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# A comparative clinical study on the cosmetic approach in *Tarunyapidaka* vis-a-vis Acne Vulgaris amongst female population through *Shodhana Shamana* and *Lepa*

Dr. Sharanamma<sup>1</sup>, Dr. Prashanth A.S.<sup>2</sup>, Dr. S.G. Chavan<sup>3</sup>

<sup>1</sup>Post Graduate Scholar, <sup>2</sup>Principal and HOD, <sup>3</sup>Guide and Professor, Department of Kayachikitsa, Ayurveda Mahavidhyalaya, Hubli, Karnataka, INDIA,

## ABSTRACT

*Tarunyapiadaka* is one of the *Kshudraroga* and most common skin disorders. Ayurvedic medicine plays important role in the patients who are in deep depression due to disfiguration of face and *Tarunyapidaka* in the field of Cosmetology. In the present study an effort has been made to formulate an effective, economic and simple remedy to help in the total cure and preventing of *Tarunyapidaka*. In the present study 40 Subjects diagnosed with *Tarunyapidaka* w.s.r to Acne Vulgaris fulfilling the Inclusion criteria were selected for study and randomly categorized into two groups as Group A and Group B each consisting of 20 subjects from OPD and IPD of department of PG studies in Kayachikitsa department of Ayurveda Mahavidhyalaya, Hubballi have been treated with *Amapachana* with *Guduchi Churna*. In group A *Sadhyosnehapana* with *Panchatikta Ghrita*. *Sarvanga Abhyanga* with *Elaadi Taila* followed by *Sarvanga Swedana*. And *Sneha Virechana* was administered with *Trivruth Lehya*. After *Samsarjana Krama*, *Navaka Kashaya* given as a *Shamanoushadi* along with *Manjista* with *Madhu Lepa*. In Group B *Sadhyosnehapana* with *Panchatikta Ghrita*. *Sarvanga Abhyanga* with *Elaadi Taila* followed by *Sarvanga Swedana* and *Sneha Virechana* was administered with *Trivruth Lehya*. After *Samsarjana Krama*, *Gopanganadi Kashaya* given as a *Shamanoushadi* along with *Manjista* with *Madhu Lepa* for 45 days to assess the clinical efficacy of *Navaka Kashaya* and *Gopanganadi Kashaya*. Significant changes in Subjective and Objective criteria were observed.

**Key words:** *Tarunyapidaka*, *Acne Vulgaris*, *Navaka Kashaya*, *Gopanganadi Kashaya*.

## INTRODUCTION

Beauty is the characteristic of a person that provides a perceptual experience of pleasure or satisfaction. The concept of beauty is laid on the principles of health. In short the secret of beauty is the reflection of skin; Skin is the reflection of good health. If such important and beautiful face gets vitiated by the *Doshas*, it directly influences the personality of a

person. Among them one of the ailment which affects the face is *Tarunyapidaka*.<sup>[1]</sup>

*Tarunyapidaka* is also known as *Yauvanapidaka*, as it occurs in *Tarunya* or *Yauvana Avastha* of the individuals.<sup>[2]</sup> Among the *Ayurveda* classics, *Acharya Sushruta* mentioned *Tarunya Pidaka* as one among the "*Kshudra Roga*" and is due to disturbed state of *Kapha*, *Vata* and vitiation of *Raktadhatu*, and also involvement of *Pitta* due to its *Ashrayashrayibhava*. *Acharya Charaka* mentioned *Tarunyapidaka* while explaining *Bahya Rogmarga*,<sup>[3]</sup> which implies that its *Adhithana* is *Twak*. There we find the vitiation of *Rasadhatu* also. *Acharya Bhavamishra* has quoted *Swabhava*<sup>[4]</sup> (the natural cause) as one of the causative factors. *Acharya Sharangdhar* has mentioned *Tarunyapidaka* as the *Mala* of *Shukra Dhatu*<sup>[5]</sup> along with *Vaktra Snigdhatu* (unctuousness of face). *Acharya Vagbhata* has mentioned presence of *Shukra in Stree* (women)<sup>[6]</sup> also. *Shukra Pradurbhava* takes place in adolescence, hence

### Address for correspondence:

Dr. Sharanamma  
Post Graduate Scholar, Department of Kayachikitsa, Ayurveda Mahavidhyalaya, Hubli, Karnataka, INDIA,  
E-mail: dr.sharanamma24@gmail.com

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prevalence is more in this age group. It was also recorded 54% in women and 40% in men over 25 years of age.<sup>[7]</sup> As a matter of cosmetology, females are more concerned about their beauty. The area where the trial was conducted, the availability of female subjects was more than male subjects. So this research work was highlighted among the “female population”.

We find a ray of light in Ayurveda as it has two basic principles i.e., Maintenance of health in healthy and prevention of disease in diseased. For Maintenance of beauty of skin especially of face various measures like *Abhyanga*, *Bashpaswedana*, *Nasya* etc. are explained in *Dinacharya*. For prevention of *Tarunypidaka*, *Shodhana* modalities such as *Vamana*, *Virechana*, *Nasya* and *Raktamokshana*, various types of *Lepa* are told.<sup>[8]</sup>

Present study included *Amapachana* with *Guduchi Churna* as it is said “*Rogah Sarveapi Mandagnou*”.<sup>[9]</sup> *Virechana Karma* is one of the prime treatment modality for *Rakta*, *Pitta* and *Santharpana Janita Vikara*,<sup>[10]</sup> along with it, it also has a significant role in mitigation of *Vata* and it is one of *Shodhana Karma* advocated prior to administering *Shamanoushadhi*. As it said that “*Dosha Evam Hi Sarvesham Rogaanam Eka Karanaam*”<sup>[11]</sup> without involvement of *Dosha*, disease can't manifest. As mentioned earlier, all the three *Dosha's* as well as *Rasa*, *Rakta*, *Meda* and *Shukra Dhatus* are involved directly or indirectly in the formation of *Samprapti* of the *Tarunypidaka*. Formulations which contain drugs having properties like *Raktashodaka*, *Varnya*, *Kushtagna*, *Kandugna*, *Pittashamaka* and *Kapha-Vatahara* would be beneficial to bring back the balanced state of affected *Dosa-Dushya*. For the present clinical study two herbal formulations- *Navaka Kashaya*<sup>[12]</sup> and *Gopanganadi Kashaya*<sup>[13]</sup> are selected. *Navaka Kashaya* contain drugs like *Manjishta*, *Katuki*, *Guduchi*, *Nimba*, *Vacha* etc. which have the qualities of *Raktashodhaka*, *Pittashamaka*, *Kaphahara*, *Kusthagna* and *Varnya*. *Gopanganadi Kashaya* contains drugs like *Sariva*, *Chandana*, *Kamala*, *Utphala*, *Hribera* etc. which have the qualities of *Raktashodaka*, *Raktaprasadaka*, *Varnya*,

*Pittashamaka*. Above formulations are selected for the study based on the observations of many experienced practitioners widely practicing and have got better results in the management of *Tarunypidaka*. Local application directly acts on skin lesions, so along with *Antha Parimarjana Chikitsa*, *Bahiparimarjana Chikitsa* also plays an important role in *Tarunypidaka*, hence *Lepachikitsa*<sup>[14]</sup> was selected for both the groups which acts as *Raktaprasadaka*, *Kaphagna*, *Varnya*, *Kusthagna* and *Tvachya*. In the present clinical study, 40 subjects were selected incidentally and placed randomly into two groups, Group A and Group B, with 20 subjects in each group. Classical signs and symptoms form the main diagnostic criteria and also studied for the assessment criteria.

Group A received *Amapachana* with *Guduchi Churna*,<sup>[15]</sup> *Sadhyosnehapana* with *Panchatikta Grutha*,<sup>[16]</sup> *Abhyanga* with *Elaadi Taila*,<sup>[17]</sup> *Atapasevana*, *Virechana* with *Trivruth Lehya*<sup>[18]</sup> followed by *Samsarjana Krama*, *Navaka Kashaya* as *Shamanaushadhi* and *Manjista* with *Madhu* as *Bahya Lepa*.

Group B received *Amapachana* with *Guduchi Churna*, *Sadhyosnehapana* with *Panchatikta Grutha*, *Abhyanga* with *Elaadi Taila*, *Atapasevana*, *Virechana* with *Trivruth Lehya* followed by *Samsarjana Krama*, *Gopanganadi Kashaya* as *Shamanoushadhi* and *Manjista* with *Madhu* as *Bahya Lepa*.

In both groups *Lepa* as follow up was done for 45days in both the groups and they were advised to attend the OPD every 15 days for general checkup and for recording changes observed in them.

#### AIM AND OBJECTIVES

1. To study *Tarunypidaka* and Acne Valgaris in detail.
2. To evaluate the efficacy of *Virechana Karma* in the management of *Tarunypidaka*.
3. To evaluate the efficacy of *Manjista Lepa* in the management of *Tarunypidaka*.
4. To compare the efficacy of *Navaka Kashaya* and *Gopanganadi Kashaya* in the management of *Tarunypidaka*.

## MATERIALS AND METHODS

The patients were selected and registered after their fulfillment of diagnostic criteria of *Tarunypidaka* (Acne Vulgaris). The patients were thoroughly questioned and examined on the basis of proforma which includes both Subjective and Objective criteria's. Ethical Clearance and informed consent were obtained before conducting the clinical trial.

### Inclusion Criteria

1. Subjects presenting with signs & symptoms of *Tarunypidaka* (Acne Vulgaris)
2. Subjects of age group between 15 to 30 years were included.
3. Subjects of female sex were included.
4. Subjects who were fit for *Virechana* & *Lepa Karma*.

### Exclusion Criteria

1. Subjects having *Pidaka* other than face and other *Kshudraroga* and *Kushtaroga*.
2. *Pidaka* produced due to side effect/allergic reaction of any drug applied earlier.
3. Subjects suffering from systemic and metabolic pathologies.
4. Subjects contraindicated for *Virechana* and *Lepa Karma* were excluded.

**Table 1: Showing the parameters of study**

Subjective Parameters	Objective Parameters
<i>Vaivarnya</i>	Papules
<i>Ruja</i>	Pustules
<i>Kandu</i>	Size of <i>Pidaka</i>
<i>Srava</i>	Number of <i>Pidaka</i>
Oiliness of face	
Dryness of face	

### Study Design - A Randomized Clinical Study

### Study Size

A minimum of 40 subjects diagnosed with *Tarunypidaka* fulfilling the diagnostic and inclusion criteria were incidentally selected and randomly categorized into two groups as Group A and Group B each consisting of 20 Subjects for the clinical study excluding the dropouts

### Intervention

**Table 2: Showing Intervention of Group A**

<i>Aamapachana</i>	<b><i>Guduchi Churna</i></b> Dose : 3gms of <i>Churna</i> with warm water before food. (Till <i>Nirama Laxana</i> )
<i>Snehapana</i>	<i>Sadhya Snehapana</i> with <b><i>Panchatikta Ghrita</i></b> Dose- <i>Madhyama Matra</i> (as per <i>Agni, Kostha</i> of patient)
<i>Vishrama Kala</i>	<i>Abhyanga</i> with <b><i>Elaadi Taila</i></b> followed by <i>Nadi Swedana</i> .
<i>Virechana</i>	<b><i>Trivrut Lehya</i></b> (Based on <i>Roga</i> and <i>RogiBala</i> ).
<i>Paschat Karma</i>	<i>Samsarjana Krama</i> depending on <i>Vega/Shuddhi</i>
<i>Shamana Yoga</i>	<b><i>Navaka Kashaya</i></b> .
<i>Matra &amp; Anupana</i>	15ml-20ml twice a day, before food & <i>Ushnodaka</i> .
<i>Lepa</i>	<b><i>Manjista Churna</i> with <i>Madhu</i></b> .
Method	<i>Mrudu Sweda</i> (steaming) with <i>Nimbodaka</i> . 1/4 <sup>th</sup> <i>Anguli</i> (approx 0.31cm) thick <i>Lepa</i> will be applied once daily.
<i>Chikitsa Kala</i>	45 days.
Follow –up	Every 15 days

**Table 3: Showing Intervention of Group B**

<i>Aamapachana</i>	<b><i>Guduchi Churna</i></b> Dose : 3gms of <i>Churna</i> with warm water before food.(Till <i>Nirama Laxana</i> ).
<i>Snehapana</i>	<i>Sadhya Snehapana</i> with <b><i>Panchatikta Ghrita</i></b> Dose- <i>Madhyama Matra</i> (as per <i>Agni, Kostha</i> of patient).

Vishrama Kala	Abhyanga with <b>Elaadi Taila</b> followed by <i>Nadi Swedana</i> .
Virechana	<b>Trivrut Lehya</b> (Based on <i>Roga</i> and <i>RogiBala</i> ).
Paschat Karma	<i>Samsarjana Krama</i> depending on <i>Vega/Shuddhi</i> .
Shamana Yoga	<b>Gopanganaadi Kashaya</b> .
Matra & Anupana	15ml-20ml twice a day before food & <i>Ushnodaka</i> .
Lepa	<b>Manjista Churna with Madhu</b> .
Method	<i>Mrudu Sweda</i> (steaming) with <i>Nimbodaka</i> . 1/4 <sup>th</sup> <i>Anguli</i> (approx 0.31cm) thick <i>Lepa</i> will be applied once daily.
Chikitsa Kala	45 days.
Follow-up	Every 15 days

**Overall assessment of treatment**

The overall assessment of both the groups will be assessed according to the grades given below;

**Table 4: Showing the overall assessment of treatment**

Overall Assessment	Grade of Improvement
Complete Relief	100% improvement
Marked Relief	75 to 99% improvement
Moderate Relief	50 to 74% improvement
Mild Relief	26 to 49% improvement
Unchanged	<25% or No improvement

**Table 5: Showing the effect of therapy on Subjective and Objective parameters in Group A**

Parameter	Mean		Mean diff	% Improvement	S.D	S.E	't'	P value	Remark
	B	A							
Vaivaranya	2.3	0.9	1.4	60.87%	0.489	0.1095	12.48	<0.001	SS
Ruju	1.9	0.25	1.65	86.84%	0.48	0.107	16.8	<0.001	SS

Kandu	0.95	0.9	94.73%	0.59	0.131	7.020	<0.001	SS
Srava	1.65	0.15	90.63%	1.113	0.2491	5.484	<0.001	SS
Oiliness of face	1.95	0.45	79.08	0.670	0.150	10.086	<0.001	SS
Dryness	0.15	0.05	50.00%	0.217	0.047	1.004	>0.001	SN
Size of pidaka	1.68	0.8	50.00%	0.357	0.079	10.38	<0.001	SS
Number of Pidaka	1.75	0.95	55.88%	0.4358	0.097	12.50	<0.001	SS
Pustules	0.95	0.05	94.44%	0.792	0.177	4.678	<0.001	SS
Papules	2.49	0.9	62.50%	0.5916	0.132	11.054	<0.001	SS

**Table 6: showing comparing effect of therapy on Subjective & Objective parameters.**

Assessment Parameters (N=40, D.F=38)	Group A			Group B			Unpaired t test (Group-A vs Group-B)			Remark
	Mean	S.D	S.E	Mean	S.D	S.E	S.D	t <sub>cal</sub>	P	
Vaivaranya	1.4	0.489	0.1095	1.25	0.367	0.067	0.127	1.185	0.005	SS
Ruju	1.85	0.48	0.107	1.3	0.458	0.102	0.148	3.704	0.005	SN

Kandu	0.95	0.59	0.131	0.07	0.640	0.143	0.019	1.284	0.005	SS
Srava	1.4	1.13	0.249	0.091	0.768	0.171	0.030	1.653	0.005	SS
Oiliness	1.55	0.670	0.150	0.075	0.53	0.120	0.019	4.188	0.005	SNS
Dryness	0.05	0.217	0.048	0.037	0.556	0.124	0.013	1.873	0.005	SS
Size of Pidaka	0.85	0.357	0.079	0.06	0.489	0.109	0.013	1.846	0.005	SS
Number of Pidaka	1.25	0.435	0.097	0.09	0.538	0.120	0.015	2.260	0.005	SS
Pustules	0.85	0.792	0.177	0.055	0.804	0.179	0.025	1.188	0.005	SS
Papules	1.5	0.591	0.132	1.04	0.583	0.129	0.018	0.538	0.005	SS

**Table 7: Showing the Overall effect of study on both Group A & Group B**

Remark	Group A	%	Group B	%	Total	%
Complete	01	05%	00	00%	01	2.5%
Marked Improvement 75% & above	06	30%	02	10%	08	20%
Moderate Improvement 50 to 74%	12	60%	11	55%	25	57.5%
Mild Improvement 25- 49 %	01	05%	07	35%	08	20%
No Improvement	00	00	00	00	00	00

Below 25 %						
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## DISCUSSION

Discussion is the most essential part of Research work which helps to explain the interpretation on findings and judgment on clinical study. In present study, various aspects of *Tarunypidaka* from Ayurveda and Modern perspective have been explored. Ayurveda put attention on cosmetology and considers the well physical appearance for women for the purpose to admire the world through her beauty. In *Tarunypidaka*, valve of cosmetic not present due to disfiguration of the face by pidaka, so in present study an attempt was made to solve the issues of disfiguration of face and conquering cosmetic value through herbal sources as dealt in Ayurvedic science.

### Discussion on Virechana

In the present study *Virechana* therapy is taken as *Shodhana karma* because prior to administering *Shamana* and *Lepa*, *Shodhana* is advocated. If *Shodhana karma* is not administered priorly, its like dyeing in dirt cloth. *Tarunypidaka* is due to *Kapha vata* and *rakta* vitiation. It is a *Raktapradoshaja vikara*. *Rakta* and *Pitta* has *Ashrayaashryi Sambanda*. *Acharya* have mentioned that *Virechana* is one among the treatment for *Raktapradoshaja Vikara* and *Pittaja Vikara* and hence it has been selected as a treatment for *Virechana*. *Trivrutta* is best drug for *Virechana*. It is good for all persons having as it is *Sukha Virechana*. *Trivrutta* having *Laghu*, *Ruksha*, *Tikshna Gunas*, *Katu Tikta Rasa*, *Ushna Veerya* and *Pittaghna* property. *Lehya Yogas* of *Trivrutta* are used as *Virechana* mentioned in *Charaka Samhita*. By these all properties and *Virechana* action of drug *Trivrutta* *Lehya* removes vitiated *Pitta* from the body and relief of sign and symptoms of *Tarunypidaka*.

### Discussion on Navaka Kashaya

It is used as *Shamana Oushadhi* in present clinical study. *Navaka Kashaya* contains the ingredients like *Manjista*, *Lodra*, *Katuki*, *Vacha*, *Amalaki*, *Vibhitaki*, *Haritaki*, *Haridra* and *Nimba*, all ingredients are having equal proportion, to be used in *Kustha Roga* and have *Kusthaghna* properties. In *Rasa*, *Tikta Pradhana Rasa*,

in *Guna-Laghu Ruksha Guna*, In *Virya-Ushna Virya* and *Katu Vipaka Pradhana*. As the pathogenesis of *Tarunyapidaka* mentioned in classics, *Kapha* and *Vata Dosha* vitiate and they do the *Avarodha* of *Srotas*. Due to *Srotoavarodha* the *Pidaka* formation happen.

In order to break the pathogenesis drugs having *Tikta Katu Rasa* reduces the vitiated *Kapha Pitta Dosha*. *Laghu Ruksha Guna* also helps in pacifying the vitiated *Kaphapitta Dosha*. Due to *Ushna Virya* the *Avarodha* of *Srotas* is reduce out. The mentioned drugs were also reported for anti acne action in various researches.

**Discussion on Gopanganadi Kashaya**

It is used as *Shamana Oushadhi* in present clinical study. *Gopanganadi Kashaya* its name suggest that in ancient days *Gopikas* use to have this *Kashaya* to achieve the *Mukhasoudharya* forever. It contains – *Gopanga, Sariva, Chandana, Kamala, Ushira, Madhuka, Utpala, Shatavari, Sunthi, Yastimadhu* all ingredients are having equal proportion, to be used in *Pittaja Jwara Roga* and have *Kaphapittashamaka* properties. In *Rasa - Kashaya Pradhana Rasa*, in *Guna - Laghu Snigdha Guna*, In *Virya – Sheeta Virya Pradhana* and *Katu Vipaka Pradhana*. As *Kashaya Rasa* is having *Rakta Shodhana* property acts on vitiated *Rakta Dhātu* and purifies it. By cleansing the blood, it cures the skin diseases and enhances the skin complexion. Major of drugs contain *Flavonoid* which are proven to posses good antioxidant property. Antioxidants protect the skin from the oxidative damage. *Tannin* promotes the healing process by increasing capillary formation. *Shatavari* has action on hormonal imbalance. *Sunthi* does *Deepana Pachana* action. This *Yoga* helps in *Samprapti Vighatana* of *Tarunyapidaka*.

**Probable mode of action of Manjista Madhu Lepa**

The drug *Manjista* is described in *Caraka Samhita* in *Varnya Mahakashaya*. *Raktashodhaka* property of *Manjista* helpful in increasing superficial blood circulation and Stimulating the generation of cells locally. *Kaphaghna* and *Lekhana* properties of *Madhu* destroy the sebum, hyperkeratinization and reduce the *Pidaka*.



**CONCLUSION**

We can concluded that, as compare to modern view, the holistic approach of Ayurveda system of medicine is effective without any complication and side effects because Ayurveda focuses on rebalancing individuals and not just treating diseases, its treatment are having low potential for iatrogenesis or side effect. In addition, they tend to promote the systemic health and well-being of the individual. This being the case, it makes sense to first approach cosmetic by correcting disfiguration through Ayurvedic treatment. *Tarunyapidaka* is disease condition which consists of various clinical symptoms, such as *Shalmalikantakavat Pidaka, Kandu, Ruja*. This study shows both the treatments like *Navaka Kashaya* and *Gopanganadi Kashaya* along with *Virechana* and *Lepa* shows

effectiveness in *Tarunyapidaka* w.s.r. to *Acne vulgaris*. Though both the groups provided Statistically significant results in subjects of *Tarunyapidaka*, but the overall percentage of improvement provided by *Navaka Kashaya* with *Virechana* and *Lepachikitsa* is 66.83%, while *Gopanganadi Kashaya* 55.75% of improvement along with *Virechana* and *Lepa Chikitsa*. As comparatively *Navaka Kashaya* showed more effective on all parameters like *Vaivarnya*, *Ruja*, *Srava*, *Kandu*, Oiliness of face, Size of *Pidaka*, Number of *Pidaka* Papules and Pustules. While *Gopanganadi Kashaya* showed more effective on Dryness of face compared to *Navaka Kashaya*.

## REFERENCES

1. Sushruta Samhita - Nibandha sangraha commentary of Dalhana by Vaidya Jadhvi Trikamji Acharya, Chaukhamba Sanskrit Sansthan Varanasi, reprinted edition 2010 Sutrasthana Chapter 15 Verse 15, page no-75.
2. Text of Kayachikitsa, Joshi Y, G, Ganesh publisher Pune ,2010 chapter no 18,p.198- 199.
3. Charaka Samhita of Agnivesha, by Vaidya H.C. Kushwaha, Edited with Ayurveda Deepika Hindi Commentary, Chaukhamba Orientalia Varnasi, reprinted edition 2016.Volume 1<sup>st</sup> Sutrastana Chapter 11 Verse 48, page no- 181.
4. Bhaishajya Ratnavali of Sri Govindadasji Bhisagratna commented upon by Vaidya Shri Ambikadattashastri, English Translation by Dr Kanjiv Lochan, Chaukhambha Sanskrit Bhawan Varanasi, reprinted edition 2006, Vol.3rd, Chapter 54th Verse 257-60, p.82.
5. Sharangadhara samhita of Pandita Sharangadharacarya with Dipika' Hindi commentary by Dr Brahmanand Tripathi, Chaukhamba Surbharati Prakashana Varanasi,2016,Purva Khanda, Chapter no 5,Verse25-26.p.40.
6. Astanga SangrahaHindi Vyakhyasahita by Kaviraj Atrideva Gupta, Chowkhamba Krishnadas Academy, Varanasi, reprinted edition 2005 volume 1st, Shareerasthana 1st Chapter Verse 72,page no- 271.
7. Rademaker M, Garioch JJ, Simpson NB. Acne in school children: No longer a concern for dermatologists. Br Med J 1989;298:1217-9.
8. Asthanga hrudaya of vidyotini hindi commentary by Kaviraj attri Dev Gupta, Chowkhamba Prakashana, Varanasi,reprinted edition 2017 ,Utharsthana , chapter 32, Verse 3,page no-769.
9. Charaka samhita of Agnivesa, 'Vaidhyamanorama' hindi commentary by Vidyadara Shukla and PV Sharma, Chaukhamba Sanskrit Sansthan Varanasi, Reprinted.ed 2011.vol 2. Chikitsasthana ,chapter 13, sloka no 10.p.307.
10. Charaka samhita of Agnivesa, 'Vaidhyamanorama' hindi commentary by Vidyadara Shukla and PV Sharma, Chaukhamba Sanskrit Sansthan Varanasi, Reprinted.ed 2011.vol 1. Sutrasthana ,chapter 24, sloka no 18.p.323
11. Asthanga hrudaya of vidyotini hindi commentary by Kaviraj attri Dev Gupta, Chowkhamba Prakashana, Varanasi, reprint edition 2017 ,Sutrasthana , chapter 12, Verse 32,page no-124.
12. Yoga Ratnakara by Dr Madhapteram Shetty Suresh Babu, Chaukhamba Sanskrit Series, Varanasi, reprinted edition 2008, Volume 2nd, Chapter Ksudrarogadikara , verse 66 page no-947
13. Sahasrayogamby K. Nishtewar & R.Vidyanath English Translation, Chaukhamba Sanskrit series office Varanasi, reprinted.edition 2017, chapter Kashaya prakarana Page no..2-3.
14. Yoga Ratnakara by Dr Madhapteram Shetty Suresh Babu, Chaukhamba Sanskrit Series, Varanasi, reprinted edition 2011, Volume 2nd, Chapter Ksudrarogadikara , verse no 124- 125 page no-1019.
15. Dravyaguna vijnana, Dr.J.L.N Sastri,Chaukhamba orientlia Varanasi, reprinted edition 2010, vol.2.,p.40.
16. Bhaishajya Ratnavali of Sri Govindadasji Bhisagratna commented upon by Vaidya Shri Ambikadattashastri, English Translation by Dr Kanjiv Lochan, Chaukhambha Sanskrit Bhawan Varanasi, reprinted edition 2006, Vol.3rd, Chapter 54th Verse 257-60, p.82.
17. Sahasrayogam by K. Nishtewar & R.Vidyanath, English Translation, Chaukhamba Sanskrit series office Varanasi, reprinted edition 2017,chapter Tailaprakarana Pageno.124-125.
18. Asthanga hrudaya of vidyotini hindi commentary by Kaviraj Atri Dev Gupta, Chowkhamba Prakashana, Varanasi,reprinted edition 2017 ,Kalpasthana, chapter 2nd Verse 9,page no-588

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