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# Cosmetic effect of *Charakokta Varnya Mahakashaya* in *Vyanga* due to Sunburn (*Erythema solare*)

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## ABSTRACT

Face the most important and beautiful organ of the body and a very few people are blessed with natural perfect skin, but this skin is often affected by certain anomaly at different ages of the life like scars, wrinkles, slack skin and hyper pigmentary skin problems. Many people living in the cities are constantly exposed to dust and pollution perceiving high speed, tension producing lifestyle yet aspiring to natural beauty. Toxins seems to be everywhere, food, air, water, with diminishing ozone layer even sunshine has become hazardous. Sunburn is the clinical manifestation of a complex inflammatory process in the skin, short UV radiation from the sunlight is the main cause. A variety of treatment modalities exist and newer once are continuously being introduced to tackle the cosmetic problem of hyper pigmentary skin problem due to sunburn. Now it is a time to highlight the Ayurveda in the world of cosmetics with its unique aspects. The adverse reaction of modern cosmetics and higher cost of therapy are also one of the causes to look towards Ayurveda for its humeral approach. There is a great demand for Ayurveda in the field of cosmetology. Acharya Charaka describes 50 group of drugs based on their pharmacological actions with each group comprising of 10 drugs under the denomination of 'Dashemani'. *Varnya Dashemani* is one of them which is said to enhance the color in the individual. So the present study 'Cosmetic effect of *Charakokta Varnya Mahakashya* in *Vyanga* due to Sunburn' has been selected to study the Cosmetological approach of Acharya Charaka in detail and whole aspect according to Ayurveda.

**Key words:** *Dashemani, Varnya Mahakashaya, Vyanga, Erythema Solare, Sun Burn.*

## INTRODUCTION

Face is the most important and beautiful organ of the body and very few people are blessed with naturally perfect skin, but this skin is often affected by certain anomaly at different ages of the life like scars, wrinkles, slack skin and hyper pigmentary skin

problems. Many people living in the cities are constantly exposed to dust and pollution pursuing high speed, tension producing life style, yet aspiring to natural beauty. Toxins seems to be everywhere, in the food we eat, water we drink, air we breath with diminishing ozone layer, even sunshine has become hazardous.

Sunburn is the clinical manifestation of complex inflammatory in the skin, most commonly encountered in fair skinned populations. Short UV radiation (UV-B, 280 - 320 nm) from sunlight is the main cause of sunburn.

The symptoms range from mild redness to painful erythema with edema and blistering. In worst cases, severe sunburn may result in systemic reactions.<sup>[1]</sup>

Healthy skin plays a major role in most persons self esteem and is a key component of the image they present to the outside world. The texture and tactile

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qualities of skin as well as its appearance plays a significant role in life.<sup>[2]</sup>

As the field of cosmetology becomes vast, Ayurveda may not remain behind in this field. There is enough description regarding maintenance of natural beauty in classical texts. Now it is the time to highlight Ayurveda in the world of cosmetics with its unique aspects and higher cost of therapy in alternative sciences, is also one of the cause to look towards Ayurveda for its humeral approach. It has been established due to its unique concept about beauty and effective, cheaper and long lasting beauty therapy without any side effect.

*Vyanga* (hyper pigmentation) is explained under the headings of *Kshudra Rogas* in the classical texts of Ayurveda which mainly affects the glowing complexion of a facial skin by producing *Neeruja* (painless), *Tanuka* (thin light brown pigmentation), *Shyava* (dark brown pigmentation), *Mukhamagataya Mandalas* (circumscribed patches over face)<sup>[3]</sup> According to modern view the *Mandalas* can be taken under the heading of pigmentation. So, *Vyanga* can be correlated with hyper pigmentation.<sup>[4]</sup>

The present study i.e. "Cosmetic effect of *Charakokta Varnya Mahakashaya* in *Vyanga* due to Sunburn (*Erythema solare*)" has been selected to study the cosmetological approach of Acharya Charaka in detail and whole aspect according to Ayurveda.<sup>[5],[6]</sup>

## OBJECTIVES OF THE STUDY

- 1 To analyze the concept of *Charakokta Mahakashaya* with special reference to *Varnya Mahakashaya*.
- 2 To evaluate the effect of *Charakokta Varnya Mahakashaya* in Sunburn.

## MATERIALS AND METHODS

**Study Design:** Randomised Comparative Clinical Study.

**Sample Size:** Total number of patients taken for the study will be 60 including dropout.

## Posology:

### Group A: *Varnya Mahakashaya Lepa*<sup>[7]</sup>

- **Ingredients:** *Chandana* (*Santalum album* Linn.), *Tunga* (*Calophyllum inophyllum*), *Padmaka* (*Prunus cerasoides*), *Ushira* (*Vetiveria zizanioides*), *Madhuka* (*Glycyrrhiza glabra*), *Manjistha* (*Rubia cordifolia* Linn.), *Sariva* (*Hemidesmus indicus*), *Payasya* (*Impomoea paniculata*), *Sita* (white variety of *Cynodon dactylon*), *Lata* (black variety of *Cynodon dactylon*) in equal quantity.
- **Dosage:** Quantity sufficient (as per area of the affected part) for application with water.
- **Thickness:** ½ Anguli
- **Duration:** 30 days
- **Follow up:** 15 days

### Group B: *Varnya Mahakashaya Pana*

- **Dosage:** 4-8 g. (*Kwatha Churna*)
- **Duration:** 30 days
- **Follow Up:** 15 days

### Group C: *Varnya Mahakashaya Lepa & Pana*

- **Dosage:** As mentioned above
- **Duration:** 30 days
- **Follow Up:** 15 days

## Source of formulation

The drugs required for the present study will be purchased from the Pharmacy of BLDEA'S AVS Ayurveda Mahavidyalaya, Vijayapur, Karnataka.

## Criteria for Assessment

The Subjective and Objective parameters of baseline data to pre and post medication will be compared for assessment of the results.

## Grading of the Assessment Criteria

### Subjective Criteria

1)	<i>Mukhamaagatya Mandala</i> (Brown Patches)	-	Score
a)	0-1 cm	-	0
b)	1-3 cm	-	1

c)	3-6 cm	-	2
d)	>6 cm	-	3
When lesions or patches are multiple, the size of the largest lesion is taken into consideration.			

2)	Kandu (Itching)	-	Score
a)	No Itching	-	0
b)	Mild Itching - Occasional itching but does not disturb routine activity	-	1
c)	Moderate Itching - Frequent itching, disturbs routine activity but does not disturb sleep	-	2
d)	Severe Itching - Frequent itching that disturbs routine activity as well as sleep	-	3

3)	Daha (Burning sensation)	-	Score
a)	No Burning sensation	-	0
b)	Mild Burning sensation - Occasional burning sensation mostly when patient undergoes to Sun exposure.	-	1
c)	Moderate Burning sensation - Frequent burning sensation which increases when patient undergoes to Sun exposure	-	2
d)	Severe Burning sensation - Continuous burning sensation with or without sun exposure.	-	3

4)	Tanukam (Tanning of the Skin)	-	Score
a)	Light Brown	-	1
b)	Brown	-	2
c)	Dark brown	-	3
d)	Black	-	4
e)	Dark black	-	5

### Objective Criteria

1. Von Luschan's skin colour chart (1-36 scale)
2. Fitzpatrick scale
3. Counting of the nevi
4. Number of the Sunburns

### OBSERVATIONS AND RESULTS

Total 60 patients were registered for clinical study. In Group A total 20 patients were registered among 17 have completed the treatment and 3 patients left the treatment against medical advice. In group B total 20 patients were registered among them 20 have completed the treatment. In group C total 20 patients were registered among them 19 have completed the treatment and 1 left the treatment against medical advice.

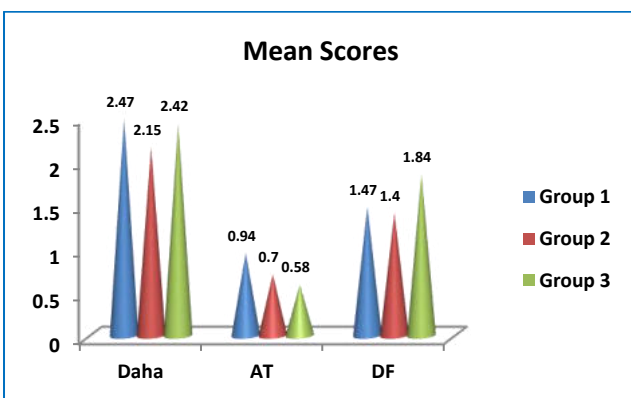
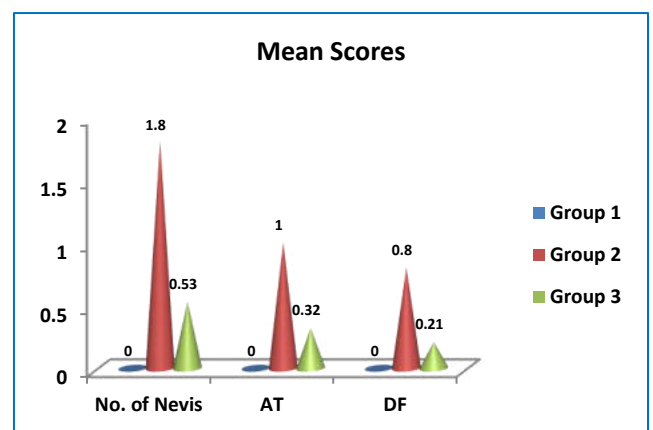
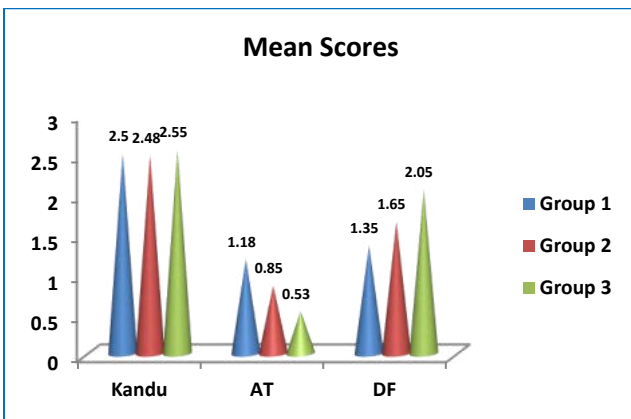
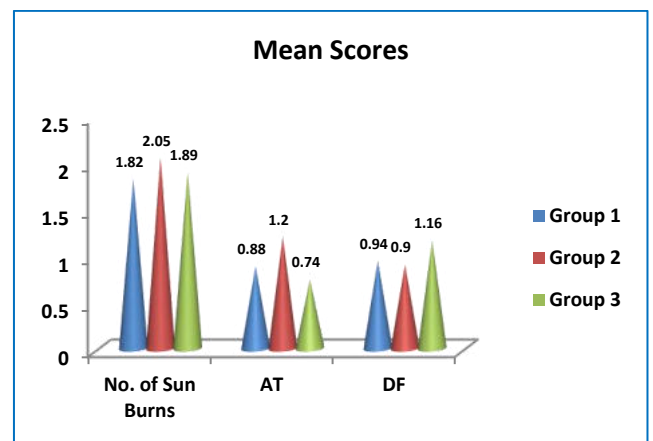
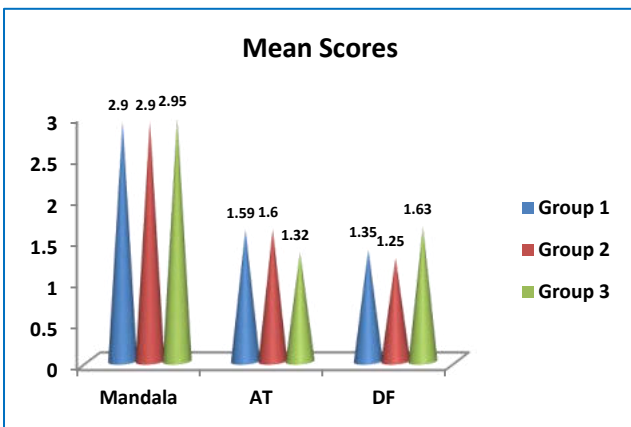
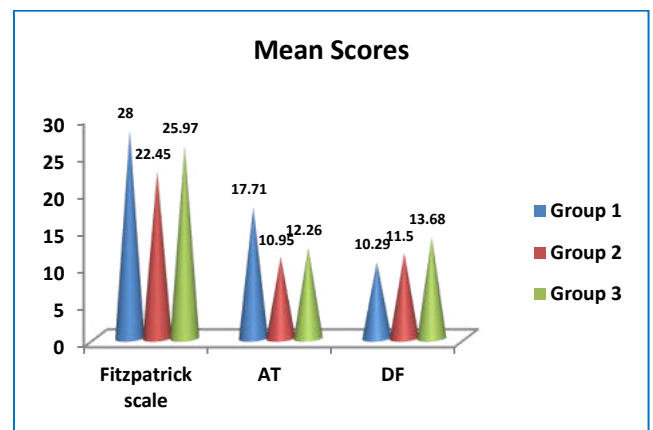
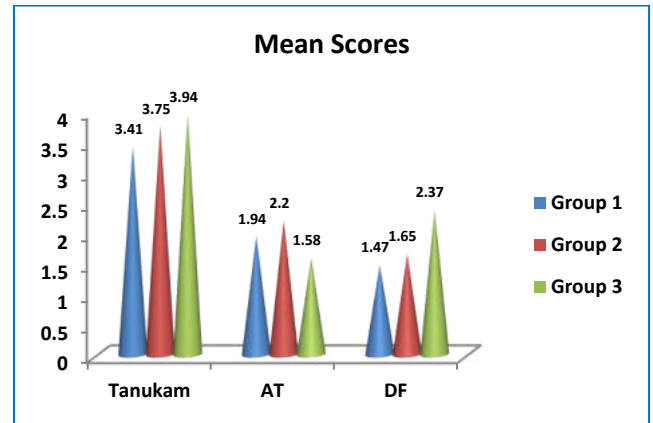
Age range varied from 15 to 55 years. Among majority (38%) patients were between 15-25 years of age group followed by (36%) patients from 26-35 years of age group and (23%) patients were between 30-55 years. Male female ratio was 1:7. Maximum number of the patients (86%) was Hindu, 85% were married, 58% were educated and 66% were from middle socio-economic class. As House wives were prominent (33%), Labours were 25%, working 16% exposure to sun are (90%). Majority (53%) patients were of Mixed diet and 56% patients had *Mandagni*. The dominance of *Madhura* and *Lavana Rasa* was seen in 36% patients. *Vata Pitta Prakruti* patients were (28%), *Pittakaphaja* (30%) and *Vatakaphaja Prakriti* (16%). Majority of them had *Madhyama Sara* (95%), *Samhanana* (93%), *Satmya* (95%) and *Satwa* (93%). 68% patients had chronicity of the lesion between 5-6 month while 25% had chronicity of 1-4 month. Most of the patients (60%) were having sudden onset of the disease. In Majority patients (90%) lesions were aggravated by sun exposure. The commonly used Cosmetics were Fair and lovely cream. Hyper Pigmentation (*Vaivarnya*) *Kandu* and *Daha* was present in all the patients. In 53% patients Cheek was the major site of the involvement. The size of the lesion was found between 3-6 cm in majority (46%) of the patients, 27% patients had Oily skin while 63%

patients had Dry skin. The colour of the lesion was Brown in maximum number (28%) of the patients. Dark Brown were (23%) of the patients.

**Classification according to Site of Lesion**

The disease Vyanga was found to occur on cheek in maximum number (53%) of the patients. Involvement of forehead was found in (21%) patients. Next to it nose was involved in (1%). Periorbital area was found affected in (11%). The area above eyebrow and upper lips were affected in 5% and 6% patients respectively

**Comparative results of improvement in signs and symptoms of three groups**



In Group C we get maximum difference comparative to Group A and Group B

### OVERALL EFFECT OF THERAPY

11 patients from Group C were markedly improved, 6 patients had moderately improved and 2 patients had mild improvement. So compare to A and B group results are maximum in this group. In Group B also 10 patients had moderate improvement, 7 patients had markedly improvement and 3 had mild improvement. And in Group A markedly improvement only in 1 patient, 7 patients had moderate improvement and 9 patients had mild improvement.

### DISCUSSION

Discussion is of supreme important part where the scholar should have to try and throw light on such type of facts and break the silence of science following and fulfilling the same requirement, here also an attempt has been made to critically discuss and interpret the whole study

The present study “cosmetic effect of Charakokta Varnya Mahakashaya in Vyanga due to Sun burn”

Acharya Sushruta was the first person who has given detail description of the disease Vyanga. All the classical scholar have mentioned that Vyanga is caused due to Vata, Pitta, Kapha and Rakta only Maharshi Sushruta has explained specific Nidan like, Krodha, Shoka, Aayas, Shrama, all factors like Vataprakopaka, Pittaprakopaka and Raktodustikar Nidana all the causative factor for the disease Vyanga.<sup>[8]</sup>

Face is the most important and beautiful organ of the body and very few people are blessed in with natural and perfect skin, but this skin often affected by certain anomaly at different ages of the life like, scars, wrinkles, slack skin and hyper pigmentary skin problems.

As the field of cosmetology becomes vast, Ayurveda may not remain behind in this field. There is enough description regarding maintenance of natural beauty in classical texts. Now it is time to highlight., Ayurveda in the world of cosmetics with its unique aspects and

higher cost of therapy in alternative science is also one of the cause to look towards Ayurveda for its humeral approach. Vyanga Laxanas are Mandala, Shyava, Tanutwa and the colour of the disease Vyanga is different opinion from one Acharya to another.

Dosha involvement according to Charaka is Pittapradhana where as according to other Acharyas Sushruta, Bhavaprakash, Sharangdhar says that Dwandvaja i.e. Vata and Pitta. According to Vaghbhatta Vata, Pitta and Kapha Doshaja Vyanga separately. According to Sushruta, and Vaghbhatta, Vyanga Adhistana is 2<sup>nd</sup> layer of Twacha (Lohita). But Charaka has not mentioned the Adhistana and he considered it as a variety of Kushta.<sup>[9]</sup>

Ayurveda gives equal importance to beauty as well as health cosmetology as special branch for todays beauty problems and for increased demand of beautification. Ayurveda Acharyas describe beauty techniques such as Dinacharya, Ritucharya, Rasayana. Ayurveda gives equal importance to beauty as well as health. Cosmetology emerged as a special branch for todays beauty problems and for increased demand of beautification.

Ayurveda Acharyas described Dinacharya, Ritucharya, Rasayana for natural beautification. Acharya Sushruta is the first person established surgery in cosmetology like Rhinoplasty and Auroplasty, etc. In modern cosmetology various minor, major and advanced procedures are available.

### Mode of action of Varnya Mahakashaya Dravyas

In Varnya Mahakashaya Dravyas all drugs are Sheeta Veerya except Manjishta.

Chandana, Padmaka, Usheera and Sariva are Tikta Rasa Pradhana by which Pitta Dosha gets subsided Madhuka, Sariva, Payasya are having Guru and Snigdha Guna predominancy and hence nullify the Vata Dosha.<sup>[10]</sup>

It was observed that the relief in Group B and Group C was statistically nearer to significant. The size of the lesion reduced maximum in Group C where as Group B was at second place and Group A at third place.

Regarding the colour of the lesion, best improvement was noted in Group C and Group B. Thus looking to the severity, chronicity and extent of the lesion, it can be said that Group C where local *Lepa* and *Kashaya* internal use of the medicine was done provided the better relief in comparison to other two groups.

## CONCLUSION

On the basis of above detail study of "Cosmetic effect of *Charakokta Varnya Mahakashaya* in *Vyanga* due to Sun Burn" *Pitta Dosha* is found to be predominant in all the patients taken for study. *Varnya Mahakashaya Dravya* are *Pittahara* and *Vatahara*. The drugs of *Varnya Mahakashaya Gana* are found to be having properties like *Varnya*, *Daha Shamaka* and *Kanduhara*. Definite results on all the symptoms is found in Group C (*Kashaya* and *Lepa* group) then group B and group A. No adverse drug reaction were noted. Based on results of the study it can be used in cases of *Vyanga*.

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