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RESEARCH ARTICLE

An Ayurvedic Clinical Study on the Effect of Kushta Churna in the Management of Arunshika (Seborrhoeic Dermatitis)

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Abstract: Arunshika is a Kshudra Roga mentioned in classical Ayurvedic texts, predominantly caused by Vata-Kapha Dushti, presenting with Kandu (itching), Rukshata (dryness), Twak Sphutana (scaling or fissuring of scalp), and Keshapatan (hair fall). In modern dermatology, Seborrhoeic Dermatitis represents a chronic, relapsing inflammatory condition of the scalp characterized by erythematous plaques with greasy or dry scales and pruritus. Conventional treatments include antifungal and corticosteroid preparations which often produce temporary relief, recurrence, and side effects such as irritation and hair fall. Ayurvedic formulations, addressing Dosha-Dushti and Srotorodha, offer a safer and holistic approach.

Keywords: Kshudra Roga, Kandu, Rukshata , Twak Sphutana,, Keshapatan .

INTRODUCTION

Arunshika disease, as described in both the Purana and Ayurveda, is characterized by profuse pustular eruptions or ulcers on the scalp. These conditions arise from a combination of deranged Kapha and parasitic infections, leading to significant discharges. The key phrase highlights the infectious nature and symptoms of Arunshika disease, emphasizing its connection to imbalances in bodily elements and the underlying causes related to parasites. In Ayurveda, Seborrhoeic Dermatitis can be closely correlated with Arunshika, which is described as a Kshudra Roga in Sushruta Samhita (Ni. 13/35) and Bhavaprakasha (Kshudra Roga Adhikara 61/15). It is primarily a Vata-Kaphaja Vyadhi localized in Shiras (scalp region), presenting with Kandu, Rukshata, Twak Sphutana, and Keshachyuti.

In modern Science Seborrhoeic dermatitis is a chronic, relapsing inflammatory dermatosis predominantly affecting sebaceous gland-rich regions, especially the scalp, face, and trunk. The disease manifests with flaking, scaling, itching, and erythema. Its prevalence is approximately 3-5% among adults and can reach up to 70% among infants in the first three months of life. The disease tends to peak in the third and fourth decades and affects men more commonly. Environmental triggers (humidity, cold climate), stress, hormonal imbalance, microbial factors (especially Malassezia furfur), and individual immune response contribute to its pathogenesis.

While antifungal shampoos, corticosteroids, and keratolytic agents provide temporary symptomatic relief, they often cause irritation, rebound flare-ups, and do not address the underlying chronic inflammation. Therefore, a holistic and long-lasting therapeutic approach is needed.

AIM AND OBJECTIVES:

AIM: A clinical evaluation of the effectiveness of Kushtha Churna in the management of Arunshika

OBJECTIVES:

1. Conceptual study of Arunshika in detail with both ayurvedic and modern perspectives.
2. To observe the side effects of Kushtha Churna during the trail.
3. To assess overall wellbeing effect of the drug.

HYPOTHESIS (H1): - Kushtha Churna Lepa is effective in the management of Arunshika (seborrheic dermatitis)

NULL HYPOTHESIS (H0): - Kushtha Churna Lepa not effective in the management of Arunshika.

ARUNSHIKA SAMPRAPTI (PATHOGENESIS) INVOLVES:

Vitiation of Vata and Kapha Dosha due to Atiruksha Ahara-Vihara, Ratri Jagarana, Atapa Sevan, and Asevana of Keshataila (non-application of head oil).
Kapha leads to excessive scalp secretion and stickiness (Kleda), while Vata causes dryness and fissuring.
The Srotas of Twak and Rakta become obstructed (Srotorodha), causing Kandu and Twak Vaivarnya.
Hence, treatment should aim at Vata-Kapha Shamana, Raktashodhana, Kandughna, and Twak-Prasadana.

THERAPEUTIC JUSTIFICATION:

Kushta Churna is a classical polyherbal formulation indicated in Kushtha and Kshudra Roga. Its chief ingredient Kushta (Saussurea lappa) is endowed with Katu-Tikta Rasa, Ushna Virya, Laghu-Ruksha Guna,

Kaphavatahara and Raktashodhaka properties. It acts as Kandughna, Krimighna, and Vranashamaka, which directly address the pathogenesis of Arunshika.
Supporting therapies such as Yashtimadhu Churna with Narikela Taila (external massage) pacify Vata and nourish the scalp, while Triphala Yavakuta Kwatha (scalp wash) purifies and cleanses debris due to its Rasayana and Srotoshodhaka actions.
Modern research on Saussurea lappa confirms its antimicrobial, antifungal, antioxidant, and anti-inflammatory effects, aligning with its traditional Twak Vikara indications.
Therefore, this clinical trial was undertaken to evaluate the efficacy and safety of Kushta Churna in the management of Arunshika (Seborrhoeic Dermatitis).

MATERIALS AND METHODS

Treatment	Kushtha churna
Dose	2gm
Root of administration	External
Kala	Twice a week at night
Duration of treatment	30 days
Follow up period	0-15-30

STUDY SITE: - Dermatology OPD, Kayachikitsa Department, College of Ayurveda, Bharati Vidyapeeth (Deemed to Be University), Pune 411043
DURATION: - 45 days.
SAMPLE SIZE: - 10 patients (7 completed the study, 3 dropped out due to personal reasons).
SELECTION CRITERIA
INCLUSION CRITERIA:
1) Patients aged 18–60 years.
2) Clinical features of Arunshika: Kandu, Rukshata, Twak Sphutana, Keshpatan.
Willing to adhere to protocol and follow-up.

EXCLUSION CRITERIA:
Psoriasis, eczema, tinea capitis. Systemic illnesses (Diabetes, TB, severe infections). Recent use of topical steroids or antifungal therapy.
Assessment: Symptoms were graded from 0–3 based on severity

Symptoms	0	1	2	3
Kandu (Itching)	Absent	Occasional	Frequent	Constant
Rukshata (Dryness)	None	Mild	Moderate	Severe
Twak Sphutan(Scaling)	None	Mild	Moderate	Severe With Oozing
Keshpatan(Hairfall)	None	On Washing	On Combing	On Mild Touch

TREATMENT PROTOCOL
External application of Kushta Churna lepa with Narikey Tail at night, twice a week
Assessment was done on Day 0, 15, 30, and 45.
Safety Parameters: Hb, TLC, DLC, ESR were assessed before and after the study.

RESULT AND OBSERVATION:

Analysis of clinical data

Age group wise

Age group	No. of patients	Percentage
18-20 years	1	10%
21-30 years	3	30%
31-40 years	3	30%
41-50 years	2	20%
51-60 years	1	10%

Family history Wise

Family history	No. of patients	Percentage
Present	6	60%
Absent	4	40%

Sex Wise

Gender	No. of patients	Percentage
Male	3	30%
Female	7	70%

Atap Sevan Wise (Exposure to sun)

Sun exposure	No. of patients	Percentage
Yes	6	60%
No	4	40%

Prakruti Wise

Prakruti	No. of patients	Percentage
Vatapittaj	2	60%
Pittakaphaj	6	20%
Vatakaphaj	2	20%

Ahara Wise

Ahara	No. of patient	Percentage
Veg	3	30%
Mixed	7	70%

Skin type

Skin type	No. of patients	Percentage
Dry	3	30%
Oily	3	30%
Moist	4	40%

Other disease history

Diseases	No. of patients	Percentage
Hypothyroidism	2	20%
Hyperacidity	5	50%
Hypertension	1	10%

Addiction

Type of addiction	No. of patients	Percentage
Tea/ coffee	6	60%
Tobacco	1	10%
Alcohol	2	20%
Smoking	1	10%
No addiction	3	30%

Effect of therapy on the symptoms of Arunshika (Seborrhoeic Dermatitis).

Effect of Therapy on the Kandu

Groups	N	Mean		Dif.	% of Diff	SD	SE	T	P
		BT	AT						
Kandu	10	4.43	01.42	3.01	67.94	0.63	0.16	3.67	<0.01

Kandu was reduced up to 67.94%. The values are statistically highly significant.

Effect of Therapy on the Rukshata

Groups	N	Mean		Diff.	% of Diff.	SD	SE	T	P
		BT	AT						
Rukshata	10	0.988	.153	0.835	85.51	0.353	0.139	7.05	<0.01

Rukshata was reduced up to 85.51%. The values are statistically highly significant.

Effect of The Therapy on the Twaksputana

Groups	N	Mean		Dif.	% of Diff	SD	SE	T	P
		BT	AT						
Twaksputan	10	0.727	0.097	0.63	86.65	0.512	0.158	6.59	<0.01

Twaksputana was reduced up to 86.65%. The values are statistically highly significant.

Effect of The Therapy on the Keshpatan

Groups	N	Mean		Dif.	% of Diff	SD	SE	T	P
		BT	AT						
Keshpatan	10	3.09	1.54	1.55	57.94	0.63	0.16	3.57	<0.01

Keshpatan was reduced up to 57.94%. The values are statistically highly significant.

OBSERVATIONS:

Kandu was reduced up to 67.94%. The values were statistically highly significant. Rukshata was reduced up to 85.51%. The values are statistically highly significant. Twaksputana was reduced up to 86.65%. The values are statistically highly significant. Keshpatan was reduced up to 57.94%. The values are statistically highly significant. There was no any significant change in the investigations.

DISCUSSION

The results demonstrate that Kushta Churna effectively alleviates the clinical features of Arunshika (Seborrhoeic Dermatitis) by targeting the Samprapti Ghataka (pathogenic components) of the disease.

At the Dosha level: Vata-Kapha Shamaka actions of Kushta Churna alleviate dryness and itching, while Raktashodhaka property purifies Rakta Dhatu, reducing inflammation and erythema.

At the Dushya level: Twak and Rakta are purified, restoring scalp integrity.
At the Srotas level: Svedavaha Srotas are cleared by Teekshna Ushna Guna, removing accumulated sebum and debris.

At the Karma level: Kushta acts as Kandughna, Krimighna, and Vranashamaka; Yashtimadhu Taila provides Snigdhata to counter Vata, and Triphala Kwatha cleanses scalp and maintains pH balance.

From a modern view point, the antifungal and anti-inflammatory effects of Saussurea lappa, Glycyrrhiza glabra, and Triphala likely reduce microbial colonization (Malassezia), inhibit inflammatory mediators, and normalize sebaceous secretions - explaining the clinical improvement observed.

Thus, Kushta Churna provides both Shamana (palliative) and Shodhana (purificatory) benefits, achieving Samprapti Vighatana (breakdown of pathogenesis).

Discussion on the result of the study was observed that the Kustha Churna had highly significant effects in reducing Kandu, Rukshata, Twaksputana, Keshpatan. The Daha was absent before and after treatment. Highly significant effects in reducing yellowish pigmentation and size of mandalas as well as pustular lesion.

CONCLUSION:

The clinical study establishes that Kushta Churna is effective in managing Arunshika (Seborrhoeic Dermatitis) by balancing Vata-Kapha Dosha, purifying Rakta, and restoring scalp homeostasis. It provides relief from itching, dryness, and scaling, enhances hair health, and prevents recurrence.

Hence, Kushta Churna can be recommended as a safe, affordable, and holistic Ayurvedic remedy for Seborrhoeic Dermatitis.

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