

A Case Report On Ayurvedic Management Of Dadru

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ABSTRACT

Skin (*Tvak*) is considered the largest organ of human body and acts as a barrier from external environment. It reflects the internal health and is susceptible to various disorders, which are classified in Ayurveda as *Kushta*. *Dadru* is one among the *Kshudra Kushta*, which is mainly caused by *Kapha–Pitta* vitiation and presents with circular reddish lesions and severe itching. The present study shows a case report of a 67-year-old female, who was admitted with multiple circular reddish lesions over the axillae, groins, inner thighs, waist, and buttocks, associated with burning sensation and severe itching for six months. She was diagnosed with *Dadru* based on clinical features. Ayurvedic management involving *Shamana & Shodhana chikitsa*, incorporating *Krimighna* line of management and appropriate external applications, along with dietary measures were administered. Significant improvement was observed in itching, redness, and size of the lesions. Hence, this case highlights the effectiveness of *Ayurvedic* treatment in *Dadru*.

Keywords: Skin (*Tvak*), *Kapha–Pitta* vitiation, *Dadru*, *Ayurvedic*.

INTRODUCTION

Skin (*Tvak*) is an essential organ serving as a protective barrier and thereby reflecting the internal health. Disturbance in *Tridosha* with involvement of *Rakta*, *Mamsa*, and *Lasika* leads to *Kushta* disorders¹. *Dadru* is a *Kshudra Kushta*, resulting from predominant *Kapha–Pitta* vitiation and is characterized by circular reddish lesions and itching². Factors such as improper diet, sweating, and poor hygiene can worsen the condition.³ *Ayurvedic* management emphasizing *Nidana Parivarjana*, *Shodhana*, *Shamana oushadhi*, and external applications aims at restoring *doshic* balance.

CASE REPORT

A 67-year-old female reported to the *Vishachikitsa* OPD at SDM College of Ayurveda & Hospital, Hassan, presenting with multiple circular reddish lesions along with severe itching and burning sensation in the axillae, groins, inner thighs, waist and buttocks, persisting for the last six months. The patient does not have any history of chronic illness.

General Examination

- **Temperature:** 97 F
- **Pulse rate:** 86 bpm
- **Blood pressure:** 130/90 mmHg
- **Respiratory System:** Chest clear
- **Circulatory System:** S1, S2 heard, no murmurs
- **Central Nervous System:** Conscious and oriented
- **P/A:** soft and non tender

Local Examination

- **Site:** B/L axillae, groins, inner thighs, waist and buttocks
- **Shape:** Circular
- **Colour:** Reddish
- **Number:** multiple

Relevant conflicts of interest/financial disclosures: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

- **Type of lesion:** erythematous patches, with raised borders **Dashavidha pareeksha**

Ashta sthana pareeksha

- **Nadi:** Kapha pitta
- **Mala:** Regular bowel
- **Mutra:** occasionally associated with burning sensation
- **Jihva:** Alipta
- **Shabda:** Spashta
- **Sparsha:** Anushna sheeta
- **Drik:** Prakruta
- **Akruti:** Madhyama
- **Prakruti:** Vata kapha
- **Vikruti:** Dosha - Kapha pitta; **Dushya** - Rasa, rakta, mamsa, ambu, lasika
- **Sara:** Madhyama
- **Samhanana:** Madhyama
- **Satva:** Madhyama
- **Satmya:** Katu, Amla pradhana ahara
- **Ahara shakti:** Madhyama
- **Vyayama shakti:** Madhyama
- **Vaya:** Madhyama
- **Bala:** Madhyama





Figures 1 to 4: Showing clinical presentation on day 1 of admission

MANAGEMENT

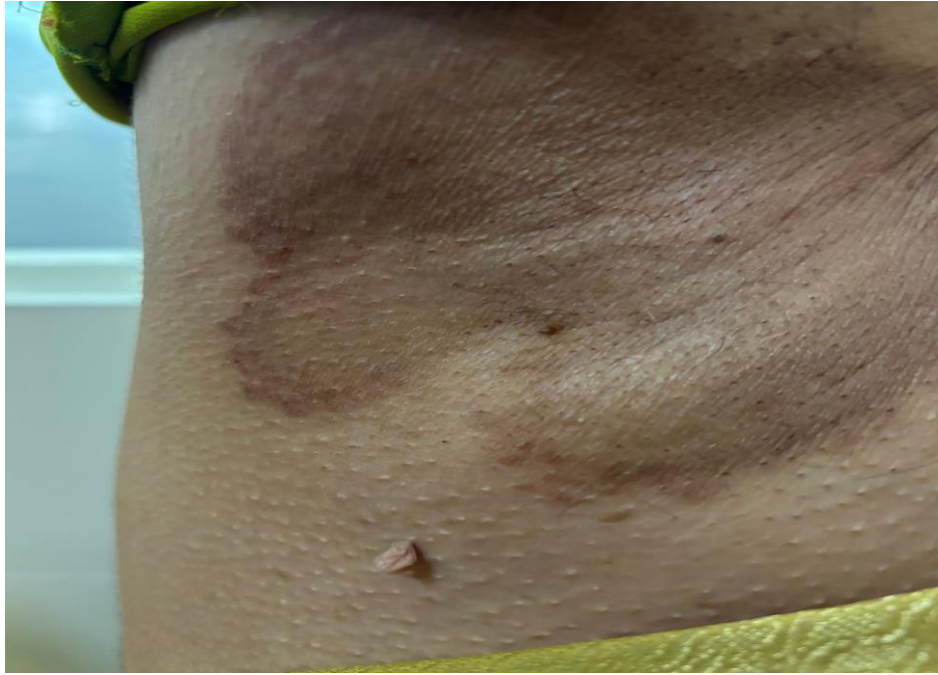
SL.NO	SHAMANA OUSHADHI	DOSE	TIME
1.	<i>Krimikutara rasa</i>	1-1-1	After food
2.	<i>Gandhaka rasayana DS</i>	1-0-1	After food
3.	<i>Arogyavardhini vati</i>	2-0-2	Before food
4.	<i>Sootasekara rasa</i>	2-2-2	Before food
5.	<i>Nimbadi kashaya</i>	15ml-0-15ml	Before food

6.	<i>Tulasi bathing powder</i>	once	for external application & wash
7.	<i>Pinda taila</i>	once	for external application at night
8.	<i>Gandha karpura</i>	once	for external application at morning

Table 1: Showing Shamana Oushadhi (for 7 days)

SL.NO	PROCEDURES	DAYS
1.	<i>Sarvanga Utsadana with Daruharidra+Kushta+Lodhra choorna+Pinda taila</i>	11 days
2.	<i>Sarvanga Parisheka with Dashamoola kwatha</i>	11 days
3.	<i>Sadyovirechana with Avipattikara choorna 15grams with honey at 11am on 04/09/2025 (2 Vegas)</i>	1 day
4.	<i>Sadyovirechana with Nimbamruthadi eranda taila 50ml at 5.30am on 05/09/2025 (5 Vegas)</i>	1 day
5.	<i>Anuvasana Basti with Nimbamruthadi eranda taila 50ml</i>	3 days
6.	<i>Anuvasana Basti with Balaguduchyadi taila 60ml</i>	3 days
7.	<i>Niruha Basti - Manjishtadi niruha basti</i> <i>Madhu - 50ml</i> <i>Saindhava - 5g</i> <i>Sneha - Balaguduchyadi taila 50ml</i> <i>Kalka - Daruharidra choorna, Lodhra choorna, Manjishta choorna, Kushta choorna (5g each), Arogyavardhini vati (2 tabs)</i> <i>Kwatha - Manjishtadi kashaya 100ml</i>	4 days
8.	<i>Virechana with Trivrut lehya 100grams with Triphala kashaya 100ml with honey on 12/09/2025 (9 vegas)</i>	1 day

Table 2: Showing treatment procedures



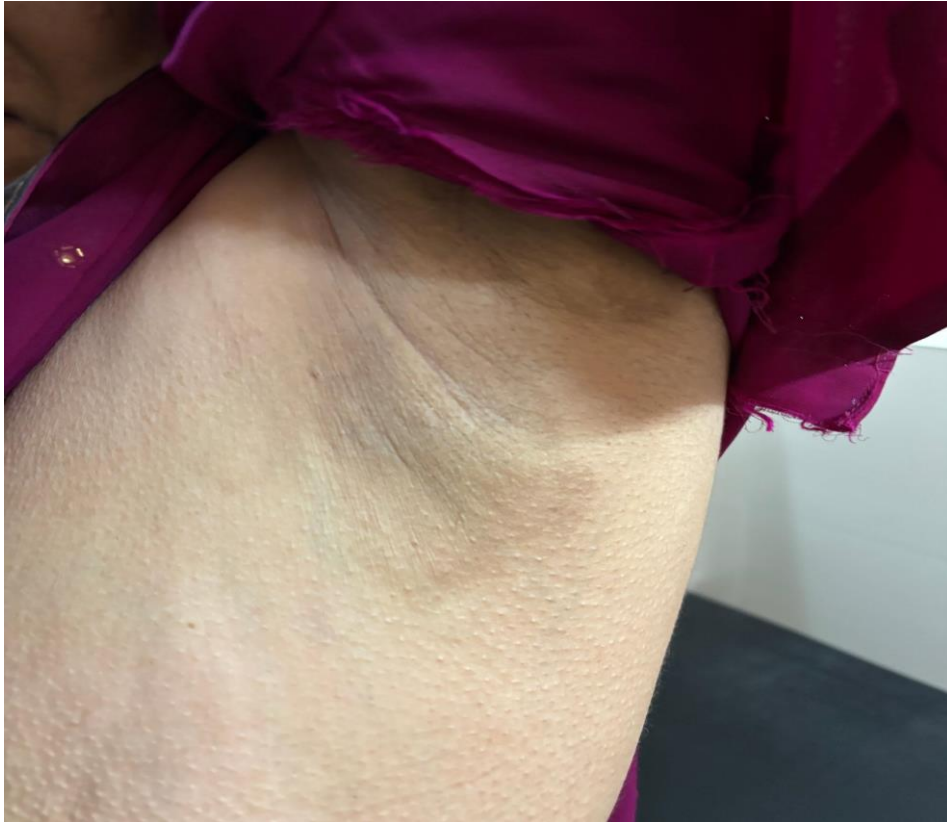


Figures 5 to 8: On the day of discharge - redness and itching reduced

SL.NO	SHAMANA OUSHADHI	DOSE	TIME
1.	<i>Gandhaka rasayana DS</i>	1-0-1	After food
2.	<i>Arogyavardhini vati</i>	1-1-1	Before food
3.	<i>Patolakaturohinyadi kashaya</i>	15ml-0-15ml	Before food
5.	<i>Aragwadhadi kwatha</i>	once	for external wash
6.	<i>Pinda taila</i>	once	for external application at night
7.	D sora lotion	once	for external application at morning

Table 3: Discharge medications







Figures 9 to 12: Follow up after 15 days - lesions subsided, patient free of symptoms

OBSERVATION & RESULTS

DAY	<i>KANDU</i>	<i>RAGA</i>	<i>DAHA</i>
1st	++++	++++	+++
14th	++	++	+
30th	+	-	-

Table 4: Observation and symptoms

DISCUSSION

Dadru involves *Kapha–Pitta* vitiation affecting *Tvak*, *Rakta*, *Mamsa*, *Ambu* and *Lasika*⁴. The patient presented with chronic circular reddish lesions, severe itching, and burning sensation, indicating deeper *dosha dushti*². *Krimikutara rasa* was prescribed in the intention of eliminating *Krimi* from the body. *Shamana oushadhi* such as *Gandhaka rasayana*,

Arogyavardhini vati, *Sootasekara rasa*, and *Nimbadi Kashaya* are indicated for *Kushta*, *Pitta–Kapha* disorders, and skin purification^{3–5, 8–9}. External medicaments like *Pinda taila*, *Gandha karpura*, and *Tulasi* bathing powder are documented for reducing inflammation and itching^{9–10}. *Pinda taila* has specific indications for *vata pittaja vikaras*, as mentioned in *Vatarakta adhikara*. As the present case shows

predominant vitiation of *Pitta dosha*, *Pinda taila* was advised.

Shodhana was planned in accordance with classical guidelines²⁻⁴. *Utsadana* helps in *kapha vilayana* and *Parisheka* prepare the body for purification, by eliminating the toxins via sweat. *Sadyovirechana* was administered for elimination of *Krimi* from the body and also for immediate and quick relief of symptoms. *Anuvasana*, and *Niruha basti* were prescribed, and curated in such a way targeting *Kapha* and *Pitta doshas*¹¹⁻¹²; and also to relieve the symptoms present in *adho-shareera*. *Virechana* was again administered to ensure complete *shuddhi* and thereby providing systemic cleansing and enhanced therapeutic outcome.

Marked symptomatic improvement reflects successful *Samprapti vighatana* and validates *Ayurvedic* principles in managing chronic *Dadru*.

CONCLUSION

This case demonstrates the effectiveness of combined *Shodhana* and *Shamana* therapy along with *Krimighna chikitsa* in treating *Dadru*. Internal medications, external applications, and purificatory therapies addressed both symptoms and underlying *doshic* imbalance³⁻⁶. Significant relief in itching, burning, redness, and lesion size confirms Ayurveda's role as an effective modality for managing *Kshudra Kushta* like *Dadru*.

REFERENCES

1. Shastri AD, editor. Sushruta Samhita, Nidana Sthana; Kushta Nidana. Varanasi: Chaukhamba Sanskrit Sansthan; 2021. p. 275-280.
2. Tripathi B, editor. Charaka Samhita, Chikitsa Sthana; Kushta Chikitsa. Varanasi: Chaukhamba Surbharati Prakashan; 2022. p. 459-470.
3. Savrikar SS, Ravishankar B. Introduction to Ayurvedic pharmaceuticals and therapeutics. Ayu.

- 2011;32(3):397-402. Bhavamishra. Bhavaprakasha Nighantu. Chuneekar KC, Pandey GS, editors. Varanasi: Chaukhamba Bharati Academy; 2018. p. 295-300. (Arogyavardhini Vati, Gandhaka Rasayana)
4. Sharma PV. Rasa Ratna Samuccaya. Varanasi: Chaukhamba Orientalia; 2019. p. 180-185. (Krimikutara Rasa, Sootasekara Rasa)
5. Joshi D, editor. Bhaishajya Ratnavali, Kushta Chikitsa. Varanasi: Chaukhamba Prakashan; 2020. p. 290-298. (Nimbadi Kashaya)
6. Dinda SC, Das M, Banerjee A. A review on Ayurvedic management of skin diseases. J Ethnopharmacol. 2015;168:252-267.
7. Savrikar SS, Ravishankar B. Introduction to Ayurvedic pharmaceuticals and therapeutics. Ayu. 2011;32(3):397-402.
8. Patel S, Shukla VJ. Evaluation of Gandhaka Rasayana in dermatological disorders. AYU. 2010;31(3):302-307.
9. Prasad M et al. Clinical evaluation of Pinda taila in skin inflammation. AYU. 2013;34(2):210-214.
10. Singh AR, Nair V. Antipruritic and anti-inflammatory actions of Tulasi. Indian J Tradit Knowl. 2014;13(3):556-560.
11. Murthy KRS, editor. Ashtanga Hridaya, Sutra Sthana; Shodhana Adhyaya. Varanasi: Chaukhamba Krishnadas Academy; 2020. p. 185-195.
12. Vagbhata. Ashtanga Sangraha, Chikitsa Sthana; Kushta Chikitsa. Edited by Gupta A. Varanasi: Chaukhamba Krishnadas Academy; 2019. p. 510-520.

HOW TO CITE: Dhivya Kaviarassane^{1*}, Tapas Brata Tripathy², Ambika Gotagi¹, Shakthi Rani S. N.¹, A Case Report On Ayurvedic Management Of Dadru, Int. J. Sci. R. Tech., 2026, 3 (8), 272-281. <https://doi.org/10.5281/zenodo.21850518>