



A Review Article on *Dadru* w.s.r. to Fungal Infection

Poonam Verma¹ , Ravi Sharma²

1-PG Scholar, PG Department Of Kayachikitsa MMMGAC, Udaipur,

2-Prof. & HOD, PG Department Of Kayachikitsa MMMGAC, Udaipur

Article Info

Article history:

Received on: 17-02- 2022

Accepted on: 14-03-2022

Available online: 31-03-2022

Corresponding author-

Poonam Verma, PG Scholar, PG Department Of Kayachikitsa MMMGAC, Udaipur,

[Email:](mailto:drpoonamhiteshverma09@gmail.Com)

drpoonamhiteshverma09@gmail.Com.

ABSTRACT:

Skin is the outermost covering of the body and largest organ of body, with a total area of about 20 square feet, which protects us from microbes and the elements, helps regulate body temperature and permits the sensation of touch, heat and cold. There are many skin disease in present time but *Dadru* (Fungal infection) is one of the common skin disease mentioned in Ayurveda. *Dadru* can correlate with tinea also known as Fungal skin infection in modern medicine system. Excessive severe itching and round red patches are the common clinical manifestation. 10-20% KOH and fungal culture are the specific tools for diagnosis of fungal infection. In *Ayurvedic classics Virechana* (Purgation) *Raktamokshna* (Bloodletting) and *Shamana chikitsa* (Pacification therapy) will be help to cure *Dadru* (Fungal infection). Here we will discuss about *Nidana* (causative factors), *Samprapti* (etiopathogenesis), *Lakshan* (clinical features), *Chikitsa* (treatment), *Pathya-Apathya* and preventive methods of *Dadru kushtha* (Fungal infection).

Key words-Skin, *kshudra kushtha*, *dadru*, *bahiparimarjan antahparimarjan*

INTRODUCTION

The skin is body's largest organ made of water, protein, fats and minerals.¹ Skin works as a mirror who reflects internal and external pathology and thus helps in diagnosis of disease. In *Ayurveda*. According to acharya *sushruta* there are seven layers of skin in which fourth and fifth layer of skin is responsible for *kushtha*. Where acharya *charaka* describe only about six layers of skin in which forth layer is responsible for *dadru*². All skin disease in ayurveda classified under *kushtha* and further *kushtha* has been divided into two categories-*mahakushtha* and *kshudrakushtha*. There are about 2000 skin disorders. Depending upon aetiology, they can be classified into various groups such as, genetic, infectious, allergic,

autoimmune, traumatic, developmental, occupational, climatic etc. In recent years, there has been a considerable increase in the incidence of skin problems. *Dadru* is described under the division *kshudra kushtha*³. In *dadru* responsible *doshas* for etiopathogenesis are *pitta and kapha dosha*.⁴ In *dadru* is a disease which is characterized by *sakandu* (itching in the site of lesion), *raga* (redness over the skin), *pidaka* (papule over lesion), *mandalmudgata* (circular patches with elevated edge on skin).⁵ It is the type of *kushtha* which has capacity to invade the deeper *dhatu* very quickly. Therefore *Acharya Sushruta* has described it under the heading of *Mahakushtha*.⁶ If it is neglected then the chance of recurrence and prognosis may be poor. Dermatophytosis



or Ringworm is a very common dermatological issue throughout the world. More than 10 million cases per year in India. The ringworm is also a disease, where many exaggerated persons may not inquire about medical awareness, particularly in rustic areas of underdeveloped and developing countries.

Dadru in modern medicine

A general view of dermatophytosis is presented here:

A highly contagious fungal infection of the skin or scalp. Ringworm is spread by skin to skin contact or by touching an infected animal or object. It is typically scaly and may be red and itchy.

- These are filamentous fungi that infect only superficial keratinized tissues.
- Causative agents of ringworm is *Tinea* or Dermatophytoses.⁷
- Never involves living tissues.

Nidana- Table no. 1: Nidanas of dadru

Samprapti-

Due to indulgent in various causative factors, *tridosha prakopa* occurs in the body, which results in the destruction of digestive fire thereby forming *amavisha* accumulation in the body. This *amavisha* affects the *rasavaha, raktavaha* and *swedavaha srotases* and cause *twak Rakta dusti* which finally results in the formation of *dadru*. (Flow Chart 1)

Samprapti ghatakas

Doshas- Tridosha (kapha pitta pradhana)

Dushya- Twak, Rakta, Lasika, Sweda

Srotas- Rasa, Rakta

Adhishthana- Twacha

Rogmarga- Bahya

Clinical features:

- Local inflammation is due to irritation by fungal products and hypersensitivity reaction.
- Transmission through brushes, combs and towels in infected to uninfected person.

Dermatophytoses comes under fungal infections category. These are keratinophilic Fungi, living on the superficial dead keratin. This is why they infect the most superficial layer of epidermis that is stratum corneum.⁸ They do not penetrate living tissues.

Dermat/ophytes classified into 3 genera: Table 2

- i. Trichophyton: Skin, hair, nails
- ii. Microsporam: Skin, hairs
- iii. Epidermophyton: Skin, nails

The fungal disease of the skin can be divided into:

Superficial Mycoses: Dermatophytoses come under superficial fungal infections of the skin. These infections are restricted to invasion of horny structures like the stratum corneum, the nails & the hair.

Deep mycoses: Deep mycoses are much more common in immune-compromised patients including those with AIDS transplant patients, on corticosteroids, or immunosuppressive agents & those with congenital immune deficiencies, are widespread systemic infections which only occasionally involve the skin.⁹

Ayurvedic Concept Of *Dadrुकushta*- Table no 3 shows Characteristics of *Dadru* according different acharyas

Chikitsa-

The ayurvedic formulations of *bahiparimarjana* in the form of *lepas* and *shaman aushadhis* should be taken which can acts as *sthanika chikitsa* externally and internally do *Rakta shuddhi* so that disease should be cured from root. These ayurvedic formulations having the property to totally cure this *dadru kushtha* and the chances of reoccurrence are also very less due to the properties of the various drugs that are included in this.

1. ***Nidana Parivarjan:*** To avoid the triggering factors i.e. food habit, lifestyle, poor hygiene etc. that can lead to this infection so that the manifestation of disease can be controlled. Before administration of any disease should follow *Koshtha shuddhi & Agni deepana*. So that the assimilation of the drugs properly take place and for efficacy of treatment protocol.
2. ***Shodhana chikitsa (Purification therapy) Table no. 4***
3. ***Shaman chikitsa (Pacification therapy)***

Antaha parimarjan- Table no. 5 shows some important orally taken medicine for *dadru kushtha*

Bahi parimarjan- Table no. 6 shows medicine which can be apply locally in *Dadru kushtha*

Rasayana- Table no. 7

Some skin conditions requires *Shodhana*, some needs only *Shamana*, some requires repeated *Shodhana*, *Raktamokshana* etc.

Pathya Apathya- Table no. 8 shows some pathya apathya for Dadru kushtha

Precautions

1. Avoid sharing clothing, sports equipment, towel or sheets.
2. Wash clothes in hot water with fungicidal soap after suspected exposure to ringworm.

3. Avoid walking bare foot. Instead wear appropriate protective shoes in locker rooms and sandals at the beach.
4. Avoid touching pets with bald spots, as they are often carries of the fungus.
5. Washing bedding and clothes daily during an infection to help disinfect your surroundings.
6. Drying areas thoroughly after bathing.
7. Wearing loose and light clothing at affected areas.
8. Treating all infected areas to avoid spreading to other parts of body.

DISCUSSION

The basic principles of *hetu* of *Dadru* have been mentioned in *Brihatrayi* and *Laghutrayi* in the *Kushtha nidana*. Most of the *apathya ahara vihara* mentioned in *ayurveda* for causes of *kushtha*. All we know that **Prevention Is Better Than Cure**. So some preventive methods should also be known to patients to avoid contamination. So, to prevent the resistance rate have to take step ahead so that these type of disease could be cured without any side effects. Patient should follow proper precautions so that rate of occurrence can be reduced. There is difference of opinion amongst various *acharyas* regarding *dadru* in the terms of *doshik* involvement.

CONCLUSION

Skin is the outermost covering of the body serves as an important component in terms of protective as well as cosmetic purpose. Therefore it is essential to treat the skin disease in time for better prognosis. As per the need of today's lifestyle and also due to the increase in the resistance of the human body *ayurveda* has to be taken in the limelight for such types of resistance behavior which is going to harm the humans in future. Thus, the ayurvedic formulations of *bahiparimarjana* in the form of *lepas* and *shaman aushadhis* should be taken to improve *Rakta dushti*. These ayurvedic formulations having the property of completely curing this *dadru kushtha* with no or less chances of recurrence due to the properties of the various drugs. *Ayurveda* can definitely prove to be a boon in the proper and effective management of this kind of skin condition in today's time.

Acknowledgements:- Nil

Conflict of Interest – None

Source of Finance & Support - Nil

REFERENCES

1. Gorden C Monsoons tropical disease- edited by Gorden c. cook & alimuddinsumala, Saunderson Elsevier science, London edition.2007
2. Acharya YT Charak samhita, Vidhyotini tika, Sharira sthana, Chapter no. 7, Shloka no. 4, Choukambha Orientalis Delhi 2009.pp. 910
3. Shastri AD Sushrut samhita, Ayurvedatva sandeepika, Nidana sthana, chapter no. 5, Shloka no. 5, Choukambha Orientalis Delhi 2007. pp. 320
4. Acharya YT Charak samhita, Vidhyotini tika, Chikitsa sthana, Chapter no. 7, Shloka no.30, Choukambha Orientalis Delhi 2009.pp. 253
5. Acharya YT Charak samhita, Vidhyotini tika, Chikitsa sthana, Chapter no. 7, Shloka no. 23, Choukambha Orientalis Delhi 2009.pp. 252
6. Shastri AD Sushrut samhita, Ayurvedatva sandeepika, Nidana sthana, chapter no. 5, Shloka no. 5, Choukambha Orientalis Delhi 2007. pp. 320
7. Singh SP, Self assessment and Review Microbiology and Immunology, 8th edition, Jaypee Publication, New delhi.2008
8. Gorden C Monsoons tropical disease- edited by Gorden c. cook & alimuddinsumala, Saunderson Elsevier science, London edition.2007
9. A. Paul Kelly AP, Dermatology for skin colour, Chapter 2 Elsevier science, London edition.2006
10. Acharya YT Charak samhita, vidhyotini tika, chikitsa sthana, chapter no 7, shloka no. 23, Choukambha Orientalis Delhi 2009.pp.252
11. Shastri AD Sushrut samhita, Ayurvedatva sandeepika, nidana sthana, chapter no. 5, shloka no. 8, Choukambha Orientalis Delhi 2007.321
12. Gupta A, Ashtanghridayam, vidhyotini tika, Atridev Gupta, Nidana sthana, Chapter no. 14 Choukambha Orientalis Delhi 2007

How to cite this article : Verma P, Sharma R “A Review Article On *Dadru* W.S.R. To Fungal Infection” IRJAY.[online]2022;5(3);63-68.
Available from: <https://irjay.com>
DOI: <https://doi.org/10.47223/IRJAY.2022.5308>

Flow Chart 1 **SAMPRAPTI-**

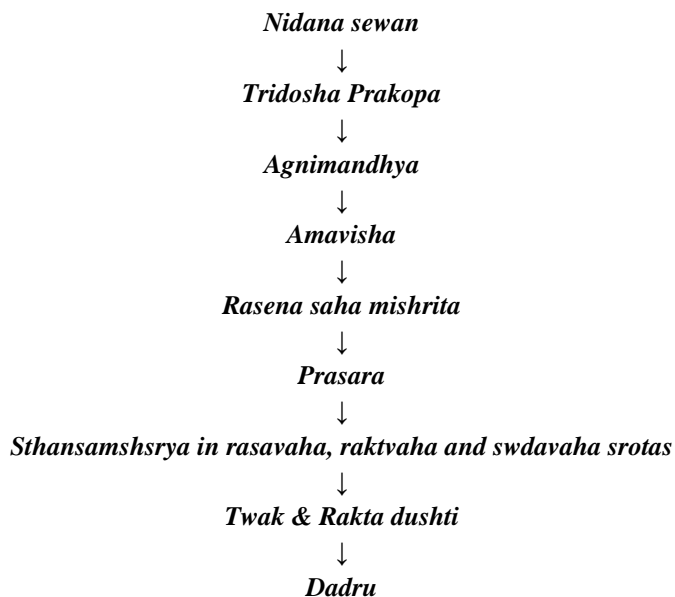


Table no. 1: Nidanans of dadru

<i>Aharaja nidana</i>	<i>Viharaja nidana</i>	<i>Others</i>
Excessive oily food intake	Tight cloths	Weak immune system
Honey+milk	Using others inmate objects	Immunosuppressive drug
Excess tila taila	Excessive sweating	Obesity
Excess radish	Soil to person	
<i>Madhya</i> , <i>amla</i> with milk	Contaminated by affected person	
Excess curd/ buttermilk	Humidity	
<i>Mamsa</i> with <i>madhu</i>	Poor hygiene	
<i>Guda</i> with milk	Seasonal (rainy/ summer/ winter)	
<i>Ajeerna bhojana</i>	Petting or grooming an animal	
<i>Atymla sevana</i>	Using public shower	
Rice with milk		

Table 2: Description of genera

<i>Features</i>	<i>Trichophyton</i>	<i>Microsporum</i>	<i>Epidermophyton</i>
<i>Site</i>	Infect hair, skin & nail	Hair & skin only	Skin & nail only
<i>Colony</i>	Powdery, pigmented	Cotton like pigmented	Powdery greenish yellow
<i>Spores</i>			
Microconidia	Abundant	Relatively scanty	Absent
Macroconidia	Pencil or cylindrical shaped, relatively scanty	Multicellular spindle or fusiform shaped and is predominant spore	Club shaped or pear shaped multicellular

Table no 3 : Characteristics of *Dadru* according different acharyas

<i>Clinical features</i>	<i>Acharya charak</i> ¹⁰	<i>Acharya sushruta</i> ¹¹	<i>Acharya vagbhata</i> ¹²
<i>Color</i>	Red	Dark brown	Dark brown
<i>Itching</i>	Present	Present	Present
<i>Lesion</i>	Present	Not-specific	Present
<i>Pustules</i>	Present	Present	Present
<i>Spreading nature</i>	Not-specific	Wide spread	Constantly spreading
<i>Association of other disease</i>	Not-specific	Not-specific	Associated
<i>Doshic dominance</i>	Kapha-pitta	Kapha	Kapha-pitta
<i>Classification</i>	Kshudrakushta	Mahakushta	Mahakushta

Table no. 4 shodhan chikitsa

<i>Purvakarma</i>	<i>Abhyanga, Sweda</i>
<i>Pradhana karma</i>	<i>Vamana, Virechana, Raktamokshana</i>

Table no. 5 some important orally taken medicine for *dadru kushtha*

<i>Bhasma/Rasa</i>	125-250mg twice a day	<i>Shuddha gandhak, Kushtha kuthar rasa</i>	Before food
<i>Vati</i>	500mg twice a day	<i>Arogyavardhini vati, Kaishor guggulu, Panchtikita ghrita guggulu</i>	Before food
<i>Churna</i>	3-5gm twice a day	<i>Panchnimba churna, Manjishthadi churna, Triphaladi churna</i>	Before food
<i>Kwatha</i>	15-20ml twice a day	<i>Patoladi kwatha, Brihadmanjishthadi kwath, Laghumanjishthadi kwath</i>	Empty stomach
<i>Asava</i>	20-30ml twice a day with equal water	<i>Triphalasava, Sarivadhyaasava</i>	After food
<i>Arishta</i>	20-30ml twice a day with equal water	<i>Khadirarishta, Kanakbindvarishta, Vidangarishta</i>	After food
<i>Ghrita</i>	10-15ml once a day with warm milk	<i>Mahatikta ghrita, Panchtikta ghrita, Mahakhadira ghrita</i>	Empty stomach early in the morning
<i>Lehya</i>	1tsp twice a day	<i>Amrita bhallataka lehya, Dhatriyavleha</i>	Empty stomach
<i>Ekal dravya</i>		<i>Khadira, Vidanga, Manjishtha, Haridra, Karveer</i>	After food

Table no. 6 medicine which can be apply locally in *Dadru kushtha*

<i>Lepa</i>	<i>Karanjadi lepa, Kareeradi lepa, Manahshiladi lepa</i>
<i>Taila</i>	<i>Marichadi taila, Karanja-nimba taila, Kanakshiri taila</i>
<i>Kalka</i>	<i>Bhrishtha sarshapa kalka</i>

Table no 7 Shows *Rasayana*-

<i>Gandhaka rasayana</i>
<i>Haritaki rasayana</i>
<i>Bhallataka rasayana</i>
<i>Haridra rasayana</i>
<i>Tuvaraka rasayana</i>

Table no. 8 some pathya apathya for *Dadru kushtha*

<i>Pathya</i>	<i>Apathya</i>
<i>Ahara</i>	<i>Ahara</i>
<i>Laghu, ruksha, tikta ras pradhan drvya Moong, Masoor daal, Wheat, Yava, Purana ghrita, Gomutra, Dadima, Nimba, Patola, Lashun, Karela shak etc.</i>	<i>Viruddhahara, Navanna, Pishtanna, Vidahi, Abhishyandi, Tila, Madya, Urda, Dahi etc.</i>
<i>Vihara</i>	<i>Vihara</i>
<i>Laghu vyayam, Snana etc.</i>	<i>Diwaswapn, Vega dharna, Ativyayam, Atisweda, Sankramit purush samyoga etc.</i>