



**AN OBSERVATIONAL STUDY OF CURRENT FOOD HABITS OF
COLLEGE GOING STUDENTS IN *KITIBH KUSHTA***

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ABSTRACT

Ayurveda has “Triskandha” (three-pillared) Or “Trisutra” (three-threaded) having Hetu (etiology), Linga (signs and symptoms) and Aushadha (therapeutics) as constituents but later on Hetu and Linga were further analysed and developed to Pancha-Nidana. In Ayurveda a Novel concept of viruddha Sahara has been condensed so kitibh kushta disease were developed by current food habits and that has to find out.

Total 43 individuals were studied out of them 88 % of the individuals in the group of 20-27 age were experienced the characteristically manifested symptoms. In this age group more individuals are consuming fast food or different types of viruddha ahara dravya more frequently in their diet. Result total 43 individuals, out of them we found that, 26 individuals with fast food consumption, 19 individuals with fruits and milk, 26 individuals with junk food, 17 individuals with Mutton-Chicken food, 18 individuals with sprouts and milk, 17 individuals with fish and milk. all current food habits are factors for manifestation of kitibh kushta disease and junk food and fast food with milk is aggregating factor for pathogenesis of shravi, rukshata, mandalata, vaivarnyata laxshan in kitibh kushsta.

Keywords: Kitibh Kushta, Food habits, College Student, Viruddha ahara, Psoriasis

INTRODUCTION:

Ayurveda is an ancient science came into existence with major noble causes one is maintenance of Swasthya and other is treatment of diseases.

‘स्वस्थस्य स्वास्थ्य रक्षणम् आतुरस्य विकार प्रशमनञ्च।’

(च.सू.30/26)

Nature always doing better for all living being, but life of modern man declined the human immunity day by day so many diseases born and becomes rigid. ‘Kushtha’ is one of the such disease. It is one of the “MAHAGADA” defined by Ayurveda which not only affect the skin but also other dhatu for e.g.: rakta, mansa etc. Skin is the largest organ of body it reflects Physical, mental, and physiological state of an individual. Skin not only covers and protects the body but also perform some function of excretion and metabolism.

‘कुष्णातिङ्गिकुष्ठम्।’

(मा.नि./कुष्ठ/1 टिका)

Out of 18 types of Kushtha explained in Bruhatrayi ‘7’ are Mahakushtha and ‘11’ are Kshudrakushtha. While going through modern textbook of dermatology, we can find that psoriasis is the commonest autoimmune disease occurring in humans. Its most of the signs and symptoms resemble with Kushtha (कुष्ठ).

‘देहधातुप्रत्यनिक भूतानि द्रव्याणि देहधातुभिविरोधमापद्यन्ते।’

(च.सू. २६/८१)

Aahar, nidra and brahmacharya are three sub pillars, which support the body itself. Here ahara has been enumerated first and which shows its importance. Food plays a decisive role in development, substances reproduction and termination of life. Through centuries, food has been recognized as an important factor for human beings, in health and diseased state. Unfortunately, hardly one or two percent individuals in India follow the codes and

rules of Dietic. As a result, he may have to pay penalty for his non- judicious change. According to Ayurveda the non-beneficial or harmful food is termed as the Ahita Ahara, which includes so many things.

In Ayurveda a Novel concept of viruddha ahara has been condensed. Since the effect of this viruddha ahara is in different from ahita ahara , this viruddha ahara may be included under the ahita ahara group. Charaka has mentioned “whatever articles of food, which having dislodged the morbid humours do not eliminate the from the body, are to regarded as unwholesome. And Because of fast lifestyle industrial and occupational Hazard, repeated use of chemical additives, mechanical or radiation trauma can initiate disease of skin like psoriasis, which makes much more handicap in society because with its presence nobody wants to touch them and for bidden by everyone, beauty and personality loss which leads to under stress. Now-a- days whole world is gradually turning towards Ayurveda for safe & complete cure of skin disease. Initially Ayurveda was “Triskandha” (three-pillared) Or “Trisutra” (three-threaded) having Hetu (etiology), Linga (signs and symptoms) and Aushadha (therapeutics) as constituents but later on Hetu and Linga were further analysed and developed to Pancha-Nidana. Nidana (etiology), Purvarupa (prodermal), Rupa (signs and symptoms), Upashaya

(therapeutic suitability) and Samprapti (pathogenesis) which becomes as five of examination of disease. Knowledge of disease is acquired for treatment of any particular disease, diagnosis of disease & its stages is important Hetu (etiological factors) & samprapti (pathogenesis) of the disease carries more weight than the treatment. So, I choose this topic

MATERIAL AND METHOD –

- **STUDY DESIGN**

Survey Study,
Literary and Retrospective.

- **STUDY SETTING**

In Dr.D.Y.Patil College of Ayurved
And Research centre,Pimpri,Pune

- **STUDY POPULATION**

Patients of Kitibha Kushth

MATERIALS:-

Literature - Relevant
Ayurved and Modern topics.

Subjects - Participants of
Kitibh Kushta

METHODOLOGY:-

□ Literally review :-

The literature regarding the topics studied from the relevant compendia of ayurved and modern science.

□ Data collection :-

Source: - Participants were selected from the OPD and IPD of our hospital.

Informed consent was obtained from all the subjects.

Subjects given consent were enrolled in the study & Scrutinized as per the inclusion criteria.

Clinical examination was performed and assessment done with the help of nidhanpanchak of kitibha kushtha.

The data was recorded in the Case Record Form & analysed.

Conclusion will be drawn on the basis of data obtained.

SAMPLE SIZE -

$$n = Z^2 pq / L^2$$

p=prevalence

$$q = 1 - p$$

L= allowable error.

40 pre diagnosed patients of kitibha kushtha (Psoriasis)

Sampling Technique:-

Convenience Sampling Technique.

40 individuals of kitibha kushtha will be questioned for the survey study and will be assessed as per assessment criteria.

Test :

Sr. No.	KITIBHA KUSHTHA	PSORIASIS FEATURES
1	Kinakhara sparsha	Scaling
2	Shyavam	Discolouration
3	Parusha	Dryness
4	Sravi	
5	Vritta	Oval to round lesions
6	Ghana	Keratosi /elevation
7	Ugrakandu	Severe pruritic
8	Snigdha Krushna /rakta Krushna	Erythematous plaques
9	Prashantani cha punah utpadayate remissions and relapse	Common episodes of
10	Drudhan punah prasravayati	Auspitz's sign

OBSERVATION

“An observational study of current food habits of college going students in kitibh

- Chi-square Test.

INCLUSION CRITERIA

- 1) Sex- Both Sex Male and Female
- 2) Age-Between 18 yrs to 27 yrs
- 3) Patients presenting with signs and symptoms of kitibha Kushtha.
- 4) Patients presenting with signs and symptoms of Plaque Psoriasis.

EXCLUSION CRITERIA

- 1) Patients having other disease like leprosy, CCF etc.
- 2) H/o anaphylaxis to medicine.
- 3) Immunocompromised disease like HIV, HBV.
- 4) Malignancy
- 5) H/o Angioedema.

ASSESSMENT CRITERIA -

Clinical assessment was done according to nidhanpanchak of kitibha kushtha mentioned in classical texts.

Assessment Criteria Table

These criteria are as follows:

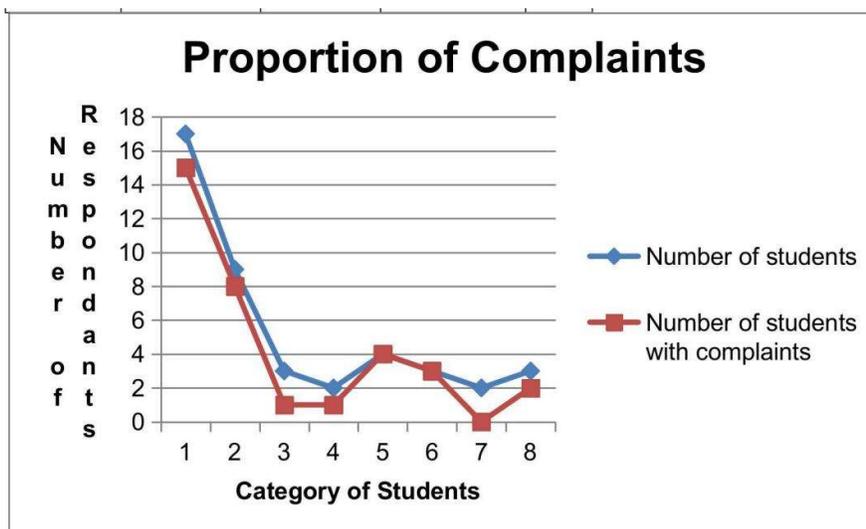
kushta.”

Main Complaints of Kitibh Kushth with respect to Hetus:

Types ofK. Kushth	Types of Kitibh Kushth Hetus													
	FF	JF	IF	CF	BP	SP+M	MSH	F+M	Fi+M	MC+M	L+M	DCWM	PSD	SIF
KN	26	26	14	16	10	18	24	19	17	17	12	13	19	18
TW	21	17	6	10	5	9	0	19	13	13	7	10	14	11
RK	17	12	10	11	7	10	12	13	13	13	7	9	9	9
SV	4	4	4	4	4	18	4	4	4	4	2	2	1	2
PD	4	4	6	3	2	3	3	15	4	13	4	16	1	1
MN	9	7	6	5	4	5	7	8	6	7	4	3	6	5
Total	81	70	46	49	32	63	50	78	57	67	36	53	50	46

Main Complaints of Kitibh Kushth with respect to Hetus:

Types of K.Kushth	Types of Kitibh Kushth Hetus											
	CF	RWN	FKG	OR	ES	ND	DMF	DA	TMG	DBP	C5	
KN	15	15	13	16	5	28	25	11	15	8	7	
TW	9	9	7	11	5	21	20	8	11	8	5	
RK	7	7	6	8	2	14	14	8	9	7	4	
SV	2	2	2	2	1	4	4	2	2	3	1	
PD	0	0	2	2	0	4	4	2	3	3	1	
MN	3	6	4	5	0	7	6	3	3	3	3	

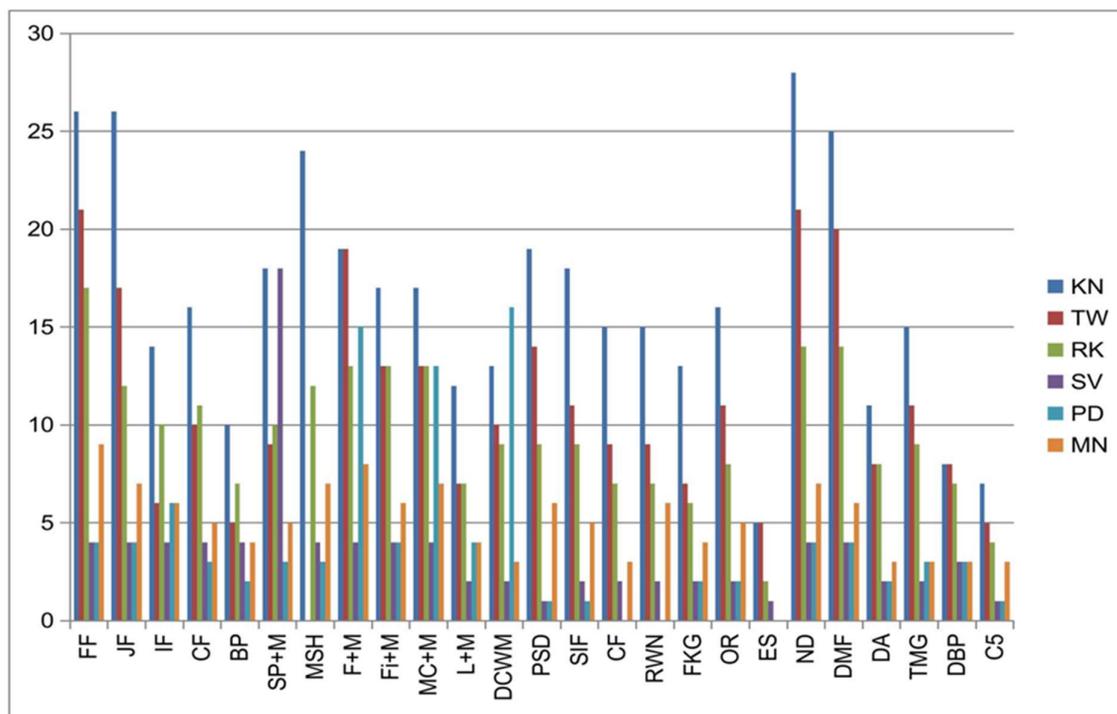


Average Age (In Years): 21.98= 22 Years

The study was carried in the students in the age group of 20 to 27 years and it was observed that the onset of the symptoms was as early as 20 years with the maximum number of complainants as reflected from the observation table. The 88 % of the students in this group experienced the characteristically manifested symptoms

.The symptoms are aggravated by one percent (89) in the next group of students that is 21 years. The older age groups are seem to be intelligent and are aware of the consequences of the effect of food habits, hence there is a downward in the percentage of the complaints which is obvious. The time tested ramifications of the food habits is also better for the old age problems.

Standard Deviation of the Age(In Years)= 2.33 Years.

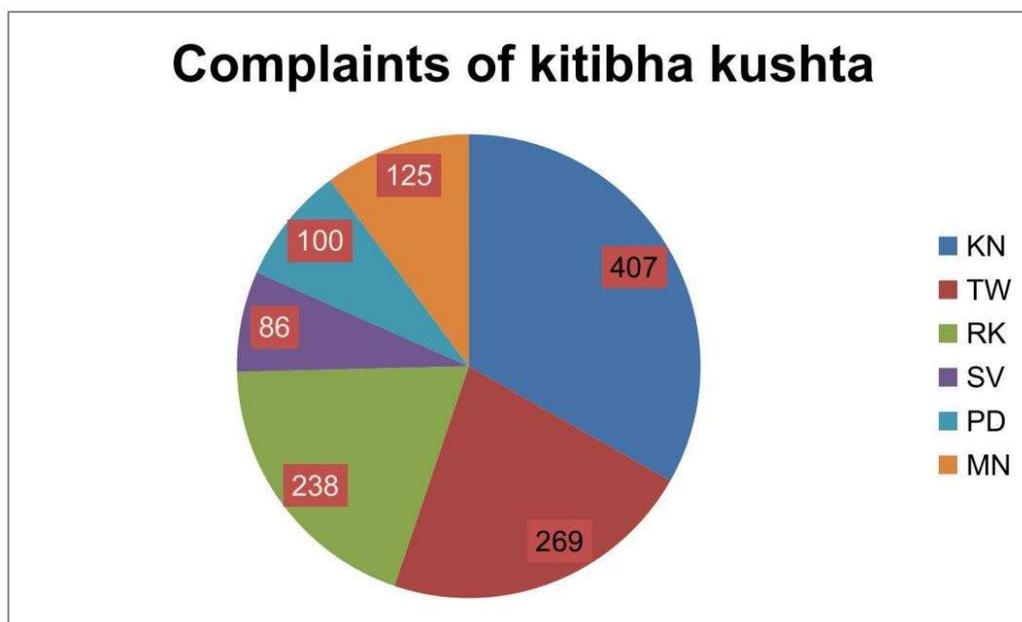


Fast Food (FF) and junk Food (JF), Drinking Cold Water before Meal (DCWM), Punjabi Special Dish (PSD), South Indian Food (SIF), Chat Food (CF), Rice With/Without Non Veg (RWN). Food Kala Garam Masala intake with Spices (FKG), Over Eating (OR), Navin Dhanya (ND), Dahi and fermented Milk Food (DMF), Til oil , Milk and Guda (TMG), (C5) Individual observation of Food , showing similar pattern of the behavior as far as the Kitibha Kushta chief complaints are noticed with the students. The Diagrammatic presentation is predicting the generalization. However Italian Food (IF), Bakery Products (BP), (SP+M) Sprout Food with Meals, (MSH)

Milk Shake, (F+M) Fermented with Milk, Fish with Milk (Fi+M), Mutton Chicken with Milk (MC+M), Garlic with Milk (L+M).

Milk Shake food pattern has show an exceptional symptoms with Discoloring of the Skin (TW) as not being present in the complaints. The food habits which have foreign origin are unpredictable and the order of the complaints is significantly different from the first few food habits. Moreover the Non Vegetaria food play a major role in the expressions of Kushta which is measured in the study.

Complaints of kitibha kushta	
KN	407
TW	269
RK	238
SV	86
PD	100
MN	125



Kitibha Kushta has been described by six components but three are major as depicted by the chart above. The Six of these were seriously studied and only three are significantly prominent. Itching is a characteristic symptom represented by KN (KNDU) with 33% respondent have experienced it. The discoloring of the skin (TW) is the second most noted symptoms as 22% of the respondents have noted it and brought it to the notice of the coordinator. The Skin Dryness (RK) presented in 19% of

the study subjects is also significantly higher and these three cumulatively stands upto 914 (75%) in the study while rest 311 (25%). The first three are the causing factors and the later are its auxiliarily related

symptoms. The food habits are more associated with the first three symptoms while the rest are just the defining symptoms of Kushta according to literature. The junk foods are responsible for the Kitibha Kushta.

DISCUSSION

Any research work without being discussed about its nature, utility and importance is said to be incomplete. Vitarka (ability of discussing on the basis of Shastras) is one of the six features to be present in an excellent Scholar (Ch. Su. 9/27). Any hypothesis /principle, if to be proved, must be discussed thoroughly from all angles. This has been clearly told by Acharya Charaka long back (Cha. Vi. 8/37). After the formation of a hypothesis, it has to be tested and observed by various methods and eventually the results are obtained. All these should be well supported by proper reasoning or logic and finally concluded. A hypothesis gets established as a principle if the reasoning given is satisfactory, otherwise, it remains as it is. Acharya Charaka has very precisely said that, even the truth may not accept, as it is without the logical interpretation. Charaka has clearly stated in Sutra 25th Chapter that, **"Shastra sahit tarka sadhananam"** (Ch. Su. 25/40)

Discussion improves the knowledge and discussion with Shastra becomes base establishment of the concept. Thus, discussion is the most essential phase of any research work. Keeping in this view the facts which have emerged from the conceptual, and observational study have been discussed here.

In the study total 43 individuals were studied. All individuals were having the symptoms of kitibha kushta. All the symptoms and their respective hetu sevan was studied thoroughly.

The conclude observations are as follows-

Age- in the present study the average age found was 21.98 I.e. 22 years. The study was carried out in the age group of 20- 27 years. Total 43 individuals were studied. Maximum patients were of age 20 years. The 88 % of the individuals in this age were experienced the characteristically manifested symptoms. In this age group the more individuals are consuming fast food or different types of viruddha ahara dravya more frequently in their diet. As the result of which they are more experiencing the Kitibha kushta like symptoms.

Different food habits and corelation with kitibha kushta symptoms-

❖ Fast food -

1) Fast food consumption and Kinakhara Sparsha -

Among 43 individuals, 26 patients were consuming fast food like pizza, burger etc. The study shows these 26 patients were showing the Kina khara sparsha symptom. Fast food increases the ruksha guna in the body because of which the skin dryness occurs.

2) Fast food consumption and Twacha vaivarnya-

Among 43 patients 21 patients were

consuming fast food and showing the twacha vaivarnya symptom. Rasa dushti occurs and the dhatu level which further reflects by the skin in the form of skin discolouration.

3) Fast food consumption and rukshata-

Among 43 patients, 17 were consuming fast food and facing the skin dryness simultaneously.

4) Fast food consumption and Sraav -

Among 43 patients, only 4 were consuming fast food and facing the Sraav I.e. oozing from the patches simultaneously. In kitibha kushta the sraav symptom is very rare as the skin faces dryness more often.

5) Fast food consumption and pidaka -

Among 43 patients, only 4 were consuming fast food and facing the pidaka symptom. Which is again not very common in kitibha kushta

6) Fast food consumption and Mandala -

Among 43 patients, only 9 were consuming fast food and facing the Mandala symptom. The round patches are more common in fungal infections rather than kitibha kushta.

❖ Fruits + Milk Consumption -

1) Fruits+Milk Consumption and Kinakhara Sparsha-

Among 43 patients, 19 were consuming Fruit items along with different milk products like lassi, takra, paneer, cheese etc. In which we are finding the kina khara twacha sparsh. Scaling is more in this type.

2) Fruits +Milk Consumption and

Twacha vaivarnya -

Among 43 patients, 19 were consuming fruit items along with different milk products like lassi, takra, paneer, cheese etc. In which we are finding the Twacha vaivarnya.

3) Fruits+Milk Consumption and Rukshata -

Among 43 patients, 13 were consuming fruit items along with different milk products like lassi, takra, paneer, cheese, milkshakes etc. In which we are finding the rukshata.

4) Fruits +Milk Consumption and Sraav -

Among 43 patients, only 4 were consuming fruit items along with different milk products like lassi, takra, paneer, cheese, milk shakes etc. In which we are finding the Sraav . Because kledadhikya and Kapha prakop this lakshan is manifested.

5) Fruits +Milk Consumption and pidaka -

Among 43 patients, 15 were consuming fruit items along with different milk products like lassi, takra, paneer, cheese, milk shakes etc. In which we are finding the pidaka lakshana. Paak of the pidaka was not that common. The pidaka were small and dry in nature.

6) Fruits +Milk Consumption and Mandala -

Among 43 patients, 8 were consuming fruit items along with different milk products like lassi, takra, paneer, cheese, milk shakes etc. In which we are finding the mandala lakshana. The patches are circular.

❖ Junk Food -

1) Junk Food Consumption and Kinakhara sparsha -

Among 43 patients, 26 patients were consuming junk food like chips, chocolates, carbonated drinks etc. These are the people found to be having kinakharata of the skin. The dryness and scaling was more in these patients as junk food vitiates the vata dosha and affects the rasa dhatu formation. It reflects as the dry and scaly skin in the kitibha kushta.

2) Junk Food Consumption and Twacha vaivarnya -

Among 43 patients, 17 patients were consuming junk food like chips, chocolates, carbonated drinks etc. These are the people found to be having vaivarnya of the skin.

3) Junk Food Consumption and Rukshata -

Among 43 patients, 12 patients were consuming junk food like chips, chocolates, carbonated drinks etc. These are the people found to be having rukshata of the skin.

4) Junk Food Consumption and Sraav -

Among 43 patients, only 4 patients were consuming junk food like chips, chocolates, carbonated drinks etc. These are the people found to be having Sraav symptom.

5) Junk Food Consumption and Pidaka -

Among 43 patients, only 4 patients were consuming junk food like chips, chocolates, carbonated drinks etc. These are the people found to be having pidaka.

6) Junk Food Consumption and mandala

- Among 43 patients, only 7 patients were consuming junk food like chips, chocolates, carbonated drinks etc. These are the people found to be having mandala.

❖ Mutton chicken like mamsa along with milk products -

1) Mutton chicken like mamsa along with milk products and kinakhara sparsha-

Among 43 patients, 17 patients were consuming mamsa along with milk products in various forms. They were facing Kinakhara sparsha among all the symptoms.

2) Mutton chicken like mamsa along with milk products and Twacha vaivarnya, Rukshata and Pidaka -

Among 43 patients, 13 patients were consuming mamsa along with milk products in various forms. They were facing Twacha vaivarnya of shyav varna, twacha rukshata was observed and pidaka were formed simultaneously.

3) Mutton chicken like mamsa along with milk products and Sraav-

Only 4 patient among the 43 were consuming the mamsa along with milk products were facing the sraav lakshana

4) Mutton chicken like mamsa along with milk products and mandala -

Only 7 patient among the 43 were consuming the mamsa along with milk products were facing the mandala lakshana.

❖ Sprouts with milk products-

1) Sprouts with milk products and

kinakhara sparsha -

Among 43 patients, 18 patients were consuming Sprouts along with milk. There is a so called balanced diet practice is going on in young generation, having sprouts early in the morning in breakfast. Soon after which they consume milk or smoothies as a pre work out snack. This leads to overall rakta dushti as virudhaka is rakta prakshobhaka.

2) Sprouts with milk proucts and Twacha vaivarnya -

Among 43 patients, 9 patients were consuming sprouts along with milk and were having the twacha vaivarnya.

3) Sprouts with milk proucts and Rukshata -

Among 43 patients, 10 patients were consuming sprouts along with milk and were having the rukshata.

4) Sprouts with milk proucts and Sraav-

It is observed that the sraav lakshana is present at maximum number I.e in 18 patients who follow this practice. So we can say that, virudhaka along with milk creates more kleda in the body.

5) Sprouts with milk proucts and pidaka -

Among 43 patients, only 3 patients were consuming sprouts along with milk and were having the pidaka.

6) Sprouts with milk proucts and mandala-

Among 43 patients, only 7 patients were

consuming sprouts along with milk and were having the mandala symptom.

❖ Fish along with milk -**1) Fish along with milk and kinakhara sparsha -**

Among 43 patients, 17 patients were consuming fish with different milk proucts like takra, milk shakes, dadhi etc. were showing the symptom - kinakhara sparsha.

2) Fish along with milk and twacha vaivarnya, rukshata-

Among 43 patients, 13 patients were consuming fish with different milk proucts like takra, milk shakes, dadhi etc. were showing the symptom - twacha rukshata and vaivarnya.

3) Fish along with milk and Sraav, Pidaka-

Among 43 patients, only 4 patients were consuming fish with different milk proucts like takra, milk shakes, dadhi etc. were showing the symptom - Sraav and pidaka.

4) Fish along with milk and Mandala -

Among 43 patients, 06 patients were consuming fish with different milk proucts like takra, milk shakes, dadhi etc. were showing the symptom - mandala.

RESULTS-

There is an impact of Aharaj and Viharaj Hetu in aetiopathogenesis of kitibha, we observed various hetu of aharaj and viraj is responsible for maniefistation of kitibh kushta disease.

Also we see that some of the hetu

of kitibh kushta is same present in plaque psoriasis.

CONCLUSION-

We found the highest number of complaints was with the Hetu- fast food consumption, followed by fruits along with milk.

It also conclude that junk food and fish with milk or mansa with milk is aggregating factor for pathogenesis of shravi, rukshata, mandalata, vaivarnyata laxshan in kitibh kushsta.

SUMMARY-

“An observational study of current food habits of college going students in kitibh kushta .” is presented in 7 sections.

These sections are as follows – Introduction, Review of literature, and Methodology of research, Observation and results, Discussion, Conclusion and Summary.

1. The introduction gives an overview on importance of whatever articles of food, which having dislodged the morbid humours do not eliminate them from the body, are to regarded as unwholesome And Because of fast lifestyle industrial and occupational Hazard, repeated use of chemical additives, mechanical or radiation trauma can initiate disease of skin like psoriasis, which makes much more handicap in society because with its presence nobody wants to touch them and for bidden

by everyone, beauty and personality loss which leads to under stress, so we need the research work on it for that purpose we selected the topic.

2. Review of literature comprises of following headings
Historic review of Kitibh Kushta and Plaq Psoriasis in disease. Various clinical manifestation of kitibh kushta and literature, their definition, classification and mechanisms Historic review and detailed literature available on kushta and skin diseases.
3. Methodology of research explains aims and objectives, source of patients, study design, criteria for inclusion and exclusion criteria.
4. The fourth section Observations and the result present relevant tables and graphs based on the study.
5. The observation percentages and p values were statistically analysed and explained.
6. Discussion part deals with salient points on literary aspects, interpretation of observations and results of the study.
7. Conclusion highlights the inferences drawn on the basis of the study and recommendations or simple take home message.

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