</i>	3 gm BD	Milk	4 months
4	<i>Triphala churna</i>	3 gm TDS	Lukewarm water	First 2 months
5	<i>Kaishor Guggulu</i>	2x250mg BD	Lukewarm water	4 months
6	<i>Arogyavardhini vati</i>	1x150mg TDS	Lukewarm water	First 2 months
7	<i>Dashang Lepa</i>	L/A	<i>Utsadan</i> with water	4 months

Visit	Treatment	Symptoms			
		Acne over face (<i>Pidika</i>)	Burning sensation over face (<i>Daha</i>)	Itching over face (<i>Kandu</i>)	Discolouration of skin (<i>Vaivarnaya</i>)
1	BEFORE TREATMENT / START OF TREATMENT	+++	++	++	++
2	Medicines as Table 3	+++	++	+	++
3	Continue above medicines	++	+	+	+
4	Above medication + 1st sitting of <i>Jalaukavacharan</i>	+	+	+	+
5	Above medication + 2nd sitting of <i>Jalaukavacharan</i>	Almost cured	Almost cured	Almost cured	Almost cured
6	Above medication + 3rd sitting of <i>Jalaukavacharan</i>	Almost cured	Cured	Cured	Almost cured
7	Above medication + 4th sitting of <i>Jalaukavacharan</i>	Cured	Cured	Cured	Cured

Source of leeches:

A reputed biological product provider in Delhi provided all of the leeches utilised in the study.

Procedure of Leech Therapy

Preparation of the leeches:

For the procedure, fresh leeches were employed at each session. The initial step in the preparation of leeches was to place them in *Haridra Jala*, or turmeric water, which was made by putting a few pinches of *Haridra Churna* (turmeric powder) in a kidney tray half-filled with fresh water. The leech was removed and placed in a vessel with cool, fresh water when it started to move rapidly, or when it became active.

Preparation of patient:

One day before leech therapy, blood tests including BT, CT, HIV, HCV, HbsAg were conducted to rule out any bleeding disorder or infection. Mild *Abhyanga* was performed on the patient, followed by sudation (*Bashp Swedana*) over the face for a short period of time to improve superficial circulation and aid in blood-letting. After that, the face was thoroughly washed with dry cloth to get rid of all the secretions. The patient was then made to lie down comfortably.

Leech Application:

In order to apply leeches at a specific location, the active leeches were brought close to the pustules/papules. No need for lancet prick has arisen as leeches got self-applied on affected site. A damp cotton pad was put over a leech when it was fastened to a site. At a time, a total of 3 leeches measuring 3 to 4 inches long were utilised, sucking 5 to 8 cc of blood each.

Leech Management:

The leech usually separates from the site on its own within 20 to 25 minutes. Following that, *Haridra Churna* was applied to the leech's anterior sucker in an effort to make it vomit. For the leech to release the blood it had sucked, it occasionally needed to be gently squeezed. Leech reactivates after removing all the blood from its gut and is kept in fresh water.

Patient Management:

Patient was watched for 4 hours for any sign of secondary bleeding from the bite site after the leech detaches itself from the area. On the bite site, *Sphatik Bhasma* was applied with little water. A short while later, cotton gauze pieces were placed over the site and tightly compressed to avoid any further bleeding. Patient was told not to

unplug it before the dawn of the following day to prevent any bleeding once it became adhered to the location and formed a clot.

Dietary (do's & dont's) Advise during Treatment

Pathya

Green grains, wheat, fruits, primarily red, green vegetables, and grains. enough sleep at night.

10 to 15 minutes of breathing exercises per day in open air. *Paad-abhyang* every night before sleep.

Washing the face before going to bed and after coming from the outdoors environment.

Apathya

Foods that are oily, fried, spicy, bread items, curd, fast food, cold beverages, etc.

Ratrijagran or *Diwaswapna*
acne compression & extraction.

RESULT

Improvement in the patient's signs and symptoms was started to be visible 15 days following the start of the treatment.



Figure 1: Before Treatment



Figure 2: After Treatment

Up until the third visit, *Daha* (burning sensation), *Shoth* (inflammation), and new acne formation saw significant relief. After 1-2 sitting of *Jalaukavacharan*, there was a satisfactory, quick, and dramatic improvement in *Kandu* (itching), *Daha* (burning), *Vaivranyata* (discoloration), etc. After 4 sitting of *Jalaukavacharan* along with internal medicines for around 4 months the patient was cured completely. (Figure 1; Figure 2) All sign and symptoms were resolved by the end of treatment and patient was very much satisfied with the after results of *Ayurvedic* treatment.

DISCUSSION

A common man's lifestyle is becoming more embellished day by day. People are becoming more aware about their skin and physical appearance. Even still, acne is one of the skin conditions for which allopathic medical science is unable to offer an effective, long-lasting treatment. Although *Raktaja/Pittaja* symptoms are more prominent in patients, Acharya Susruta has identified *Salmali-Kantaka* and *Vata, Kapha, and Rakta* as the main perpetrator *Doshas* accountable for the condition in Ayurvedic scriptures. Because *pidika* (a *Rakta Dushti lakshan*) is the main complaint observed in the patients. *Medogarbha Pidika*, as described by Acharya Vagbhatta, is a phrase that refers to a lesion that is filled with sebum or has a whitish hue. As

compared to how acne lesions are currently described, this can either be a pustule or a closed comedone that is filled with oil. A *Pidika* that resembles a *Salmali-Kantaka* suggests a lesion filled with *Puya* (pus), but in *Apakvavastha* (unripen), which indicates *Kapha* involvement. When vitiated *Vata*, *Pitta*, and *Kapha* are involved in the illness, all of these symptoms are visible, which is why Ayurveda encourages the use of *Yukti* (sensing) in diseases that are not yet known. Pain, watery discharge, and scarring may result from *Vata* vitiation, whereas *Pitta* involvement may result in *paka*. *Kandu*, *Kleda/Snigdha*, *Ghanasrava* (thick discharge), and *Puya* can all develop as a result of *Kapha* vitiation. The combination of all these symptoms links *Mukhadusika* to facial-only Acne vulgaris. *Rakta-Dushti* is regarded as the main pathology in all *Kshudra Rogas*. When it comes to *Shodhan* or treatment in *Rakta Dushti*, *Raktamokshan* is recommended as the best option. In the present case, *Raktamokshan* by *Jalaukavacharan* is considered. The complex mixture of several physiologically and pharmacologically active chemicals found in leech saliva like Hirudin, Bdelin, Apyrase, Hyaluranidase, Calin, Prostaglandin, Proteinase Inhibitor, a Vasodilator Substance, an Anaesthetizing Substance, etc. are a few of them. They are alleged to be in charge of the numerous biological effects observed on the body following leech treatment. In the same way as Hirudin and Calin, which have anticoagulant properties, control inflammation and promote gradual wound healing. Histamine's ability to dilate blood vessels makes it possible for more blood to get to the location of a leech application or lesion, replacing old, stagnant blood with new blood. All physiologically active chemicals have thrombolytic, anti-inflammatory, and immune-stimulating effects collectively.^[5] Hirudin-induced secondary bleeding for a short period of time promotes faster wound healing without the development of scars by removing toxins and increasing circulation to the

affected area.^[6] Also, it has been established that leech saliva contains analgesics, which may be the cause of the pain reduction.

Various internal medicines like *Mahamanjishthadi Kwath*, *Arogyavardhini Vati*, *Kaishor Guggulu*, *Haridra Khand* was also used in present case. *Panchanimba Churna*'s key ingredients are *Nimba*, *Aragwadha*, *Amalaki*, *Maricha*, and *Haridra*^[7]. This *Churna* has *Pitta Shamaka*, *Kusthaghna*, and *Kandughna* among its qualities. This remedy is helpful for vitiated *Kapha Dosh*, *Rakta Dushti*, and *Kandu* (itching). *Nimba* (*Azadiracta indica*), which has *Tikta*, *Kashaya Rasa*, and *Laghu*, *Snigdha* qualities by which *Pitta Shamaka* action can be noticed, is the major component of *Panchanimba Churna*.^[8] *Mahamanjishthadi Kwath* is extensively discussed in Ayurveda classics for its therapeutic benefits in treating a variety of skin conditions.^[9] Research has demonstrated that P. acne proliferating is inhibited by methanol extract of *Rubia cordifolia*.^[10] It has a modest activity against IL-8 and is only moderately efficient against TNF-alpha. It is thought to be astringent and helpful for skin conditions and external inflammations like ulcers. *Manjistha*'s significance in promoting skin health is supported by traditional and recorded uses, which demonstrate its significant blood purifying, antioxidant, anti-inflammatory, anti-stress, and antibacterial properties. These properties can be helpful in treating acne and enhancing skin health.^[11] The properties of *Kushtaghna*, or *Vyadhipratyanika Chikitsa* and *Krimihara*, are acted upon by drugs like *Katuki* (*Picrorrhiza kurroa*) and *Nimba* (*Azadiracta indica*). The *Tridoshghna-Kapha pittahar*, *Kushtaghna*, *Vranashodhana*, *Vranropana*, *Deepana*, and *Pachana* properties are present in majority in *Arogyavardhini Vati*'s medicine. It encourages digestive activity, opens up bodily channels, and has laxative effects that aid in the removal of toxins from the body. while, based on contemporary science Pathology at multiple levels can be broken by anti-inflammatory,

immunostimulatory, and anti-helminthic characteristics.^[12] *Guduchi* (Tinospora cordifolia Willd.), *Amalaki* (Emblica officinalis Gaertn.), *Bibhitaki* (Terminalia bellirica Gaertn.), and *Haritaki* are the components of *Kaishora Guggulu* (Terminalia chebula Rets.). *Marich* and *Shunthi* (Zingiber officinale Roscoe) (Piper nigrum L.), *Pippali* (Piper longum L.), *Shudhha Guggulu* (Commiphora mukul Hook.), *Vidanga* (Embelia ribes Burm f.), *Trivrit* (Operculana turpethum Linn.), and *Danti* are other examples of the plants (Baliospermum montanum Willd.) The indication for *Kaishora Guggulu* is skin condition with secretions and *Vrana* (non healing wounds). It is recommended in *Mandagni* because it aids with digestion. It treats wounds thanks to its anti-bacterial, anti-inflammatory, antioxidant, and anti-microbial properties. Because it is an effective blood purifier and has *Rasayana* properties, it corrects *Raktadushthi* (blood vitiation) (anti-ageing).^[12]

The total duration of this treatment was four months. The patient was given strong instructions to adhere to *Pathya and Apathya* recommendations for the entirety of their treatment. The patient underwent a 15-day interval followup after each sitting of *Jaloukavacharan*. Acne completely vanished after four sessions, and the pain, itching, and burning were also completely gone. Intense improvement was seen in the discoloration of the face. This demonstrates that, as demonstrated in the instance of *Mukhdushika*, a successful course of therapy is guaranteed provided the treatment plan is chosen in accordance with the principles of Ayurveda and includes the right medications, doses, duration, *Anupan*, *Pathya*, and *Apathya*.

CONCLUSION

Mukhdushika is a *Kapha Raktaj Vyadhi*, as stated in the Ayurveda classics. *Jaloukavcharan* is regarded as the primary therapy in *Rakta- Pradoshaj Vikara* in conventional Ayurveda medicine. According to the case study's findings,

Jaloukavcharan and Ayurvedic medicines are found useful in the treatment of *Mukhdushika* with a history of acne vulgaris. This study provides strong clinical evidence for the usefulness and potency of ayurvedic treatments. The time-tested holistic medical system of Ayurveda now has a fresh avenue for further clinical research on *Mukhdushika*.

Declaration by Authors

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REFERENCES

1. Ambika Datt Shastri, "Ayurved Tatva Sandipika". Sushrut Samhita, Hindi, Sutrasthan: chapter 15. Verse no. 48. Varanasi: Chaukhambha sansthan.Pg.no 84.
2. J.L.Burton, W.J. Cunliffe, I Stafford. "The prevalence of acne vulgaris in adolescence". British Journal of Dermatol1971;85(2): Pg. no.119-126.
3. Susruta, Susruta Samhita. Ayurved Tatva Sandipika. Commentary, edited by Dr. Ambika Datta Shastri, Chaukhamba Sanskrit Publication, Varanasi, reprint 2005; Nidanasthana, 13(39).
4. Dr.Ambika Datt Shastri," Ayurved Tatva Sandipika." Sushrut Samhita, Maharishi Sushrut, Hindi. Chikitsasthan: Chapter 20. Verse no.3,37. Varanasi: Chukhambha prakashan,2011, Pg. no. 115,118.
5. Kanti Kar Pulak, Mechanism of Panchkarma and its Module of Investigation, Chaukhambha Sanskrit Pratishtan, Delhi, First Edition (2013).
6. Mohammad Ghawi, Abbas et al., Free Radical Scavenging Activity of the Medicinal Malaysian Leech Saliva Extract, Hirudinariam an illensis, Journal of Bioequivalence and Bioavailability; Spec2012; 1.
7. Ambikadattav Shastri 2005 Bhaishjaratnavali Video 18 revised edition. Chaukhambha orientalia, Varanasi, India, 5/86-91.
8. Khare CP. New York: Springer-Verlag; 2004. Encyclopedia of Indian Medicinal Plants; p.384-6

9. Vrndamadhava or siddha yoga edited and translated by Dr. Premvati Tewari , , chapter 23, verse no 86-87. chaukhambha visvabharati Varanasi.
10. Gorle AM, Patil SS. Evaluation of antioxidant and antiacne property of Rubia cordifolia. Der Pharmacia Sinica. 2010; 1(3): 59-63.
11. Meena, V. (2015). Manjistha (Rubia cordifolia) - A helping herb in cure of acne. Journal of Ayurveda and Holistic Medicine, III(II). http://jahm.in/index.php/JAHM/article/view/296/pdf_117
12. Kalangutkar D, Sahu AK. ROLE OF SHODHANA KARMA IN MANDALA KUSHTHA (PSORIASIS) A CASE STUDY. WORLD JOURNAL OF PHARMACY AND PHARMACEUTICAL SCIENCES. 2018May16;7(6)

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