



Clinical Research

Comparative effect of *Navayasa Rasayana Leha* and *Medhya Rasayana* tablet along with *Dhatryadhyo Lepa* in *Ekkakushta* (psoriasis)

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ABSTRACT

All skin diseases can be included under the umbrella of *Kushta Roga*. *Ekkakushta* is a variety of *Kshudra Kushta* with dominancy of *Vata* and *Kapha Doshas*. It is characterized by symptoms like- *Aswedanam*, *Mahavastum*, *Matsyashakalopamam*, etc., these characteristic features has a striking similarity with Psoriasis. It is a papulosquamous disorder of the skin, characterized by sharply defined erythmatosquamous lesion. Due to its chronic and recurrent nature, it has a great impact on the quality of life of the patients. The present study was aimed to compare the effect of *Navayasa Rasayana Leha* and *Medhya Rasayana* tablet along with *Dhatryadhyo Lepa* in patients of *Ekkakushta* (psoriasis). For this study, the selected patients were randomly divided into two groups. *Koshtha Shuddhi* was done by *Eranda Bruhstha Haritaki* (6 g-at night with *Ushnodaka*) in patients of both the groups for 3 days before starting the treatment. Total 111 patients were selected for present study. Patients of group A (45 patients) were given “*Navayasa Rasayana Leha*” and “*Dhatryadhyo Lepa*” for external application. Stress is a very well known precipitating factor of Psoriasis. Hence, to study the efficacy of *Medhya Rasayana* drugs, patients of group B (49 patients) were given *Medhya Rasayana* tablet along with the external application of *Dhatryadhyo Lepa*. The duration of the study was 3 months with follow up for one month. Both the groups showed highly significant results in all signs, symptoms and other parameters. *Navayasa Rasayana Leha* and *Medhya Rasayana* tablet along with *Dhatryadhyo Lepa* can be used effectively for the treatment of *Ekkakushta*.

Key words: *Ekkakushta*, Psoriasis, *Navayasa Rasayana Leha*, *Dhatryadhyo Lepa*, *Medhya Rasayana* tablet

INTRODUCTION

The nature of *Kushta roga* is described by Acharya Charaka by the term- “*Dirgharoga*”^[1] (chronic disease). Its importance also lies in the fact that it is considered as one among the eight *Mahagadas* by Acharya Sushruta^[2] and Vagbhatta. *Ekkakushta* can be correlated with Psoriasis due to its characteristic features like *Matsyashakalopamam* (Silvery fish like scale), *Mahavastum* (extensive surface area involved) etc., Probably due to such features, Acharya Bhavamishra has described *Ekkakushta* as – “Prime among *Kshudra Kushta*.”^[3]

The modern treatments given for Psoriasis have their own

limitations and side effects. Above all, the chronic and recurrent nature of the disease leaves a great psychological impact on patients. It disturbs the quality of life of the patients to a great extent.

The trial drug *Navayasa Rasayana Leha* is taken from the reference found in Chakradatta^[4] It has the following ingredients in increasing proportions - *Dhatri*, *Aksha*, *Haritaki*, *Vidanga*, *Chitraka*, *Shuddha Bhallataka*, *Bakuchi*, *Loha Bhasma*, *Bhrungraj* and *Tila Taila* (Q.S). The fine powder of the drugs is to be licked with *Tila Taila* at the time of drug administration.

It is interesting to note that the same combination of drugs is described in Bharat Bhaishya Ratnakara^[5] for local application. Hence, this *Yoga* (formulation) was also selected for local application in both the groups.

Stress is the most crucial factor in onset and progression of the disease. Hence, in group B, *Medhya Rasayana* tablet

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was given along with local application of *Dhatryadhyo Lepa*. *Medhya Rasayana* tablet is *Anubhuta Yoga* (non-classical formulation). It contains the following drugs in increasing proportions- *Vacha*, *Haritaki*, *Jatamansi*, *Jyotishmati*, *Yashtimadhu*, *Shuddha Bhallataka*, *Guduchi*, *Brahmi* and *Shankhpushphi*.

AIMS AND OBJECTIVES

1. To assess the efficacy of *Navayasa Rasayana Leha* and compare it with the efficacy of *Medhya Rasayana* tablet in the management of *Ekkakushta* (Psoriasis)
2. To assess the efficacy of *Dhatryadhyo Lepa* in the management of *Ekkakushta* (Psoriasis).

MATERIALS AND METHODS

Detailed study of *Ekkakushta* and Psoriasis was done along with study of drugs selected for the present study. Various books of Ayurveda, Modern science and web sites related to the subject were referred to. Patients consulting the Out Patient Department of Kayachikitsa, Institute for Post Graduate Teaching and Research in Ayurveda, Jamnagar were selected for the present study.

Criteria for selection

Patients having signs and symptoms of *Ekkakushta* (Psoriasis) like well circumscribed erythematous papules/Plaques covered with dry, brittle, silvery grayish white micaceous scales, Auspitz sign, Koebner phenomenon, Candle grease sign etc., were selected. A special proforma was made for assessing all the patients.

Inclusion criteria

1. Age- 13-70 years
2. Cardinal symptoms of *Ekkakushta*
3. Positive Signs of Psoriasis like Auspitz sign, Candle grease sign etc.

Exclusion criteria

1. Patients suffering from systemic disease like Diabetes Mellitus, Cancer, Acquired Immunodeficiency Syndrome (AIDS), Tuberculosis (TB) etc., and other skin diseases like Seborrheic dermatitis, Lichen Simplex Chronicus etc
2. Age less than 13 years and more than 70 years.

Laboratory investigations

1. Blood – Hemoglobin (Hb), Total count of WBCs (TC), differential count of WBCs (DC), erythrocyte sedimentation rate (ESR), Total red blood corpuscles (RBC), Peripheral Blood picture
2. Urine – Routine and Microscopic examination
3. Biochemical- Fasting blood sugar (FBS), Serum.creatinine, serum glutamic pyruvic transaminase (SGPT), Serum calcium, Total protein, albumin globulin ratio (A/G ratio).

Plan of treatment

Patient's were randomly divided into 2 groups (with his/her consent) as follows:

Koshtha Shuddhi was given by *Eranda Bruhstha Haritaki* (6 gm-at night with *Ushnodaka*) in patients of both the groups for 3 days before starting the treatment.

Group A

1. *Navayasa Rasayana Leha* with local application of *Dhatryadyho Lepa*.
2. Dose of *Leha* -2 gm - twice a day.
3. *Anupana*- *Koshna Jala* (lukewarm water)
4. Dose of *Lepa*- Q.S (as per the area of distribution of the lesion)
5. Duration - 3 months.

Group B

1. *Medhya Rasayana* Tablet with the local application of *Dhatryadyho Lepa*.
2. Dose of tablet-(Each Tablet-500 mg) 2 tablets – twice a day.
3. *Anupana* - *Koshna Godugdha* (lukewarm cow's milk)
4. Dose of *Lepa*- Q.S (as per the area of distribution of the lesion.)
5. Duration - 3 months.

Follow up

A follow-up study was carried out for one month after completion of treatment.

Dietary restrictions

The patients were strictly advised to follow the *Pathyapathya* for *Kushtha Roga*.

Criteria for assessment

1. Psoriasis Area and Severity Index (PASI).
2. Scoring pattern made specifically for the present study and scoring pattern of some symptoms as given by the National Psoriasis Foundation.

Statistical analysis

The information gathered on the basis of above observations was subjected to statistical analysis as follows:

1. Wherever there was qualitative data, paired *t* test and χ^2 test was carried out
2. Wherever there was quantitative data, paired *t* test and unpaired *t* test were carried out.

The obtained results were measured according to the grades given below:

1. Complete Remission : 100% relief
2. Marked Improvement : 75%-99% relief
3. Moderate Improvement: 51% to 74% relief
4. Mild Improvement : 25% to 50% relief
5. Unchanged : <25% or No relief.

Observations

The details of patients registered in group A and B are given in Table 1. Out of 111 patients registered, 45 patients in group A and 49 patients in group B, completed the study.

Maximum number of patients, i.e. 26.12% were from the age group of 41-50 years, 22.52% patients had the first onset of Psoriasis between age group of 21-30 years and 94.59% were

Table 1: Distribution of 111 registered patients

Group	Completed patients	Drop outs	Total
A	45	11	56
B	49	6	55
Total	94	17	111

vegetarian. 63.06% patients were of *Vata-Kapha Prakruti*, 98.19% patients were of *Rajasika Prakruti* and 46.84% patients were of *Vishmagni*. 61.26% were having negative family history of Psoriasis while 34.23% patients had positive family history.

63.96% had lesion in exposed areas, 61.26% reported asymmetrical pattern, 64.86% had well demarcated lesion, plaque variety of lesion was found in 49.54% of patients, 53.15% reported shiny color of lesion, 58.55% reported lower extremities as the commonest site of involvement and all patients had normal sensation.

Chief complaints reported were *Matsyashakalopamam*, *Kandu* and *Bahaltva* in all patients; *Mandala* was found in 99.09% of patients; *Aswedanam* in 98.19% patients and *Daha* was found in 96.39% of patients. 97.29% patients had involvement of 1-10% of body surface area.

Among the *Nidanas* found, *Virrudha ahara* was found maximum in 86.48% patients followed by *Chinta* in 80.18% patients [Figure 1].

Associated complaints reported were *Sandhishula* found in 23.42% patients, *Nidranasha* found in 21.62% patients, *Jwara* in 5.40% patients and palm and feet involvement in 0.90% patients. The *Auspitz sign* was present in 95.49% patients followed by *Candle grease sign* in 61.26% patients *Koebner Phenomenon* in 10.81% of patients.

In the present study, maximum patients, i.e. 85.58% had moderate type of Psoriasis.

Highly significant results were found in all signs and symptoms in both the groups [Table 2]. Insignificant results were found in all laboratory parameters in both the groups. It is observed that the therapy showed highly significant relief ($P < 0.001$) by 83.14% in psoriasis Area and severity index in group A and by 79.28% in group B [Figure 2]. In follow-up study, no recurrence was found in 77.14% patients in group A and recurrence was noted in 22.85% patients at the end of one month. In follow-up study, no recurrence was found in 58.53% patients in group B and recurrence was noted in 43.90% patients at the end of one month.

Chi square test was applied on the cardinal symptoms. Insignificant difference was found between effect of therapies of both the groups on *Mandala*, *Matsyashakalopamam*, *Aswedanam*, *Kandu*, *Daha*, *Bahalatva*, *Srava* and *Unnati*. Which suggested that both groups showed equally good effect on all above symptoms. In *Rukshata*, group A showed better relief than group B.

On comparing the effect of both therapies on associated symptoms and signs, it was found that both the groups were equally effective in *Nidranasha*, *Sandhishula*, *Auspitz sign*, *Candle grease sign*, *Koebner phenomenon* and *Body Surface Area*. Group A was more effective in *Jwara* in comparison to group B.

Overall effect of therapy shows that complete remission was found in 16.32% patients in group B and 6.66% patients in group A, while marked improvement was found in 62.22% patients in group A and 40.81% patients in group B [Table 3]. While on comparing the effect of therapy by χ^2 test, insignificant difference was found which meant that both the groups were equally effective.

Effect of therapy- In the present study, maximum patients between the age group of 41-50 years showed better relief (complete remission and marked improvement) in both groups.

Table 2: Effect of therapy in symptoms and signs of *Ekkushtha* in group A and group B of the patients selected for the study in percentage of patients showing improvement (paired t test)

Symptoms	Effect in group A (in %)	Effect in group B (in %)
<i>Mandala</i>	82.31	80.31
<i>Matsyashakalopamam</i>	76.35	74.25
<i>Aswedanam</i>	82.97	84.61
<i>Rukshata</i>	74.4	72.66
<i>Kandu</i>	84.04	79.04
<i>Daha</i>	88.54	87.20
<i>Bahalatva</i>	83.59	73.53
<i>Sraava</i>	90.41	91.46
<i>Unnati</i>	81.25	80
<i>Nidranasha</i>	47.82	56.09
<i>Sandhishula</i>	21.87	31.81
<i>Auspitz sign</i>	83.36	85.10
<i>Candle grease sign</i>	84.61	77.52
<i>Koebner phenomenon</i>	61.11	67.5
<i>Body surface area</i>	53.28	57

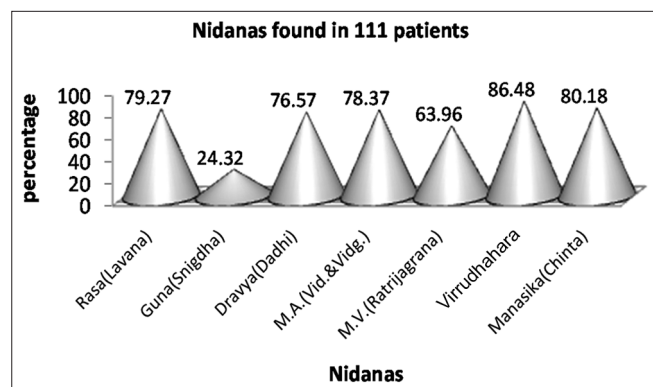


Figure 1: Different types of *Nidanas* seen in the 111 patients who were enrolled for the study

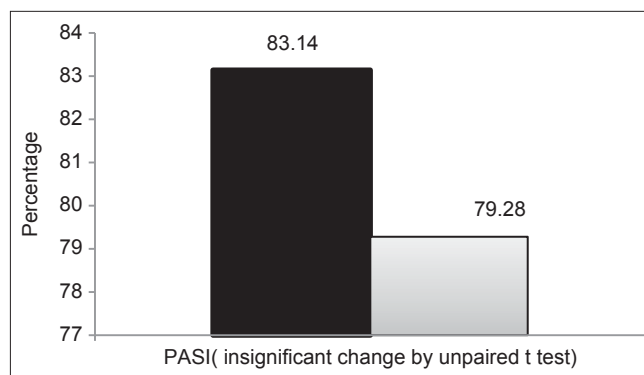


Figure 2: Effect of therapy on patients enrolled in the study and divided into groups A and B, on psoriasis area and severity index, in percentage of patients showing improvement

It was seen that patients of *Vata-Kapha Prakruti* achieved received benefit (complete remission and marked improvement) of the drugs. Group A showed better results in plaque type of Psoriasis whereas group B showed good results in both plaque and guttate type of Psoriasis. It was seen that patients with negative family history responded better in comparison to that of positive family history of Psoriasis. Patients with mild and moderate Psoriasis responded better to both the therapies.

DISCUSSION

It is observed that maximum number of patients (22.52%) had the first onset of Psoriasis between age group of 21-30 years. Psoriasis can occur at any age; however, due to a stressful life and dietary disturbances in young age, incidence is found more in the age group of 21-30 years. 36.93% were doing *Virrudhashana* (Consuming incompatible foods) followed by 36.03% doing *Vishamashana* (Irregular dietary habits). *Virrudhashana* is said to cause-*Ninditavyadhies* and one among them is *Kushta*. The dominance of *Rasa* in the diet of the patients of this series was, *Lavana* (81.98%) *Amla* (68.46%) and *Katu* (59.45%). *Acharya Charaka* has quoted that excessive use of *Lavanarasa* is a direct cause of *Kushta Roga*.^[6] Moreover, it aggravates *Pitta ad Kapha Doshas*. Also *Amla Rasa* is said to be *Raktadushtikara Nidana* by *Acharya Charaka*.^[7] *Katu Rasa* is said to cause *Bala Kshaya*^[8] and decreased immunity of the body, and hence may be responsible for causing psoriasis, as it is an immunological disorder. Most prominent precipitating factors reported by the patients of this series were climate (87.38%) and emotional stress (84.68%). The role of climate as a trigger is also supported by many studies. A number of studies have shown that psychological stress is often caused by Psoriasis, and also can be a factor in Psoriasis flare up.

Effect of therapy

On the basis of complete remission and marked improvement, it can be concluded that drugs in group A was more effective on following symptoms- *Mandala, Bahalatva, Unnati, Auspitz sign, Candle grease sign, Daha and Kandu*; whereas drugs in group B was more effective in *Matsyashakalopamam, Rukshata, Koebner Phenomenon, Nidranasha, Srava and Aswedanam*.

Probable mode of action

Navayasa Rasayana Leha- has dominancy of *Tikta-Katu Rasa* in 66.66% drugs. As described by *Acharya Charaka*, *Tikta Rasa* has the property of *Deepana and Pachana*^[9] and thus, helps in *Amanashana* formed due to *Nidanasevana*. *Tikta Rasa* also has the property of *Raktaprasadana, Vishaghna, Kushthaghna, Kandughna and Dahaprasamana*. It also has *Kaphaghna* property. Thus through these properties *Navayasa Rasayana Leha* acts on *Ekkakushta*. *Acharya Charaka* has described that *Katu Rasa* possesses *Deepana and Pachana*^[8] properties, through which it acts at level of *Agni* and stops *Ama* formation. One property of *Katu Rasa* described by *Acharya Charaka* is "*Marganvivrunoti*" which means it dilates the *Srotas* and thus acts on cellular level and stops the uncontrolled production of cells which causes hyperkeratinization. Other properties of *Katu Rasa* described by *Acharya Charaka* are *Vishaghna, Kandughna* and *Vranaprasadana*.

Also, the ingredients of *Navayasa Rasayana Leha* has dominancy

Table 3: Overall effect of therapy on patients enrolled in the study and divided into groups A and B, in number of patients and corresponding percentage of patients showing varying degrees of improvement

Effects	Group A		Group B	
	Number of Patients	%	Number of Patients	%
Complete Remission (100%)	3	6.66	8	16.32
Marked Improvement (75-99%)	28	62.22	20	40.81
Moderate Improvement (51-74%)	12	26.66	20	40.81
Mild Improvement (25-50%)	2	4.44	1	2.04
Unchanged (<25%)	0	0	0	0

Table 4: Pharmacologically proven actions of drugs of Navayasa Rasayana Leha

Actions	Drugs
Immunomodulatory	<i>Amalaki, Haritaki, Bakuchi</i>
Antioxidant	<i>Amalaki, Haritaki, Bhallataka</i>
Adaptogenic	<i>Amalaki, Haritaki</i>
Wound Healing	<i>Haritaki</i>
Anti-inflammatory	<i>Bhallataka, Bakuchi, Bhrungraj</i>
Anti-arthritis	<i>Bhallataka</i>
Antistress	<i>Bhallataka</i>

Table 5: Pharmacologically proven actions of drugs of Medhya Rasayana tablet

Actions	Drugs
Sedative	<i>Vacha, Jyotishmati, Shankpushpi</i>
CNS depressant	<i>Vacha, Jatamansi</i>
Anti-inflammatory	<i>Jyotishmati, Yashtimadhu, Guduchi, Bhallataka</i>
Immunomodulatory	<i>Yashtimadhu, Guduchi, Haritaki</i>
Antioxidant	<i>Yashtimadhu, Brahmi, Haritaki</i>
Antistress	<i>Yashtimadhu, Guduchi</i>
Adaptogenic	<i>Yashtimadhu, Guduchi, Haritaki</i>
Nootropic	<i>Yashtimadhu, Guduchi, Brahmi, Shankpushpi</i>

of - *Laghu Guna*-66.66% and *Ruksha Guna*-77.77% drugs. *Laghu Guna* possesses *Kaphashamaka* property. It also has *Agnideepana* property through which it helps in relieving *Agnimandya*. By its *Srotoshodhaka* property, it acts on minute channels and removes the *Amavisha*. *Acharya Sushruta* has described *Lekhana* and *Ropana* properties of *Laghu Guna*.^[10] *Lekhana* property might help in management of hyperkeratinization which leads to scaling, *Bahalatva* and *Unnati*. *Acharya Hemadri* has given *Shoshana* property of *Ruksha Guna* which might help

in management of *Sraava*. It also has *Kaphashamaka* property. It is seen that 77.77% drugs in Navayasa Rasayana Leha were of *Ushna Veerya*. According to Acharya Vruudha Vagbhatta, *Ushna Veerya* has *Vatakaphashamaka* property and according to Acharya Vagbhatta, it has *Ashupaka* property through which it acts quickly at minute channels.^[11]

Doshagnata

It is seen that 33.33% drugs possessed *Tridosahara* property and 44.44% drugs possessed *Vatakaphahara* property by which they act directly on the underlying *Doshas* of the disease.

Karmas of Navayasa Rasayana Leha

All the drugs of *Navayasa Rasayana Leha* possess *Rasayana* property. Drugs like *Haritaki*, *Amalaki*, *Vidanga* and *Bhallataka* are included in *Kushthaghna Mahakashaya* given by Acharya Charaka and, 55.55% drugs have *Kushtaghna* property, and 33.33% drugs have *Medhya* and *Shothahara* property.

Some pharmacologically proven actions of drugs of *Navayasa Rasayana Leha* are given in Table 4.

The drugs of *Navayasa Rasayana Leha* possess immunomodulatory, antioxidant, and anti-inflammatory property [Table 4]. Thus, the probable mode of action of *Navayasa Rasayana Leha* can be understood.

Medhya Rasayana tablet Rasa Dominancy: *Tikta Rasa*-88.88%, *Katurasa*-44.44%. As discussed earlier, *Tikta Rasa* acts by the property of *Amapachana*, *Raktaprasadana*, *Vishaghna*, *Kushtaghna*, *Kandughna* and *Dahaprashamana*. *Katu Rasa* acts by its “*Marganvivrunoti* property”, *Deepana*, *Pachana*, *Kandughna* and *Vranaprasadana* property.

Guna dominancy: *Laghu* and *Snigdha Guna*-55.55%. As discussed earlier, *Laghu Guna* acts by its *Kaphashamaka*, *Agnideepana*, *Srotoshodhaka* etc., properties. *Snigdha Guna* is *Vatahara* and is responsible for *Mruduta*, *Bala* and *Varna*. Here, *Bala* can be interpreted as *Vyadhikshamtva*. It may help in the management of *Rukshata* and *Kharata* by its *Mruduta*. Owing to the dominancy of *Tikshna Guna* it may not increase *Kapha Dosh*

Veerya dominancy: *Ushna veerya*-66.66%- acts by its *Vatakaphashamaka* and *Ashupaka* property.

Doshagnata: 44.44% drugs in *Medhya Rasayana* have *Tridosahara* and *Vatakaphashamaka* properties by which they directly act on the disease.

Karmas of Medhya Rasayana tablet

44.44% drugs of *Medhya Rasayana* tablet have *Kushthaghna* property and 22.22% drugs have *Swedajanana* property.

In *Medhya Rasayana* Tablet, all ingredients are having *Medhya Prabhava*. In the tablet, maximum 9 parts of *Shankhpushpi* is included which is said to be best *Medhya Rasayana* drug by Acharya Charaka. Also, all the four *Medhya Rasayana* described by Acharya Charaka have been included.^[12]

Some pharmacologically proven actions of *Medhya Rasayana* tablet are provided in Table 5.

Drugs of *Medhya Rasayana* tablet have properties like sedative, anti-inflammatory, immunomodulatory actions etc., by which they act on the disease [Table 5].

Dhatryadhyo lepa

Loha Bhasma present additionally in the *Lepa* has *Lekhana* property which may help in removing hyperkeratinization. Also it has *Yogvahi* and *Raktaprasadana* property,^[13] which may help in management of the disease. *Ekkakushta* is a *Kapha-Vata* dominant disease. Upon topical application, the active principle of the *Lepa* reaches to the deeper tissues through *Siramukha* and *Swedavahi Srotas* and stains it with its *Sukshma* and *Tikshna* property. Due to its *Ushna*, *Tikshna*, and *Sukshma* properties it deblocks the obstruction in *Swedavahi Srotas* and allows the local toxins to flow out through the *Sweda*, thus clearing out the micro channels. The *Ushna Veerya* of *Dhatryadhyo Lepa* and *Snigdha*, *Sukshma* and *Picchila Guna* of its vehicle, i.e. *Tila Taila* causes pacification of *Vata* and *Kapha* which forms the *Samprapti* thus alleviating the symptoms. In the present study, no adverse effects of the research drugs have been found during the clinical trial and follow up period.

CONCLUSION

Stress may lead to early onset of disease (maximum patients-21-30 years) and early recurrence. *Virrudhaashana* is one of the predominant *Nidana* found (36.93%) which is also described by Acharya Charaka as cause of *Ninditavyadhies*, one among which is *Kushtaroga*. Maximum patients were depressed/ anxious- which clearly shows the psychosomatic nature of the disease. Family history was positive in 34.23% of the patients, suggesting a genetic cause of the disease. In the present study, maximum patients were of *Vata-Kapha Prakruti* (63.03%). It may be inferred that people of *Vata-Kapha Prakruti* may be more susceptible to Psoriasis.

Both the groups showed almost equal effect in improvement of all signs and symptoms of *Ekkakushta* (Psoriasis) without any adverse effects. On the basis of maximum number of patients getting complete remission and marked improvement, the therapy in group A was concluded to be more effective on the following symptoms- *Mandala*, *Bahalatva*, *Unnati*, *Auspitz* sign, *Candle grease* sign, *Daha* and *Kandu*. Whereas Group B was more effective in *Matsyashakalopamam*, *Rukshata*, *Koebner Phenomenon*, *Nidranasha*, *Srava* and *Aswedanam*.

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हिन्दी सारांश

एककुष्ठ में नवायसरसायनलेह, मेध्यरसायन टेबलेट तथा धात्र्याद्यो लेप का तुलनात्मक अध्ययन

चार्मि मेहता, अलंकृता आर. दवे, वी. डी. शुक्ल

एककुष्ठ (सोरीयासीस) एक जीर्ण रोग है जो आतुर की जीवनशैली को बहुत प्रभावित करता है। इस अध्ययन में रूग्णों को पंजीकृत करके सामान्य विभिन्न विभजन वितरण पद्धति से दो वर्गों में विभाजित किया। वर्ग अ में नवायस रसायन लेह - २ ग्राम प्रतिदिन दो बार उष्णोदक के साथ दिया गया। साथ ही धात्र्याद्यो लेप का बाह्य प्रयोग करवाया गया। वर्ग ब में मेध्य रसायन टेबलेट - २ गोली दिन में दो बार कोष्ण गोदूध के साथ दी गई। साथ ही धात्र्याद्यो लेप का बाह्य प्रयोग करवाया गया। दोनों वर्गों में रूग्णों पर औषध का प्रभाव देखा गया। पाये गये परिणामों से यह सिद्ध हुआ कि दोनों वर्गों में रूग्णों की जीवनशैली पर अच्छे परिणाम प्राप्त हुए।