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“TO STUDY THE EFFICACY OF *HARIDRA KALKA LEPA* IN STRIAE GRAVIDARUM (*GARBHINI KIKKISA*)”

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ABSTRACT:

Striae gravidarum is common gestational change that affects 55% to 90% of women. Abdominal stretch marks found during pregnancy may be indicative of poor skin elasticity. Striae gravidarum is common phenomenon of stretch marks observed during pregnancy that may be indicator of poor skin elasticity. The type and amount of collagen in connective tissue are considered to determine the individual elastic index. Striae gravidarum is caused by changes in the structural connective tissue due to hormonal elect on the alignment and reduced elastin and fibrillin in the dermis. Striae gravidarum commonly observed on abdomen, thigh, buttocks and breast. It develops after 24weeks of gestation.

Keywords: Pregnancy, skin, striae gravidarum.

INTRODUCTION:

Woman is the most important part of the family. Woman plays an important role in *Utpatti, Dharan, and Poshan of Garbha*. Pregnancy is very important period in every woman life. Woman needs proper care from her family as she plays an important role in the reproduction. So she must have to maintain a physical and mental condition of woman for healthy pregnancy.

Today woman is more career oriented, so that she needs talent confidence and good looks and personality. So she uses the cosmetics. Cosmetics are applied to colour or texture of skin. In *Ayurveda* there are many natural herbs, oils, creams used make woman more beautiful. During pregnancy has to face many physiological and anatomical changes like weight gain, changes in breast skin like chloasma, linea nigra etc. but in pregnancy most common complains is striae gravidarum i.e stretch marks¹, it's very irritating symptom and its affect physically and mentally too. This mark is seen in 7th month of pregnancy. It occurs over abdomen, breast and thigh. Striae gravidarum seen in 2nd trimester of pregnancy when actual distension of abdomen starts due to growing uterus. These are pinkish, whitish, redish in colour develop on thigh, buttocks, breast, but more commonly over abdomen². In

Ayurveda there are many formulations described in *Samhita* for *kikkisa*. They are natural and easy to use. Many formulations are explained in *Ayurveda* such as *Kalka, Churna* for local application out of there *Haridra* has been selected as mentioned in *Charak Samhita*³. There are many products are available in the market and laser surgery is also available to minimize those scar⁴.

AIMS AND OBJECTIVES:

AIMS –

To study the *Haridra Kalka Lepa* in Striae gravidarum.

OBJECTIVES –

1. To study the Striae gravidarum in detail.

MATERIALS AND METHODS:

This cross-sectional study was conducted among the pregnant women attending the OPD of *Streeroga Avum Prasutitantra* department at L. R. P. Ayurvedic Medical College, Islampur. A total 100 pregnant women were come for antenatal visit in third trimester having Striagravidarum. 50 patients for trial group (*Haridra kalka lepa*) and 50 patients for control group (Stretchnil cream)^[5]. Pregnant women with no stria gravidarum were excluded. After taking an informed consent, their demographic characteristics including Age, parity, residence, occupation, and education were recorded. Pregnant women were examined for abdominal stria

gravidarum and scored given by abdominal quadrants. Abdomen was divided in 9 quadrants each was examined for striae.

Grade 0 =Absent

Grade 1 =Striae present in lower 3 quadrants

Grade 2 =Striae present in lower and middle (6) quadrants.

Grade 3 =Striae present in all (9) quadrants.

And Scoring depend on severity of parameters like Burning , Itching, Discoloration by Using Mann Whitney level of significance <0.05.

OBSERVATION AND RESULTS:

For assessment, all assessment parameters were used.

Overall Effect (patient wise)	No. of patients			
	Trial group		Control group	
	Cou nt	%	Cou nt	%
Complete remission	35	70.00 %	17	34.00 %
Marked improvement	00	00.00 %	04	08.00 %
Moderate improvement	07	14.00 %	14	28.00 %
Mild improvement	06	12.00 %	07	14.00 %
Unchange d	02	04.00 %	08	16.00 %
Total	50	100.00 %	50	100.00 %

In trial group, 35 patients (70%) were completely relieved, 7 patients (14%) were moderately improved, 6 patients (12%) were seen with mild improvement while 2 patients (4%) remained unchanged.

In control group, 17 patients (34%) were completely relieved, 4 patients (8%) were markedly improved, 14 patients (28%) were with moderate improvement, 7 patients (14%) were seen with mild improvement while 8 patients (16%) remained unchanged.

DISCUSSION:

a.Age-

Among the 100 patients out of 50% patients of age group 25 -27 years had got striae as in this age group marriages occurs and conception occurs promptly.

Due to the increasing the age of marriage or conception 34% patients of age 28 – 30 years and 11% patients of age 31-33 years had got striae.

5% of patients were from age group 34-35 years.

b. Occupation and economic status-

Most of the patients in this study were housewife and some were working women's and they were belonging to lower middle class of socio economic group.

c. *Prakriti*-

In the trial group of 50 patients, 44% patients had *Vatadhikya-Piitta*,

14% patients had *Kaphadhikya Pitta*, 7% patients had *Pittadhikya Vata*, 6% patients had *Pittadhikya Kapha* and 1% patients had *Kaphadhikya VatPrakriti*.

In control group of 50 patients, 34% patients had *Vatapittadhikya*, 20% patients had *Kaphadhikya Pitta*, 14% patients had *Kaphadhikya Vata*, 12% patients had *Pittadhikya Kapha* and 8% patients had *Pittadhikya Vata*.

CONCLUSION:

This cross-sectional study was conducted among the pregnant women attending the outpatient department of dermatology and Gynaecology at Dow University Hospital OJha campus from January 2016 till January 2017 for a period of one year. A total 112 pregnant women were interviewed came for antenatal visit in third trimester having Striagravidarum.

Pregnant women with no striagravidarum were excluded. After taking an informed consent, their demographic characteristics including Age, parity, residence, occupation, education and ethnicity were recorded. Pregnant women were examined for abdominal striagravidarum and scored for severity. Abdomen was divided in four quadrants each was examined for striae. If no striae score:0, if few striae score :1 and if many striae score :2. Then all of four

quadrant scores will be summed up. Finally the Score 1-2 marked as mild and Scores 3-8 as severe. Skindex 16 dermatology specific QOL (Quality of life) questionnaire was used by researcher to evaluate the QOL among pregnant women after getting official permission to use QOL Questionnaire by Mapi Research.

Trust 6France. To determine skin quality of life.

Skindex -16 was used having 16 questions/items. Each item was marked with 7 - point likert-type scale with scores range from 0(no effect) to 100 (effect experienced all the time). These items are divided in to three domains... Emotions (item 5-11), Symptoms (item 1-4), Functioning (item 12-16). Higher the score= higher impact of skin disease.

Data was analyzed by using SPSS version -16. Using Mann Whitney level of significance <0.05. Observation And Result- For assessment , all the parameters were use In trial group, 35 patients (70%) were completely relieved, 7 patients (14%) were moderately improved, 6 patients (12%) were seen with mild improvement while 2 patients (4%) remained unchanged

Conclusion-

1. It is included from the present study that *Haridra Kalka Lepa* is efficient in *Kikkisa*.

2. It is noted that the symptoms itching, burning is better relieved by *Haridra Kalka Lepa* than Stretch nil cream.
3. After the present study, it concluded that *Haridra Kalka Lepa* and stretch nil cream both has shown equal result.
4. There is no side effect of *Haridra Kalka Lepa* was reported or observed.
5. According to present study the treatment is safe, effective, and harmless.
6. Thus, from the present study it is concluded that *Haridra Kalka Lepa* local application is useful in *Kikkis*.
7. It plays significant role in reducing itching, burning of *Kikkis* by its properties.

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