



AYURVEDIC MANAGEMENT OF YAUVANA PIDIKA (ACNE VULGARIS)- A CASE STUDY.

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ABSTRACT

Yauvana Pidika, also described as Mukhadushika is mentioned under Kshudraroga (minor disorder) according to Ayurveda that closely correlates with Acne vulgaris. It is caused by vitiation of Kapha, Vata Dosha and Rasa, Rakta Dhatu, producing eruptions resembling the thorns of the Shalmali tree (silk-cotton tree) over the face. A 29-year-old male patient presented with complaint of Pidika on B/L cheeks, on forehead and chin region associated with Todavata peeda and Daha. The patient was diagnosed as a case of Yauvana Pidika (Acne vulgaris) with Kapha-Pittaja Rakta Dushti. He was treated with a combined Shaman and Bahiparimarjana chikitsa and lifestyle modifications for 21 days. After treatment there is seen in number of Pidika, Todavat Vedana, Daha and Srava with altered bowel habit was observed, with no any adverse effects reported. This case supports the utility of a combined internal and external Ayurvedic protocol in the management of Yauvana Pidika.

KEYWORDS : Yauvana Pidika, Acne vulgaris, Mukhadushika, Kaishore Guggulu, Acne, Raktashodhaka ksheera basti.

INTRODUCTION

Acne vulgaris is a chronic inflammatory disorder of the caused by obstruction and inflammation of pilosebaceous unit characterised by comedones, papules, pustules, nodules and/or cyst and in some cases, scarring, most commonly affecting the face, chest and back of adolescents and young adults.[1] It is multifactorial in origin, involving increased sebum production, follicular hyperkeratinisation, colonisation by *Cutibacterium acnes* and a resultant inflammatory response, often aggravated by hormonal, dietary and psychological factors.[2] Although the condition does not threaten life, its chronic relapsing course and noticeable cosmetic impact can adversely affect mental well-being, leading to reduced self-confidence and increased social anxiety, particularly in younger individuals. According Acharya Sushruta, Acne vulgaris resembles to Yauvana Pidika or Yuvan Pidika, also referred to as Mukhadushika and Tarunya Pidika described under the heading of Kshudraroga as it is small, elevated, painful eruptions studded over the face resembling the thorns of the Shalmali tree (silk-cotton tree), occurring due to vitiation of Kapha, Vata and Rakta Dosha, aggravated by Sweda (sebum/sweat) accumulation at Yauvana Avastha (younge age), when Kapha and Rakta are naturally predominant.[4] Acharya Vagbhata similarly places it among the diseases of the face caused by Kapha and Vata vitiated Rakta.[5]

Nidana categorised into Aharaj, viharaj and Manasika Hetu in which Aharaj Hetu includes intake of Katu (pungent), Amla (sour), Lavana (salty) and Snigdha-Guru (unctuous and heavy) Ahara (diet), Viharaj Hetu include irregular food habits, Vegadharana (suppression of natural urges), Ratri Jagarana (nocturnal wakefulness) and Manasika Bhava like Chinta (worry) and Krodha (anger), which vitiate Kapha, Pitta and Rakta Dhatu, causing Agnimandya (digestive fire) and producing Ama (metabolic toxins), causing Rasa-Rakta and Twakadushti, results in the eruption of Shalmalikantakavat Pidika (firm, thorn like painful pustules) all over the face.[6] Since Acne vulgaris is a chronic, relapsing condition and long-term use of conventional therapies such as retinoids and antibiotics is often limited by cutaneous and systemic side effects, an Ayurvedic approach addressing both the internal Dosha-Dushya vitiation and local lesions offers a comprehensive and comparatively safer alternative.[7] The present case study documents the clinical outcome of a combined Shamana, and Bahiparimarjana protocol in a young adult male diagnosed with Yauvana Pidika (Acne Vulgaris).

MATERIALS AND METHODS

Patient Information

Chief Complaints

A 29 year male presented with complaints of Pidaka (Recurrent papulopustular eruptions) over the face (forehead, cheeks and chin) with Todavat peeda (Severe pain) and Daha (Burning sensation) and Srava (Discharge), associated with Irregular bowel habit, with recurrent comedones since past 6 months. Apparently 1 year ago patient has good and healthy skin, gradually patient suffered with Comedones, Red papules, Pustules, Nodules around chin region and cheeks patient take allopathy treatment for that but did not get satisfactory results, so patient came to our hospital for treatment.

- **Past History** - No history of any major systemic illness
- **Personal History** - History of frequent intake of Katu (pungent), fried and oily food; irregular sleep pattern; occasional Vegadharana (suppression of natural urges).
- **Family History** - Maternal- K/C/O- DM type 2 on regular medication
 - Paternal- K/C/O- Hypertension on regular medication

General and Systemic Examination

No abnormality was detected on general and systemic examination.

Ashtavidha Pariksha (Eightfold examination)- (Table no. 1)

Parameter	Finding
Nadi (pulse)	Kapha Pradhana Pitta
Mala (stool)	Asamyak
Mutra (urine)	Samyak, no abnormality noted
Jihva (tongue)	Saam (Coated)
Shabda (voice)	Spashta
Sparsha (touch)	Ushna Sparsha
Druk (eyes)	Prakruta
and Akruiti (built)	Prakruta

Dashvidha Pariksha (Ten-fold examination) (Table no.2)

Parameter	Finding
Prakruti (constitution)	Kaphapittaj
Vikruti (Pathology)	Pitta pradhana
Sara (quality of tissue)	Madhyama
Samhanana (structural integrity)	Heena
Pramana (measurement)	Height: 156.2 cm, Weight: 70.4 kg
Satmya (adaptability)	Avara

Satva (mental status)	Madhyama
Ahara shakti (digestive capacity)	Madhyama
Vyayama shakti (exercise tolerance capacity)	Madhyama
Vaya (stage of life)	Yuvavastha

Local Examination: Multiple discrete papules and pustules with a few comedones were noted over the forehead, both cheeks and chin, with mild surrounding erythema. Active discharge, scarring and nodulocystic lesions were observed. The lesions corresponded to a mild-to-moderate grade of Acne vulgaris on clinical grading.

Diagnosis: Based on clinical history and examination, the case was diagnosed as *Yauvana Pidika* (Acne vulgaris) - a *Kapha-Pitta pradhana Tridoshaja Rakta Dushiti Vyadhi*.

Treatment Protocol: A combined *Shamana Chikitsa*, and *Bahiparimarjana Chikitsa* protocol was administered as detailed in Table 3 and Table 4.

Table 3: Shamana Chikitsa

S. No.	Formulation	Dose	Anupana / Timing	Duration
2	<i>Kaishore Guggulu</i>	250 mg	Twice daily after food with lukewarm water	For 21 Days
4	<i>Raktashodhak a Vati</i>	250 mg	Twice daily after food with lukewarm water	For 21 Days
5	<i>Gandhaka Rasayana</i>	250 mg	Twice daily after food with lukewarm water	For 21 Days
6	<i>Arogyavardhini Vati</i>	250 mg	Twice daily after food with lukewarm water	For 21 Days
7	<i>Avipattikara Churna</i>	5 g	Once daily at bedtime with lukewarm water	For 21 Days

Table 4: Bahiparimarjana Chikitsa

Sr. No.	Formulation	Route of administration	Frequency
1	<i>Khadira</i> (<i>Acacia catechu</i>), <i>Sariva</i> (<i>Hemidesmus indicus</i>), <i>Manjishtha</i> (<i>Rubia cordifolia</i>), <i>Yashtimadhu</i> (<i>Glycyrrhiza glabra</i>), <i>Lodhra</i> (<i>Symplocos racemosa</i>), <i>Raktachandana</i> (<i>Pterocarpus santalinus</i>)	Local application over face	Once daily

Assessment Criteria: Clinical response was assessed on the basis of the number and severity of active lesions (comedones, papules and pustules), and associated symptoms including *Todavat peeda* (Severe pain) and *Daha* (Burning sensation) and *Srava* (Discharge), associated with Irregular bowel habit, with recurrent comedones *Daha* graded before starting treatment and at the end of the treatment period. Any adverse drug reactions were recorded at each follow-up.

RESULTS AND DISCUSSION

Clinical Outcome: On completion of the treatment protocol, a marked reduction was observed in the number of active papules and pustules, associated pain, *Srava* (Discharge), *Daha* (Burning), along with visible improvement in facial *Varnya* (complexion) and skin texture. No fresh eruptions were noted during the course of treatment, and the patient did not report any adverse effects or intolerance to the medications, indicating good compliance and tolerability of the protocol.



Figure 1 - Before Treatment



Figure 2 - After Treatment

Probable Mode of Action

The rationale for the selected combination can be understood in terms of classical Ayurvedic pharmacodynamics (*Rasa-Guna-Virya-Vipaka-Prabhava*) as well as the *Samprapti Vighatana* of *Yauvana Pidika*.

Kaishore Guggulu, containing *Guduchi* (*Tinospora cordifolia*), *Triphala* and *Guggulu*, is well documented for its *Kaphaghna*, *Raktaprasadaka* and *Kushthaghna* properties; it helps eliminate vitiated *Kapha* responsible for excess sebum production and clears obstruction of sebaceous ducts. [8][9]

Raktashodhaka Vati and *Gandhaka Rasayana* act as *Raktashodhaka* and *Krimighna* (antimicrobial) agents; *Gandhaka Rasayana* in particular is regarded in classical texts as beneficial in *Sarva Kushtha* (all types of skin disorders) and possesses *Rasayana* (rejuvenative) properties that support skin health from within. [10][11]

Arogyavardhini Vati, containing *Shuddha Parada*, *Shuddha Gandhaka*, *Triphala* and *Katuki*, it has *Yakrit-uttejaka* (hepatic-stimulant), *Medohara* and *Kushthaghna* properties, and is traditionally used to correct the underlying metabolic vitiation (*Agni-Ama* imbalance) that perpetuates chronic skin disorders. [12]

Avipattikara Churna, a mild *Pittashamaka* and *Anulomana* (mild laxative/bowel-regulating) formulation, corrects irregular *Mala Pravritti* (bowel movement) and *Pitta* vitiation, both of which are recognised *Nidana* for *Yauvana Pidika*, thereby addressing the disease from its root (*Nidana Parivarjana*). [13]

Locally, the *Lepa* of *Khadira*, *Sariva*, *Manjishtha*, *Yashtimadhu*, *Lodhra* and *Raktachandana* combines potent *Varnya* (complexion-enhancing), *Kushthaghna* and *Vranaropaka* (wound/lesion-healing) properties. *Manjishtha* is considered among the foremost *Raktashodhaka* and *Varnya Dravyas* in Ayurveda; *Khadira* and *Lodhra* possess *Kaphahara* and astringent properties that reduce sebum and exudation; *Yashtimadhu* is *Vranaropaka* and soothing; and *Raktachandana*, being *Pitta-Shamaka* and *Twacha Prasadaka* (skin-clarifying), reduces local heat and discolouration. [14] [15]

Taken together, the protocol addresses *Yauvana Pidika* at three levels simultaneously - correcting *Agni* and eliminating *Ama*, purifying vitiated *Rakta* and pacifying *Kapha-Pitta* systemically and providing direct *Varnya-Kushthaghna* action at the site of the lesions - consistent with the classical dictum of treating skin disease through combined *Shamana* and local measures. [16] [17]

LIMITATIONS

As a single case report without a comparator arm and without standardised photographic or scoring documentation, the

findings cannot be generalised. Controlled clinical studies with a larger sample size, standardised acne grading (e.g., Global Acne Grading System), and longer follow-up are required to validate the efficacy of this protocol.

CONCLUSION

This case highlights the potential benefit of a combined *Shamana* and *Bahiparimarjana* (local) Ayurvedic protocol - comprising *Kaishore Guggulu*, *Raktashodhaka Vati*, *Gandhaka Rasayana*, *Arogyavardhini Vati* and *Avipattikara Churna* along with a *Manjishthadi lepa* in the management of *Yauvana Pidika* (Acne vulgaris) in a young adult male, with good symptomatic improvement and no adverse effects. The approach of simultaneously correcting the internal *Dosha-Dushya Sammurchhana* and treating the lesions locally appears rational and effective, though further well-designed clinical studies are warranted to establish a standardised, evidence-based protocol.

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