



# International Journal of Innovative Pharmaceutical Sciences and Research

[www.ijiprsr.com](http://www.ijiprsr.com)

## ROLE OF TIKTAKSHEERBASTI IN THE MANAGEMENT OF HAIR FALL WITH RESPECT TO KHALITYA: A CASE STUDY

<sup>1</sup>Dr. Lekurwale P.S. \*, <sup>2</sup>Dr. BendeYogita V., <sup>3</sup>Dr. ShrikhandeSuchita G.

<sup>1</sup>Associate Professor, Kayachikitsa Department, Jupiter Ayurved Medical College,  
Nagpur, INDIA

<sup>2</sup>Associate Professor, Panchakarma Department, Shree Ayurved College, Nagpur, INDIA

<sup>3</sup>M.D.( Scholar ),K. D. K. Ayurved College, Nagpur, INDIA

### Abstract

In Ayurvedic approach, falling of hair is coined out as in term of 'Khalitya' under the broad heading of Siroroga. Khalitya is considered as Shudra roga by various scholars because of their short description at the same time, calling them Siroroga because of their location over the scalp and the similarity of their etiopathogenesis with Siroroga. Acharya Sushruta has said that the Drushti and the Lomkupa never grow throughout life but the hairs and nil do. Acharya Charaka has mentioned hairs as the Mala of Asthi dhatu. Acharya Sharangdhara has mentioned Kesh, Loma as the Updhatu of Majja Dhatu. Acharya Vagbhatt has said that Asthidhara kala reside in Pakwasaya which is the main Stahana of Vata. Basti is the main treatment of Vata Dusti. Panchtiktsheerghrita Basti provides nourishment to Asthi dhatu and also to mala of Asthi and improves hair fail. A 28 year female with a history of hair fall from 18 months was confirmed by Visual Analog Scale (VAS) and dermatology life quality index (DLQI) questionnaire. Ludwig scale is used to study the pattern of hair fall. The response to the treatment was recorded and therapeutic effect was evaluated through symptomatic relief. It was observed that there was significant improvement in hair fall.

**Keywords:** Khalitya, Shudra roga, DLQI, VAS.

### Corresponding Author:

**Dr. Lekurwale P.S.**

Associate Professor,

Department of Kayachikitsa,

Jupiter Ayurved Medical College,

Shankarpur, Nagpur, INDIA

**E-mail:** pawanayu2013@gmail.com

**Phone:** +91-9579766005



## INTRODUCTION

Hair loss, also known as alopecia or baldness, refers to a loss of hair from part of the head or body [1]. Typically at least the head is involved [2]. Pattern hair loss by age 50 affects about half of males and a quarter of females. About 2% of people develop alopecia areata at some point in time [2]. Treatment of pattern hair loss may simply involve accepting the condition [2]. Intervention that can be tried include the medications minoxidil or finasteride and hair transplant surgery [3]. Alopecia areata may be treated by steroid injections in the affected area but these need to be frequently repeated to be effective [4]. Hair loss is a common problem also Hair thinning and baldness cause psychological stress due to their effect on appearance [5]. People experiencing hair thinning often find themselves in a situation where their physical appearance is at odds with their own self image and commonly worry that they appear older than they are or less attractive to others. Psychological problems due of baldness, if present, are typically most severe at the onset of symptoms; thereby reducing their quality of life (QoL) [6]. *Khalitya* as described in Ayurvedic text, has features quite similar to alopecia [7]. In the pathogenesis of *Khalitya*, Sushruta explains the involvement of all strotas in succession. Firstly vata and pitta are deranged affecting the hair roots (romkupa) leading to gradual hair fall. When kapha starts filling the pores of the hair roots, it prevents fresh growth. This leads to baldness Strotasas that get involved in the above pathology-Swedavaha, asthivaha, majjavaha, rasavaha, purishvahastrotasa [8].

### Case study

A 28 years old female lady visited at Shree Ayurved College with the complaint of hair fall, hair thinning, and rough hairs since 18 months. She would lose 50-100 hair strands per day, there was considerable hair thinning and a general decrease in hair volume, her centre part also continue to widen. She was using some local shampoo but was not helping her to control her hair fall [9].

### Study design

#### General characteristics:

- |                    |                                 |
|--------------------|---------------------------------|
| Age (years)        | - 28 years                      |
| Disease duration   | - 18 months                     |
| Ludwig score [10]: | - Grade II (moderate hair fall) |

We requested patients to answer visual analog scale (VAS) and dermatology life quality index [11] (DLQI) questionnaires

We modified certain items in the index to ensure it was appropriate for alopecia patients. We studied the DLQI score at the first visit and after 3 months later. Each question has four alternative responses with corresponding scores of 0, 1, 2, and 3, respectively. The DLQI was calculated by summing the scores of all questions, with total scores ranging from 0-30, where a lower score indicates the lower QoL.

### **VAS**

Subjective assessment (the patient's perception of hair loss severity) of the patient at first visit and a comparison between the assessment results prior to and following treatment were conducted using a VAS in which the patients evaluation was scored from 0(completely dissatisfied)to 100(completely satisfied). The VAS is a simple tool for measuring the satisfaction of the patients regarding the state of their hair loss and the effect of the treatment.

### **Drug review:**

Panchatiktaksheeraghritabasti was described by Charaka and Vagbhata , as very safe and effective in AsthyashritVyadhi

Indication: Asthikshya

Contents and dose of Panchatiktaksheerghritabasti:

130ml Decoction (kwatha) of panchatiktadravyas was made.

130 ml of Godugdha was added and the Siddha Ksheer was prepared.

### **Preperation of basti:**

Madhu(5ml)+Lavan(5gm)+Goghrita(20ml)+Siddhaksheer(130ml)

Total 150ml of PanchatiktaksheerghritaBasti was given daily for 7 days

### **Treatment advised:**

Deepana and pachan:TrikatuChurna 6 grams ,bd. With warm water for 3 days

Panchtiktaghritksheerbasti with duration of 7 days in 3 cycles –with 14 and 15 days gap was given after each cycle.

Follow up- monthly once for 3 months

### **Pathyapathya:**

Pathya: Milk, egg, protein diet, vit C, Shigru, laghuAhar, Ghrit, fruits ,almond, black TilTaila and seed, mustard oil, sleep .

Apathya: Pitta and RaktaPrakopakAhar, Nidra, Vegvidharana, Purisha Veg Vidharana .

## RESULT

Patient was classified using the Ludwig Criteria. We analyzed the responses to the VAS and DLQI questionnaires prior to and following treatment. The scores for the VAS indices prior to and following the administration of basti was 80 and 40 .The total scores for the DLQI indices were 11 and 7 , prior to and following treatment, respectively.

## DISCUSSION

In the disorders of Asthivahasrotastiktasamskaritksheeravasti is indicated.Ksheera is considered as the best dravya in nourishing the asthidathu.Due to its snigdha, guru, bahalagunasit nourishes the asthidhatu and hairs & due to its mrudu, snigdha ,slakshna and pichhilaguna, it controls therukshata(dryness) of hairs. Also to its guru, sheet,snigdhaguna of sksheera controls the vatadosha and controls(Khalitya) hairfall. The tiktadrawyas used are having predominance of akasha and vayumahabhuta.Hence it can enter any part of the body especially that part having the similar mahabhuta predominance like asthidhatu.So, the bastidrawyas prepared with tiktaksheera has capacity to nourishes the asthidhatu.Usuallytikta rasa aggravates vata, but when processed with milk(samskara), its pharmological activity is changed and it enables them to promote asthidhatu formation by combination of properties like unctuousness(snighatvaa),dryness (soshanatva) and solidity(kharatva)and by alleviating vata, which is described by Arundatta [12]. As per Ayurveda, Basti is mainly indicated in Vata predominant diseases. The two types of abnormalities of Vata namely: Avaran and Dhatukshayajanya can be treated by Basti karma. Application of basti to colon helps not only in defaulting and coordinating the vatadosha in its site, but also control the other doshas involved in the pathogenesis of the disease (S.S.Chi.35/6)

Basti is used in Shakagat, Tiryagamidosha, Kosthagatrogas. Among them PanchtiktaghritksheerBasti is AnuvaasanaBasti used in AsthiKshaya. As per Ayurveda, main Sthana of Vata is Pakwasaya and according to Vagbhata ,Asthidhara Kala situated in the Pakwasaya. So this Basti provides nourishment to Asthi and hair as well, as we know hair is mala of Asthi. Ayurveda explains health as equilibrium of the Dhatus, “DhatuSamyamArogata” .Among the Dhatus, asthi is blessed with the function of shariraDharana. Any derangement of Asthi results in disease .Asthikshya is a condition in which there is kshaya of AsthiDhatu. Asthikshaya maybe compared to osteoporosis in which there is a decrease in bone mass leading to bone fragility and fractures. Kesha and nakha are malas of Asthi. So asthikshaya result inhairfall. According to the principal of Asrayaashryeebhava, when vata increases asthi decreases



because are inversely proportional to each other. Classics mention the use of Basti prepared with tiktadrawyas ,ksheer and ghrita for the treatment of Asthikshaya .To assess the efficacy of TiktaKsheerBasti in the treatment of alopecia, present study was undertaken.

## **CONCLUSION**

After assessing the results, it can be said that basti could be the treatment for khalitya as it works on vata and asthidharakala in the colon which in turn prevents hairfall andpanchtiktadrawyas with milk could be the choice for basti therapy.

## **REFERENCES**

1. "Hairloss".NHS Choices.Retrieved 22 September 2013.
2. Vary JC<Jr(November 2015). "Selected Disorder of Skin Appendages—Acne, Alopecia,Hyperhidrosis."The Medical clinics of North America.(6):1195-211.doi:10.1016/j.mcna.2015.07.003.PMID26476248
3. McElwee, K.J.;Shapiro,J.S.(2012)."Promising therapies for treating and /or preventing androgenic alopecia">Skin therapy letter.17 (6):1-4PMID22735503
4. Leavitt, M (2008). "Understanding and management of female Pattern Alopecia". Facial Plastic Surgery.24 (4):414-427.doi:10.1055/s-0028-1102905.PMID19034818.
5. The psychology of appearance: Why health psychologists should "do looks",NicholaRumsey,September2008:[1]
6. Passchier J, erdman J, Hammiche F, Erdman R92006)."Androgene tic alopecia: stress of discovery".Psychol Rep.98 (1):226-8.doi:10.2466/PRO.98.1.226-228PMID16673981
7. Acharya J.T. Carakasamhita, Varanasi; Choukhambha Sanskrit Sansthan, 2001
8. Shastri, K., AmbikaDatta,Susrutasamhita.Varanasi;AyurvedTatvaSandipika Hindi commentary, Choukhambha Sanskrit Sansthan.
9. AcharyaVidyadharShukla, Prof. RavidattaTripathi, Charakasamhita, 2007-edition Chaukhamba Publishing House,New Delhi,[ch.su.28/25page no.431]
10. Ludwig scale (www.miamihair.com>blog>ludwig-cla.)
11. DLQI (Dermatology life quality questionnaire) Dermatology.columbia.edu>pdf>Hair)
12. Arundatta, Sarvnagasundara commentary, AstangaHridayam,Sutrasthana,11/31 ChaukhambaOrientalia,Varanasi, p.no.187