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Research Article

HAIR GROWTH CESSATION EFFECT OF KOSHTAKI BEEJ SIDDHA TAILA LOCAL APPLICATION IN FACIAL HIRSUTISM

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ABSTRACT

The Polycystic ovarian syndrome (PCOS) is a common gynaecological disorder characterized by hypergonadotropism, hirsutism, obesity, oligo menorrhoea and commonly associated with infertility. The condition hirsutism is defined as excessive terminal hair growth in male pattern in female. It is typically affects 5-10% of reproductive age group. Excessive hair growth can often cause significant psychological and emotional distress. Genetic or unhealthy lifestyle which triggers pathogenesis. Hirsutism result from excess production of androgen, often from ovarian or adrenal sources. It is typically associated with metabolic syndromes like PCOS, but can be idiopathic. Although the term Hirsutism is nowhere mentioned directly in the literature of Ayurveda, but the certain term which correlate with the features of hirsutism can be found such as atilomata in charak Samhita and sthulalmasha gandha in kashayapa samhita.

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INTRODUCTION

Hirsutism is defined as distribution of coarse hair in a female normally present in a male, i.e. upper lips, chin, chest, lower abdomen and thighs. Causes of hirsutism Genetic and ethnic, excess androgen, liver disease when level of SHBG drops, ovarian- PCOS other causes are congenital adrenal hyperplasia, Cushing's syndrome, adrenaltumour, obesity, hypothyroidism, anovulatory hypogonadism. Hirsutism occurs early in congenital adrenal hyperplasia, around puberty in PCOD and in elderly women at menopause. PCOD accounts for age. Due to fast and busy life, faulty food habits, excess use of fertilizers and pesticides on vegetables and fruits, sedentary lifestyle etc., the prevalence of hirsutism increased day by day.

Ayurveda and hirsutism- There is no direct term for hirsutism in Ayurveda but we can decipher term for hirsutism in Ayurveda by various references in charak Samhita sutra sthanashtaninditeeyamadyaya we come across atilomata and alomata individuals where excess hair on their entire body/complete absence of hair mentioned. In kashyap Samhita while delineating about graharogas the author emphasizes about pushpaghani, one among three types jyatagni characterised by sthulalomasha gandha i.e one with corpulent and hairy cheeks, this presence of hair on chin can be compared with facial hirsutism. Professor P.V. Tiwari while commenting

on the same regarding pushpaghani which is type of curable Jataharini has opined it to be an ovular menstruation with hirsutism.

Physiological concepts related to keshha (scalp hair) and Loma (Body hair)

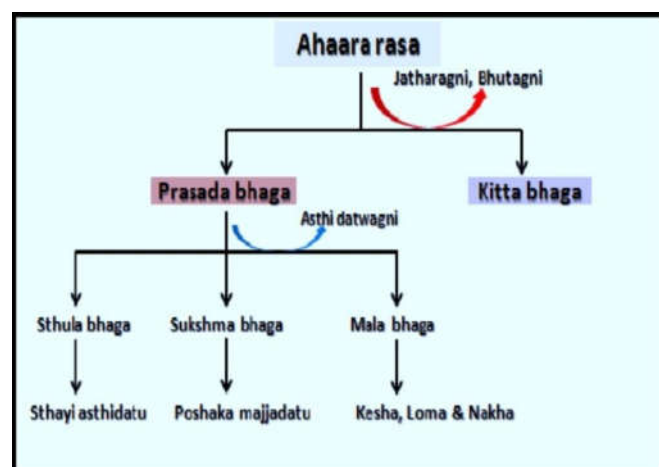


Figure 1 flow chart depicting the physiology of keshalomaupatikram

In above said reference from gad nigrha a simple remedy is given for permanent removal of hairs, by application of koshtaki beej siddha tail after plucking out the hairs.

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In case of hirsutism girl and women have to shave or wax regularly, some women use the bleach but as it is chemical it can cause reaction and discolouration of skin, there are therapies like laser treatment for permanent hair removal but its is costly and minimum 8 settings are required and having much more side effects.

So with the above said reference here application of koshtaki siddha taila after waxing prevents hair regeneration which will help women having hirsutism.

Aim

To evaluate the efficacy of koshtaki siddha taila local application in facial hisutism

MATERIALS

Drug name	Latin name	Rasa	Virya	Vipak	Prabhav	Guna
Koshtaki	Luffa acutangula	Tikta	ushna	Katu	Induce emesis and purgation	Laghu,ruksha, tikshna

Administration of Drug

1. Application of koshtaki siddha taila on lower forearm and wiped out after 10 mins.
2. Examination of application area will be done after 24hrs to check sensitivity. Patient will be instructed to report any adverse condition at any point of time during treatment.
3. Waxing will be done
4. Koshtaki siddha taila will be applied anti direction of hair waxed area for 5 min daily followup will be taken at 30th day to check any adverse condition.
5. On 30th day followup waxing of facial hairs will be done.
6. Koshtaki siddha taila will be applied in anti direction of hair on waxed area for 5min daily for 7days same procedure will be repeated in next month .

Drug	Koshtaki siddha taila.
Route of Administration	Local application in antidirection of hairs.
Time of application	5 min
Duration	7 Days
Followup	1 st ,2 nd ,30 th ,60 th ,150 th day

Clinical Assessment

The physical examination should be used to establish the type , pattern and extent of excessive hair growth. Ferriman and gallwey devised a score for clinical quantification of hirsutism. However it was a subjective scale hence not universally adopted . According to atiloma and alopecia individuals are considered as nindita. Atiloma is a more elaborate word used in Ayurveda which includes both male and female having excess or unwanted hair growth on any part of body. Patient will be assessed according regeneration of hairs on followupdays ,discolouration or pigmentation of skin , skin of application area will be analysed with dermascope before 2nd session of treatment.

DISCUSSION

In Ayurveda treatment of hirsutism is mostly by topical medicaments . the Oil enters the lomakupa and vandalize the follicle to cause temporary and permanent depilation. Mode of action regarding the taila of koshtaki is uncertain. Owing its tiktaras causes vitiation of vatadosha to produce rukshata, kharata which might serve the purpose of depilation. Ayurvedic classical topical formulaton are useful in emergency cases . for instant depilation irrespective of the underlying cause. Through examination can lead a different therapies related to exact origin of the condition.

CONCLUSION

Extensive research work has to be carried out to understand the effectiveness of koshtaki siddha taila action of formulation mentioned in ayurvedic classics with respect to its SOP , standardization of formula , toxicity and efficacy studies so as to provide safe and cost effective solution for hirsutism.

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