

**A RETROSPECTIVE SURVEY STUDY OF NEWLY DIAGNOSED KUSHTHA RUGNA
WITH SPECIAL REFERENCE TO POORVARUPA ACCORDING TO MADHAV NIDAN**Anand V. Kalaskar^{1*}, Radha S. Khadakkar², Ruchira S. Virkar³ and Ankeeta P. Dahiwal⁴¹Assoc. Professor M.D. Kayachikitsa- Vikritivigyan (BHU) SSAM Hadapsar, Pune.²P.G. Scholar Rognidan, SSAM Hadapsar, Pune, Maharashtra, India.³P.G. Rognidan, SSAM Hadapsar, Pune, Maharashtra, India.⁴P.G. Scholar Rognidan, SSAM Hadapsar, Pune, Maharashtra, India.

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ABSTRACT

Kushtha is one of the major skin diseases. Vitiated *doshas* in the body produces discolouration of the skin and it is known as *Kushtha*.^[1] Practically, *Kushtha* is considered as leprosy. However according to *ayurved*, all skin diseases are considered as *Kushtha*. *Kushtha* is always *tridoshaj* in origin and a dominance of a particular *dosha* leads to a specific symptom complex. It is produced by the vitiation of the seven factors like, three *doshas* and four *dushyas*.^[2] Many a times, some specific signs and symptoms are seen in patients, before commencement of disease which gives some idea about future disease. Primary signs and symptoms which are not fully established and are suggestive of future disease are called as *Poorvarupas*.^[3] This study had been taken to find *Poorvarupas* of *Kushtha*, if any. Knowledge of *nidan* is thus useful to provide proper guidance for treatment as well as in prevention of disease. So, the study is to evaluate *Poorvarupas* of newly diagnosed *Kushtha rugna*.

KEYWORDS: *Kushtha*, *Kshudrakushtha*, *Mahakushtha*, *Poorvarupa*.**INTRODUCTION**

Kushtha is one of the major skin diseases. Vitiated *doshas* in the body produces discolouration of the skin and it is known as *Kushtha*. Practically, *Kushtha* is considered as leprosy. However according to *ayurved*, all skin diseases are considered as *Kushtha*. *Kushtha* is a chronic skin disease. According to *charakacharya*, it is the disease of *bahya rogmarga*.^[4] Mainly *Kushtha* is divided into two types *MahaKushtha* and *KshudraKushtha*, *Mahakushtha* is further subdivided in seven types and *kshudraKushtha* in eleven types.^[5] *MahaKushtha* is having more severity than that of *kshudraKushtha*. Many a times, some specific signs and symptoms are seen in patients, before commencement of disease which gives some idea about future disease. Primary signs and symptoms which are not fully established and are suggestive of future disease are called as *Poorvarupas*. When these symptoms are completely developed they are termed as *Rupas* of that disease. There are two types of *Poorvarupas* *Samanya* and *Vishesh poorvarupas*.^[6] Prevalence of skin diseases is about 10-12% in India.^[7] Knowledge of *nidan* is thus useful to provide proper guidance for treatment as well as in prevention of disease.

In this study after analyzing the data collected from the patients of newly diagnosed *Kushtha* it was observed that

around 88 percent of total *Granthokta Poorvarupas* of *Kushtha* were actually seen in the patients and 12 percent were not seen. Thus the study emphasizes the importance of *Poorvarupas* as one of the important aspect to be studied while studying.

AIMS AND OBJECTIVE

To find *Poorvarupas* of *Kushtha* which are mentioned in *Madhav nidan* in the patients of *Kushtha*.

Nirukti of kushta

कुष निष्कर्षे + हनि कृषि = कुष्ठः (शब्द कल्पद्रुम)^[8]

Kthan pratyaya is said for its firmness or certainty. Thus the word *Kushtha* means that which destroys with certainty & also which comes out from the inner part to the outer part.

Kushtha

त्वचः कुर्वन्ति वैवर्ण्यं दृष्टाः कुष्ठमुशन्ति तत । अ.ह.नि.१४/४.

When the vitiating *doshas* provoke the four *dushyaja* and if this derangement of the seven *dravyas* is not cared to, a disease is formed inside the body which manifests itself on the skin and makes it '*kutsit* or contemptible. The whole body becomes despised; therefore it is called "*Kushtham*".

Poorvarupa^[9]

The complaints which appear before real manifestation of the disease are known as '*poorvarupa*'.

Skin^[10]

Skin is the soft outer covering of vertebrates. In humans skin is the largest organ of the integumentary system, Skin which is so called integument (Latin covering) is a protective covering of the body. The adjective cutaneous literally means "of the skin" (Latin-cutis means skin), Human skin is similar to that of most other mammals, except that it is not protected by a fur. Because of its visibility, skin reflects our emotions and some aspects of normal physiology of all the body's organs, none is more easily inspected or more exposed to infection, disease and injury than the skin.

Leprosy^[11]

Leprosy or Hansen's disease (after discovery of the causative organism by Hansen in 1874) is a chronic granulomatous disease affecting skin and nerves, caused by *Mycobacterium leprae*, a slow-growing mycobacterium which cannot be cultured in vitro. A chronic infectious disease with a predilection for cooler, superficial regions of the body, namely skin, mucous membrane, and peripheral nerves, other organs such as the liver, spleen, bone marrow and regional lymph nodes are also involved.

MATERIALS AND METHOD**A) Materials Study setting**

Study was conducted in two phases:

a) Literary study

Reference of Poorvarupas were studied from samhitas. *Kushtha* was also studied from samhitas. Literatures regarding leprosy, psoriasis and eczema were studied from modern texts, scientific journals, research papers and internet. Questionnaire was prepared for patient's assessment.

b) Observational study

Patients having *Kushtha* were asked for Poorvarupas of *Kushtha* with the help questionnaire. With the help of CRF and questionnaire Assessment of Poorvarupas were done

Data were collected from designed questionnaire. Study type

Retrospective Cross-sectional

Study population:- *Kushtha rugna*. Duration of study: 1 year

Place of work: OPD and IPD of attached authorized institute. Sample Size and Sampling method

Sampling method: Purposive method Sample size: 61

Study design

- 61 diagnosed patients of *Kushtha* were selected by purposive method of sampling technique.
- Valid written informed consent was taken from each patient prior to case taking.
- Detailed case of patients was taken with the help of a specially designed CRF (Case Record Form) and

validated questionnaire.

- Poorvarupas* of *Kushtha* were studied in these patients.
- Observations were made and analysis of result was done.
- Conclusion was drawn on the basis of observations and results.

Inclusion criteria

- Newly diagnosed cases of *Kushtha*
- Age group 18-80 years
- Gender- Both male and female irrespective of religion, occupation and socio economic status

Exclusion Criteria:

- Patients of known diseases like HIV, skin tuberculosis and skin cancer
- Patients of *sheetapitta*, *udarda*, *kotha*, *utkotha*, *visarpa*, *yuvan Pidaka* and *Shvitra*
- Pregnancy

Nidan

One of the fundamental principles of *ayurveda* is the *karya karan Siddhanta*. The *karya* - the production of the disease is not possible without the *nidan* or *hetu*.

Etiological factors of *kushtha*

- Aaharaja hetu*
- Viharaja hetu*
- Aacharaja hetu*
- Others *nidan*

In *ayurvedic* classics, classification of *Kushtha* has been carried out with different views.

- Broadly *Kushtha* has been classified into two groups^[12]:

- MahaKushtha*
- KshudraKushtha*

Charaka clarifies that due to various forms of *doshadushya sammurchana* of *tridosha*, *Kushtha* can be classified into 7 types, 18 types and in fact of innumerable types.

Types of *mahakushtha*

Kapal, *Udumbar*, *Mandala*, *Rishyajivha*, *Pundarika*, *Sidhma*, *Kakanaka*, *Dadru*, *Aruna*.

Types of *kshrudrakusththa*

EkaKushtha, *Charma Kushtha*, *Kitibha*, *Vipadika*, *Alasaka*, *Charmadala*, *Dadru*, *Pama*, *Visphota*, *Shataru*, *Vicharchika*, *Sidhma*, *Sthularushka*, *MahaKushtha*, *Visarpa*, *Parisarpa*, *Ruksha*, *ShvitraVishaja*
Poorvarupa of *Kushtha*: *Aswedanam*, *Atiswedanam*, *Parushyam*, *Atishlakshnata*, *Vaivarnyam*, *Kandu*, *Nistoda*, *Suptata*, *Parihaha*, *Shvayathu*, *Kothonnati*, *Shrama*, *Klama*, *Visrpagamanam*, *Kayach hidreshu*, *Upadehana*, *Pakva dagdha*, *Dashta bhanga kshata*, *upaskhalitesu*, *atimatram*, *vedana*, *Svalpam api*, *Vrananam*, *Dushti*, *Svalpam api*, *Vrananam*, *asamrohananm*.

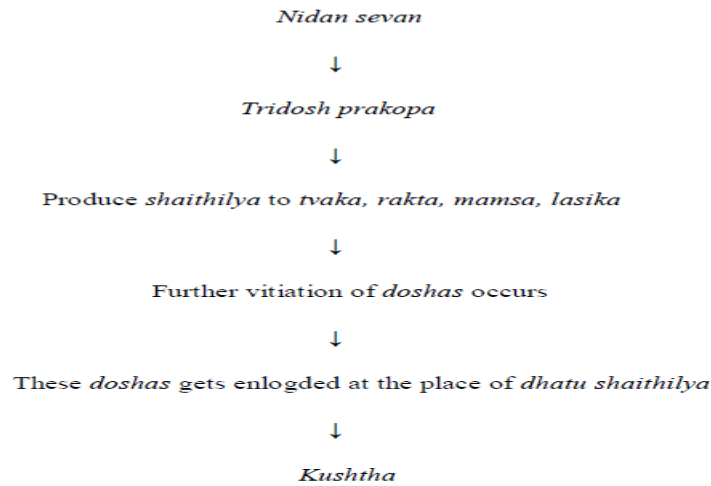
Samprapti of kushtha

Samprapti according to Charaka :^[13]

जय दोषाः युगपत् प्रकोपमापद्यन्ते, त्वगाद्यक्षत्वारः शैथिल्यमापद्यन्तेः तेषु शिथिलेषु दोषाः प्रकुपिताः स्थानमधिगम्य सन्तिष्ठमानास्तानेव त्वगादीन् दूषयन्तः कुष्ठान्यभिनिवर्तयन्ति ॥ च.नि.५६)

Because of the various causative factors all the 3 doshas are simultaneously provoked, which in turn involve the four body elements like *tvaka*, *rakta*, *mamsa* and *lasika*. The 4 *dushyas* become morbid and lose their character.

These provoked *doshas* settling themselves in these vitiated body elements and getting localized there, further vitiate themselves to produce *Kushtha*.

**Samprapti ghatak**

Dosha: All *Kushthas* are *tridoshaja*.

Dushya: Four *dushyas* (*Tvaka*, *Rakta*, *Mamsa* and *Lasika*).

Srotas: *Raktavaha*, and *svedavaha srotas*.

Vyadhimarga: *Bahya*

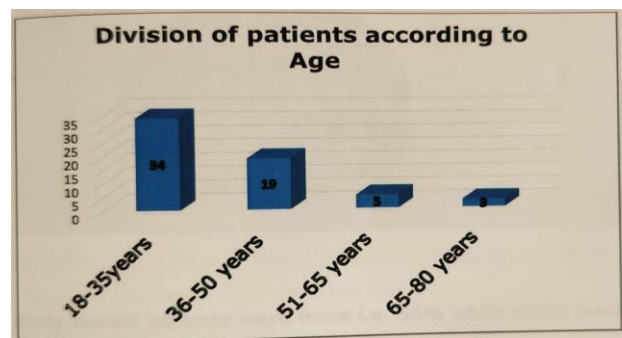
Vyaktisthan: *Tiryaga sira*

Adhishthan: *Tvacha*

Svabhava: *Cheerkari*

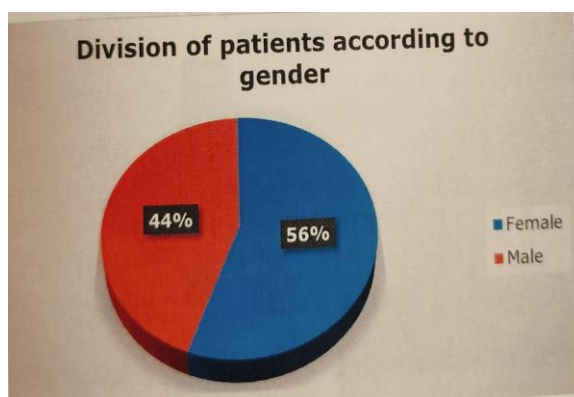
RESULT**Division of patients according to Age**

Sr. No	Age group	NO. of patients	Percentage
1	18-35 years	34	56%
2	36-50 years	19	31%
3	51-65 years	5	8%
4	65-80 years	3	5%
5	Total	61	100%

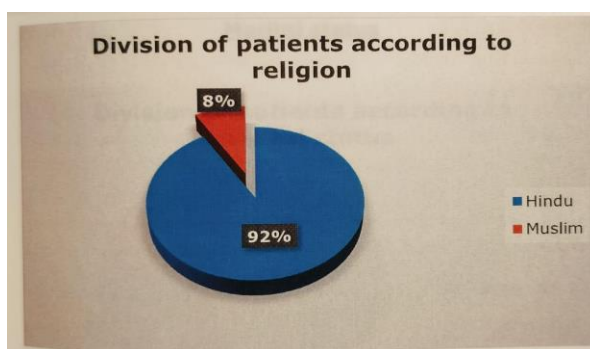


Division of patients according to Gender

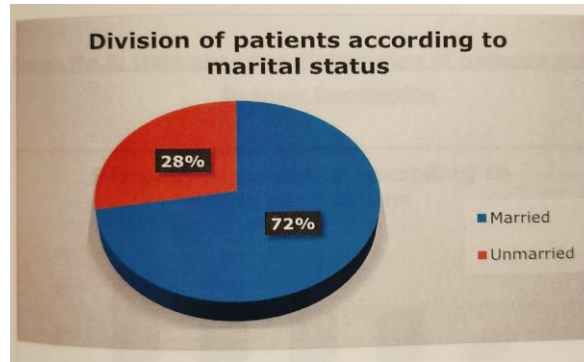
Sr. No	Gender	NO. of patients	Percentage
1	Male	27	44%
2	Female	34	56%
3	Total	61	100%

**Division of patients according to Religion**

Sr.No	Religion	No of patients	Percentage
1	Hindu	56	92%
2	Muslim	5	8%
3	Total	61	100%

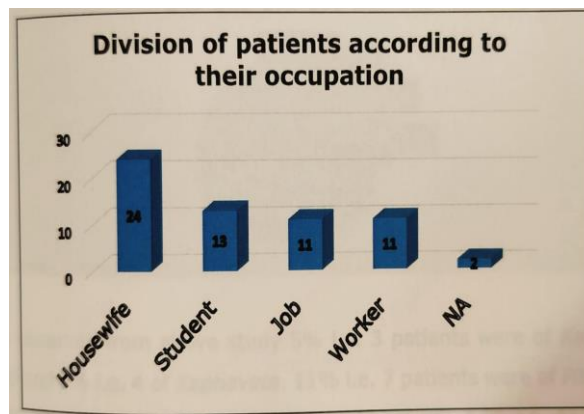
**Division of patients according to Marital status**

Sr.No	Marital status	No of patients	Percentage
1	Married	44	72%
2	Unmarried	17	28%
3	Total	61	100%



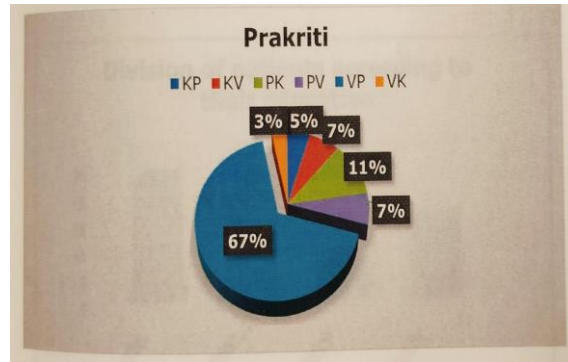
Division of patients according to their occupation

Sr. No	Occupation	No. of patients	Percentage
1	Housewife	24	40%
2	Student	13	20%
3	Job	11	18%
4	worker	11	18%
5	NA	2	4%
6	Total	61	100%



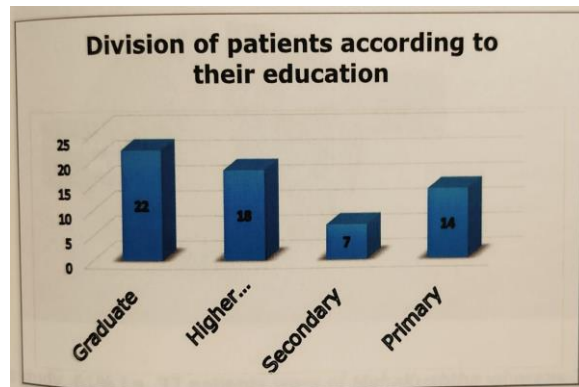
Division of patients according to Prakriti

Sr. No	Prakriti	No. of patients	Percentage
1	Kapha-Pitta	3	5%
2	Kapha-Vata	4	7%
3	Pitta- Kapha	7	11%
4	Pitta-Vata	4	7%
5	Vata-pitta	41	67%
6	Vata- Kapha	2	3%
7	Total	61	100%



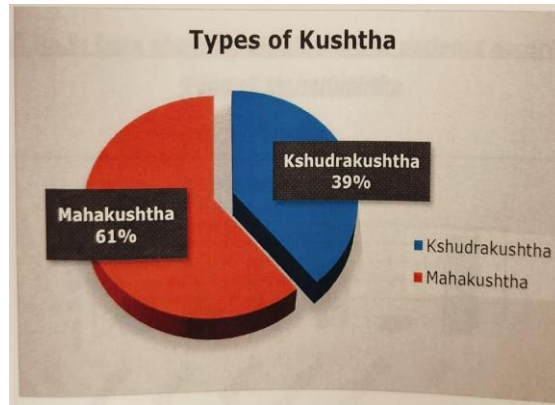
Division of patients according to Education

Sr. No	Education	No. of patients	Percentage
1	Graduate	22	36%
2	Higher secondary	18	30%
3	Secondary	14	23%
4	Primary	7	12%
5	Illiterate	0	0%
6	Total	61	100%



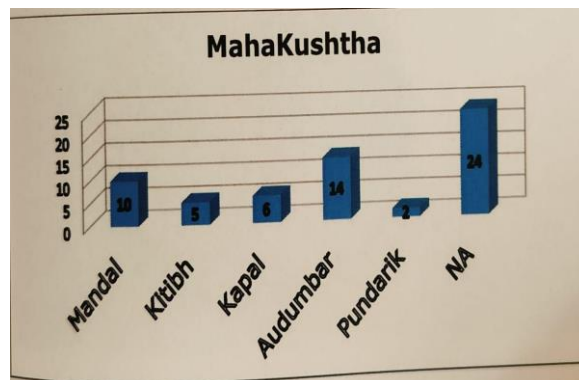
Division of patients according to Type of Kushtha

Sr. No	Type of Kushtha	No. of patients	Percentage
1	MahaKushtha	37	61%
2	KshudraKushtha	24	39%
3	Total	61	100%



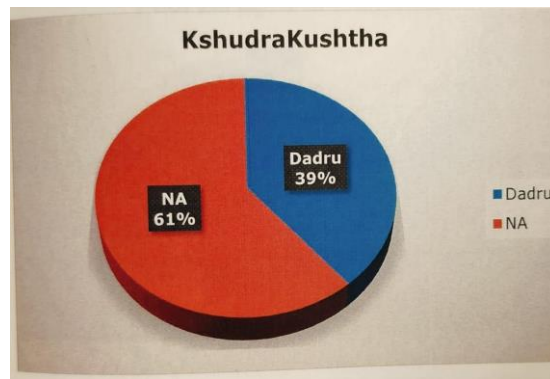
Division of patients according to Type of Mahakushtha

Sr. No	Type of MahaKushtha	No. of patients	Percentage
1	Mandal	10	16%
2	Kitibh	5	8%
3	Kapal	6	11%
4	Audumbar	14	23%
5	Pundarik	2	3%
6	NA	24	39%
7	Total	61	100%



Division of patients according to Type of Kshudrakushtha

Sr. No	Type of KshudraKushtha	No. of patients	Percentage
1	Dadru	24	39%
2	NA	37	61%
3	Total	61	100%



Division of patients according to *Poorvarupas* of *Kushtha*

Sr. No	<i>Poorvarupas</i> of <i>Kushtha</i>	No. of patients	Percentage
1	Present	56	92%
2	Absent	5	8%
3	Total	61	100%



DISCUSSION

Age: It was observed from present study maximum number of patients i.e. 56% belonged to age group between 18 to 35 years, whereas 31% patients belonged to age group between 36 to 50 years and 8% patients belonged to age group 51 to 65 years and 5% patients belonged to age group 66 to 80 years. Though *Kushtha* is a disease that manifests in all groups, but in this study its peak manifestation occurs during 18 to 35 years age.

Gender: In this study 56% patients were females and 44% patients were males. This may be due to smaller sample size.

Religion: From this study it is observed that maximum 92% patients were Hindus and 8% patients were Muslims. No patients were found from other religion. This may be due to dominance of the Hindus in region. This may reflect demographic pattern of religion and due to small sample size, we cannot say that Hindus are more

prone towards *Kushtha*.

Marital status: In this study 72% patients were married and 28% patients were unmarried. But it cannot be said that married person are more prone to this disease. Exact conclusion cannot be drawn from this data due to small sample size.

Occupation: In this study it is observed that maximum numbers of patients were housewives i.e. 40%, 20% were students, 18% were doing job and 18% patients were workers and 4% patients were not having any occupation. So, it can be said that people from various occupations may be affected from *Kushtha*. Ignorance to healthy life style was the common factor amongst them.

Prakriti: In this study it is observed that, 5% patients were of *Kaphapitta prakriti* and 7% of *Kaphavata*. 11% patients were of *Pittakapha prakriti*, 7% patients were of *Pittavata prakriti*, 67% patients were of *Vatapitta*

prakriti. 3% patients were of *Vatakapha prakriti*. This shows that maximum numbers of patients belongs to *Vatapitta prakriti*.

Education: In this study, 36% patients were graduated, 30% were having higher secondary education, 23% were having secondary education, 12% were having primary education and no patients were illiterate. So most of the patients were educated.

Type of *kushtha*: In this study maximum number of patients i.e. 61% patients were of *MahaKushtha* whereas 39% were of *KshudraKushtha*.

Type of *maha kushtha*: In this study, 16% patients were of *Mandal* type of *Mahakushtha*, 8% were of *Kitibh* type of *Mahakushtha*. 11% were of *Kapal* type of *Mahakushtha*, whereas 23% were of *Audumbar* type of *Mahakushtha*. 3% were of *Pundarik Kushtha* and 39% were not having any type of *Mahakushtha*. It is observed from above study that maximum type of *Mahakushtha* was *Audumbar Kushtha*.

Type of *Kshudra Kushtha*: In this study, 39% patients were having *Dadru* type of *Kshudrakushtha*.

Poorvarupas of *Kushtha*: In this study maximum 56 i.e. 92% patients were having *Poorvarupas* of *Kushtha* and 8% i.e. 5 patients didn't have *Poorvarupas* of *Kushtha*.

CONCLUSION

- On the basis of review of literature and observations made by this study, which was conducted on purposively selected 61 newly diagnosed patients of *Kushtha*, the following conclusion can be drawn.
- Majority of patients were middle aged, female having *Vatapitta pradhan prakriti*.
- The present study helps us to understand the *Poorvarupas* of *Kushtha* mentioned in *Madhav nidan*.
- It can be concluded that out of 61 selected patients, maximum patients were having *Poorvarupas* of *Kushtha*.
- Out of 17 *Poorvarupas* of *Kushtha* mentioned in *Madhav nidan*, 15 were seen those 61 patients. These are namely *Kharsparsha*, *Atisweda*, *Asweda*, *Vivarnata*, *Daha*, *Kandu*, *Swapa*, *Kothonnati*, *Bhrama*, *Vrananamadhik shoola*, *Sheeghrotipatti chirsthiti*, *Rudhanam rukshatva*, *Nimittealpe atikopanam*, *Romaharsha*, *Asruj karshnya*, *Toda*.
- Thus the aim for present study for dissertation "TO FIND POORVARUPAS OF KUSHTHA WHICH ARE MENTIONED IN MADHAV NIDAN IN THE PATIENTS OF KUSHTHA" stands validated with above specific observations.

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