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Research Article

## CLINICAL EVALUATION OF *KARANJAPATRA KALKA SIDDHA TAILA* IN *KIKKIS*

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### ABSTRACT:

A state of the pregnancy brings a lot of physiological changes in a woman. These changes are catogarised as changes in genital organs, changes in breasts, cutaneous changes, altered body weight, Haematological changes, circulatory changes, metabolic changes & systemic changes. Thus the pregnancy brings many alterations in the body of the female. As far as this topic is considered, it is important to know about skin changes. There is pigmentation over cheeks, forehead, nipples and areola of breast. The most important is stretch marks over abdomen i.e. striae gravidarum. Stretch marks are slightly depressed linear marks with varying length & breadth found in pregnancy. They are predominantly found in the abdominal wall below umbilicus, over the thighs & breast. This represents the scar tissue in the deeper layer of the cutis. Initially they are pinkish but after the delivery, they turn into striae albicans. Probable causes are mechanical stretching of the skin as well as increased level of aldosterone.

**KEY WORDS:** *Karanjapatra, Kikkis, Taila,*

### INTRODUCTION:

In ayurvedic text, Kikkis is described as cutaneous change during pregnancy. According to Charaka

किक्किसश्चर्मविदरणम् ।

गर्भोत्पीडनाद्वातपित्तश्लेष्माण, उरः प्राप्यविदाहंजनयन्ति,  
ततः कण्डूरुपजायते, कण्डूमूला च किक्किसावाप्तिर्भवति ।

च.शा. ८ जातिसुत्रीयअध्याय

उरुस्तनोदरेवलिविशेषारेखाकारस्तत्कालेप्रायो

येजायन्तेतेषांकिक्किससंज्ञाः ॥

- अरुणदत्त

As far as modern texts are considered in the treatment of striae gravidarum weight reduction,

use of oils such as olive oil for massaging is given but no satisfactory result is gained. As far as ayurvedic texts are considered KikkisChikitsa is mentioned in details & these yogas are found really useful in the management of kikkis.

Hence this topic has been selected as per the reference of AshtangSangraha.

करंजपत्रकल्कसिद्धेन च तैलेनभ्यंगमः ॥

- अ. सं. शा. ४

### AIMS & OBJECTIVES

1. To study role of KaranjPatra Siddha Taila in Kikkisa.

2. To evaluate effects of KaranjPatra siddha Taila in Kikkisa clinically.

#### MATERIALS AND METHODS:

##### A. Karanjapatra :

The KaranjaPatra is collected in Varsha&VasantRutu& care taken that they were fully developed &non infected.

The collected drug is authenticated at IDRL Institute Pune.

KaranjaPatra Siddha Taila used as a treatment for Kikkisa which is described in following text.

##### B. TilaTaila :

TilaTaila is taken for the preparation of KaranjaPatra Siddha Taila as described in SharangdharSamhita

KaranjaPatra Siddha Taila is made by SnehapakKalpana.

##### C. Inclusion criteria :

PrimiGravida of any age.

##### D. Exclusion criteria :

1. Multi Para
2. Skin diseases
3. Poly Hydromnios
4. Twin Pregnancy

##### E. Work Profile:

30 Cases of pregnant woman according to inclusion criteria taken and treated with KaranjaPatra siddha taila

Assessment on the basis of size & no. of Striae & reduction of symptoms.

##### F. Gradation of Symptoms :

Gradation of RugnaSamvedyaLakshanas

Grade	Symptoms
0	No Symptoms
1	Kandu
2	Kandu + Daha
3	Kandu + Daha + Raga
4	Kandu + Daha + Raga + Vranotpatti

##### G. Measurement :

Date	Size of Striae	No. of Striae

##### H. Follow up :

After every 15 days

##### I. Duration of Treatment :

From the 5<sup>th</sup> month of pregnancy upto 9<sup>th</sup> month of pregnancy

##### J. Method of application :

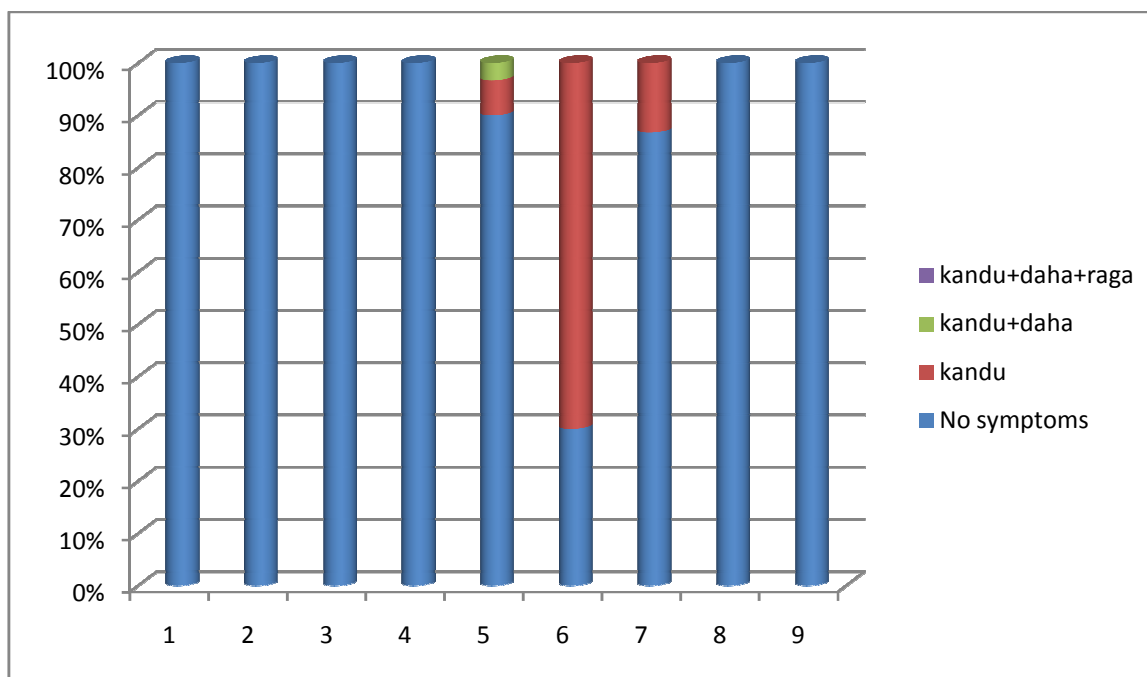
KaranjaPatra siddha taila is applied on Udara in the form of Abhayanga in dose of 5 To 10 ML / Day.

#### OBSERVATIONS AND RESULTS:

1. Total Number of 30 patients for the study
2. No adverse effects in any patient of experimental group due to application of KaranjaPatra Siddha Taila.

Follow up No	No symptoms	kandu	Kandu+Daha	Kandu+Daha+raga	Total
1	30	0	0	0	30
2	30	0	0	0	30
3	30	0	0	0	30
4	30	0	0	0	30
5	27	2	1	0	30
6	9	21	0	0	30
7	26	4	0	0	30
8	30	0	0	0	30
9	30	0	0	0	30

### Distribution of Symptoms in Experimental Group

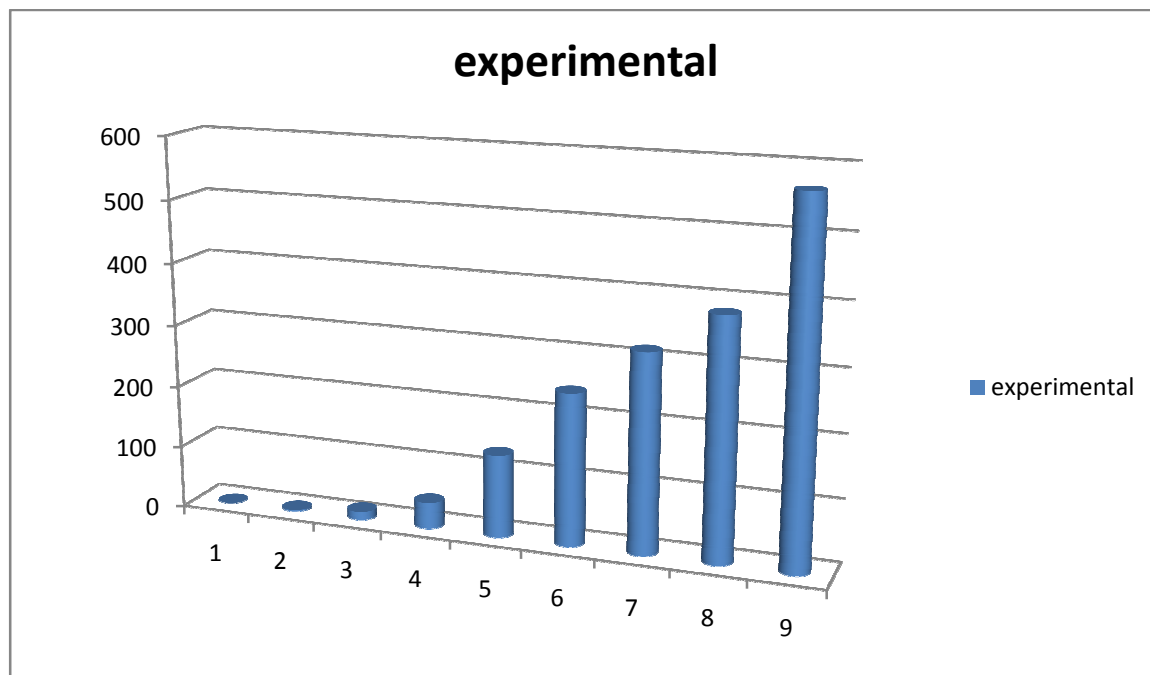


In experimental group at fifth follow up 6.70% patients had kandu, 3.30% had kandu and daha and 90% patients had no symptoms at 6<sup>th</sup> follow up 70% patients had kandu and 30% patients had no symptoms at 7<sup>th</sup> follow up only 13.30% patients had kandu at 8<sup>th</sup> and 9<sup>th</sup> follow up no patients had kandu and daha. Patients got relief from kandu and daha due to application of karanjpatra siddha taila.

### Distribution i.e. number of Kikkis in Experimental group

Count	Mean
0	0.00
2	0.07
13	0.43
42	1.40
132	4.40
242	8.07
316	10.53
381	12.70
566	18.87

Bar diagram showing no.ofKikkis formed during each follow up in observation period

**DISCUSSION:**

1. Size & Number of kikkisa :- Variable size of kikkisa were found ranging from 2 cm. to 8 cm. & about number maximum 35 kikkisa were found
2. Symptoms of kikkisa :- Satisfactory results are obtained in the symptoms of kikkisa i.e. kandudaha due to application of karanjpatrasiddhataila in experimental group

**Probable action of karanjpatra siddha taila in reducing symptoms of kikkisa****A. Kandu**

- a. Karanj is the best kandughnadravya& is mentioned in the kandughnagana by acharya charaka by its kaphashamak property as well as katu, tikta rasa &katuvipak it helps to reduce kandu in kikkisa.
- b. AcharyaShushruta mentioned karanj in araghavahadigana& in the properties of this gana he mentioned kandughna action so above yoga helps to reduce kandu

- c. Kandu is the symptom due to twakrukshata&snehan effect of karanjpatrasiddhataila helps to reduce kandu.
- d. According to kirtikar&basu oil extracted from karanja is usefull in various cuntanous affections such as itches scabies septic wounds from that we concluded that karanja definitely having antitching property.

**B. About Daha :-**

- a. As far as pathogenesis of kikkisa is considered first symptom develops is kandu& then vidaha develops so kandu is the predisposing factor for the vidhaha so any yoga which makes kandu less ultimately plays role in no or minimal formation of daha
- b. Tikta&kashay rasa of karanja have dahashamak property & helps to reduce daha.

**CONCLUSION:**

The final conclusion has been drawn on the basis of clinical trials which are conducted in

vyadhipratyaniklakshanas mentioned in Garbhnikikkisa shows statistically significant improvement which confirms the effectiveness of Karanjpatrasiddhataila in the treatment of GarbhiniKikkisa.

- a) After a complete study we came to conclusion that no side effects were noticed in any subjects after local application of karajpatrasiddhataila on udar.
- b) It is concluded by that use of Karanjpatrasiddhataila having 100 % results in Kandu&dahalakshana.
- c) No significant results were obtained as size & number of kikkisa formation considered
- d) It is concluded that karajpatrasiddhataila can be safely used in all patients of garbhnikikkisa.

#### FUTURE SCOPE OF STUDY

1. It gives an idea that abhayantarchikitsa may be required along with karajpatrasiddhataila for results in vaivarnyata also so futures study should be considered regarding the same
2. The treatment should be continued in sutikaavastha, to see whether we are getting an results in vaivarnyata.
3. Study on the large sample size can be done.

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