

A SINGLE CASE OF STUDY SHANKHADI LEPA IN THE MANAGEMENT OF
AHIPUTNA W.S.R DIAPER DERMATITISDr. Mayank Patle*¹ and Dr. Reetu Pandey²¹P G Scholar, Dept. of Kaumaryabhritya, Rani Dullaiya Smriti Ayurved P.G Mahavidyalaya & Chikitsalaya, Bhopal (M.P).²Associate Professor, Dept. of Stri Roga Evam Prasuti Tantra.

*Corresponding Author: Dr. Mayank Patle

P G Scholar, Dept. of Kaumaryabhritya, Rani Dullaiya Smriti Ayurved P.G Mahavidyalaya & Chikitsalaya, Bhopal (M.P).

Article Received on 04/02/2024

Article Revised on 24/02/2024

Article Accepted on 14/03/2024

ABSTRACT

Ayurveda is the faithful health care system in the world. It is a precious heritage for humanity. In *Ayurveda* *Ahiputna* explained as *gudgata vyadhi* which is very common in infant. It is a *Kapha Rakta* predominant disorder which could be compared with diaper dermatitis of contemporary science. More than 35% of infant are affected with this disease. Diaper dermatitis is common frustrating problem in infant as the infant can't tolerate the pain, rashes and itching due to diaper dermatitis and cry for long time. Diaper dermatitis involves upper most layer of the epidermis that is stratum corneum and develops over the particular area. The over hydration of skin raised the pH of perianal area, presence of protease and lipase in stool breakdown the skin with raised pH, addition mechanical friction from the diaper leads to *Ahiputna*. So overcome the problem of *ahiputna* with satisfactory solution. *Ayurveda* have better solution with compound like *shankhadi lepa* local application. It is cost effective as well as *lepa* contain drugs having antibacterial properties.

KEYWORDS: *Ayurveda, Gudgata vyadhi, Dipper dermatitis, Sankhadi lepa, Itching, Kandu.***INTRODUCTION**

Ayurveda is the faithful traditional health care system in the world; it is a precious heritage for humanity. *Ayurveda* is the part of *Upaveda of Atharvaveda*. *Ayurveda* is divided into eight branches in *Kashyapsamhita*. *Acharya kashyap* has described *Kaumaryabhritya* is a first branch of *ayurveda* and another *Acharya* described *kaumaryabhritya* as special branch of *ayurveda*. *Acharya shushrut* and many *ayurveda acharyas* describe *ahiputna* under *kshudraroga*.

Ahiputana is common in infants and it can be correlated with Diaper dermatitis. Disease which is *Kapharakta* predominant disorder mentioned in *Ayurvedic* text book. It is caused due to the unhygienic condition like absence of proper cleaning after defecation and urination. Diaper dermatitis is caused by *B proteus* in feces. In that perineal and perianal region inflammatory disorder characterized by the development of erythema, papules and sometimes vesiculation with scaling is seen and that seen Diaper dermatitis. It involves uppermost layer of the epidermis that is stratum corneum and develops over that particular area. The over hydration of skin promotes the development of higher Ph then normal skin ph. Due to increase Ph in skin. The enzyme present in the stool

protease and lipase increase their activity when there is an increase in Ph leading to skin break down in addition mechanical friction from the diaper.

A case report as follow

A 15 days old female child came to us with chief complains of-

- 1) *Guda pradeshi vranotpatti.*
- 2) *Sphiktwak lalima.*
- 3) *Sparsha-asahatva.*
- 4) *Sparsha-asahatva.*

The child was having complains since 2 days.

History of present illness

Child was all right prior 2 days since then she started the complains and then came to our hospital – R.D. Memorial Ayurveda Hospital OPD for management.

On examination

Nadi: 130/min *Sparsha:* *Anushna Mala: Samyak Druka: Prakrut Mutra: Samyak Akruti: Madhyam Jivha: Niram Koshta: Madhyam Shabda: Spashta Bala: Madhyam.*

Local examination

Erythema – Present.

Skin excoriation – Present.
 Small popular eruptions- Present.
 Pain (Hypersensitivity to touch) – Present

AIM AND OBJECT

AIM

“A Single Case Of Study Shankhadi Lepa In The Management Of Ahiputna W.S.R Diaper Dermatitis”.

OBJECTIVE

To evaluate the effect of *Sankhadi Lepa* in a child

MATERIALS AND METHODS

Disease review

शकन्मूत्रममाचुक्तेऽधीतेऽपाने शिशोर्भवेत् । स्वित्त्रस्यास्नाप्यमानस्य कण्डू रक्तकफोद्भवा ॥५९॥
 कण्डूयनातः क्षिपं स्फोटः स्रावश्च जायते । एकीभूतं प्रणेषोरं तं विशादहिपूतनम् ॥६०॥ सु नि 13469.

60

According to *Acharya Vagbhatta* and *Sushruta* the *Sthanik Mala*, *sweda* causes *rakta* and *kapha dushti*. This *rakta* and *kapha* further disturbs local *dhatu*s including *twak*, *rakta* and *mamsa*. This *dhatu dushti* causes local skin irritation, itching and rashes. When child scratches this rashes, small wounds are made from which serous discharge is secreted.

Further these small wounds combine together to form one large wound which is called “*Ahiputana*” which if not taken good care can go into “*Paaka*” condition. In *Ahiputana* continues contact with local *Mala i.e sweda*, *mutra* and *Shakruta* causes formation of *garavisha* at

suffering from *Ahiputana*.

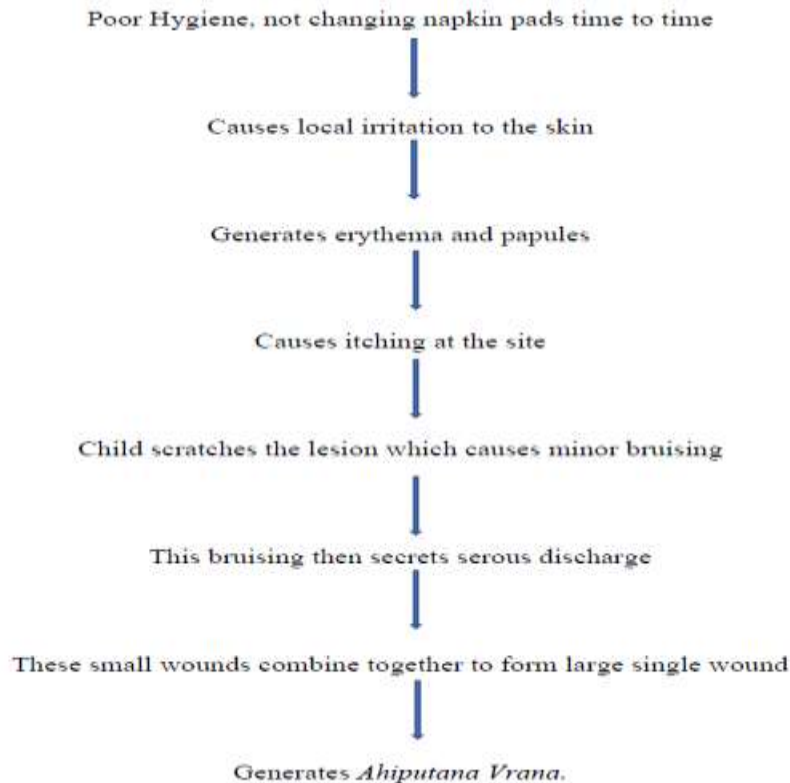
Secondary Objective

1. To evaluate the efficacy of *Sankhadi Lepa* on the basis of Ayurvedic criteria including “*Rasa, Guna, Virya, Vipaka, Samprapti ghatak* and *Samprapti Bhanga*”.
2. To Study the Standard Preparation of *Sankhadi Lepa* as per mentioned in texts.

local *mamsa dhatu*. This *vishar ghatak* then causes irritation, inflammation, excoriation and popular eruptions at the skin. Thus, to treat the wound caused by these local toxins one must follow the *bahiparimarjana chikitsa* to do *sthanik shodhana* of the skin.

Also, according to modern studies when the wound is open and has serous discharge it is most likely to get infected with microorganisms. Most commonly occurring staphylococci are leading cause for the “*Paaka*” (secondary infection) condition. This may lead to further eruption of systemic signs and symptoms like fever.

SAMPRAPTI OF AHIPUTANA



SAMPRAPTI GHATAK

<i>Dosha</i>	<i>Pitta, Rakta, Kapha</i>
<i>Dushya</i>	<i>Rasa, Rakta, Mamsa</i>
<i>Srotasa</i>	<i>Rasavaha, Raktavaha, Mansavaha</i>
<i>Srotodushti Prakara</i>	<i>Atipravrutti</i>
<i>Agni</i>	<i>Bhrajaka Agni</i>
<i>Udbhavasthana</i>	<i>Guda</i>
<i>Sanchar sthana</i>	<i>Sphika, Uru, Nitamba</i>
<i>Adhishthana</i>	<i>Bhaya</i>
<i>Swabhava</i>	<i>Ashukari</i>
<i>adhyaasadyata</i>	<i>Sadhya</i>
<i>UpaDrava</i>	<i>Paakotpatti, Tvakvaivarnya.</i>

DRUG REVIEW

शङ्खसौवीरयष्ट्याहैर्लेपो देयोऽहिपूतने ॥१२॥

यो.र.60 / 92

1. *Shankha*

Scientific Name – *Lobatus Gigas* Used Part – Bhasma

shankhadi lepa.

2. *Sauvira*

Scientific Name- lead sulfide Used Part – Bhasma

Route of administration: Topical application

Centre of study: R. D. Memorial Ayurvedic collage and Hospital, Bhopal

3. *Yastimadhu*

Botanical Name – *Glycyrrhiza glabra* Used Part – Root

Method of sampling and study design: Simple randomized single case study.

METHODS

Method of preparation of *SHANKHADI LEPA*

Take equal amount of *sankha bhasma*, *sauvira* and *yastimadhu*.

RESULT

Clinical examination of patient on follow up days revealed significant decrease in sign and symptoms *Guda pradeshi vranotpatti*, *Sphiktwak lalima*, *Sparsha-asahatva*, *Sparsha- asahatva* also *vrana* was healed within 7 days of drug administration.

DOSE- As per lesion every time when infant defecate Proper clean the perineal and perianal area and apply



DAY 1



DAY 7

DISCUSSION

In *Ahiputana* the cause is “*Atipravrutti of Doshas*” as the local *Doshas* are vitiated due to improper hygiene. The increased *Doshas* should be levelled and for that *shodhana* is needed. In this case *sthanik shodhana* is more important than *abhyantara shodhana*. As the disease is of *Bhahya marga*. So *bahirparimarjana chikitsa* is needed. The drug used in this case is one of the potent *bahirparimarjana* drug. The “*Shankhadi*

lepa” is *sheeta* in *sparsha* so decreases the local *daha* and relieves tenderness present at the lesion. The *Kashaya-tikta rasa* helps to level the vitiated *Kapha* and *Pitta Doshas*. *Grahi* and *laghu guna* decreases the *strava* oozing from wound and helps to contract the wound margins.

Sankh is having *katu rasa* and *ruksha*, *Tikshna guna* also having *ushna (sheetsparsha) virya* which work in

vitiated *kapha*. It has also properties of *lekhan*. *sankha* is known to have anti-inflammatory, antispasmodic and antiulcer properties. *Sankha kshar* (alkaline) property which helps neutralize the produced excessive acid. It is coolant improves skin colour & complexion. *Sankha* have calcium carbonate as a main chemical composition which is a great absorbent.

Sauveeranjan is having *snigdha guna* and *sheeta virya* so it is a *vranshodhak* and *vranropak* properties. Its chemical composition contains lead, sulphur, silver and zinc. Sulphur has antifungal, antibacterial and keratolytic activity.

Due to its anti-inflammatory effect, zinc is especially beneficial for inflammatory eruption over skin.

Yastimadhu is having *Madhur rasa*, *sheeta virya* and work on pacifies *vata* and *kapha* vitiating skin disease. *Acharya charak* define *yastimadhu* in *shonit sthapan gana*.

Yastimadhu have known to as anti-bacterial, anti-fungal, skin regeneration activity, antiulcer, anti-inflammatory, and healing properties. The presence of glycyrrhizin is anti-inflammatory, which means less redness and irritation for inflamed, irritated skin. The above mentions property of *yastimadhu* due to its chemical composition i.e., isoflavone, licoagron, quercetin, liquiritigenin & isoliquiritigenin, aspergine.

CONCLUSION

As *Shankhadi lepa* is easy to prepare and apply. The properties of drug effectively do *samprapti bhanga* of disease thereby the above case study proves that "*Shankhadi lepa*" is effective ayurvedic management in child's suffering from *Ahiputana*.

REFERENCES

1. Sushruta, Sushrutasaṃhita with Nibandhasaṅgraha commentary of Dalhanacharya, Edition, Nidansthan, Chapter.14, Shlok.No-57-58, Edited by Yadavji Trikamji and Narayan Ram Acharya Kavyatirtha, Chaukhambha Sanskrit sansthan, 2010; 325.
2. Vagbhatta, Ashtanga hrudayam with commentaries of Arunadatta and Hemadri by Dr. Anna. M. K and Krushnachandra. S. N, edition, Uttarsthan chapter.2, Shlok.No.69-70, Edited by Pt. Hari Sadashiv. S. p, Chaukhamba Snaskrut Sansthan, 2011; 785.
3. Yogratnakar, yogratnakar part 2nd Edition, Chapter.72, Shlok. 92. by asha tiwari and premvati tiwari. Chaukhambha visvabharti Varanasi, 2004; 1184.
4. Tuttak Drava" an effective treatment in Ahiputana – A case study. Onkar Suryakant Jadhav, Vijay Suryawanshi, April- 2020; 08th: 2nd.
5. Sharandhar, Sharandhar samhita hindi commentry. Edition uttar khanda chapter 11 by Bramhanand tripathi. Chaukhambha surbharti prakashan Varanasi, 2004; 391-401.

6. www.Wikipedia. com/google
7. O.P GHAI'S-O. P. GHAI'S Essential Pediatrics, BY Dr. O.P Ghai, Piyush Gupta, V.K.Paul. 6th Edition, Chap-25 common skin Disorders, 2004; 636.
8. Clinical Pediatric Dermatology, By Thappa D.M, Elsevier publication, Chap-12 Eczemas and Dermatitis, 2009; 75.
9. IAP Textbook of Pediatrics, By A Parthasarthy, Jaypee publication, 4th Edition, Pead. Dermatology, 2009; 1356.