

SHORT RESEARCH COMMUNICATION
CLINICAL STUDY OF SOMARAJ CURNA (VERNONIA ANTHALMINTICA) AND
NIMBADI OIL ON VICARCIKA ECZEMA

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The present clinical study have been conducted to assess the therapeutic value of known indigenous drug in different types of eczema. But the eczema is a very controversial disease in the modern dermatology, as eczema is defined by ancient disease and very often synonymously told as dermatitis. In real sense it does not indicate any specific disease, only it signifies the inflammatory condition of the skin. In Ayurveda the description of vicarcika are much identical to modern eczema, which are characterised by popular blackish coloured lesion with itching and profuse discharge or dry. It is described in the chapter of ksudra kustha. We selected the cases for this study those suffered from different types of Vicarcika (eczematous lesion).

METHODS AND MATERIALS

A planner study was carried out at S.V.S.P. Hospital of institute of Post Graduate Training and Research in Ayurveda, Calcutta. 35 cases were selected for the study.

All the cases were carefully examined, detailed clinical history and physical examination was performed. The routine and microscopic examination of blood, urine

and stool were carried out in all the patients. In the present trial Somaraji (Vernonia Anthalminticum) was used in the powdered form and given with water as Anupana. Nimbadi oil was given for local application twice daily and patients were advised to wrap a polythin paper over the affected part when they go out of home.

Observation

Out of 35 patients of Vicarcika the highest number of patients were male, between the age group of 41 – 60 years. It is found that most of the sufferers were non vegetation and urban residents. Most of the cases shows mixed aetiological factors but increased industrial hazards, moden style of living, poor hygienic condition etc. precipitating factors help in producing the diseases, apart from that immunological factors, allergic consideration etc. are related with the disease.

Cosmetics are also important causes for producing contact dermatitis in some individual. Different kinds of body spray, talc, etc. may also play an important role as a sensitizer to produce eczema (Vicarcika).

Assessment and Results

The assessment was made weekly and finally after the sixth week of treatment.

There were 15 patients of acute eczema and response of drugs are stationary 13.33%, improved 33.44%, cured 13.33% and deteriorated 40.00%. Results obtained from the patients of sub-acute stages were stationary 18.33, improved 46.15%, cured 7.70% and deteriorated 15.38%. But in

chronic stages the effect in the 7 patients were as stationary 57.14%, improved 28.57%, cured nil and deteriorated were 14.29%.

On analysis of the effects of the drugs on the various stages of eczema it may be concluded that the therapy of Somraj powder and Nimbadi oil has got a beneficial effect. For gathering a perfect knowledge, in future further study should be undertaken.

TABLE SHOWING THE CRITERIA OF ASSESSMENT

Clinical Stage	Stationary	Improved	Cured	Deteriorated
Acute	No. changes of the lesion	Partial subsidence of erythema, less burning and oozing, oedema reduced, less of crusting	Complete subsidence of erythema, no oozing, disappearance of crusting	Increased lesion with papules and vesicules and oozing, more extension of area
Sub-acute	No changes	Reduction of sign of early lichenification, Reduction in oedema, Papules & erythema, Scalling of area involvement	Complete reduction of erythema, papules, sign of early lichenification, disappearance of cross mark	More appearance of fresh lesion & Papules. Extension of the area of original lesion.
Chronic	No changes	Almost complete subsidence in existing erythema, papules, lichenification, Peeling of scales of area of involvement with greater demarcation and clearing	No erythema, papules & lichenification. Complete clearance of scales involvement with only some scar of the lesion.	More of erythema papules and formation of vesicules, more extension of the lesion.

REFERENCES

1. Chaturvedi, G. N., et-all. Charaka Samhita. Ed 2nd. Chowkhamba Sanskrit Sansthan Varanasi (1969).
2. Chopra, R. N., Bose, J. P. & Ghose, H. M. : Indigenous drugs of India. Ed. 2nd Pub. U. N. Dhar & Sons, Calcutta (1958).
3. Goldsmith Hoel, W., Francis, F., Hellier, H : Recent advances in Dermatology, Ed. 2nd, Pub. J & A. Churchill Ltd., London, 104 Gloucester Place W.
4. Goodman Herman : Cosmetic Dermatology, Ed. 1st, Merrow Hill Book Company INC. New York & London.
5. Kirtikar, K. R. & Basu, B. D. : Indian Medicinal Plants Vol. II, Ed. 2nd, Pub. Basu, L. M. Allahabad (1955).
6. Sharma P. V. Drabyaguna Vigyan, Ed. 3rd Chowkhamba Orientalia (1975).