Evaluation of Varnya Mahakashaya Anulepan in Daily Regimen Vis-À-Vis Discoloration for Varna Prasadana

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ABSTRACT:
Skin being the largest organ is very unique in nature as it reflects each and every minute inevitable changes in the body. As it also connects us to the other person firstly, it become very important to have a flawless fresh skin that not only increase the confidence but shows a healthy person from inside, with the increasing lifestyle changes and environmental factor its leading to various pathologies in skin which is affecting its normalcy. To attain a healthy skin and to maintain and prevent from many such pathologies in our classical texts many references has been given along with daily regimen Anulepan has been stated. To evaluate such a reference of Charak Samhita on Varnya Mahakashaya a clinical study has been conducted at Govt Ayurveda College Raipur CG, with 60 randomly selected opd patients. All raw drugs of Varnya Mahakashaya were prepared with Go Ghrita for external application by Shatdhaut process The effects were assessed by a performa before and after and results were analyzed statistically.

Key words- Ayurveda, Anulepan, Lepa Varnya Mahakasahaya, skin, Shatdhaut Ghrita

INTRODUCTION
Skin or the integument is the largest organ of the body and constitutes 16% of the body weight, and it is reflection of overall health¹, often affected by certain anomaly at different stages of life as well as constantly changing environment exposed to dust and pollution which manifest to various skin problems among all that discoloration is common symptom that manifest first. The term Varnya refers to that which imparts Varna (skin colour) i.e. it acts as an instrument to restore and retain the natural hue, texture and tone of the skin. These Varnya dravya (complexion promoters) are not to convert the inherent colour and complexion into fairer one, but to exemplify the abnormal colour which is changed by some disturbance in normal state. The ayurvedic natural cosmetic business of India is growing at the rate of 15 20% per year much higher than India’s overall cosmetic business that has a growth rate of 7-8%.

Beauty is more than skin, rather deep according to ayurveda, there are several references of numerous medicinal plants and herbs along with their application in various formulations for enhancing complexion such as...
Varnya Mahakashayas² Varnya Dravya , Varnyakar Dravya in all of the Laghutarayi and Brihatarayi among all these drugs there methods of application has been described briefly and various daily regimen activity that has the effect of enhancing the natural texture of skin. Such a regimen Anulepanam³ has been mentioned intended for the well being of skin and for maintaining normal healthy lusture complexion and strength of skin.⁴

AIMS
To assess the efficacy of Varnya Mahakashaya

OBJECTIVE
1. To review the literature on lepa.
2. To review literature on Varna.

This thesis aims to review focus on Charakokta Varnyakar Dashemai lepa as a natural and safe for preservation and promotion of skin complexion in individuals.

Patients and method 60 healthy individuals were registered for the study between the age group ,who filed the criteria of selection from the OPD of shri NPA Govt Ayurveda college Raipur, CG

Conceptual study
Detailed review of conceptual study was done on Varnya Mahakashaya⁴ and Ghrita ⁵ from available ancient and modern literature. Detailed review of trial was reviewed and compiled.

Clinical study this was the main part of proposed research work. The present study was carried out to evaluate the Varnyakar Prasadana effect of Varnya Mahakashaya in healthy individuals. Total 60 patients were screened and registered for the study and all of them completed the trial.

Selection criteria
Inclusion criteria
1. Sex male and female
2. Age 16 year to 50 year.
3. Patients willing to participate and who give their consent in written will be included.

Exclusion criteria
1. Age <16 and >50
2. Patients with past and present history of any skin disease e.g. psoriasis, dermatitis, vitiligo etc.
3. Patients suffering from any bacterial or fungal infections or any skin infestations or who are under medication with antibiotics and antifungal drugs.
4. Patients willing to participate.

Protocol of research
Study design – single arm, open prospective.
CTRI- study is registered, trial no CTRI/2020/06/025680
Consent- written and informed consent of study objects were taken before trial.
IEC Approval- approval of synopsis for human trial was obtained from institutional ethical committee of Ayurveda college Raipur.
Proforma- proforma incorporating, detail profile of study subjects complaints, history, sign symptoms was prepared.

Preparation of drug
1. Collection Of Raw Materials
Collection of raw drugs from Shri Narayana Prasad Awasthi Govt Ayurveda College Raipur for this clinical study.

2. Preparation Method

Varnyakar Lepa is formed in 3 process:-
1. Yavkuta Churna of raw drugs
2. Kwatha formation
3. Varnyakar lepa

1. Yavkuta churna :-
Particle size reduction is another important factor for Kwatha so all raw drugs quantity of 50 gm, total after combining all 10 drugs, total amount ghrita was 50 gm. each drug were taken and prepared Yavkuta Churna (coarse powder) with then with help of Khalva Yantra and pulverier machine pounding was done for making kwatha of all these drugs.

2. Kwatha formation

Yavkuta Churna (Coarse powder) of all raw drugs obtained , was soaked over night in stainless steel vessel with 8 times of water under the Kwatha Vidhi of Sharangdhara Samhita,⁶ after this next day it was put under low flame as regulation of temperature protects heat labile phytocconstituents for kwatha preparation. Madhyam Agni is used that is mild to moderate heat used in preparation of kwatha for prolonged period till the volume is reduced to one fourth. After measuring the amount of water reduced was strained by using cotton cloth and was put in clean sterile vessel for further use. Kwatha preparation depending on nature of drug.⁷ (Table 1) Kwatha preparation depending upon quantity of drugs⁸(Table 1)

3. Varnyakara lepa in study is made by process of Shatdhaut Ghrita preparation as follows
**Ingredients**: Gow Ghrita 50 gm, Kwatha obtained. Gow Ghrita was taken in stainless steel sterile plate. Normal cold Kwatha is added above the level of Ghrita. Ghrita and water is rubbed vigorously for 6-8 minutes till the Kwatha changes slight light in colour, and the Ghrita was allowed to settle. Kwatha was removed carefully avoiding the loss of Ghrita, then same Kwatha was added to previously washed ghrita and similar procedure was repeated. This operation was carried out 100 times to obtain Varnyakar Lepa. Samples was collected after washing and stored in plastic air tight container at room temperature or in refrigerator for clinical and analytical analysis.

*Shatdhaut method* of preparing Varnyakar Lepa ended in very soft, creamy texture of Ghrita that is to be applied on affected part on body.

**Method Of Application**
- A patient was advised to first clean the face properly.
- Then advised to take this varnyakar lepa in finger tips.
- Then gently apply it on affected part twice a day.

Total duration of trial - 45 days
Follow up period- Every 15th day , patients progress was noted till the duration of study.
Grouping- there was only single trial group

**Statistical Analysis**
The result is subjected to statistical analysis by appropriate methods. Since the data is not distributed normally, Wilcoxon signed rank test and Z test is used for assessing the effectiveness of treatment, before treatment. Significance level is fixed at p-value <0.05. All the analysis is done with the help of software SPSS version 25.0.

**OBSERVATION AND RESULTS**
60 healthy individuals were registered and all completed the course of therapy. The collected data all on study variables were subjected to statistical analysis by appropriate methods. Since the data was not distributed normally, Wilcoxon signed rank test and Z test were used for assessing the effectiveness of treatment, before treatment, after treatment and after follow up (alternative to parametric paired t test) based on various study parameters. Significance level is fixed at p-value <0.05. All the analysis was done with the help of software SPSS version 25.0.

**Rukshata**: Before treatment mean score of Rukshata was 1.77 which after treatment remained as 0.30 with a relief of 70% (p-value<0.05) which is statistically significant.

**Kledata**: Before treatment mean score of kledata (snigdhata) was 1.28 which after treatment remained as 0.65 with a relief of 35% (p-value<0.05) which is statistically significant.

**Prabha**: Before treatment mean score of Prabha was 0.77 which after treatment remained as 2.65 with a relief of 65% (p-value<0.05) which is statistically significant.

**Wrinkles**: Before treatment mean score of Wrinkles was 1.35 which after treatment remained as 0.27 with a relief of 73% (p-value<0.05) which is statistically significant.

**DISCUSSION**
In the present study, 38.3% belongs to 41-50 age group, 36.7% belongs to 21-30, and 23.3% belongs to 31-40 age group, the maximum were belonging 41-50 this age group for individuals at work where mental stress other exposure i.e. environmental factors and hormonal influence which is the root causes for the disease.

The sex wise distribution of the patients reveals that of the majority patients were female 70% and 30% belong to male, which support the fact of global incidence of discoloration is associated with hormonal variations.

8.3% were having Manda Agni, 20% had Vishama Agni, 31 out of 60 had Sama Agni, 5 out of 60 had Tikshna Agni and 6 out of 60 had mixed Agni. Agni plays important role in manifestation of any disease or discomfort in body, as any type of Agni other than Sama Agni brings improper Rasa formation and consecutive Dhatus in body 9

35% patients had normal skin type, 30% had dry type of skin and only 6.7% had sensitive type of skin rest had combination skin type this shows that skin pigmentation marks is not much based on skin type it can occur in all type of skin.

25% female patient had history of contraceptives use, a aggravating cause as already proven oral contraceptive pills have side effect as producing acne and discoloration.

**Probable Mode Of Action**
Our acharya has mentioned Rasapanchaka of drug to explain the mode of action of single drug. To determination of the total effect of the drug, here it is an attempt to explain probable mode of action of Varnyakar Lepa Ayurveda has not explained single discoloration but has compiled as such disease under Kshudra Roga acharya has given special emphasis towards psychological factor like Krodha Shoka Shrama which is commonly found in most of the patients Acharya Charka has mentioned in Samprapti that aggravation of pitta along with rakta is the
chief culprit for initiation of the pathology. Discoloration is also a Rakta Pradoshaja Vyadhi Vitiatae Ranjaka Pitta, Rata Dhatu as well as Udan Vaya in body through Dhamnii and get Sthana Samshraya In Mukhgata Twacha and causes vitiation of Bhrajaka Pitta and give rise to color of skin.

Anti-inflammatory activity: in Varnya Dashemani, among 10 drugs -9 drugs are having Sheeta virya (cold potency), 6 are having Madhura (sweet) Vimaka (post metabolic effect), Madhura, Tikta (bitter) and Kashya (Astringent) Rasa and kaphapittahara property as a whole. All these factors suggest the anti-inflammatory action of the formulation as they help in detoxification of blood, Sheetavirya act as antioxidant reducing the intracellular levels of reactive oxygen species improve the discoloration11.

Because of all these properties of Varnyakar Lepa we see that they are prosperous in kashaya rasa, which is advantageous in Pitta and Rakta dominant disease. The kashaya Rasa removes the Twak Vaivarnyata and helps to attain the normal skin color. Laghu and Ruksa Guna mainly Pitta Shamaka and Rakta Prasadaka properties. Sita virya have in Varna Prasadana property which helps to purify the accumulated dosha.

In the process of making varnyakar lepa, traditional concept was carried and tested scientifically. As Shat Dhatu Ghrita alone is well known medicine in Ayurveda and this concept still needs to be explored much, so with the objective to assess in discoloration of skin and topical drug delivery of this lepa, from this study it shows better acceptability and elegance when combined with herbal ingredients with Ghrita base.

CONCLUSION

1. A look back on history shows that the people of ancient time were much aware about the beauty but description of Varna, Varnya and Vivarnta (discoloration) as a disease is found from Samhita kala onwards.

2. Discoloration or pigmentation makes the face unattractive in adolescence and young age when people are more conscious about looks. Varnya Mahakashaya described by Acharya Charaka has proved to be effective in Varna Pradanas Karma.

3. Observations showed a close resemblance to prevalence of disease in terms of Age commonly in young age & gender wise only in females, Kapha-Pita predominance show a close resemblance with the textual references.

4. In this clinical trial an attempt was made to find an effective treatment and to provide a cosmetic approach in terms of preventing discoloration on face, where significant results by use of Varnyakar Lepa application were seen.

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Table no. 1  *Kwatha* preparation depending on nature of drug.

<table>
<thead>
<tr>
<th>Drugs</th>
<th>Water</th>
<th>Reduction</th>
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<tr>
<td>soft drugs</td>
<td>4 times</td>
<td>1/4&lt;sup&gt;th&lt;/sup&gt; part</td>
</tr>
<tr>
<td>Medium-hard</td>
<td>8 times</td>
<td>1/4&lt;sup&gt;th&lt;/sup&gt; part</td>
</tr>
<tr>
<td>Very hard</td>
<td>16 times</td>
<td>1/4&lt;sup&gt;th&lt;/sup&gt; part</td>
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Table no.2 *Kwatha* preparation depending upon quantity of drugs

<table>
<thead>
<tr>
<th>Drug (quantity)</th>
<th>Ratio of water</th>
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<tbody>
<tr>
<td>1 karsha (12 gm) to 1 pala (48 gm)</td>
<td>16 times</td>
</tr>
<tr>
<td>1 pala (48gm) to 1 kudawa (192 gm)</td>
<td>8 times</td>
</tr>
<tr>
<td>1 kudawa(192gm) to prastha (786gm) and above</td>
<td>4 times</td>
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Table 3 Shows Symptomatic relief in symptoms

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Mean</th>
<th>Mean difference</th>
<th>% relief</th>
<th>SD</th>
<th>SE</th>
<th>Z</th>
<th>P-value</th>
<th>Remark</th>
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<tbody>
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<td>AT</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Rukhshata</td>
<td>1.77</td>
<td>0.30</td>
<td>-1.47</td>
<td>70</td>
<td>0.46</td>
<td>0.59</td>
<td>-6.44</td>
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<tr>
<td>Kledata</td>
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<td>0.65</td>
<td>-0.63</td>
<td>35</td>
<td>0.48</td>
<td>0.06</td>
<td>-3.69</td>
<td>0.000</td>
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<td>Prabha</td>
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<td>2.65</td>
<td>+1.88</td>
<td>65</td>
<td>0.55</td>
<td>0.07</td>
<td>-6.72</td>
<td>0.000</td>
</tr>
<tr>
<td>Wrinkles</td>
<td>1.35</td>
<td>0.27</td>
<td>-1.08</td>
<td>73</td>
<td>0.48</td>
<td>0.06</td>
<td>-5.55</td>
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