To Study the Effect of Yavadi Lepa in Vyanga WSR to Melasma

Dr. Vaishnavi Vijaykumar Jalihale[1], Dr. Rashmi Kurawar[2], Dr. Pramod Mandalkar[3]

PG Scholar, Department of Panchakarma[1]
Guide and Professor, Department of Panchakarma[2]
HOD and Professor, Department of Panchakarma[3]
S.M.B.T. Ayurved College and Hospital, Dhamangaon, Igatpuri, Nashik.
jalihalevaishnavi@gmail.com, drrashmikurawar12@gmail.com, Vdpramod31@gmail.com

Abstract: *Background: Vyanga is a condition described in Ayurveda under Kshudra Roga, and it is commonly correlated with melasma, a hyperpigmentation disorder predominantly affecting females. According to Sushruta Samhita, Vyanga arises from the aggravation of Vata and Pitta doshas and is characterized by painless, thin, dark, circular patches on the facial skin. Topical applications (lepa) are among the primary treatments recommended for this condition. Aim: To evaluate the therapeutic efficacy of Yavadi Lepa in the management of Vyanga (melasma). Materials and Methods: Yavadi Lepa, contains Yava, Yashtimadhu, and Lodhra, known for their Pitta-pacifying, complexion-enhancing (Varnya), and skin-purifying (Tvak prasadan) properties, which collectively contribute to improving facial complexion. A total of 32 patients diagnosed with Vyanga were treated with Yavadi Lepa. The intervention was administered for 14 days, with a follow-up assessment on day 21. Results: Out of 32 patients Good improvement were seen in15 patients ie, 48.87% ,Moderate improvement were seen in 15 patients ie,48.87%,Mild improvement were seen in2 patients ie, 6.25%.*

Keywords: Vyanga, Yavadi Lepa, Kshudra roga, Melasma

I. INTRODUCTION

Vyanga, classified under *Kshudra Roga* in *Ayurveda*, is considered a minor disorder but may lead to significant cosmetic concern and psychological distress. It is primarily caused by vitiation of *Vata*, *Pitta*, and *Rakta doṣhas* and presents as painless, thin, dark, circular patches on the face. Classical texts describe multiple etiological factors, including emotional stress, excessive exertion, and sun exposure.[1] Ayurvedic literature also identifies *Doṣha*-based subtypes of *Vyanga—Vataja*, *Pittaja*, *Kaphaja*, and *Raktaja*.[2]

Melasma, the condition most closely correlated with *Vyanga*, is an acquired hypermelanosis characterized by light to dark brown facial patches. Its pathogenesis is multifactorial, involving ultraviolet radiation, hormonal influences, genetics, and photosensitizing agents.[3] Prevalence is highest among Southeast Asian populations, with a female predominance and significant association with sun exposure.Prevalance rate of Melasma is0.25%to 4% in India and 10.8% in western india.[4]

Ayurveda recommends several therapies for *Vyanga*, including *Siravedha*, *Pralepa*, *Abhyanga*, *Virechana*, and *Nasya*. Among these, *Lepa* (topical herbal application) is the most commonly practiced, valued for both therapeutic and cosmetic benefits.[5]*Lepa* formulations are regarded as safe, natural alternatives to chemical-based cosmetics and are traditionally categorized based on their functional properties, such as *Varnya* (complexion-enhancing) and *Twak–Prasadaka* (skin-purifying).[6]

Given that *Vyanga* is a *Raktapradoshaja* condition involving vitiated *Vata-Pitta-Rakta*, herbs with *Pitta-shamaka*, *Varnya*, and *Twak-prasadaka* properties are emphasized. *Yava*, *Yaṣṭimadhu*, and *Lodhra*—components of the *Yavadi Lepa*—hold such actions and are traditionally used to improve facial complexion.[7]

730

Melasma lacks a definitive cure in modern dermatology, and commonly used depigmenting agents often produce adverse effects and relapse. With rising interest in natural and Ayurvedic skincare, evaluating effective, safer alternatives such as *Yavadi Lepa* becomes clinically relevant.

AIM AND OBJECTIVES:
To Study the effect of *Yavadi Lepa* in *Vyanga* with special reference to Melasma.

METHODOLOGY
Study Settings-
OPD and IPD patient of Panchakamra department of Ayurveda Hospital
Sample size-32
Total days treatment -14
Follow up after treatment -21th day
Follow up on -7TH ,14TH ,21TH day

Diagnostic Criteria
Classical signs and symptoms of *Vyanga*
-*Mukhamagatya Mandalam* –circular patches on face.
-*Shyavata*(dark coloured)
- *Kandu ,Daha*.

Inclusion Criteria
-Age -20 to 50 years of age
-Patients fulfilling diagnostic Criteria

Exclusion Criteria
- *Vyanga* caused due to any systemic disease egDibeties,Cardiovascular disease ,Cushing syndrome* Patients having another chronic skin disease
- Vyanga by birth (congenital)
-Pregnant women
-Immuno compramised disease.

Withdrawal Criteria
-If any side effects were observed during the research
-If the patient refuses to continue with the treatment.

Investigation
CBC, ESR, BSL-R

Intervention
Drug- *Yavadi Lepa*
Procedure- *Lepa* for 20 min.
Treatment duration-14 days
Follow up-7th ,14th ,21th day

SELECTION OF DRUG

Drugs used for *Lepa* are *Yava* ,*Yashtimadhu* and *Lodhra* which are *Pittashamaka*, *Varnyakar*, *Twakprasadaka* which improves glowing complexion of facial skin.

Drug Name	Yava	Yashtimadhu	Lodhra
Latin Name	Hordeum vulgarelinn	Glycyrriza glabra	Syplocos racemosa
Ras	*Mdhura,Kashaya*	*Madhura*	*Kashaya,Tikta*
Virya	*Shita*	*Shita*	*Shita*
Vipaka	*Madhura*	*Madhura*	*Katu*
Guna	*Guru,Ruksha*	*Guru,Picchila*	*Laghu,Ruksha*
Doshgnta	*Pittakaphahara*	*Vatapittahara*	*Kaphapittahara*

Table no.-1 Contains of Drug

Procedure of *Lepa*

Requirements:-

Herbal paste,Knee height chair with headrest pad,Spatula

Poorvakarma

Selection and Examination of Patient.

Preparation of Patient:-

Ask the patient to evacuate the bowel and bldder.Washing the face before application and Hair bandage is tied at the level of forhead.

Pradhanakarma

Position of patient:-

Patient is made to sit on knee height chair and his body is draped with cloth below the neck. The head is rest on headrest pad and may be elevated a little.

Application of *Lepa* :-

Cotton pad is placed on patients eyes.This will prevent escape of the paste into the eyes during procedure.Herbal paste is smearing all over the face except the eyes ,nostrils and lips with the help of a spatula.

Removal of Lepa:-

The application should be removed before it gets dried off.Cotton or soft cloth wiped in water is uesd to remove the *lepa*.

Pashachatakarma

After specified period,it is removed by scraping with the help of spatula and then wiped off with cloth.The patient may be allowed to wash his face with warm or cold water.Diet regimen and behavioral restrictions are advised to patient.

SUBJECTIVE CRITERIA

Kandu	Score
There is no itching	0
Minor itching(occasional does not disturb routine)	1
Moderate itching(disrupts daily routine but not sleep)	2
Severe itching(disrupts daily routine and sleep	3

Daha	Score
No burning	0
Mild burning (occasional sensation mostly when exposed to sun)	1

Moderate burning (frequent burning which increases when exposed to sun)	2
Severe burning (Continuous burning without sunexposure)	3

OBJECTIVE CRITERIA

MASI score.

It is Melasma Area and Severity Index Score . The Severity of the melasma in each of the four regions (forhead ,chin,left and right malar region) is assessed based on three variables.

Percentage of total area involved (A)

Darkness(D)

Homogenecity (H)

Percentage of total area involved (A)	Score
No involvement	0
<10%	1
10-29%	2
30-49%	3
50-69%	4
70-89%	5
90-100%	6

Darkness (D)	Score
Normal skin colour	0
Barely visible hyperpigmentation	1
Mild hyperpigmentation	2
Moderate hyperpigmentation	3
Severe hyperpigmentation	4

Homogenecity (H)	Score
Normal skin colour	0
Specks of involvement	1
Small patchy area of ≤2cm	2
Patches of involvement>2 cm	3
Uniform skin involvement without any clear areas	4

MASI score

MASI score=Forhead 0.3A(D+H)+ Right malar 0.3A(D+H)

+Left malar 0.3AD+H)+Chin 0.1A(D+H)

Fairness Score
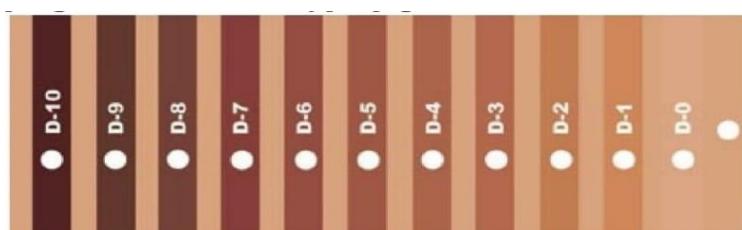
OBSERVATIONS STATISTICAL ANALYSIS

For assessing the improvement of symptomatic relief and to analyze it statistically,the observations were recorded before and after the treatment.

Symptoms	Mean BT	Mean AT
Kandu	2.781	0.750
Daha	2.813	0.397
MASI score	33.67	5.316
Fairness score	7.281	1.781

RESULT

Sr. no	Improvement	No. of patients	Percentage
1	Good Improvement(75-100%)	15	48.87%
2	Moderate improvement(50-75%)	15	48.87%
3	Mild improvement(25-50%)	02	06.25%
4	Unchanged(0-25%)	0 0	00.00%
	Total	32	

Yavadi lepa provided moderately significant effect on the symptoms of as for Kandu symptoms in study group shown the 73.03% relief followed by 68.88% relief for Daha. The total effect of therapy is evaluated by taking relief in percentage of each patient. Out of 32 patients Good improvement was seen in15 patients.i.e.48.87%. Moderate improvement was seen in 15 patients.i.e.48.87 %. Mild improvement was seen in 02 patients.i.e.06.25 %.Every patient has got the relief as explained in the above improvement group. Nobody was found in unchanged or no improvement group.

II. CONCLUSION

In view of observations and statistical analysis we concluded that Yavadi lepa showing significant result in symptoms of Vyanga.

REFERENCES

[1]. kaviraj Ambikadatta Shastri editor ,Chaukhamba Sanskrit Pratisthan Varanasi 14th edition2003 Sushruta Samhita Nidan Sthan ,Kshudraroga Nidan Adhyaya13/ 45-46

[2]. Laghu Vagbhatta, Ashtang Hridaya ,Gupta A editor, Chaukhamba Prakshan Varanasi edition -2012. Ashtang Hridaya Uttarasthan 31/28-29 pg.no-768.

[3]. J.S.Pasricha,Ramji Gupta editor,Jaypee Brothers Medical Publishers New Delhi. Edition-2006. Illustrated Textbook of Dermatology chapter no. 16 pg no.-117.

[4]. Sharma PV. Susruta Samhita. Vol 1. Varanasi- Chaukhambha Visvabharati; 2005. Sharirasthana, Chapter 4, Verse 4.

[5]. Vaidya shreelaxmipatishastri editor , Chaukhamba Prakashana Varanasi Yogratnakar Kshudraroga Nidan - chikitsa 1 page no.282.

[6]. Datta .H.S, Parmesh .R Trends in aging and skin care ayurvedic concepts. Journal of Ayurveda and Integritive Medicine 2010,1110-113.

[7]. P. Kaushik, P. Ahlawat, K. Singh, and R. Singh, "Chemical constituents, pharmacological activities, and uses of common ayurvedic medicinal plants: a future source of new drugs," Advances in Traditional Medicine, Nov. 2021, doi: https://doi.org/10.1007/s13596-021-00621-3