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AYURVEDIC REMEDIES FOR CANDIDIASIS AND TUBERCULOSIS



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ABSTRACT

Dermatophytosis(Dadru) is one of the most common dermatological conditions encountered in clinical practice. In Ayurveda, the majority of skin ailments are classified as Kushta. In general clinical practice around 10-20% patients suffer from skin disorders and out of them, fungal infections constitute up to 20%. Dadru is a type of Kushta that manifests Rasa, Rakta, and Mamsadhatu participation with Kandu(itching), Mandala(elevated margin), Raaga(erythema), Rukshata(dryness of skin) and Pidaka(eruption) [1]. The contagiousness of Dadru is on rise due to unclean habits and sharing clothes. High moist environmental temperature added with overweight and obesity precipitating increased sweating predisposes to high incidence of the dermatophytosis(Dadru) in the general population. If treated properly, this illness responds quickly. Chakramarda is a drug which helps in treating dadru khusta as the synonym of dadrugna. Chakramarda possesses Katu rasa, Laghu, Rukshaguna, Kapha Vatahara, Varnya, Vishagna(Poison-destroying), Vranaropana and Kushtagna(Removes blood impurities) properties which help in treating dadrukhusta. The treatment of kusta includes shodhana, shamana and

bahirparimarjana where the topical application played a supreme result within a short course of time [2].

INTRODUCTION

Skin diseases are manifested due of the etiological factors such as altered lifestyle, mental stress, unhygienic condition and exposure to chemical pollution etc. Incidence of dermatophytosis is increasing due to contagious nature of the dermatophytosis by sharing , unclean habits, high moist environmental temperature and overweight and obesity, increased rate of perspiration is a major cause in the general population [3]. Fungal infections of the skin, hair, and nails are common throughout the world, with a prevalence of about 20–25 percent, and dermatophytes are the most common agents of causation. Dermatophytosis is an infection of the hair, nails, or skin caused by dermatophytes, which are classified into three genera: Trichophyton spp., Microsporum spp., Epidermophyton spp. They spread outwards on the skin, forming a ring-like pattern, hence the name 'ringworm.' They are quite frequent and can affect any region of the body. The most common clinical morphology is tinea corporis and cruris in most studies,