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A BIRD'S-EYE VIEW OF THE DIFFERENTIAL DIAGNOSIS OF MAHAKUSHTA

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ABSTRACT

Skin is the most significant protective Organ of body between external and internal environment. Skin disorders are commonly caused by factors such as altered lifestyles, lack of physical activity, poor hygiene, mental stress, and improper eating habits. Skin conditions represent one of the largest groups of health issues. *Kushta* is the broad-spectrum word used in *Ayurveda* to describe all

Skin disease under one heading. Differential diagnosis is crucial for effective treatment and management of skin disorders. The Ayurvedic classics describe various symptoms of *Kushta* and draw comparisons with familiar concepts to aid in understanding. The present study aims to differentiate each type of *Maha Kushta* based on the symptoms outlined in these classical texts.

Keywords: Kushta, skin disease, Mahakushta

INTRODUCTION

The skin is the body's largest organ, comprising over 10% of its total mass and serving as the primary interface between the body and its environment.^[1] Skin

conditions affect an estimated 1.9 billion people worldwide. [2] Skin diseases are among the most common health concerns worldwide, posing a substantial

challenges for individuals and society^[3]. Kushta is the broad-spectrum word used in Ayurveda to describe all the skin disease under one heading, i.e. classified into Mahakushta (7Major) and kshudra [11minor kushta] According to Amarakosha, the term Kushta is derived from the root Kush, meaning "that which originates from within." This refers to the manifestation of symptoms on the skin (Twacha) due to the vitiation of factors like Rakta (blood), Lasika (lymph), Ambu (water elements), and the Tridoshas (Vata, Pitta, and Kapha) of the body. As per Shabdakalpadruma, Kushta implies something despised or regarded as contemptible. Acharya Vagbhata defines Kushta Roga as a condition that causes discolouration (Vaivarnya) and impairment (Dushti) of the skin $(Twacha)^{[4]}$.

burden. This burden extends beyond physical symp-

toms, impacting patients and their families' psycho-

logical and social well-being while creating financial

Ayurvedic classics classify *Kushta* (skin diseases) into two main categories: *Mahakushta* and *Kshudrakushta*. *Mahakushta* is divided into seven types: *Kapala, Udumbara, Mandala, Rushyajihwa, Pundarika, Sidhma*, and *Kakanaka*. *Kshudrakushta* consists of eleven types: *Eka, Charmakhya, Kitibha, Vipadika, Alasaka, Dadru, Charmada, Paama, Visphota, Shataru*, and *Vicharchika*. As *Kushta* classification is

innumerable, it is essential to differentiate each type of *Kushta*. So, the present study attempts a differential diagnosis of *Maha Kushta* with its sub-type and a few other conditions.

AIM

a comprehensive framework for the differential diagnosis of *Maha Kushta* (skin disorders) based on classical Ayurvedic texts and contemporary clinical insights

OBJECTIVES

Differentiate *Maha Kushta* subtypes from other dermatological conditions.

Bridge traditional Ayurvedic concepts with modern dermatological perspectives for accurate diagnosis.

TYPES OF KUSHTA

A differential understanding of *Kushta* is essential for accurately identifying the vitiated *Doshas*, assessing the *Sadhya-Asadhyata* (prognosis), formulating an effective *Chikitsa* (treatment plan), and distinguishing *Kushta* from other conditions such as *Visarpa* and *Shwitra*. *Kushta* is a disease that involves *Tridoshas*. Because of its different *Dosha* combinations[*Amshamshavikalpa*], proper diagnosis of *Kushta* becomes difficult. So *Kushta* can be diagnosed based on doshas and differentiating it from the pool of *Ashtadasha Kushtas*[5]

Mahakushta according to Charaka and Susruta

CHARAKA [5]	SUSRUTA [6]
Kapala	+
Udumbara	+
Mandala	
Rushyajihwa	+
Pundarika	+
Sidhma	-
Kakanaka	+
	Dadru
	Aruna

KAPALA KUSHTA



Dry, crimson red, coarse, unevenly spread, having rough edges, thin and slightly elevated periphery, severe numbness, covered with bristling hair, afflicted with extreme piercing pain, having mild itching, burning sensation, less severe and pus discharge, having acute manifestation and quick progression, are infested with maggots and appear like a black or blackish red piece of broken earthen pot.

This can be compared with tuberculoid eczema and nummular eczema. Tuberculids are skin manifestations of cutaneous tuberculosis (TB) caused by delayed hypersensitivity reactions to Mycobacterium tuberculosis (M. tb) or its antigens in individuals with robust cell-mediated immunity⁷. Nummular eczema, also called discoid eczema or nummular dermatitis, is

characterized by scattered circular patches that are often itchy and may sometimes ooze. Nummular dermatitis is characterized by distinct, round, erythematous, edematous, and crusted plaques, typically found on the dorsal surfaces of the hands, as well as the extensor areas of the arms, legs, thighs, and buttocks. In individuals with lighter skin tones, these lesions often appear pink or red, while in people of colour, they tend to present as brown, purple, or black. Although individuals with atopic dermatitis may develop typical nummular dermatitis lesions, they generally exhibit additional features such as symmetrical flexural eczema, lichenification, or other distinguishing clinical signs [8].

UDUMBARA KUSHTA







The affected part of the skin is coppery, covered with coppery-rough (thick) hair. It has plenty of thick discharge of pus, blood, and lymph accompanied by itching, moistening, sloughing, burning sensation, and suppuration. It has acute manifestation and quick progression, is associated with a rise in temperature, and is infested with maggots. In colour, it appears

like the ripe fruit of Udumbara (Ficus racemosa Linn).

Udumbara can be considered as allergic vasculitis. Allergic vasculitis, also known as hypersensitivity vasculitis or leukocytoclastic vasculitis, is a condition that causes inflammation and damage to blood vessels. Symptoms include rash with tender, purple or brownish-red spots, skin sores, blisters, hives, or open sores with dead tissue^[9]

3. Mandala Kushta





The skin appears unctuous, heavy, and elevated, with smooth and fixed yellowish margins. The lesions exhibit a white and reddish hue, accompanied by white hairlines. They are associated with a thick, copious, white, slimy discharge, excessive oozing, and intense itching. The affected areas may be infested with numerous maggots, and the lesions tend to be slow in spreading and progression, typically round.

This can be considered as a tenia variant. Tenia corporis is a superficial fungal infection of the skin that can affect any part of the body, excluding the hands

and feet, scalp, face and beard, groin, and nails. It is commonly called 'ringworm' as it presents characteristic ring-shaped lesions. Tinea corporis initially appears as a circular red patch with a raised, scaly leading edge. The lesion gradually expands outward, creating a ring-shaped pattern with central hypopigmentation and a scaly red rim at the periphery, commonly called ringworm. The border may be papular or pustular. Itching is a frequent symptom. Over time, multiple lesions can form, which may merge to create a polycyclic pattern. The lesions are typically distributed asymmetrically. [10]

4. Rishyajivha Kushta



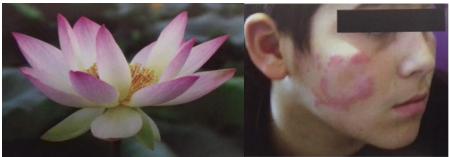


Rishyajivha *Kushta* is characterized by rough, downy skin with a reddish and blackish appearance at the centre and periphery. The lesions display shades of blue, yellow, and a coppery tinge, often associated with acute onset and rapid spreading. It is accompanied by minimal itching, oozing, and maggot infestation but features intense burning sensations, ulceration, and piercing pain resembling a bristle puncture. The lesions have an elevated centre, thin margins,

and rough pupils surrounding them. They are large in circumference and resemble the shape of an antelope's (*Rishyajivha*) tongue.

In modern terms, it can be considered lichen planus. Itchy, flat, shiny, purple bumps that can appear on the wrists, ankles, inner forearms, torso, or genitals. The bumps can be symmetrical, have sharp borders, and appear in clusters. They can also be covered in white streaks or scratch marks [11].

5. Pundarika



Pundarika *Kushta* is characterised by white skin with a reddish tint and red margins, marked by visible red lines and blood vessels. The elevated lesions produce copious, thick discharges of blood, pus, and serum. They are accompanied by itching, burning sensations, maggot infestation, and suppuration. This type of *Kushta* has an acute onset with rapid progression, and

its appearance resembles the petals of a lotus or the Butea monosperma flower.

Pundarika can be considered a DLE. Discoid lupus erythematosus (DLE) is a type of cutaneous lupus erythematosus (CLE). Cutaneous refers to skin. CLE includes types of lupus that affect your skin. People with discoid lupus get round sores, usually on their face or scalp. Another name for discoid lupus is chronic cutaneous lupus [12].

6. Sidhma Kushta



Sidhma *Kushta* is characterized by rough, downy skin with a reddish colour. The external margins are fissured and thin, while the centre appears unctuous, displaying shades of white and red. It features numerous lesions associated with mild pain, itching, burning sensations, and purulent or serous discharge. This condition has a gradual onset and progression, with minimal maggot infestation. The lesions resemble the flower of *Alabu* (*Lagenaria siceraria*, or bottle gourd) and are identified as Sidhma *Kushta*.

Tinea versicolor, pityriasis versicolor, is a common superficial fungal skin infection caused by Malassezia species, particularly *M. globosa*, *M. furfur*, and *M. sympodialis*. It typically presents as asymptomatic hypopigmented or hyperpigmented macules or patches with fine scaling, often oval or round in shape, and primarily affects the trunk and upper arms. Some patients may experience mild itching, especially in more extensive cases [13].

7. Kakanaka Kushta



Kakanaka Kushta initially presents with skin resembling the colour of a Gunja (Abrus precatorius) seed. Over time, it develops symptoms characteristic of various other types of Kushta and exhibits multiple colours. This condition is considered incurable, unlike other forms of Kushta, which are treatable.

It can be considered squamous cell carcinoma ^[14] or a primary septicemic condition

CONCLUSION

Kushta is a disease which has the involvement of all three doshas because of its different combinations of dosha amshamsha vikalpa, anubandha, sthana vibhaga, vedana, varna and samsthana, prabhava, Naama and chikitsa proper diagnosis becomes difficult. So, we should either diagnose the kushta by looking at the kushta vishesha (especially cardinal feature) of a lesion, or we should diagnose the kushta basis of dosha involved in a lesion and then recognise a particular kushta among a pool of ashtadasha (18) Kushtas .In conclusion, the differential diagnosis of *Kush*-

ta is essential for accurate identification and effective treatment. Since *Kushta* encompasses many skin disorders with distinct characteristics, understanding the specific subtype helps tailor treatments that address the root cause and symptoms. Differentiating *Maha Kushta* from other dermatological conditions ensures appropriate management, preventing misdiagnosis and unnecessary treatments. A precise differential diagnosis ultimately promotes a more effective, individualized, and compassionate patient treatment plan.

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