



Research Article

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EPIDEMIOLOGICAL STUDY OF ŚVITRA (VITILIGO) WITH SPECIAL REFERENCE TO VIRUDDHA ĀHĀRA (INCOMPATIBLE DIET)

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ABSTRACT

Today, the era of urbanization has produced increased number of fast foods and restaurants. The food habits and life style has also been modified according to the profession/ career of an individual. Continuous use of faulty diets like incompatible diet, junk food subsequently enhances the pathogenesis. Aim and Objective of the study was to perform a survey study on types of Viruddha Āhāra (incompatible diet) in Śvitra (Vitiligo). Total 242 Śvitra (Vitiligo) patients were selected from OPD & IPD of NIA, Jaipur. Survey was carried on the basis of specially prepared questionnaires. The study reveals that, all patients of Śvitra were consuming Viruddha Āhāra. Out of 242 patients, 100% patients were taking Saṁyoga Viruddha Āhāra (incompatibility of combination) & Krama Viruddha Āhāra (incompatibility of sequence). 95.45% patients were taking Pāka Viruddha Āhāra (incompatibility of cooking) & Hṛdaya Viruddha Āhāra (incompatibility of palatability) was found in 71.90% patients. After the analysis of data it was concluded that, Viruddha Āhāra (incompatible food) is most potent etiological factor of Śvitra (Vitiligo) and must be avoided.

Keywords: viruddha āhāra; śvitra; vitiligo; junk food

INTRODUCTION

All the skin diseases in Āyurveda have been described under title of Kuṣṭha (skin diseases), which are further alienated into Mahā Kuṣṭha and Kṣudra Kuṣṭha. However Śvitra (Vitiligo) has not been counted among various types of Kuṣṭha in Bṛhatrayī. Later on this has been included under types of Kuṣṭha by various Ācārya. Though Śvitra is mentioned along with other types of Kuṣṭha, but the differentiation between Śvitra and Kushtha is based on non-secretary and non-infectious nature of disease, association of Tvak (skin) only, peculiarity of Nidāna (cause), Asādhya Lakṣaṇa and chronicity.

According to Modern dermatology, Śvitra can be correlated with Vitiligo and Leucoderma characterized by depigmented patches, enlarging and becoming more numerous with time. It is due to disappearance of functioning melanocytes, and loss of melanin in the epidermis. Śvitra or vitiligo is considered as one of the social evils since times immemorial. We know it and science too has proved that it is only a deformity of the skin pigment, but is not of any infective nature. It is very distressing disease both for the patients and physician. It is major problem for patients, because of its ugly appearance and presentation of the body, which may disturb personal, familial and social life as well as due to long term treatment.

According to Āyurvedika texts there are certain rules to be followed regarding consumption of food, which a person if follows will lead a long and disease free life.¹ The etiological factors responsible for causing Kuṣṭha are common to Śvitra. The constant use of incompatible diet plays an important role in the pathogenesis of Kuṣṭha and

Śvitra². Today, the era of urbanization has produced increased number of fast foods and restaurants. The food habits and life style has also been modified according to the profession/ career of an individual. Hence much importance for taste is given but not for health benefits. People are not aware about harmful effect of incompatible diet. Hence, to understand the Viruddha Āhāra (incompatible diet) as a Nidāna (cause) in Śvitra (Vitiligo) and to know its relevance in the present era, this present study is selected.

MATERIAL AND METHODS

Total 242 patients of Śvitra (Vitiligo) were selected from O.P.D. and I.P.D. of National Institute of Ayurveda, Jaipur after their informed consent irrespective to their age, sex, occupation, religion etc. Survey was carried on the basis of specially prepared questionnaires. As described in Caraka Saṁhitā Sutrasthāna³ & other Saṁhitās, the questions of survey were based on examples of 18 types of Viruddha Āhāra viz. Deṣa (place), Kāla (time), Agni (digestive power), Mātrā (quantity), Sātmya (homologation), Doṣa (humours), Saṁskāra (mode of preparation), Virya (potency) Koṣṭha (bowel), Avasthā (state of health), Krama (sequence), Parihāra (caution), Upacāra (treatment), Pāka (cooking), Saṁyoga (combination), Hṛdaya (palatability), Saṁpada (richness of quality), Vidhi (rules for eating) Viruddha Āhāra.

Selection criteria - All the patients were selected with the following criteria:

Inclusion criteria: Patient with the classical sign and symptoms of Śvitra (Vitiligo); Patients above 10 years and

below 70 years; Patients belonging to either gender were selected for the survey study.

Exclusion criteria: Patients aged below 10 and above 70 years; Patients with leprosy, tuberculosis, paralysis, and malignant diseases; Pregnant women and lactating mothers; Patients with systemic disorders viz. uncontrolled hypertension, cardiac problems, diabetes mellitus, etc. were excluded for the survey study.

OBSERVATIONS AND RESULTS

Age

Out of 242 patients, maximum number of patients (40.49%) was found in the age group of 20-30 years. The next common age group is 31-40 years (34.71%) followed by 20.24% patients in age group of 41-50 years. 4.54% patients in the age group of 50-60 years. This observation reveals that, Śvitra (vitiligo) affects all age groups. (Graph 1)

Gender

In this study 54.13% of the patients were male and 45.86% of patients were female. According to modern science, male and female both are equally affected from this disease which is supported by observed findings. (Graph 2)

Marital Status

Distribution of marital status in 242 patients of Śvitra shows that maximum 69.42% patients were unmarried and 30.57% were married. No direct reference is available about the relation between the marital status and Śvitra. (Graph 3)

Diet Pattern

Maximum patients (72.72%) were vegetarian and 27.27% of patients were taking mixed diet. It may be due to general religious belief of Hindu especially in this area. (Graph 4)

Śāririka Prakṛti

The data of Prakṛti shows that 46.28% of patients were having Vāta-Kapha Prakṛti, while 35.95% of patients were Vāta-Pitta Prakṛti and rest of the patients having Pitta-Kapha Prakṛti (17.76%). As mentioned in Samhitās, Śvitra is a Tridoṣaja Vyādhi. (Graph 5)

Nidrā

58.67% patients of study were taking Divāsvāpa and 34.29% & 7.02% patients having Samyaka Nidrā & Alpa Nidrā respectively. As mentioned in Ayurvedic texts, Divasvāpa is a direct cause for Rakta Duṣṭi.⁴(Graph 6)

Dominant Rasa Sevana

The data of Predominant Rasa Sevana shows that out of 242 patients, all patients (100%) were consuming more amounts of Madhura Rasa, Lavaṇa Rasa and Amla Rasa. Katu Rasa was predominant in 69% patients. Amla & Lavaṇa Rasa may provoke Pitta and Rakta Duṣṭi. Excessive intake of Madhura Rasa is responsible for Kṛmi & Kapha.⁵ (Graph 7)

Agni

In the present study, maximum patients 86.77% were having Mandāgni (weak digestive power), 8.36% patients were having Viṣamāgni and 4.95% were having Tikṣṇāgni. Agni Duṣṭi can't digest even the easily digestible foods and responsible for production of Āma (undigested food products).⁶ (Graph 8)

Koṣṭha

On analyzing the Koṣṭha of the patients it was found that 50% of patients were having Madhyama Koṣṭha, where 43.38% patients were with Krura Koṣṭha and 6.61% patients having Mrdu Koṣṭha. Madhyama Koṣṭha indicates the dominance of Kapha Doṣa in Mahārotasa. (Graph 9)

Viruddha Āhāra consumer

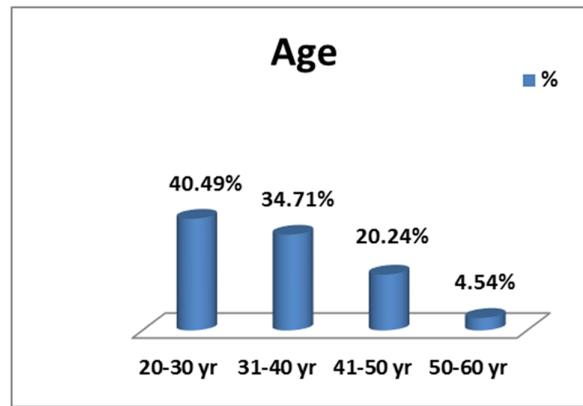
All patients (100%) were found of Viruddha Āhāra consumer.

Table 1: Prevalence of Nidāna (Cause)

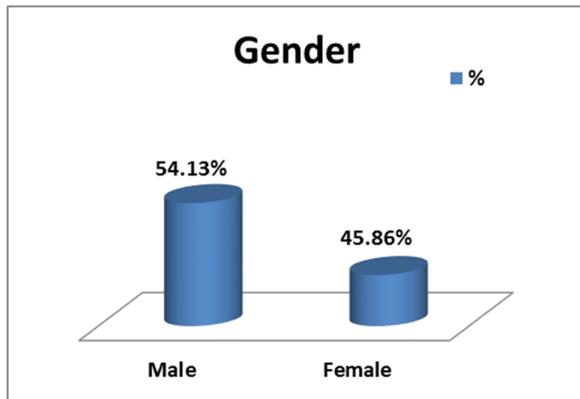
Availability of Nidāna	No. of patients	%
Intake of milk with Khichadi (cooked rice)	242	100%
Intake of milk with Guḍa (jaggery)	189	78.09%
Intake of milk + sour fruits	242	100%
Intake of non veg diet + curd & milk	66	27.27%
Intake of curd at night	242	100%
Intake of chilled water after exposure of sun	242	100%
Intake of junk food like samosa chaat, dabheli, pani puri, dahi puri, sheva puri, bhela puri, ragada patis etc., fried foods & oily, spicy foods and processed food (frozen, canned, packaged or wrapped)	231	95.45%
Intake of food in the presence of Manovighātakara Bhāva (emotional disturbances) like Cintā, Śoka, Bhaya, Krodha, Irṣā etc.	174	71.90%

On considering data of Viruddha Āhāra consumer in 242 patients of Śvitra, all patients (100%) were taking milk with Khichadi (cooked rice), milk + sour fruits, curd at night, chilled water after exposure of sun. 95.45% patients were junk food like samosa chaat, dabheli, pani puri, dahi puri, sheva puri, bhela puri, ragada patis etc., fried foods & oily, spicy foods, bakery products and processed food (frozen, canned, packaged or wrapped). Intake of milk with Guḍa (jaggery) was found in 78.09% patients. 71.90% patients consuming food in the presence of Manovighātakara Bhāva(emotional disturbances) like Cintā (worry), Śoka (sorrow), Bhaya (fear), Krodha (anger), Irṣā (jealousy) etc. Intake of non veg diet + curd & milk was found in 27.27% patients. (Table 1)

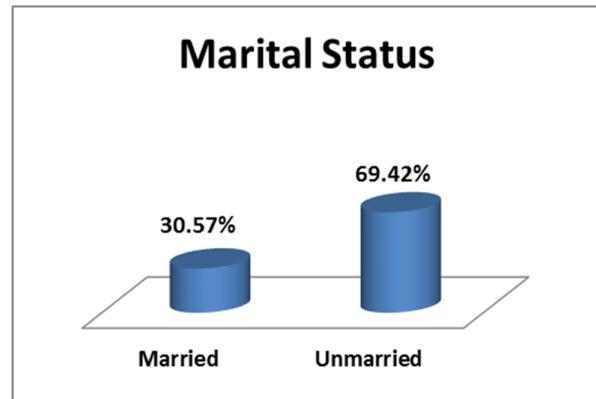
Now in modern era, many dietary verities are available in market. Most of people consume different varieties in different hotels, companies, without considering its preparation. Therefore Samyoga Viruddha (incompatibility of combination) is more observed in modern society like in a combination of milk + sour fruits, all patients (100%) were taking this combination. When milk is mixed with Amla Rasa it gets curdled & causes obstruction in channels. Next example of combination is milk with Guḍa (jaggery), 78.09% patients were taking milk with Guḍa. As described in Samhitā (classics), intake of Guḍa causes excessive increase of Kṛmi, Majjā, Śonita, Meda & Māmsa.⁷



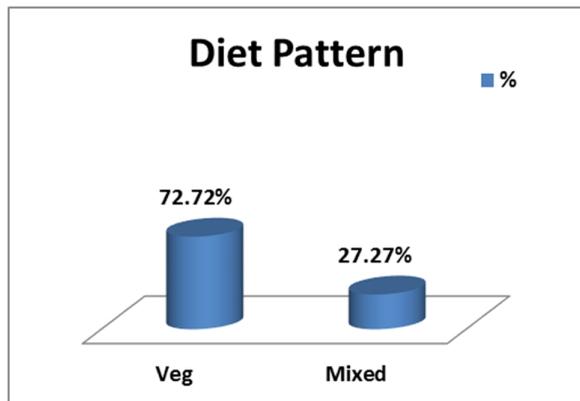
Graph 1: Age group of total study patients (n=242)



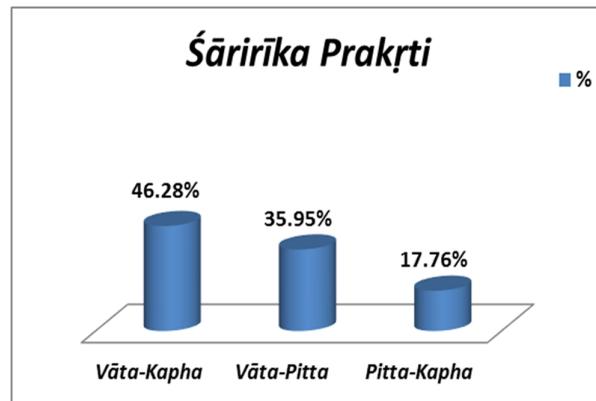
Graph 2: Gender of total study patients (n=242)



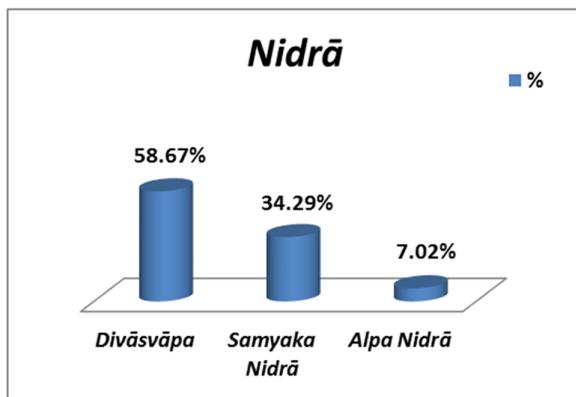
Graph 3: Marital status of total study patients (n=242)



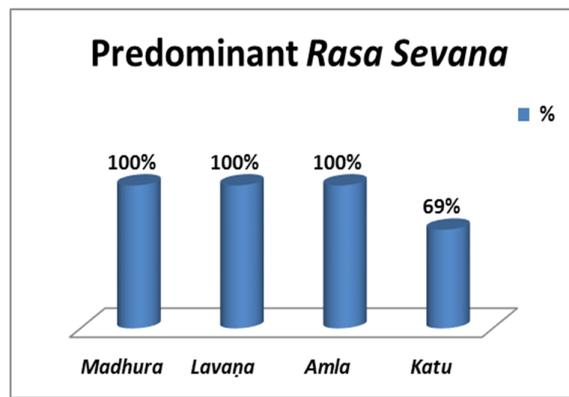
Graph 4: Diet pattern of total study patients (n=242)



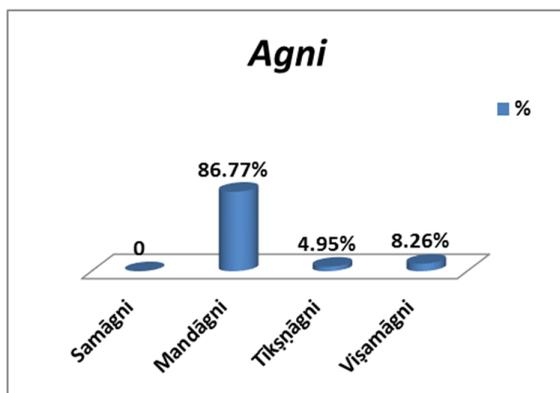
Graph 5: Śārīrīka prakṛti of total study patients (n=242)



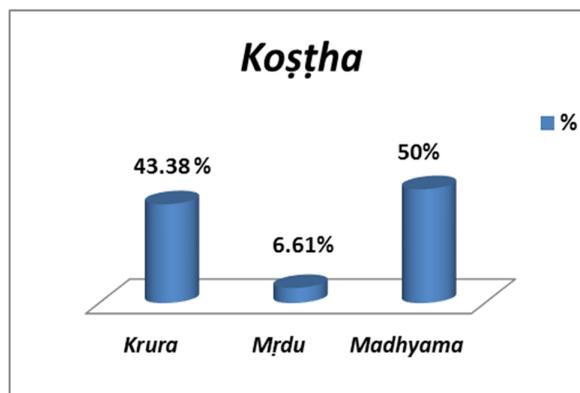
Graph 6: Nidrā of total study patients (n=242)



Graph 7: Predominant rasa sevana of total study patients (n=242)



Graph 8: Agni of total study patients (n=242)



Graph 9: Koṣṭha of total study patients (n=242)

95.45% patients were junk food like samosa chaat, dabheli, pani puri, dahi puri, sheva puri, bhela puri, ragada patis etc., fried foods & oily, spicy foods, bakery products and processed food (frozen, canned, packaged or wrapped). An experimental study which supports a positive link between junk food and Vitiligo suggested that, Childhood Vitiligo has been related to malnutrition and intake of junk food.⁸ Junk food is a classic example of unbalanced diet usually characterized by high proportion of carbohydrates, refined sugar, salt, fats & low nutritional value, which can raise various health concerns. Junk food is unhealthy for digestive system as they slow down the digestion process making the stomach bloated. In case of deeply fried junk food, some of the nutritional values get destroyed due to the application of excessive heat and unwanted qualities are become a part of food stuff due the combination of unhygienic substances which are the reasons in producing the incompatibility. This observation supported the modern science, as protein deficiency diet and copper deficiency diet can contribute for causation of vitiligo.

All patient (100%) were taking chilled water after exposure of sun causes trauma (injury) to skin by the opposition of each other's qualities and intake of curd at night etc. hampers the 'Kāla' (time) unit of Āhāraparināmakara Bhāva (factors required for food processing) leading to Agniduṣṭi (vitiation of digestive fire) giving rise to

blockage of channels and results in improper digestion & assists in the incidence of Vyādhī (disease). These examples comes under Krama Viruddha (incompatibility of sequence)

71.90% patients consuming food in the presence of Manovighātakara Bhāva like Cintā, Śoka, Bhaya, Krodha, Īrṣā etc. which comes under Hṛdaya Viruddha (incompatibility of palatability) there is Mano-Āghāta which leads to Agni Duṣṭi⁹ ultimately engender harmful effects to Śārīra (body). In this way, many of above examples both qualitative & quantitative variation may produce itself as Viruddhāhāra.

According to Āyurveda, Śvitra is enumerated as Raktaja Vikāra¹⁰ and Rakta and Pitta are correlated with Āsraya-Āsrayībhāva. So, mainly Pitta (Bhrājaka) gets vitiated, which is responsible for normal skin color, leads to white colored skin patches, named as Śvitra Vyādhī. According to Suśruta, Varṇaprasādāna is one of function of Raktadhātu.

After the analysis of data regarding incidence of Śvitra and Viruddha Āhāra it may be hypothesized that, above mentioned etiological factors (incompatible diet) are responsible for Raktaduṣṭi and production of Agnimāndya and then formation of Āma which plays an important role in beginning of pathogenesis of Śvitra.

CONCLUSION

Viruddhahāra (incompatible diet) is a potent cause of several diseases especially in this era when faulty dietary practice is in vogue. Hence every people should be aware about consumption of incompatible diet.

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