



E-ISSN: 2321-2187
P-ISSN: 2394-0514
www.florajournal.com
IJHM 2021; 9(2): 11-13
Received: 15-12-2020
Accepted: 25-01-2021

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Clinical efficacy of *Tabeekh Fasaad-e-Khoon* and *Roghan kamela* in Seborrhoeic Dermatitis (*Iltehaab-e-Jild Dohniyah*): A case report

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Abstract

Seborrhoeic Dermatitis is a common skin disease caused by *Malassezia furfur*, characterized by itchy red patches with flaky or greasy scales. Greek-o-Arab philosophers like *Ali Bin Abbas Majusi* (930-994 AD) and *Ibn-e-Sina* (980-1037 AD) have described it as *Quba-e-Mutaqash'shira* (desquamative dermatophytosis), a chronic variant. This article reports a case in which a 36 years old married male patient with scalp Seborrhoeic Dermatitis, was treated with Unani drugs; *Tabeekh Fasaad-e-Khoon* in the form of *Joshanda* (decoction) as oral administration, and *Roghan Kamela* as a topical application, to evaluate the efficacy of drugs. The patient has shown excellent and significant result just within 2 days of Unani treatment and finally all clinical characteristics of scalp Seborrhoeic Dermatitis completely evanesced, may be due to *Musaffi-e-Khoon* (blood purifier), *Muhallil-e-Waram* (anti-inflammatory) and anti-fungal potentials.

Keywords: Seborrhoeic dermatitis, *Tabeekh Fasaad-e-Khoon*, *Roghan Kamela*, blood purifier, anti-inflammatory, anti-fungal

1. Introduction

Seborrhoeic Dermatitis (SD) is a common skin disease caused by yeast, *Malassezia furfur*, characterized by itchy erythematous follicular papules with flaky or greasy scales. It is affecting 10-20 % of the general population. Its prevalence is higher in adult males than females and oily skin people but infrequent in infants^[1]. HIV, stress, genes, alcohol, cold and dry weather, an immune system response and certain medicine are seemed to be high risk factors^[2]. It is distributed at the site of the scalp, eyebrows/eyelashes, squamous blepharitis, nasolabial folds, retro auricular region, presternal and interscapular region and flexures. Usually, no investigations are required^[1]. Diagnosis is based on morphology and typical distribution of lesion, differentiated from psoriasis, atopic dermatitis, rosacea, systemic lupus erythematosus (SLE) and tinea^[1]. In Unani system of medicine, SD considered as *Quba* (dermatophytosis), defined by Greek-o-Arab philosophers *Ali Bin Abbas Majusi* (930-994 AD) as dryness and inflammation of the skin in reddish or blackish color and most commonly caused by *Dam-e-Lateef* (diluted blood) mixed with *Merah-e-Sauda* (bilious melancholy) or sometimes by *Dam-e-Haad* (hottest blood) mixed with *Ratubat-e-Ghaleez* (viscous fluid) and *Balgham-e-Shore* (bilious phlegm). Its chronic variants are known as *Quba-e-Mutaqash'shira* (desquamative dermatophytosis) in which peelinglike scales of fish occur from the lesion^[3]. It can be treated by doing *fasad* (venesection) and by achieving *Nuzj-o-Tanqiyah-e-Sauda* (concoction & purgation of melancholic humor) measures orally as well as the drugs having *Mulattif* (demulcent) and *Murattib* (moisturizer) effects, to be applied locally^[4].

2. Case Report

A 36 years old married male patient suffering from scalp Seborrhoeic Dermatitis came to Government Unani Dispensary, Bheem Ganj Mandi, Kota, Department of Unani Medicine Rajasthan, India, for the treatment. He complained mainly red patchy lesions associated with severe itching followed by oozing, scaling, hair loss and wax like crust in his scalp since 7 years recurrent attack. He has felled suddenly the appearance of these typical lesions; the definite cause was unknown. These lesions were relapsed by Allopathic treatment but after withdrawal remission occurred. There was no history of diet impact on lesions but a burning sensation with the use of detergent was present. His appetite, urinary and bowel habits were good. He was vegetarian but takes mutton 5-6 times in a month. His blood group was O positive. There was no previous history of any surgery and blood transfusion. History of alcohol consumption and smoking or tobacco addiction was not found.

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Investigation to test for HIV-specific antibodies is negative. On local examination of the skin, erythematous patches with yellow greasy scales and somewhere crusts were present only over the scalp (Figure-1). The parietal area of the scalp was more affected. Other parts of the body like the ear, eyelids, face, groin, chest, and armpit were not involved. The diagnosis was made on the basis of clinical history, morphology and distribution of the lesions while differentiating them from similar skin diseases. He gave consent to start Unani treatment.

3. Therapeutic intervention

The patient was advised to take 10 gm *Safoof* (powder) of *Tabeekh Fasaad-e-Khoon* in the form of *Joshanda*

(decoction); after boiling with two cups of water till evaporated one cup of water, then remaining one cup to be filtered and used as lukewarm at the morning and evening on empty stomach orally and to apply *Roghan Kamela* locally over the scalp lesions twice a day. *Tabeekh Fasaad-e-Khoon* is a patent Unani compound drug prepared in Ayurved Rasayanshala Ajmer, Government of Rajasthan^[5], and supplied to the Unani Dispensary, Kota, Rajasthan. *Roghan Kamela* is a proprietary Unani Medicine, manufactured by GMP certified company Hamdard Laboratories (India)^[6]. The patient was assessed based on clinical examination. No concomitant therapy was allowed during treatment. The composition of *Tabeekh Fasaad-e-Khoon* and *Roghan Kamela* is illustrated in Table-1 & Table-2.

Table 1: Ingredients of *Tabeekh Fasaad-e-Khoon*

S. No.	Ingredients	Botanical Name	Parts Used	Quantity per 10 gm
1	Unnab	<i>Ziziphus jujuba</i> Mill.	Fruit	0.66
2	Mundi	<i>Sphaeranthus indicus</i> Linn.	Flower	2.66
3	Sandal Safed	<i>Santalum album</i> Linn.	Sawdust	2.66
4	Sandal Surkh	<i>Pterocarpus santalinus</i> L.f.	Sawdust	2.66
5	Sana	<i>Cassia angustifolia</i> Vahl.	Leaf	0.53
6	Halela	<i>Terminalia chebula</i> Retz.	Fruit Bark	0.26
7	Balela	<i>Terminalia bellirica</i> (Gaertn.) Roxb.	Fruit Bark	0.26
8	Amla	<i>Emblica officinalis</i> Gaertn.	Fruit	0.26

Table 2: Ingredients of *Roghan Kamela*

S. No.	Ingredients	Botanical Name	Parts Used	Quantity per 10 ml
1	Berge Neeb	<i>Melia azadirachta</i> Linn.	Leaf	0.30 gm
2	Berg-e-Hina Sabz	<i>Lawsonia alba</i> Lam. nom. illeg.	Leaf	0.60 gm
3	Kamela	<i>Mallotus philippensis</i> (Lam.) Muell.Arg.	Fruit	1.20 gm
4	Roghan Kunjad	<i>Sesamum indicum</i> Linn.	Seed oil	5.00 ml
5	Roghan Sarson	<i>Brassica campestris</i> Linn.	Seed oil	5.00 ml

4. Results and discussions

It was observed that all symptoms of scalp Seborrheic Dermatitis including red patchy lesions associated with itching, scaling, oozing, crusts were disappeared completely just within two days of Unani treatment. (Figure-2) The drugs were found to be safe and highly effective in the treatment of scalp Seborrheic Dermatitis. Hence clinical improvement was excellent and admirable which may be the first result in the treatment of Seborrheic Dermatitis in clinical dermatological history.



Fig 1: Pre Treatment



Fig 2: Post Treatment of 2 Days

Tabeekh Fasaad-e-Khoon (TFK) is indicated in impurities of blood like boils, welks and abscess etc^[5]. *Roghan Kamela* (RK) is used for curing scabies and healing wounds^[6]. The effect of TFK and RK can be attributed to *Musaffi-e-Khoon* (blood purifier), *Muhallil-e-Waram* (anti-inflammatory), *Musakkin* (sedative), and anti-fungal activities, present in their ingredients. Unnab (*Ziziphus jujuba*), Mundi (*Sphaeranthus indicus*), and Sandal Surkh (*Pterocarpus santalinus*) refer to *Musaffi-e-Khoon* (blood purifier) activity as these may remove the toxins and waste products of blood from the affected organ^[7]. Unnab (*Ziziphus jujuba*), Sandal

Safed (*Santalum album*), Sandal Surkh (*Pterocarpus santalinus*), Halela (*Terminalia chebula*) and Kamela (*Mallotus philippinensis*) act as *Muhallil-e-Waram* (anti-inflammatory) and anti-oxidant which may resolve the redness, scaling and swelling of the scalp by reducing dermal inflammation and proliferation in Seborrheic Dermatitis^[8-12]. Mundi (*Sphaeranthus indicus*), Sandal Surkh (*Pterocarpus santalinus*) Halela (*Terminalia chebula*) and Kamela (*Mallotus philippinensis*) allude to antifungal effect; may remove the *Malassezia furfur*, a causative organism of Seborrheic Dermatitis^[10-13]. Unnab (*Ziziphus jujuba*), Mundi (*Sphaeranthus indicus*), Sandal Safed (*Santalum album*), Sandal Surkh (*Pterocarpus santalinus*) and Amla (*Emblica officinalis*) obtained as *Musakkin* (sedative) drugs; may relieve itching of scalp developed by Seborrheic Dermatitis^[7-10]. Sana (*Cassia angustifolia*) has *Mus'hil* (purgative) effects which may evacuate the disease matters like *Merah-e-Sauda* (bilious melancholy), *Dam-e-Haad* (hottest blood), and *Balgham-e-Shore* (bilious phlegm) which are responsible for *Quba-e-Mutaqash'shira*, through feces^[7]. Halela (*Terminalia chebula*), Balela (*Terminalia bellirica*), and Amla (*Emblica officinalis*) owned as *Muqavvi-e-Me'ada wa Am'aa* (gastro-entero-tonic) drugs; may correct the weakness of stomach and intestine complicated after cleansing the disease matter^[7]. Unnab (*Ziziphus jujuba*), Mundi (*Sphaeranthus indicus*) and Sandal Surkh (*Pterocarpus santalinus*) imply *Muqawwi-e-Kabid* (liver tonic) activity; may stimulate the liver to produce *Akhlath-e-Saleha* (good humors) by regulating normal body functions and preventing any damage^[8, 10, 13].

5. Conclusion

It is concluded that Unani treatment of scalp Seborrheic Dermatitis showed significant results with *TabeeKh Fasaad-e-Khoon* and *Roghan Kamela*. There is no satisfactory treatment available for Seborrheic Dermatitis in Allopathic medicine, so to prevent further exacerbations of the condition and to prevent recurrence and its complications it is better to advice for Unani therapy. Void of harmful effects, inexpensiveness, and the effectiveness of the Unani medicines will strongly be convinced as prime therapy for the management of Seborrheic Dermatitis. Further scientific studies are needed in this direction.

Funding: None

Conflict of interest: None

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