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A Survey Study Of *Yuvanpidika* (Acne) In The Context Of *Dosha* Predominance

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ABSTRACT: -

A great philosopher says, "Human faces express and represent their personality and wisdom." *Yuvanpidika* described under the *Kshudrarogas* in *Ayurveda* text. *Yuvanpidika* is one of *Kshudrarogas* which mainly affects the skin of face. According to *Ayurveda* text it occurs due to imbalance of *Kapha*, *Vata*, and *Rakta*. It means the eruptions occur on the face of young person is called *Yuvanpidika*. Sometime it may appear on upper chest & back but generally it manifests on facial skin only and this might be the reason that word *Mukhdushika* has been used as a synonym of *Yuvanpidika* at many places. Acne vulgaris (henceforth acne) is the eighth most common skin disease, according to the Global Burden of Disease Study 2010, with a global prevalence (for all ages) of 9.38 percent. *Acharya Vijayrakshita*, commentator of *Madhava Nidana* had used the term *Yuvana Pidika* as for *Mukh-Dushika* for the first time.

Key Words: *Yuvanpidika*, *Kshudrarogas* *Mukh-Dushika*.



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INTRODUCTION

Ayurveda is the science of life which described the *Hita* and *Ahita* towards *Ayu*. Means, it described the favorable and unfavorable to life. If man doesn't follow the rules described in *Ayurveda*, it leads to imbalance of *Dosha* ultimately this produces different disorders. *Ayurveda* is a very ancient scripture. Every person desires healthy, glowing skin that he or she finds attractive. People are constantly conscious of their health and appearance. Acne vulgaris (henceforth acne) is the eighth most common skin disease, according to the Global Burden of Disease Study 2010, with a global prevalence (for all ages) of 9.38 percent^[1] The value of beauty and personality in people is growing every day. In *Ayurveda* texts various type of internal and local remedies are prescribed in the management of *Yuvanpidika*.

MATERIAL & METHODS

AIMS AND OBJECTIVE

1. Preliminary Data Of Patients:

Table no. 1: Age wise distribution of 500 patients:

S.no.	Age in years	No. of patients	Percentage
1.	18-22	113	22.6%
2.	23-27	220	44%
3.	28-32	116	23.2%
4.	33-37	38	7.6%
5.	38-42	13	2.6%
Total		500	100%

Table no. 2: Sex wise distribution of 500 patients:

S.no.	Sex	No. of patients	Percentage
1.	Female	268	54%
2.	Male	232	46%
Total		500	100%

1. To conduct a *Nidanatmaka* (Epidemiological) study of *Yuvanpidika* in context of *Dosha* predominance.
2. To identify the etiological factors in the pathogenesis of *Yuvanpidika*.

Survey of 500 subjects was done. After randomly selecting the patient, a structured questionnaire was prepared to each subject for *Nidanatmaka* survey to collect data on *Aharasatmya* (dietary pattern), This survey study was conducted at NIA and other NIA camp sites. The *Yuvanpidika* related questionnaire was specially made in an excel sheet format and data was collected by interview method.

Nidanatmaka Assessment:

OBSERVATIONS

Various observations which were made during this survey study are presented here in table & charts forms as:

Table no. 3: Religion wise distribution of 500 patients:

S.no.	Religion	No. of patients	Percentage
1.	Hindu	474	94.8%
2.	Muslim	26	5.2%
Total		500	100%

Table no. 4: Marital status wise distribution of 500 patients:

S.no.	Marital status	No. of patients	Percentage
1.	Married	198	40%
2.	Unmarried	302	60%
Total		500	100%

Table no. 5: Habitat wise distribution of 500 patients:

S.no.	Habitat	No. of patients	Percentage
1.	Rural	136	27.2%
2.	Urban	364	72.8%
Total		500	100%

Table no. 6: Education wise distribution of 500 patients:

S.no.	Education	No. of patients	Percentage
1.	High Secondary	172	34%
2.	High School	53	11%
3.	P.G.	70	14%
4.	Ph.D.	5	1%
5.	Graduate	179	36%
6.	Primary School	21	4%
Total		500	100%

Table no. 7: Occupation wise distribution of 500 patients:

S.no.	Occupation	No. of patients	Percentage
1.	Businessman	19	3.8%
2.	Govt. Service	39	7.8%
3.	Housewife	47	9.4%
4.	Labor	30	6%
5.	Private job	97	19.4%
6.	Shopkeeper	1	0.2%
7.	Student	267	53.4%
Total		500	100%

Table no. 8: Socioeconomic status wise distribution of 500 patients:

S.no.	Socioeconomic status	No. of patients	Percentage
1.	High Income group	8	1.6%
2.	Lower middle class	200	40%
3.	Upper middle class	230	46%
4.	Poor	62	12.4%
Total		500	100%

Table no. 9: Desh wise distribution of 500 patients:

S.no.	Desh	No. of patients	Percentage
1.	Anupa	85	17%
2.	Jangala	153	30.6%
3.	Sadharana	262	52.4%
Total		500	100%

Table no. 10: Ahara wise distribution of 500 patients:

S.no.	Ahara	No. of patients	Percentage
1.	Vegetarian	422	84.4%
2.	Non-vegetarian	78	15.6%
Total		500	100%

NIDANATMAKA ASSESSMENT:**Table no. 11: Frequency of food/day wise distribution of 500 patients:**

S.no.	Frequency of food	No. of patients	Percentage
1.	1 time	10	2%
2.	2times	319	64%
3.	3 times	158	32%
4.	4 times	13	2%
Total		500	100%

Table no. 12: Over eating food habit wise distribution of 500 patients:

S.no.	Over eating	No. of patients	Percentage
1.	Never	91	18.2%
2.	Rarely	188	37.6%
3.	Sometimes	209	41.8%
4.	Often	12	2.4%
Total		500	100%

Table no.13: Dietary habit wise distribution of 500 patients:

S.no.	Dietary habit	No. of patients	Percentage
1.	<i>Adhyasana</i>	29	5.8%
2.	<i>Samasana</i>	215	43%
3.	<i>Vishmasana</i>	143	28.6%
4.	Proper dietary habits	113	22.6%
Total		500	100%

Table no.14: Akalabhajana (Irregular food intake) wise distribution of 500 patients:

S.no.	Irregular food intake	No. of patients	Percentage
1.	Never	106	21.2%
2.	Rarely	130	26%
3.	Sometimes	237	47.4%
4.	Often	20	4%
5.	Constantly	7	1.4%
Total		500	100%

Table no. 15: Distribution of 500 patient according to *Nidra*

S.no.	Dietary habit	No. of patients	Percentage
1.	<i>Alpa</i>	59	11.8%
2.	<i>Asamyaka</i>	40	8%
3.	<i>Atinidra</i>	56	11.2%
4.	<i>Samyaka</i>	345	69%
Total		500	100%

Table no.16: Distribution of 500 patients according sleep just after meal during day:

S.no.	Sleep just after meal during day	No. of patients	Percentage
1.	Never	157	31.4%
2.	Rarely	99	19.8%
3.	Sometimes	198	39.6%
4.	Often	36	7.2%
5.	Constantly	10	2%
Total		500	100%

Table no.17. *Kostha* wise distribution of 500 patients:

S.no.	<i>.Kostha</i>	No. of patients	Percentage
1.	<i>Mridu</i>	75	15%
2.	<i>Madhayama</i>	279	55.8%
3.	<i>Krura</i>	146	29.2%
Total		500	100%

Table no.18: Distribution of 500 patients according feeling stress

S.no.	Feeling stress	No. of patients	Percentage
1.	Never	64	12.8%
2.	Rarely	111	22.2%
3.	Sometimes	259	51.8%
4.	Often	55	11%
5.	Constantly	11	2.2%
Total		500	100%

Table no. 19: Distribution of 500 patients according to dominant Rasa intake:

S.no.	Dominant Rasa intake	No. of patients	Percentage
1.	<i>Amla, Madhur</i>	136	27.2%
2.	<i>Amla, Katu, Lavana</i>	106	21.2%
3.	<i>Amla, Katu</i>	93	18.6%
4.	<i>Madhur</i>	67	13.4%
5.	<i>Madhur, Katu</i>	54	10.8%
6.	<i>Katu</i>	44	8.8%
Total		500	100%

Table no.20. Distribution of 500 patients according to Diwaswapna:

S.no.	Diwaswapna	No. of patients	Percentage
1.	No	266	53.2%
2.	2 hours	38	7.6%
3.	1 hours	78	15.6%
4.	½ hour	79	15.8%
5.	Uncertain	39	7.8%
Total		500	100%

Table no.21: Addiction wise distribution of 500 patients:

S.no.	Addiction	No. of patients	Percentage
1.	No addiction	199	39.8%
2.	Tea	191	38.2%
3.	Tea, Coffee	55	11%
4.	Tea, Smoking	16	3.2%
5.	Tea, Tobacco	10	2%
6.	Tea, Alcohol	17	3.4%
7.	Coffee	12	2.4%
Total		500	100%

Table no 22: Guru Ahara (Heavy food/junk food) intake wise distribution of 500 patients:

S.no.	Excessive <i>Guru Ahara</i> (Heavy food/junk food) intake	No. of patients	Percentage
1.	Never	95	19%
2.	Rarely	201	40.2%
3.	Sometimes	182	36.4%
4.	Often	22	4.4%
Total		500	100%

Table no. 23: Atishithahara Sevana (Excessive intake of cold food & ice creams, cold drinks) wise distribution of 500 patients:

S.no.	<i>Atishithahara Sevana</i>	No. of patients	Percentage
1.	Never	77	15.4%
2.	Rarely	195	39%
3.	Sometimes	208	41.6%
4.	Often	20	4%
Total		500	100%

Table no.24: Excessive intake of oily /spicy food wise distribution of 500 patients:

S.no.	Excessive intake of oily /spicy food	No. of patients	Percentage
1.	Never	90	18%
2.	Rarely	150	30%
3.	Sometimes	233	46.6%
4.	Often	19	3.8%
5.	Constantly	8	1.6%
Total		500	100%

Table no.25: Atidrava (Excessive intake of milk/fruit juice/fruit shake) intake wise distribution of 500 patients:

S.no.	<i>Atidrava</i> (Excessive intake of milk/fruit juice/fruit shake) intake	No. of patients	Percentage
1.	Never	90	18%
2.	Rarely	163	32.6%
3.	Sometimes	213	42.6%
4.	Often	28	5.6%
5.	Constantly	6	1.2%
Total		500	100%

Table no.26: *Atapasevana* (Direct exposure in sunlight) wise distribution of 500 patients:

S.no.	<i>Atapasevana</i> (Direct exposure in sunlight)	No. of patients	Percentage
1.	Never	62	12.4%
2.	Rarely	137	27.4%
3.	Sometimes	221	44.2%
4.	Often	72	14.4%
5.	Constantly	8	1.6%
Total		500	100%

Table no 27: Distribution of 500 patients according spend long time in hot humid environment

S.no.	Spend long time in hot humid environment	No. of patients	Percentage
1.	Never	102	20.4%
2.	Rarely	164	32.8%
3.	Sometimes	191	38.2%
4.	Often	39	7.8%
5.	Constantly	4	.08%
Total		500	100%

Table no.28: *Prakriti* distribution of 500 patients:

S.no.	<i>Prakriti</i>	No. of patients	Percentage
1.	<i>Vatapittaja</i>	197	39.4%
2.	<i>Pittakaphaja</i>	188	37.6%
3.	<i>Vatakaphaja</i>	115	23%
Total		500	100%

Table no 29: *Sara* distribution of 500 patients:

S.no.	<i>Sara</i>	No. of patients	Percentage
1.	<i>Pravara</i>	80	16%
2.	<i>Madhyama</i>	311	62.2%
3.	<i>Avara</i>	109	21.8%
Total		500	100%

Table no.30: Samhanana distribution of 500 patients:

S.no.	Samhanana	No. of patients	Percentage
1.	<i>Pravara</i>	66	13.2%
2.	<i>Madhyama</i>	238	47.6%
3.	<i>Avara</i>	196	39.2%
Total		500	100%

Table no.31: Pramana wise distribution of 500 patients:

S.no.	Pramana	No. of patients	Percentage
1.	<i>Pravara</i>	55	11%
2.	<i>Madhyama</i>	294	58.8%
3.	<i>Hina</i>	151	30.2%
Total		500	100%

Table no.32: Satmya wise distribution of 500 patients:

S.no.	Satmya	No. of patients	Percentage
1.	<i>Mishra Rasa</i>	378	75.6%
2.	<i>Sarva Rasa</i>	122	24.4%
Total		500	100%

Table no.33: Satva wise distribution of 500 patients:

S.no.	Satva	No. of patients	Percentage
1.	<i>Pravara</i>	24	4.8%
2.	<i>Madhyama</i>	179	35.8%
3.	<i>Avara</i>	297	59.4%
Total		500	100%

Table no.34: Abhyavarana shakti wise distribution of 500 patients

S.no.	Abhyavarana shakti	No. of patients	Percentage
1.	<i>Pravara</i>	48	9.6%
2.	<i>Madhyama</i>	375	75%
3.	<i>Avara</i>	77	15.4%
Total		500	100%

Table no.35: Jaranashakti wise distribution of 500 patients:

S.no.	Jaranashakti	No. of patients	Percentage
1.	<i>Pravara</i>	91	18.2%
2.	<i>Madhyama</i>	278	55.6%
3.	<i>Avara</i>	131	26.2%
Total		500	100%

Table no.36: Agni wise distribution of 500 patients:

S.no.	Agni	No. of patients	Percentage
1.	<i>Manda</i>	62	12.4%
2.	<i>Sama</i>	259	51.8%
3.	<i>Tikshna</i>	46	9.2%
4.	<i>Vishama</i>	133	26.6%
Total		500	100%

Table no.37: Vyayamashakti wise distribution of 500 patients:

S.no.	Vyayamashakti	No. of patients	Percentage
1.	<i>Pravara</i>	54	10.8%
2.	<i>Madhyama</i>	191	38.2%
3.	<i>Avara</i>	255	51%
Total		500	100%

Table no.38: Vaya wise distribution of 500 patients:

S.no.	Vaya	No. of patients	Percentage
1.	Bala	421	84.2%
2.	Madhayama	79	15.8%
Total		500	100%

ASSESSMENT CRITERIA**Table no.39: Distribution of 500 patients according to time duration of Yuvanpidika**

S.no.	Time duration of Yuvanpidika from	No. of patients	Percentage
1.	2 months	149	29.8%
2.	6 months	177	35.4%
3.	1 year	55	11%
4.	More than 1 year	119	23.8%
Total		500	100%

Table no.40: Distribution of 500 patients according to affected area by Yuvanpidika

S.no.	Affected area by Yuvanpidika	No. of patients	Percentage
1.	Face	339	67.8%
2.	Face, Neck	9	1.8%
3.	Face, Neck, Upper chest	5	1%
4.	Face, Neck, Upper chest, upper back & shoulder	3	0.6%
5.	Face, upper back & shoulder	42	8.4%
6.	Face, Upper chest	29	7.8%
7.	Face, Upper chest, upper back & shoulder	4	0.8%
8.	Neck, Upper chest	2	
9.	upper back & shoulder	31	6.2%
10.	Upper chest	35	7%
11.	Upper chest, upper back & shoulder	1	0.2%
Total		500	100%

Table no.41: Distribution of 500 patients according to type of skin

S.no.	Type of skin	No. of patients	Percentage
1.	Normal	82	16.4%
2.	<i>Snigdha</i>	370	74%
3.	<i>Ruksha</i>	48	9.6%

Table no.42: Distribution of patients according to *Snigdhatata* (oiliness of skin)

S.no.	<i>Snigdhatata</i> (oiliness of skin)	Grade	No. of patients	Percentage
1.	Mild Oiliness, not seen with naked eye, no need to wash face frequently (only 1-2 times a day)	1	246	66.49%
2.	Moderate Oiliness, Oiliness is visible on skin, need to wash face frequently (3-4 times a day)	2	112	30.27%
3.	Severe Oiliness, Excessive Oiliness, need to wash face more frequently (>4 times a day)	3	12	3.24%
Total			370	100%

Table no.43: Distribution of patients according to *Rukshata* (dryness of skin)

S.no.	<i>Rukshata</i> (dryness of face)	Grade	No. of patients	Percentage
1.	Mild dryness (not seen but felt by touch)	1	45	93.75%
2.	Moderate dryness (Stretching of the skin that person feels)	2	3	6.25%
Total			48	100%

Table no.44: Distribution of 500 patients according to *Kandu* (itching)symptom

S.no.	<i>Kandu</i> (itching)	Grade	No. of patients	Percentage
1.	No Itching	0	305	61%
2.	Mild Itching (Occasional itching but does not disturb routine activity)	1	158	31.6%
3.	Moderate Itching (Frequent itching, disturbs routine activity but does not disturb sleep)	2	31	6.2%
4.	Severe Itching (Frequent itching that disturbs routine activity as well as sleep)	3	6	1.2%
Total			500	100%

Table no.45: Distribution of 500 patients according to *Daha* (burning sensation)

S.no.	<i>Daha</i> (burning sensation)	Grade	No. of patients	Percentage
1.	No Burning sensation	0	349	69.8%
2.	Mild Burning sensation	1	134	26.8%
3.	Moderate Burning sensation	2	12	2.4%
4.	Severe Burning sensation	3	5	1%
Total			500	100%

Table no.46: Distribution of 500 patients according to *Vedana*(pain) in *Pidika*

S.no.	<i>Vedana</i> (pain) in <i>Pidika</i>	Grade	No. of patients	Percentage
1.	No tenderness	0	253	50.6%
2.	Pain on deep pressure over the <i>pidika</i>	1	189	37.8%
3.	Pain on touch	2	57	11.4%
4.	Pain without touch	3	1	0.2%
Total			500	100%

DISCUSSION

- ❖ **Age:** Table no.1. shows that out of 500 patient maximum incidence of patients (44%) were found in the age group of 23-27years followed by age group of 28-32 years i.e., 23.2%. This also indicates that in this age groups peoples use chemical cosmetics, they have irregular dietary habits and taking more fast food due to their busy life style.
- ❖ **Gender:** Table no 2. shows that out of 500 patients 54% were female and 46% were male. Probable reason may be that females have more affinity towards spicy food, *Usna* ,*Tiksna Ahara*, fast food and they are more beauty conscious than males.
- ❖ **Religion:** Table no 3. shows that out of 500 patient maximum number of patients 94.8% belonged to Hindu religion. This could be due to the fact that the study was conducted in a Hindu-dominated area.
- ❖ **Marital status:** Table no 4. shows that Maximum number of patients (60%) were unmarried because it initiates in adolescence and resolves by mid-twenties.
- ❖ **Habitat:** Table no 5. shows that out of 500 patient maximum patients 72.8% were belonged to urban area, this may be due lack of personal hygiene and in urban area people are less conscious about their health. In urban area environment is more polluted than rural area.
- ❖ **Education:** Table no 6. shows that out of 500 patients maximum 36% patient were graduate. There is no relation of between education and disease prevalence.
- ❖ **Occupation:** Table no 7. shows that Maximum patients 53.4% were students, this is due to the prevalence of disease is in *Yuvavastha*. The other reason is that mostly student have irregular dietary habits and sleeping pattern, they not follow proper *Dincharya*.
- ❖ **Socioeconomic status:** Table no 8. shows that out of 500 patient maximum patients were belonged to upper middle -class family, this data only represents the status of patient, there is no significance of family status in *Yuvanpidika*.
- ❖ **Desh:** Table no. 9. shows that Maximum no of patients (52.4%) belonged to *Sadharana Desh*, this is due to the fact that the site where the survey study is carried out was *Sadharana Desh*. *Saharana Desh* have characteristics of both *Jangala* and *Anupa Desh*.
- ❖ **Ahara:** Table no.10. shows that 84.4% patients were vegetarian. Vegetarians have the highest incidence in this study. The reason could be the study location, where the majority of the patients were vegetarians. Among them unusual eating habits, as well as the incorrect combination of foods, may play a role in the development of *Yuvanpidika*.
- ❖ **Dietary habits:** Table no 13. shows that in survey study majority of patients were taking *Vishmasana* (28.6%), only 22.6% were followed proper dietary habits. *Vishmasana* is the chief cause of most of the skin disease.
- ❖ **Akalabhojana (Irregular food intake):** Table no 14. shows that 1.2% patients constantly taken *Akalabhojana* (Irregular food intake), irregular food intake leads to *Mandagni*, due to *Mandagni ama* formation occurs, which plays a major role in *Samprapti* of any disease.
- ❖ **Nidra:** Table no 15. shows that Maximum patients 69%were having *Samyaka Nidra*,. *Nidra's* role in *Medoroga* is clearly stated by *Acharya Charaka*. Excessive sleep is another symptom of *Medodusthi*, which is caused by *Kapha Dosha* vitiation and fat accumulation in the body.
- ❖ **Sleep just after meal during day:** Table no 16. shows that Maximum 39.6%patients were sometimes, sleeping just after meal. Sleeping just after meal during day is the cause of *Raktadushti*.
- ❖ **Kostha:** Table no 17. shows that Maximum 55.8% patient were having *Madhayama kostha*.

Kostha assessment is more significant in selecting suitable drug for treatment. In *Madhayama Kostha Kapha Dosha* is predominant.

- ❖ **Stress:** Table no 18. shows that 2.2% patients were having constantly stressed, 11% having often stressed and maximum 51.8% having sometimes stressed. This shows that *Yuvanpidika* disease affects the mental health of person. *Chintadi Mansika bhava*, affects *Hridaya* and *Oja*. *Hridaya* is place of *Sadhaka Pitta* therefore, *Pittadushti* takes place.
- ❖ **Dominant rasa intake:** Table no 19. shows that in this survey study out of 500 patients maximum 27.2% patients were taking *Amla, Madhur Rasa* dominant diet. By this observation we can say that maximum patients were taking *Katu* and *Amla Rasa Pradhana Ahara* which cause *Pitta Prakopa*.^[2]
- ❖ **Divaswapna:** Table no 20. shows that Total 46.8% patients were having day sleep habit. *Divaswapna* is *Vata -Kapha Prakopka* according to *Acharya Sushruta*.
- ❖ **Addiction:** Table no 21. shows that 38.2% patients had addiction of tea and 11% patients had addiction of both tea and coffee. Tea is a very common and widely available product that produces *Pitta, Prakupit pitta* is cause of *Yuvanpidika*. More amount of *Drava* diet (tea and coffee and other liquid fluid) leads to *Raktadushti* according to *Acharya Charaka*.
- ❖ **Guru ahara (fast food /junk food):** Table no 22. shows that 36.4% patients were taking *Guru Ahara* sometimes and 4.4 % of patients were taking it often. *Guru Ahara* and *Vidahi Ahara* like fast food, burger, pizza etc. are heavy to digest, *Kapha Vardhaka* (Because *Guru* is *Guna* of *Kapha Dosha*)^[3]
- ❖ **Atishithahara sevana (cold drinks, refrigerated food items):** Table no 23. shows that Maximum 41.6% patients were sometimes taking *Shitaahara* in large quantity. *Atishithahara* includes ice-creams, refrigerated

food items. *Shita Guna* is lead to *Kapha & Vata Prakopaka*^[4]

- ❖ **Snigdha ahara/ Ushna /Tikshna ahara:** Table no24. shows that Maximum 46.6% patients were taking *Snigdha, Ushna, Tikshana Ahara* (spicy food) sometimes. *Snigdha Guna* is cause of *Srotomardavata* and *Abhisyanada*. *Snigdha Guna* is responsible for *Sanga Pradhana Srotodusti* and *Yuvanpidaka* is one among them. *Ushna* and *Tikshna Guna* cause *Pitta Prakopa*.
- ❖ **Atidrava (Excessive intake of milk/fruit juice/fruit shake):** Table no25. shows that Maximum 42.6% patients were taking *Atidrava Ahara* sometimes, *Atidrava Sevana* also leads to *pitta Dushti* (as *Drava* is *Guna* of *Pittadosha*)
- ❖ **Atapa sevana (Direct exposure in sunlight):** Table no 26 shows that Maximum 44.2% patient were reported sometimes sun exposure. Sun exposure cause of disturbance in normal function of *Bramjaka pitta*. More sweating occurs as a result of sun exposure, which increases the chances of pimples. *Atapasevana* leads to *Raktadushti and Pittadushti* ^[5].
- ❖ **Spend long time in hot humid environment:** Table no 27 shows that 20.4% patients were never spent long time in the hot humid environment.
- ❖ **Prakriti Pariksha:** Table no.28 shows that the maximum no. Of patients were of *Vata-Pittaja Prakṛti* (39.4%) and *Pittajakaphaja Prakṛti* (37.6%) indicates the role of *Pitta Dosha* in the disease *Yuvanpidika*. As *Vata* and *Kapha Doṣa & Rakta Dhatu* are responsible for the pathogenesis of disease *Yuvanpidika*, so by this observation it is clear that the *pitta prakriti* people are more prone to *Yuvanpidika* disease. It aids in determining what is natural and normal for a person. *Kapha* dominant *Prakriti* people are powerful, *Pitta* dominant *Prakritis* are moderately powerful, and *Vata* dominant

Prakritis are weaker. As a result, *Prakriti* influences *Atura Bala*, strength, and tolerance capacity.

- ❖ **Sara Pariksha:** In Table no.29 the observations shows that maximum numbers of patients were having *Madhyama Sara* (62.2%), All of the dhatus have good *Sara*, that means the body's defense mechanisms are in good working condition. A person having *Avarasara* indicates low immunity. *Avara Sara* people's sicknesses are often tough to control, but *Pravara Sara* people are relatively easy to control.
- ❖ **Samhanana Pariksha:** Table no.30 shows that the maximum patients were having *Madhyama Samhanana* (47.6%), A patient who has *Avara Samhanana* is difficult to cure and has poor prognosis. Whereas patient with *Pravara Samhanana* is easy to cure and have good prognosis.
- ❖ **Pramana Pariksha:** Table no.31 shows maximum 58.8% patients were having *Madhyama Pramana*.
- ❖ **Satmya Pariksha:** Table no.32 shows that maximum patients were having *Misra Rasa Satmya* 75.6%, *Satmya* may change according to the *Ritucharya*, *Desha*, etc and allergic disorders may be prevented by avoiding *Asatmya Ahara Vihara*.
- ❖ **Satva Pariksha:** Table no.33 shows that out of 500 patient maximum patients were having *Avara Satva* i.e. 59.4%. People with *Avara Satva* tend to engage in etiological factors on a regular basis, increasing their chances of developing health issues.
- ❖ **Aharashakthi Pariksha:** Both the capacity of intake (*Abhyavaharanashakti*) and the power of digestion are represented by *Ahara Shakti* (*Jaranashakti*). It also provides information on a person's *Agni's* current state.

- ❖ **Abhyavarana Shakti:** Table no.34 shows that majority of patients were having *Madhyama Abhyavarana shakti* (75%).

- ❖ **Jaranashakti:** Table no.35 shows that majority of patients were having *Madhyama Jaranashakti* (55.6%).

- ❖ **Agni:** Table no.36 shows that majority of patients were having *sama agni* 51.8% followed by *Vishama Agni* (26.6%).

Bala of *Roga*, as well as *Bala* of *Nidna* and *Dosha*, is important in determining the disease's prognosis and treatment options. If *rog Bala* and *Dosha Bala* are both *Pravara*, then only he should be treated with *Balavat Ausadha*. If *rog Bala* is *Avara* and *Dosha Bala* is *Pravara*, *Mahat Ausadha* should not be used at once.^[6]

- ❖ **Vyayamashakti:** Table no.37

Vyymashakti refers to a person's ability to work or their tolerance for exertion. For maintaining health and *Agni*, daily exercise up to *Ardha Vyayamashaktii*, or half strength, is recommended according to ancient *Acharyas*.^[7]

- ❖ **Vaya Pariksha:** Table no.38

Bala Vaya was reported in maximum patients 84.2%. This indicates that the majority of the patients of *Yuvanpidika* were of a young age. This finding could be explained by the fact that at this stage, people consume the highest amount of *Nidana*, such as *Drava*, *Snigdha*, junk food, and preserved food, refrigerated food, exposure to sunlight, irregular dietary pattern, and in *Bala Vaya* the disease *Yuvanpidika* also occurs due to increase in *Shukra dhatu*, these all causes are associated with the disease.

Young age is dominated by *Pitta*, and all tissues are functioning at their best during this time. As a result, health status can be maintained better than in old age (above 60 years).

- ❖ **Time duration of Yuvanpidika:** According to table no.389 observations the highest percentage of patients i.e. 35.4% were having *Yuvanpidika* from 6 months, second highest percentage of patients i.e. 29.8% were having this disease from 2 months. This data only represents the time of appearing of disease in people.
- ❖ **Affected area:** Table no.40 shows that maximum patients i.e. 67.8% were having *Yuvanpidika* only over their face & out of 100% total 88.2% patients had *Yuvanpidika* on face, neck, upper chest, upper back and shoulder. This data represents that face is main site for *Yuvanpidika* disease, The maximum number of sebaceous glands found on face than other body part. These observations also indicate the use of chemical cosmetics on face.
- ❖ **Type of skin:** Table no.41 shows that maximum 74% patients were having *Snigdha* skin, 9.6% patient were having *Ruksha* skin.
- ❖ **Snigdha (oiliness of skin):** Table no.42 shows that out of 370 patient maximum patients i.e. 66.49% patients were having mild oiliness on their face, 30.27% were having moderate oiliness and 3.24% were having severe oiliness. This indicates that highest percentage of patients have over production of sebum from sebaceous gland which is responsible for *Yuvanpidika*.
- ❖ **Rukshata (Dryness of skin):** Table no.43 shows that out of 48 patients who have *Ruksha* skin, 93.75% were having mild dryness. This indicates that dry skin type persons are less prone to *Yuvanpidika*.
- ❖ **Kandu (itching):** Table no.44 shows out of 500 patients 61% patients were reported with no itching symptom, 31.6% were having mild itching, 6.2% were having moderate itching and 1.2% were having severe itching. Itching indicates *Kaphadushti*. Because according to Ayurveda literature itching is not possible without *Kaphadushti*.
- ❖ **Daha (Burning sensation):** Table no.45 represents that out of 500 patient maximum patients (69.8%) had no complaint of burning sensation in *yuvanpidika*, 26.8% were having mild burning sensation, 2.4% were having moderate burning sensation and only 1% were having severe burning sensation. *Daha* is indication of *Pittadushti*.
- ❖ **Vedana (pain):** As shown in table no.46 maximum 50.6% patients reported with no tenderness in *yuvanpidika*, 37.8% were having pain on deep pressure over the *Pidika*. *Vedana* indicates *Vatadushti*.

CONCLUSION

Yuvanpidika is a relatively common issue, and practically everyone will have it at some point in their lives. *Vatta- Pitta Prakriti* patients are more prone to this disease. It appears in certain period of age or in specific season in individuals. It initiates in adolescence and resolves by mid-twenties or may be up to the age of 35 to 40 years. After this age *Yuvanpidika* is rarely persist.^[8] The cause is a combination of changing and unhealthy lifestyles, dietary patterns, hormonal changes, and pollutants. It is caused by *Raktavaha* (primarily), *Medovaha*, and *Sukravaha Srotodushti*, according to Ayurveda.

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