IJOOAR

INDIAN JOURNAL OF ODYSSEY OF AYURVEDIC RESEARCH

"XERODERMA-

A REVIEW ACCORDING TO AYURVEDA"

Dr. Ranjit Deshmukh¹

1. Professor, Department of Rachana Sharir, P. R. Pote Ayurved Medical College, Amaravati.

Dr. Swapnil Patil²

2. Professor, Department of Rognidan, Vasantdada Patil Ayurved Medical College, Sangli.

Dr. Swati Sarnaik³

3. Associate Professor, Department of Rognidan, Shri. Gurudeo Ayurved College, Gurukunj Ashram, Amravati

Dr. Priyadarshini Hanje⁴

4. Assistant Professor, Department of Shalya Tantra, Hon. Shri. Annasaheb Dange Ayurved Medical College Ashta Daist Sangli.

Corresponding Author: Dr. Priyadarshini Hanje, no-7899931108

ABSTRACT

Xeroderma refers to "dry skin," and is a common condition which results in skin roughness, tightness, flaking, and scaling. It can cause pruritus, leading to excoriations and an increased risk of skin infections. xeroderma is multifactorial in etiology and may occur in response to changes in the environment, underlying diseases, medications, or advanced age. This activity reviews the evaluation and management of xeroderma and highlights the role of the interprofessional team in managing patients with this condition. According to Ayurveda, 'Twak Rukshta' (dry skin) is classified under minor skin diseases or 'Kshudra Kushta'. Ayurveda states that our body functions are governed by the three life energies or Tridoshas - Vata, Pitta and Kapha. An imbalance in their levels directly affects our physical and mental wellbeing. An aggravation of the Vata and Pitta Doshas may increase heat and dryness in your body, leading to dry skin.

Key Words: - Xeroderma, Dry Skin, Ayurveda

INTRODUCTION

Xeroderma means "dry skin" and is a common condition which symptoms on skin roughness, tightness, flaking, and scaling. It can cause pruritus, leading to excoriations and an increased risk of skin infections. changes in the environment, underlying diseases, medications, or advanced age these are multifactorial etiology of xeroderma. Cleansing the skin with lukewarm water and applying a thick moisturizer immediately after bathing may repair the epidermal skin barrier function and restore hydration³

ETIOLOGY

The condition of xeroderma will experience majority of people worldwide in their lives due to the loss of lipids in the skin.4, 2. Xeroderma can be acute or chronic in nature, and its various causes are detailed below:

EXTERNAL CAUSES

For Skin cleansing: taking frequent, long, hot showers. Using harsh, alkaline soaps Environmental factors: cold weather, low humidity, dry indoor heat, intense exposure to sunlight

Occupational factors for skin: contact with irritant agents (i.e., chemicals used in hairdressing or housekeeping)

ENDOGENOUS CAUSES FOR XERODERMA

- ♣ Skin diseases likes Inflammatory skin disorders: atopic dermatitis, allergic contact dermatitis, irritant contact dermatitis, dyshidrotic eczema, seborrheic dermatitis, psoriasis, etc.
- ♣ Infectious skin disorders (in the chronic phase): scabies, bacterial, or fungal infections
- ♣ Genodermatoses: xeroderma pigmentosum, ichthyoses (harlequin, etc.)
- Neoplasms: cutaneous T-cell lymphoma Internal/Systemic diseases

'XERODERMA- A REVIEW ACCORDING TO AYURVEDA By DR.RANJIT DESHAMUKH & ET. AL.

4 Endocrine or metabolic: diabetes mellitus, hypothyroidism, hyperthyroidism, primary

biliary cholangitis, cholestasis, hyperparathyroidism, renal failure

♣ Inflammatory: Crohn's disease, ulcerative colitis

♣ Infections: human immunodeficiency virus (HIV), hepatitis B or C virus

♣ Hormonal: pregnancy, menopause

♣ Hematologic: myeloproliferative disorders, multiple myeloma, Hodgkin's and Non-

Hodgkin's lymphomaPsychiatric diseases

Obsessive-compulsive disorders: excess skin washing

Eating disorders: anorexia

Addictions: alcohol or drug abuseDietary

♣ Malnutrition: vitamin A or vitamin D deficiency, zinc or iron deficiency Medication-

related

♣ Drug adverse effects: diuretics, beta-blockers, contraceptives, retinoid, long-term use of

topical steroids, lipid-lowering agents, radiation therapy, etc.

Epidemiological incidence of xeroderma is unknown; it commonly affects both males and

females of all age groups. Some studies show there is an increased prevalence in older patients,

particularly over the age of 60 years. It is commonly seen in those with diseases like diabetes

mellitus, renal failure, hypothyroidism, etc. or in those taking associated medications.⁵

PATHOPHYSIOLOGY

Natural moisturizing factors are important for the skin's water-binding capacity. Lactic acid,

sugars, amino acids, urea these are natural moisturizing factors and lack of these factures cause

Xeroderma. Abnormalities in the Stratum corneum and keratinocyte differentiation causes

Xeroderma Stratum corneum is skin's superficial barrier and contains lipids like ceramides,

cholesterol, free fatty acids etc. that play a significant role in maintaining hydration. Decreased

72 www.ijooar.com

IJOOAR: Issue 02, Vol. 07, Jan .2023

lipid levels results in dry skin secondary to transepidermal water loss and dehydration. Reduction in keratinocyteproliferation causes xeroderma. 6,7,8.

SYMPTOMS AND INVESTGATIONS

Clinically, dry skin will appear dull, rough, scaly, and tight, with associated fissuring, itching, and bleeding. The xeroderma diagnosis may use laboratory testing to assess underlying causes, such as thyroidhormone levels, vitamin levels, etc.

MANAGEMENT OF XERODERMA

Enhancing skin moisturization, optimizing skin barrier function, and promoting epidermal differentiation is simple and common management of xeroderma, these should focus on restoring physiologic lipids in the epidermis, ^{7,9}

Commonly recommended strategies include:

- 1. Infrequent bathing and using lukewarm water: should avoid aggressive skin washing and too hot water, which are harsh and strip the skin of protective oils and dries skin.
- 2. Use of mild cleansers: Traditional soaps should be avoided because they alkalinize the skin, leading to worsening dry skin and itching. Mild cleansers and synthetic detergent cleansers are preferred due to their acidic pH, which closely resembles the skin's natural pH. Synthetic cleansers are less irritating than traditional soaps, and their low pH. 10, 11.
- 3. Routine use of skin moisturizers: Moisturizers should be applied to moist skin immediately after bathing, as this will decrease evaporation. Oil-based creams are thicker in consistency than water-based lotions and aremore effective in providing moisturization. Ointments are greasier in texture and particularly useful for preventing transepidermal water loss.8
- 4. Utilizing room humidifiers, especially during the winter season for staying hydrated with adequate fluid intake

'XERODERMA- A REVIEW ACCORDING TO AYURVEDA BY DR.RANJIT DESHAMUKH & ET. AL.

Many products having Humectants, Occlusive's, Emollients contents and these contents are

Active ingredients may improve skin texture and hydration. ¹² Humectants promote water

transfer from the dermis to the epidermis. Examples include glycerin, urea, ammonium

lactate, hyaluronic acid, and gelatin. Occlusives create a hydrophobic layer over the skin,

preventing water loss. Examples include lanolin, paraffin, petrolatum, cholesterol, and stearyl

alcohol. Emollients can fill gaps and fissures in the skin. Examples include petrolatum,

dimethicone, and propylene glycol. 13

AYURVEDIC VIEW ON DRY SKIN

According to Ayurveda, excess vata plays a direct role in skin dryness. Vata dosha is defined

by qualities like dryness, coldness, mobility, roughness, and clarity. Ayurveda talks about the

important principle of like increases like the reason why vata properties tend to get aggravated

during the cold months. Excess vata can show up as thinner blood, dry and rough skin, dry

mucus, chapped lips, reduced electrolytes in the body, earaches, insomnia, bloating, gas,

confusion, restlessness, anxiety, and inflammation, among other things. 15

As we said, like increases like, so to tame dryness caused by excess vata dosha (combination

of air and space elements), we need to use remedies that increase or possess the opposite

qualities like warmth, unctuousness, softness, or thickness. Managing vata also requires

getting used to a routine, especially a sleep routine.

DOSHA AND SKIN RELATION^{16, 17,18}.

Dosha Vatadosha: Twacha is site of vatadosha. Vata carried sanse of touch. It is main function

of vyan vayu. Vrudhhi of vata dosha shows darkness of skin.

Pittadosha: It is site of bhrajak pitta. It gives colour lustre to skin. Pitta regulates the body

temperature. Pitta vrudhhi shows yellowish discolouration of skin. In pitta kshaya, lustre of

skin is lost called prabhahani.

Kaphadosha: Kapha vrudhhi causes whitish discolouration of skin.

74 www.ijooar.com

IJOOAR: Issue 02, Vol. 07, Jan . 2023

DHATU AND SKIN RELATION¹⁹

Dhatu Mansa dhatu is directly related to skin. According to sushrutacharya last layer of skin is mansadhara. It shows sign and symptoms of mansavaha strotas dushti . Twacha and snayu are the root of mansavaha strotas. Ras and rakta dhatu indirectly related to skin because it is site of sira and dhamani. Skin lustre is sign of good shukra dhatu. Asthi dhatu causes dryness of skin. Mala Sweda is one of the trimala which maintains lustre and humidity of skin. Vridhhi of sweda causes itching of skin. Kshaya of sweda shows cracking of skin. Kriyatamaka vichar of skin is explained diagnostic tool for ayurvedic parikshana.

AYURVEDIC REMEDIES FOR DRY SKIN

Ayurveda is the science of life. Aacharyas explain the art of living through Dinacharya, Rutucharya, Sadvrutta and dietary regimen etc.

Dinacharya

- Abhyanga ²⁰ Abhyanga means application of oil on skin. Abhyanga should do daily with tila taila. Useful for delays old age, destroys fatigue and vata, gives strength skin, increases luster of skin. It is supposed to be uttama tvachya as tvacha is a seat of vata mainly and tila taila has uttamavatashamana property.
- 2. Sharir Marjana²¹ Sharir Marjana means Body made clean by rubbing with cloth. It helps to remove sharirmala, foul smell, and itching.
- Udvartana²² Udvartana means Application of medicated powder over body. It reduces kapha and meda, makes body firm and achieves tvak prasadana.
- Snan²³ Bath daily with hot water all over body. It helps to remove sharirmala, itching, sweat and burning. It increases strength, lustre.
- Chatradharan²⁴– Use of umbrella alleviates natural calamities, guards against the sun, wind, dust and rain.

Rutucharya: -

- Hemanta and Shishira Rutu²⁵– There is excessive cold is in Hemanta and Shishira Rutu, Recommendation of wearing thick and warm clothes in these rutu. Avoid diwa swap. All this measures helps to pacify accumulated kapha. So abhyanga should do with vataghna taila; Local application of Agarulepa.
- Vasanta Rutu²⁶– Kapha prakopa takes place during vasanta rutu. Vasantika Vamana is beneficial during vasanta rutu. Avoid diwa swap. Udvartana, snan with sukhambu, and lepa with chandana and agaru should do in Vasanat rutu.
- Grishma Rutu²⁷-Vata gets started accumulating in body In Grishma. Stay in cold room during day time and in moonlight at night on the top of the mansion with plentiful air having paste chandana on body.
- Varsha Rutu²⁸ Vata accumulated in grishma getsaggravated in Varsha rutu. Administer basti which helps to reduce vata. Take boil water as in this season water gets vitiated. Should not walk with bare foot and wear fomented cloth. Take bath regularly.
- Sharad Rutu²⁹ In Sharad Rutu pitta gets aggravated hence Virechana and Raktamokshana is advisable. Should take Hamsodaka i.e. water heated in sunlight and made cold in moonlight during rising of agasti star. It should be used for bathing and drinking purpose.

Sadvrutta:

Sadvrutta is the code of conduct for health and good behavior. Aacharya Vagbhata has explained Dashavidha Paap Karma i.e. Himsa, Satya, Asteya, Anyathakama, false andirrelevant talk, anger etc. Sadvrutta should follow good conduct and avoid bad one to prevent skin diseases. For e.g. Aacharya Vagbhat has state dinsulting elder and respectable persons, stealing others valuable things, sins of this birth and previous birth are the causes of Kushtha.

Viruddha Aahar ³⁰:-

Viruddha Aahar means the food substance which dislodges the vitiated Doshas from their places and unable to expel them out of the body and acts as antagonistic to the tissues. Example are follows these are

- 1. Substances having viruddha virya i.e. sheeta and ushna when taken together kledotpatti takes place which lead to skin diseases. E.g.: Milk and Fish, Milk and Fruit these causes are seen in many patient suffering with psoriasis, shvitra etc. skin diseases.
- 2. Do not intake of excessive cold and excessive hot substances one after the other. E.g.: Hot food and Ice cream. Intake of sweet and heavy substances at the end of meal, Intake of excessive water, drinking water in early morning, Avoid drinking hot and cold water one after these leads to agnidushti.
- 3. Eating Guda and Milk together produces skin diseases because milk is of sheeta virya and guda is of ushna virya. The combination is totally opposite. Should avoid above factors which vitiates doshas and produces skin diseases.

DISCUSSION

Ayurvedic Samhitas and modern texts have same opinion about Dry skin. In both literatures describe the causes, pathophysiology and treatment for dry skin. Moreover in ayurveda this information in scattered and more describes about dry skin. In ayurveda deep study has been done about dry skin. This explains various opinions of classical and modern text as well about dry skin.

CONCLUSION: -

Skin is one of the major organ representing physical, mental, and social state of an individual. Ayurveda provides us with countless daily, seasonal tips and remedies to help keep us in balance restore the health of your skin. From the above references

Classical texts and modern texts have same opinion about Xeroderma (Dry skin). Lifestyle change are recommended for dry skin these are take daily Shower, use more oil for application on skin, Drink enough water, eat a balanced diet. Exercise every day, Get enough sleep,

Reduce stress, Avoid extreme weather conditions. Adaption of Dinacharya, Rutucharya; Maintenance of sadvrutta and avoidance of Viruddhaaahara definitely help to prevent dry skin.

References

- 1. Parker J, Scharfbillig R, Jones S. Moisturisers for the treatment of foot xerosis: a systematic review. J Foot Ankle Res. 2017;10:9. [PMC free article: PMC5297015] [PubMed: 28191040]
- 2. Augustin M, Wilsmann-Theis D, Körber A, Kerscher M, Itschert G, Dippel M, Staubach P. Diagnosis and treatment of xerosis cutis - a position paper. J Dtsch Dermatol Ges. 2019 Nov;17 Suppl 7:3-33. [PubMed: 31738016]
- 3. White-Chu EF, Reddy M. Dry skin in the elderly: complexities of a common problem. Clin Dermatol. 2011 Jan-Feb;29(1):37-42. [PubMed: 21146730]
- 4. Kopecký A, Benda F, Němčanský J. Xerosis in Patient with Vitamin A Deficiency a Case Report. Cesk SlovOftalmol. 2018 Spring;73(5-6):222-224. [PubMed: 30541304]
- 5. Paul C, Maumus-Robert S, Mazereeuw-Hautier J, Guyen CN, Saudez X, Schmitt AM. Prevalence and risk factors for xerosis in the elderly: a cross-sectional epidemiological study in primary care. Dermatology. 2011;223(3):260-5. [PubMed: 22104182]
- 6. Madison KC. Barrier function of the skin: "la raison d'être" of the epidermis. J Invest Dermatol. 2003Aug;121(2):231-41. [PubMed: 12880413]
- 7. Barco D, Giménez-Arnau A. [Xerosis: a dysfunction of the epidermal barrier]. Actas Dermosifiliogr. 2008Nov;99(9):671-82. [PubMed: 19087805]
- 8. Proksch E, Lachapelle JM. The management of dry skin with topical emollients--recent perspectives. J DtschDermatol Ges. 2005 Oct;3(10):768-74. [PubMed: 16194154]
- 9. Mekić S, Jacobs LC, Gunn DA, Mayes AE, Ikram MA, Pardo LM, Nijsten T. Prevalence and determinants for xerosis cutis in the middle-aged and elderly population: A cross-sectional study. J Am Acad Dermatol. 2019 Oct;81(4):963-969.e2. [PubMed: 30586613]
- 10. Boccanfuso SM, Cosmet L, Volpe AR, Bensel A. Skin xerosis. Clinical report on the effect of a moisturizing soap bar. Cutis. 1978 May;21(5):703-7. [PubMed: 348407]
- 11. Abbas S, Goldberg JW, Massaro M. Personal cleanser technology and clinical performance. Dermatol Ther.2004;17 Suppl 1:35-42. [PubMed: 14728697]
- 12. Lodén M. Role of topical emollients and moisturizers in the treatment of dry skin barrier disorders. Am J ClinDermatol. 2003;4(11):771-88. [PubMed: 14572299]
- 13. Kraft JN, Lynde CW. Moisturizers: what they are and a practical approach to product selection. Skin TherapyLett. 2005 Jun;10(5):1-8. [PubMed: 15986082]

- 14. Nakagawa H. Comparison of the efficacy and safety of 0.1% tacrolimus ointment with topical corticosteroids in adult patients with atopic dermatitis: review of randomised, double-blind clinical studies conducted in Japan. Clin Drug Investig. 2006;26(5):235-46. [PubMed: 17163257]
- 15. Sayantani Chatterjee, How To Treat Dry Skin Problems With https://vedix.com/blogs/articles/dry-skin-treatment, Updated on September 09, 2022
- 16. Essentials of Medical Physiology by K Sembulingam & Prema sembulingam, Jaypee Brothers Medical Publishers New Delhi.16th Edition 2013.page 776.
- 17. Sushruta Samhita edited by Kaviraj Ambikadutta Shastri, Sutra Sthan, Chapter 21/10. Chaukhamba Sanskrit Sansthan, Varanasi; 2003. Page 89.
- 18. Ashtanga Hrudaya with Sarvangasundara commentary of Arunadatta and Ayurvedarasayana commentary of Hemadri edited by H S S Paradakara, , Sootrasthana 11/5. 9th edition Chaukambha Orientalia; Varanasi 2005. Page 183
- 19. Shastri Satyanarayan "Padmabhushan", Charak Samhita with elaborated Vidyotini commentary by Shastri Kashinath and Chaturvedi Gorakh Nath, Varanasi, Chaukambha Bharati Academy, edition: Reprint 2013, Volume 2, chikitsasthan chapter 15 shloka 17, page no. 456.
- 20. Dr. Ganesh Garde, editior. SarthaVagbhata. Varanasi:Chowkhambha surbharatiPublication; 2009.P.9
- 21. Vd.Y.G. Joshi, editior. CharakSamhita Vaidyamitra Publication;2009. P.94
- 22. Dr. Ganesh Garde, editior. SarthaVagbhata. Varanasi:Chowkhambha surbharatiPublication; 2009.P.9
- 23. Ganesh Garde, editior. SarthaVagbhata. Varanasi:Chowkhambha surbharatiPublication; 2009.P.9
- 24. Y.G. Joshi, editior. Charak SamhitaVaidyamitra Publication; 2009.P.95.
- 25. Vd.Y.G. Joshi, editior. CharakSamhita Vaidyamitra Publication;2009. P.100
- Vd.Y.G. Joshi, editior. CharakSamhita Vaidyamitra Publication;2009. P.102
- 27. Vd.Y.G. Joshi, editior. CharakSamhita Vaidyamitra Publication; 2009. P.103
- 28. Vd.Y.G. Joshi, editior. CharakSamhita Vaidyamitra Publication;2009. P.104
- 29. Vd.Y.G. Joshi, editior. CharakSamhita Vaidyamitra Publication; 2009. P.105, Ganesh Garde, editor. SarthaVagbhata. Varanasi: Chowkhambha surbharati Publication