

SIDHMAKUSHTA: A DISEASE REVIEW**Sruthi Sreedhar**

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Article Received: 17/09/2020 - **Peer Reviewed:** 29/09/2020 - **Accepted for Publication:** 03/10/2020**ABSTRACT**

Skin disorder constitutes one of the largest groups of health problems in general practice. Good skin is an integral part of health. In Ayurveda, all skin diseases are explained under a single heading of *Kushta*. *Sidhma Kushta* is an *Oupasargikaroga*. All *Kushta* is due to aggravation of *Tridosas*. These aggravated *Dosha* vitiates *Dushyas* like *Twak*, *Raktha*, *Mamsa* and *Ambu* by circulating in them and produce *Vaivarnya*.¹ According to *Susrutha*, whenever the aggravated *Doshas* get stagnated, *Mandalas* appear at that site.² *Kushta* are innumerable in number based on the permutation and combination of *Doshas* and *Dushyas*, but mainly they are divided into seven *Maha Kushta* and eleven *Kshudra Kushta*. *Sidhma* is a variety of *Kushtaroga* according to all the authors of *Brihathrayi* and *Laghutrayi*. However, *Charaka* classified it under *Maha Kushta* and other *Acharyas* like *Susrutha* and *Vagbhata* brought it under *Kshudra Kushta*. By Dalhana's commentary it can be understood that *Sidhma* is of two types, *Sidhma Kushta* and *Pushpitha Sidhma*.³ Symptoms of *Tinea versicolor* are similar to that of *Lakshanas* of *Sidhma Kushta*, *Acharya Susrutha* has said that *Krimi* is also one of the cause for *Kushta* and *Tinea versicolor* is a superficial mycoses caused by a fungi called *Malassezia furfur*. Understanding of *Lakshanas* and *Samprapti* plays an important role in the diagnosis, prognosis and treatment of the disease. So, an attempt is made to analyse and understand the concept of *Sidhma Kushta*.

Keywords: *Kushta*, *Sidhma*, *Tinea versicolor*.

INTRODUCTION

Sidhma is a variety of *Kushta*. It is commonly seen in all the seasons; aggravation of symptoms can be seen in *Greeshma Ritu* and also in the humid climate. *Sidhma* is a *Vata Kaphaja Kushta*. It has symptoms like *Vaivarnya* (*Swetha, Tamra*), *Kandu* and *Rajaprapthi*. General causative factors explained in *Kushta* are to be considered for *Sidhma Kushta* also. According to *Rasendra Sara Sangraha*, by treating one *Kushta* patient the Vaidya gets *Punya* of *Koti Kanyadaana* (one crore marriages), offering *Tarpana* to ancestors at the banks of river *Ganga* or benefits gained while residing in *Kailasa*.⁴ It shows the importance of proper treatment. *Kushnaati Rogan Kush + Hani Kushiti* i.e. *Kushta* gives an ugly look to the body. When vitiated *Doshas* provokes the four body elements & if this derangement of seven *Dravyas* is not treated then disease is formed inside the body which manifests itself on the outermost part of the body which produces *Kushta*. According to *Arunadatta*, *Kushta* is defined as that which causes disfigurement to the body. *Bhrajaka Pitta* is located in this layer and gives color and texture to the skin. According to *Charaka*, *Sidhma* occurs in the *Triteeyaka* layer of skin, but *Susrutha* explains it is in the *Avabhasini* layer.

Review of literature:

Charaka Samhitha: *Acharya Charaka* has mentioned 18 types of *Kushta*, which are further divided into *Maha Kushta* and *Kshudra Kushta*. *Sidhma Kushta* is explained in *Maha Kushta*.

Susrutha Samhitha: *Acharya Susrutha* is the 1st one who stated clearly *anuvamshikata* & *Krimi* as a causative factor of *Kushta*. He explained *Dhatugatatwa* & *Dhatuanupravesha* of *Kushta*. *Susrutha* explained *Sidhma Kushta* under *Kshudra Kushta*.

Ashtangahridaya: In *Ashtanga Hridaya Vagbhata* has given explanation about *Kushtaroga* in the 14th chapter of *NidhanaStana* and treatment is explained under *ChikitsaStana* 19th chapter.

BhelaSamhitha: In this *Samhitha* 5th and 6th chapter of *NidhanaStana* and *Chikitsasthana Kushta* roga has

been explained. *Acharya* indicated specially polluted water as an etiological factor of *Kushta*.

Vangasena: Has explained about *Sidhma* under *Kushta Chikitsa Adhyaya*.

Yogaratanakara: Information of *Kushta* is given in the same chapter *Nidana, Chikitsa* and *Sadhyasaadhyatha* of *Sidhma Kushta* is explained. *Yogaratanakara* has explained *Sidhma Kushta* under *Maha Kushta*.

Kashyapa Samhitha: *Kushta* is described in *Kushta Chikitsa* chapter. A total of 18 types of *Kushta* have been described under *Sadhya* and *Asadhya* categories. *Sidhma* is included in *Sadhya Kushta*.

Madhava Nidana: *Madhavakara* in the chapter of *Kushta Nidana*, described *Sidhma* as *Maha Kushta*.

Sarangadhara Samhitha: No detailed description is available in this *Samhitha* except a running reference of *Sidhma* while indication of some *Yogas*.

Chakradatta: In *Chakradatta* 50th chapter the *Kushtaroga* detailed treatment schedule is given *Sidhma Kushta* is also explained in the chapter.

Bhavaprakasha: *Bhavamisra* has described *Kushta* similar to *Charaka* in *Bhavaprakasha madhyama khanda* 54th in the same chapter *Sidhma Kushta*.

Nidana Panchaka: There is no specific *Nidana* explained for *Sidhma Kushta*, so the general factors told for *Kushta* can be considered. According to *Madhukosha, Nidana* are classified into *Bahya Nidana; Abhyantara Nidana; Nidanarthakara rogas*.

Vishesha Nidana for Kushta: Apart from other *Nidana, Acharya Shodala* have mentioned *Vishesha Nidana* for manifestation of *Kushta* *Tila taila; Kulattha; Valmika; Mahishadadhi*.

Samprapti: A proper understanding of *Samprapti* is vital in planning the treatment of disease. All *Acharyas* have explained common *Samprapti* for *Kushta*. According to *Charaka*, due to *Nidana, Doshas* get aggravated which further vitiates *Twacha, Mamsa, Raktha and Lasika* and produce *Kushta*.⁵ According to *Vagbhata, Samprapti* is of two phases, due to *Bahya Nidana Dosas* it aggravates, and they reach the *Shakha* through *Tiryak Vaha Siras*. They circulate within these *Dushyas* to produce

Vaivarnatha of Twak in the initial stage of disease.⁶ Even after appearance of discoloration, if it is not treated then they will reach the deeper Dhatus and produce symptoms like Sweda, Kooda, Samkotha. These will create ideal environment for development of Krimi and these Krimi will destruct Loma, Twak, Snayu, Dhamani, Tarunasthi gradually in the later stages of the disease. According to Susrutha, the Vata gets aggravated by the Nidanas, and will combine with aggravated Pitta and Kapha to enter into the Siras, which are transversely spread over the surface of the body, wherever these Doshas get stagnated they produce Mandalas. These aggravated Doshas if not treated, it will vitiate deeper to become severe forms of Kushta.⁷

Poorvarupa: Poorvarupas are the indicator of impending disease. There is no specific Poorvarupa mentioned for Sidhma Kushta. The general Lakshana of Sidhma Kushta when appeared in mild form those are considered as Poorvarupa of Sidhma Kushta.

Lakshanas: According to Charaka, Sidhma is a type of Maha Kushta, the signs and symptoms are Parusha Aruna Varna, the periphery it is fissured and then in center it is smooth white and red shade. It appears in large number and there is less pain, itching, burning sensation, Puya, Lasika, Srava i.e., pus and serous discharge. There is formation of ulcers and sluggish in nature and get infected by Krimi. It appears like

flower of Alabu and it is at Kapha Vata predominance.⁸ In Chikitsa Stana of Charaka, symptoms such as Shweta, Tamra Varna, Tanu, Rajoghrushta and Alabu Pushpavat are explained.⁹ According to Acharya Susrutha, Sidhma is characterized by Kandu, Shweta Varna, Apayi, Tanu, and generally this disease occurs in Urdhwakaya.¹⁰ Susrutha considers Sidhma as Kaphahdika Kushta. According to Vagbhata, the Sidhma Kushta appears to be externally dry, internally it is moist in nature and while scratching scales like dust will be seen. It is smooth to touch, skin over the effected part is Tanu (soft) and it looks like Daugdhika Pushpa with whitish brown colour and most commonly appears in Urdhwakaya. Dosha involved is Vata Kapha.¹¹ According to Bhavaprakasha, Sidhma Kushta Lakshanas include white and copper colored skin followed by the scales and appears like Alabu Kusuma. The variety of symptomatology in Sidhma lesions are mainly seen over Urapradesa. Madhavakara, Yogaratnakara. Vangasena also explained the signs and symptoms similar to Acharya Charaka. Acharya Bhela emphasized the signs and symptoms of Sidhma Kushta in 5th chapter of Kushta Nidana & 6th chapter of Kushta Chikitsa adhyaya. He considered Sidhma as one of Kaphaja Kushta with symptoms like Mandala which are Pandu Varna Pankiloshta, Twakuttana, Ruksha and Tanu.¹²

Character of Sidhma	Cha (Chi, Ni)	Su	AH	KS	Bh. Sam
Parushatwak	+	-	-	-	-
Arunavarna	+	-	-	-	-
Visheerna	+	-	-	-	-
Bahir tanu	+	+	-	-	-
Atisnigdha	+	-	+	-	-
Shukla raktavabhasini	+	-	-	-	-
Bahu	+	-	-	-	-
Alpavedana	+	-	-	-	-
Alpakandu	+	+	+	-	-
Alpadaha	+	-	-	-	-
Alpapuyalasiskravi	+	-	-	-	-
Laghusamudhani	+	-	-	-	-
Alpabhedi	+	-	-	-	-
AlpaKrimi	+	-	-	-	-
Alabupushpavat	+	-	-	+	-

Sweta	+	+	-	-	-
Apaka	-	+	-	-	+
Prayashaurdhwakaaya	+	+	+	-	-
Varuni pushpin pushpavat	-	-	-	+	-
Uttitawak	-	-	-	-	-
RookshaMandalani	-	-	-	-	-
Rajoghritham	+	-	+	+	-
Nisravi	-	+	-	-	-
Bahiruksham	-	-	+	-	-
Slakshnasparsham	-	-	+	-	-
Doughdikapushpavat	-	-	+	-	-
Pichila	-	-	-	-	+
Madhuvarna	-	-	-	-	+

Upashaya: No specific *Upashaya* of *Sidhma* is mentioned in classical texts.

Sadhya Asadhyatha (Cha.Su10/6-7)

After the diagnosis and before the treatment it is important to know the prognosis of disease. If the person suffers from *Sidhma Kushta* with deranged *Vata* and *Kapha* or from any one of the *Doshas*, then it is easily curable.¹³ Based on the involvement of *Dhatus*, *Acharya Susrutha* has explained that the person who has full control over his sense organs and the *Kushta* in which only *Twak*, *Rakta* and *Mamsa* are affected, are *Sadhya* varieties. If it reaches deeper *Dhatus*, then they should be considered as *Asadhya*.¹⁴ As per *Madhavakara* he considered those varieties of *Kushta* in which *Meda*, *Asthi* and *MajjaDhatu* are involved as *Yapya*.¹⁵

The main *Vikrithi* lies in the superficial *Dhathus*, so *Sidhma* is a *Sadya Vyadhi*.

Differential diagnosis:

1. *Shwithra/swetha Kushta* (*Kaphaja Kushta*) – *Swetha* and *Guru* with *Kandu* (A.Sa:Ni:14)
2. *Mandala* - *Swetha*, *Raktha*, *Stira*, *Snigdha*, *Utsanna Mandala*, *Anyonya Samyukta*
3. *Pundarika* - *Swetha*, *Raktha*, *Pundarika Dalopamam*, *Utswedam*, *Raga*.

Chikitsa: *Acharya Charaka* mentioned that all *Kushta* are *Tridoshaja* so treatment should be done only after considering the dominance of *Dosa*. Predominant dose should be treated first. *Charaka* explained three types of *Chikitsa*.¹⁶

- *Samshodana:* *Kushta* occur due to *Doshas Bahulyatha*, these *Doshas* are *Tiryagaami* and very difficult to treat by *Shamana* therapy.
- *Shamana:* *Shamana* is done when the *Dosha* aggravation is comparatively less. *Acharya Charaka* has advised *Shamana* with *Tiktha* & *Kashaya Dravyas* after administration of proper *Shodhana*.
- *Nidana Parivarjana:* Abstaining from the etiological factors is very important. It stops the further progression of the disease by restricting vitiation of *Doshas*.

According to *Charaka*, the planning of treatment depends on the predominance of *Dosha* involved. If the disease is *Vata* predominant, *Sarpi* is advocated, *Virechana* and *Rakthamokshana* are recommended if the disease is *Pitta* predominant and *Vamana* is indicated for *Kapha Dosha*.¹⁷ Once *Shodhana* is done, *Snehapana* is advised by *Acharya Charaka* as the patient would have become weak and also may lead to aggravation of *Vata*. Hence to provide strength to the patient and to control the *Vata*, *Snehapana* is done.¹⁸ *Susrutha* explained treatment with particular period of time, such as every fifteen days *Vamana Karma*, every month *Virechana Karma*, every six months *Raktha mokshana* every third day *Nasya Karma*.¹⁹ *Vagbhata's* opinion is similar to *Susrutha*. According to *Rasendra Sara Sangraha*, *Panchakarma* is the first line of treatment. *Vamana* is done once in 15 days, *Virechana* is done once in a month, *Rakthamokshana* is done once in 6 months and every 7th day *Nasya* is

done. But when *Kushta* is of recent origin, symptoms and *Dosha* aggravation are minimal then *Alpa Kriya* can be done.²⁰

Pathya Apathya of Sidhma Kushta: *Pathya Apathya* has a very important role in *Ayurveda*, as it is believed that without *Pathyaapathya* treatment won't get good result. *Sidhma Kushta* does not have separate *Pathyaapathya*, because it is understood that the *Pathyaapathya* mentioned in *Kushtaroga* is related to *Sidhma Kushta* also.

Pathya Ahara: *Sashtikashali Yava, Kudag, Khadira, Jangalamamsa, Khadirodaka, Tiktarasa, Pattola, Brihatiphala, Kakamachi, Nimbapathra, Lashun, Punarnava, Meshasringi, Bhallathaka, Triphala Chithraka* etc.

Vihara: *Vishrama*

Apathyaaahara: *Guru Anna, Virudha Anna, Vishamam bhojana drava Anna, Navanna, Dugdha, Vidahi Anna, Guda, Amla Kabani Katurasa, Tila, Masha*

Vihara: *Swedanakarma, Strisamsarga, Ativyavaya*
According to *Susrutha*, one who is suffering *Kushta* should use *Khadira* in daily life for the purpose of bathing, drinking and along with food. Apart from this *Susrutha* explained one who is suffering from *Kushta* should maintain cleanliness by cutting unwanted hairs & nails and should take medicines regularly.²¹

Modern aspects of Sidhma: *Sidhma* can be compared with *Pityriasis versicolor* in modern medical science.

Synonyms: *Tinea versicolor, Dermatomyces, Furfuracea*. It is a mild chronic fungal infection of skin caused by *Pityrosporum* species. It is characterized by discrete scaly discoloured or depigmented areas mainly on the upper trunk. The patient usually complains only of a patchy and varying change of skin colour may be associated with mild irritation. The primary lesion is a sharply demarcated macule, sometimes slightly erythematous but characterized by fine branny scaling. Typically, the eruption shows large confluent areas, scattered oval patches & outlying macule. The site most commonly affected is the upper trunk but is also often spread to the upper arms, the neck and the abdomen. Lesions occur in the axillae, groins, thighs and

genitalia which extends down to the forearms, on to the back of hands and into the popliteal fossae. Facial & scalp involvement are well recognized in the tropics. The colour of the scales may vary from pale ochre to medium brown. In the untanned white skin the affected areas are darker than normal but they fail to respond to light exposure and in the sun tanned subject, the abnormal skin is commonly paler spontaneously or as a result of treatment, the residual depigmentation may remain for many months without scaling. In hypopigmented macules, *Malassezia furfur* is in the cornified layer produces a sun protection factor, Hyperpigmented macules coloured hyphae of *Malassezia furfur* is in the cornified layer. Orthokeratosis type of scales are present.²²

DISCUSSION

Acharya Susrutha has explained *Sidhma* under *Kshudra Kushta*. The characteristic site and colour of the lesions are mentioned same as *Charaka Chikitsa Sthana*. *Kandu* is the symptom mentioned by *Susrutha* only. One more specific symptoms *Apayi*²³ which means *Akastakari* i.e., not troublesome to the patient has been mentioned. It shows low severity of *Sidhma*. Among *Saptha Dravyas* mentioned for the causation of *Kushta*, the *Tridosas Vata, Pitta, Kapha* and two *Dushyas (Rasa, Raktha)* plays an important role in the management of *Sidhma Kushta*. The role of *Mamsa* and *Lasika* seems to be less. *Charaka* has considered *Sidhma Kushta* under the heading of *Vata Kaphaja Kushta*. On other hand, *Susrutha* has stressed the role of *Kapha* in the pathogenesis of *Sidhma Kushta*. When we go through the *Lakshanas* of *Dhathugata Kushta*, it is evident that only two *Dushyas* among the four are involved in the pathogenesis of *Sidhma (Su.Ni)*. *Lakshanas* like *Vivarnyata, Rukshata, Kandu* are *Twak gata Kushta Lakshana*. *Kandu* is *Lakshana* of *Rakthagata Kushta* also. By this we can consider that only *Twak* and *Raktha* are involved. By *Nidana Dosas* get aggravated and they get localised in the superficial layer of skin i.e., *Avabhasini*. Aggravated *Kapha* increases the *Kledatha* to produce *Swedaavaran* and also provide suitable environment for the development of *Krimi* in

it (which is similar to that of pathology of *Tinea versicolor*). *Raja Prapthi* is due to *Vata* diseases. In brief *Vata*, *Kapha*, *Twak* and *Raktha* involve in the pathogenesis of *Sidhma Kushta*.

CONCLUSION

Sidhma is one among the *Ekadasa Kshudra Kushta* described by *Susrutha* and *Vagbhata*. *Charaka* mentioned *Sidhma* under *Sapta Maha Kushta*, which has similar signs and symptoms as those mentioned by *Susrutha* except *Srava*. *Susrutha*'s explanation of *Sidhma Kushta* is more relevant practically. When the *Doshas* are in the superficial *Dhatu* and the aggravation is relatively less, then it can be considered as *Sidhma* explained by *Susrutha*. Similarly, when the *Dosha* aggravation is severe and the deeper *Dhatus* are involved, then it can be considered as *Sidhma* explained by *Charaka*. *Sidhma* explained by *Charaka* in *Nidanasthana* is similar to that of *Tinea corporis* which is much severe than *Tinea versicolor* (*Susruthoktha Sidhma*). All *Kushta* are *Tridoshaja*. Most of the symptoms of *Sidhma Kushta* is *Kapha Vata* dominant. *Acharya Charaka* has described four *Dushyas* as *Twak*, *Raktha*, *Mamsa* and *Lasika Dhathu* which are primarily involved in the manifestation of *Kushta*. In *Sidhma* most symptoms are due to *Rasa Raktha Dushti*, so the primary *Dushyas* involved are *Rasa* and *Raktha*. *Srothas* involved are *Rasavaha Srothas* and *Raktha Vaha Srothas*. Treatment is always based on the predominance of *Dosha*.

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