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# Study of *Twak Shareer w.s.r to Kitibha Kustha*

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## ABSTRACT

Ayurveda describe the organization of the body in term of *Doshas*, *Dhatus* and *Malas*. *Twacha* is one among the *Upadhatus* which provide protective layer over the body that protect from the heat, cold and external infection. The union of *Shukra* (spermatozoa) and *Shonita* (ovum) while being cooked (processed by heat) give rise to the formation of seven *Twak* (skin) just like formation of cream when milk is boiled. Acharya Sushrut and other Acharyas are described *Twak Shareeram* in detail. Acharya Sushrut defined *Twacha* as *Upadhatu* of *Mamsadhatu*. *Twacha* is one among the *Panchjyanendriya*, which carry sensation of touch and it covers external part as well as internal part of body. "*Kitibha*" is one among the type of *Ksudrakustha* which is common and chronic disorder of *Twacha*. Acharyas describe symptoms of *Kitibha* like - red, with dry and silvery white scale which may be obvious only after scrapping the surface, skin is not sweating, resemble the scale of fish, producing sound (while scratching) rough, itching course and black in colour. So it becomes essential to know the structural and anatomical changes occur in the *Kitibha*. Now a days *Kitibha* disease largely spread in the human being. While diagnosing the patients of *Kitibha Kustha*, there is difficulty regarding the identification of structural deformity, hence need is felt to study the *Kitibha* and *Twak Sharira*.

**Key words:** *Kitibha Kustha, Twacha Shareera, Psoriasis, Parakerotosis, Orthrokeratosis.*

## INTRODUCTION

Today there is a cosmetic era. People are getting more and more consciousness about healthy skin. Especially females are seeking more attention towards healthy skin to be top in the fastest growing field of fashion.

So, to fulfill people's demand and giving them healthy skin. We must study the anatomy and physiology of skin and its variation from one person to another because every individual have different nature of skin depending upon his *Prakruti* and many other factors.

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After studying the nature of one's skin. We will be in a position to advice do's and don'ts or treatment to that person accordingly.

But before doing this, the basic thing is to study normal anatomy and physiology of skin. So the subject is selected.

There is another reason for doing extensive study of *Kitibha* which can be compared to Psoriasis according to modern science.

It is mainly associated with scales on palm sole, scalp and hands which are having itchy nature. Due to this complaint (itching), one may loose his concentration from his routine work and may land up in awkward situation affecting his civil life.

In this present article the study of *Kitibha* according to Ayurveda. Psoriasis according to modern science and comparative study of these diseases according to their symptoms.

## OBJECTIVES OF THE STUDY

1. Comparative study of *Twak Sharira* with modern and Ayurvedic view.

- To give appropriate and elaborate description on *Kitibha* and its relation with the 4<sup>th</sup> layer of skin.
- To study regarding *Kitibha Kustha* with modern correlation.

### REVIEW OF TWACHA SHAREERA

The external covering of the body is called *Twak* or *Twacha*.<sup>[1]</sup> A type of *Indriya* which envelops the body is called *Twagindriya* or *Sparshanendriya*.<sup>[2]</sup> As per Charaka, *Twacha* envelops *Shadanga Shareera*.<sup>[3]</sup>

#### Synonyms

- Twacha:** This word is derived as *Twacha Samvarane* which means covering of the body.
- Charma:** This word is derived from *Chara* which means movement i.e. nature of moving.

According to modern science, cells of epidermis are continuously being produced, remain for some period and become dead and they are replaced by newly produced cells. This mechanism can be correlated to Ayurveda *Shiryate Tat Shareeram* law, in this way *Charma* is related to movement so the name has given.

#### Twacha Utpatti

During the *Paka* of *Shukra* and *Shonita* by *Agni* or *Pitta Dosha*, seven types of *Twacha* appear on the surface of body of *Garbha* just like while heating milk cream appears on its surface.<sup>[4]</sup>

Acharya Vagbhata quoted that from the *Paka* of *Raktadhatu* seven types of skin appear just like cream on milk.<sup>[5]</sup>

Acharya Charaka has not given any description regarding genesis of *Twacha*.

#### Origin of Twacha

Acharya Charaka has described that every structure of the body develops from *Shadbhavas* in that *Twacha* is *Matruja Bhava*.<sup>[6]</sup> Acharya Vagbhata stated that *Twacha* develops from *Vayu Mahabhoota*.<sup>[7]</sup>

#### Number of Twacha

There is a great controversy in various Ayurvedic texts regarding number of *Twacha*. After studying above

lines we come to the conclusion that Acharya Charaka, Vriddha Vagbhata, Bhela and Kashyapa have stated 6 types of *Twacha*. While Acharya Sushruta and Bhavaprakasha have started seven types of *Twacha*.<sup>[8]</sup>

#### Twacha and Panchamahabhoota Relation

Each and every structure of the body is having *Panchabhautika* constitution even on the cell level also.

*Twacha* is also having *Panchabhautika* nature.

Element	Structure
Parthiva	Kesha, Loma
Aapya	Rasa, Lasiak
Tejas	Kanti, Varna
Vayviya	Sparsha, Samvedna
Akashiya	Lomakoopa, Sweda Vahi Nalika

#### Twacha and Upadhatu Relation

Every *Dhatu* have its own *Upadhatu Vasa* and *Shat Twacha* are *Upadhatu* of *Mamsadhatu*.

#### Twacha and Srotasa Relation

*Twacha* is closely related to *Swedavaha Srotas* and *Mamsavaha Srotas*.

#### Ayurvedic diseases review

##### Kitibha

The disorder *Kustha* is said to occur in the 4<sup>th</sup> and 5<sup>th</sup> layer of skin. (Su.Sha.4/4).

##### Nidana of Kitibha

There is no specific reference regarding the etiological factor for *Kitibha Kustha*, at the same time no particular aetiology has been depicted for any of the different varieties of *Kustha* specifically. The general causes have been described which becomes aetiological factors for the formation of *Kustha*.

For example - taking diet against the regimen given in the literatures specially eating *Guru* and *Virudha* and

*Asatmyaahara*, eating during indigestion after consumption of liquid substances or post vomiting period, after exercise, after coitus etc, eating non-veg with milk etc., entering extreme heat, causing sudden vomiting with holding vomiting. ( Su.Ni.5/4)

Further it is stated that the effect of *Karma* like murder of a Brahmin, lady, pious person, abducting other women etc. causes *Kustha*. (Su.Ni.5/30)

It is stated that *Kustha* occurs even after the rebirth of person afflicted with disease in the previous life. (Su.Ni. 5/31)

In Sushruta Chikitsa 9/9 the similar aetiology has been given in nutshell. Charaka 7/48, M.N. 49/1-5, B.P. 54, given the similar opinion regarding the aetiology of *Kustha* in genera.

This general description of aetiology in respect to *Kustha* is applicable too either of the 18 *Kusthas* and this applies to *Kitibha Kustha* too.

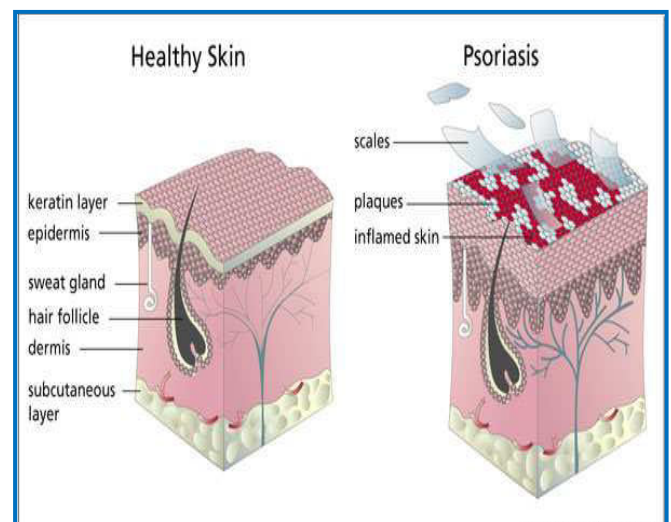
**Modern diseases review**

The skin is a largest organ in the human body it consist of vascular connective tissue named corneum dermis and an external covering of epithelium called as epidermis. Deep to dermis is sub-cutaneous layer this layer is also called superficial fascia or hypodermis, consist of aeriolar and adipose tissues. So, the skin is composed of 3 distinct layers from surface of downward and they are,

1. Epidermis
2. Dermis
3. Hypodermis.

SN	Sushruta	Charaka and Vagbhata	Modern Term	Layer of skin
1.	<i>Avabhasini</i>	<i>Udakdhara</i>	Stratum Corneum	Epidermis
2.	<i>Lohita</i>	<i>Asrukdhara</i>	Stratum Lucidum	

3.	<i>Shweta</i>	<i>Sidhma, kilasa</i>	Stratum Granulosum	
4.	<i>Tamra</i>	<i>Dadru, Kustha</i>	Malpighian layer	
5.	<i>Vedini</i>	<i>Alaji, Vidradhi</i>	Papillary Layer	Dermis
6.	<i>Rohini</i>	Blindness	Reticular Layer	
7.	<i>Mamsadhara</i>	----	Subcutaneous tissue and Muscular layer	Hypodermis

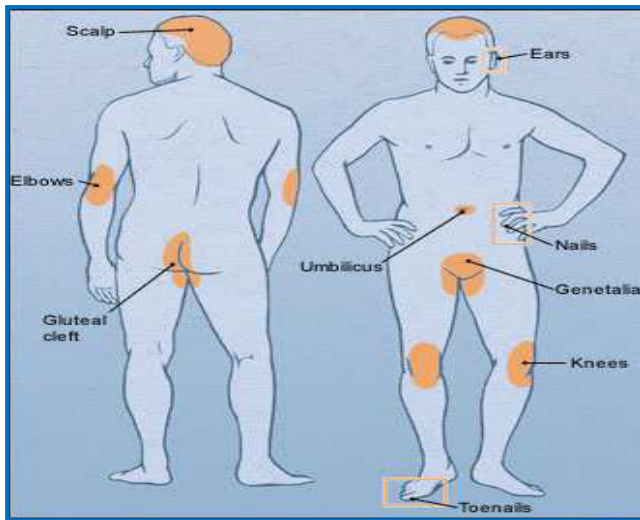


**Psoriasis**

An extremely common dermatosis of world wide distribution. Affects any age group, generally young adult of both sexes. Genetic predisposition present. Approximately three million peoples affected. It appears suddenly or gradually. Autosomal dominant inheritance with incomplete penetrance or multifactor strong association with HLA-B/B, HLA – BW17 and HLA – Cw6.

Environmental factors contribute trauma, sunlight, infection, emotional stress, climatic changes may precipitate relapse. Patients with AIDS present severe

psoriasis. In many cases, psoriasis goes away and can come back repeatedly overtime. Site of predilection:



Knees, elbows, hands, lumbosacral region the palm and sole, the scalp and nails, male genitals. Lesions often localized to the site of trauma.

Psoriasis is characterized by skin cells that multiply upto 10 times faster than normal. Normally, skin cells that are formed in the deepest layer of skin are getting mature and sloughed off the body surface and replaced by underlying cells. This cycle is approximated need 2 - 4 weeks and this process is called Keratinization, but in psoriasis, the immune system is mistakenly activated, resulting in an abnormally rapid skin cell cycle. This mean the cells move from deepest layer of skin to the surface in about 4 to 7 days. Since they migrate so quickly, they do not have time to properly mature. So immature cells are sloughs off which looks silvery, white dry scaly in nature

**Symptoms** - Pain, scaling, itching, skin patches, shivering, constitutional upset, psychosocial aspect.

## CONCLUSION

According to Acharya Sushruta there are seven types of *Twacha* and out of these seven *Twacha*. *Kitibha* occurs in fourth and fifth layer of *Twacha* i.e. *Tamra* and *Vedini*. *Kitibha Vyadhi* a type of *Kushtha* and

psoriasis a type of skin disease have most of the same symptoms which are correlated on the basis of literary, histopathological and clinical study of both Ayurveda and modern science. *Kitibha* is mostly correlated with the plaque type of psoriasis.

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