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Review Paper on Dadru Kushta with Special Reference to Fungal Dermatophytes: An Ayurvedic and Modern Correlation

Patil R.¹, Patil A.², Patil P.³, Patil S.⁴

1. PG scholar Dept. of Kayachikitsa, Lokanete Rajarambapu Patil Ayurvedic Medical College, Hospital, Post Graduate Institute and Research Center, Islampur.
2. H.O.D. Dept. of Kayachikitsa, Lokanete Rajarambapu Patil Ayurvedic Medical College, Hospital, Post Graduate Institute and Research Center, Islampur.
3. Associate Professor Dept. of Kayachikitsa, Lokanete Rajarambapu Patil Ayurvedic Medical College, Hospital, Post Graduate Institute and Research Center, Islampur .
4. Associate Professor Dept. of Kayachikitsa, Lokanete Rajarambapu Patil Ayurvedic Medical College, Hospital, Post Graduate Institute and Research Center, Islampur.

ABSTRACT:

Dadru Kushta, a common kshudra kushta in Ayurveda, is characterized by circular, red, itchy patches with eruptions, often matching the clinical picture of dermatophytosis in modern medicine. Dermatophytosis, caused by fungal pathogens such as Trichophyton, Microsporum, and Epidermophyton, shares striking similarities with the Ayurvedic descriptions of Dadru. This review paper aims to explore the clinical, etiological, and pathological correlations between Ayurvedic and modern perspectives. It emphasizes understanding the disease through Ayurvedic principles like nidana (etiology) and samprapti (pathogenesis) along with textual references, while aligning these with contemporary knowledge. A comparative table highlights the integration of both medical systems, fostering a more holistic approach to diagnosis and management.

KEYWORDS: Dadru, Kushta, Dermatophytes, Tinea, Skin Disorder, Fungal Infection

CORRESPONDING AUTHOR:

Dr. Rushikesh Bajarang Patil

PG scholar Dept. of Kayachikitsa, Lokanete Rajarambapu Patil
Ayurvedic Medical College, Hospital, Post Graduate Institute and
Research Center, Islampur

Email: rpatil95918494@gmail.com

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INTRODUCTION:

The most exposed part of the body is skin. So, it is easily prone to various type of infection. Skin diseases significantly affect the quality of life, with dermatophytosis being a prevalent superficial fungal infection. In Ayurveda, Dadru Kushta is one of the 18 types of Kushta Roga (skin disorders) described in classical texts. It primarily involves the vitiation of Pitta and Kapha doshas and affects the Twacha (skin), Rakta (blood), Mamsa (muscle), and Lasika (lymph) dhatus. Clinically, it is manifested by kandu (itching), raga (redness), utsanna mandala (raised circular patches), and pidaka (pustules)^[1]. Modern dermatology classifies these symptoms under tinea infections, caused by dermatophytes. This paper reviews Dadru Kushta through Ayurvedic and biomedical lenses to promote integrated understanding and therapeutic approaches. Prevalance of fungal infections of skin in india is 20-25%. So making them one of the most frequent forms of infection. There has been a considerable increase in the incidence of skin problems in developing countries like india and tropical countries due to less immunity, unhygienic living condition and nutrition. Dadru kusht affects the population of all age group^[2,3,4]. In modern science, Tinea corporis is treated with topical or systemic antifungal and corticosteroids and long-term use of this medicine can produce adverse effects and also recurrence occurs. In Ayurved granthas skin disease and its treatment is mentioned. Ayurvedic medicine has shown considerable effect in Dadru kushta.

Aim-

To analyse the concept of Dadru kushta as described in Ayurvedic texts and correlate it with the clinical features, pathogenesis, and management of Fungal dermatophytes in modern medicine, with the purpose of exploring integrative and holistic treatment approaches.

Objective-

1. To study the classical Ayurvedic concept of Dadru kushta, including its etiopathogenesis (nidāna and samprāpti), clinical features (lakṣaṇa), stages of progression and treatment.
2. To review the modern medical understanding of Fungal Dermatophytes, including its pathology, clinical presentation, diagnostic criteria, and treatment.
3. To establish a comparative correlation between Dadru kushta and Fungal Dermatophytes based on similarities in etiopathogenesis, clinical presentation, diagnosis, and treatment.

Methodology

This review was conducted using classical Ayurvedic texts like Charaka Samhita, Sushruta Samhita, and Ashtanga Hridaya, along with modern dermatology textbooks and peer-reviewed journals. Keywords such as Dadru Kushta, fungal dermatophytes, tinea, and Ayurvedic dermatology were searched in PubMed, Scopus, and Google Scholar databases. Ayurvedic references were cross-validated with commentaries for accuracy. Comparative tables were constructed to align both systems.

Nidan (Etiology) of Dadru Kushta**Ayurvedic Perspective**

(Charaka Samhita, Chikitsa Sthana 7/21)^[5]

According to Acharya Charaka and Sushruta, the causes of Dadru include:

Mithya Ahara-Vihara (Improper diet and lifestyle) Viruddha Ahara (Incompatible food combinations) Guru, Snigdha, Amla, Lavana, Katu Ahara (Heavy, oily, sour, salty, pungent foods) Agnimandya (Poor digestion) Krodha, Shoka, Bhaya (Psychological factors)

Modern Perspective

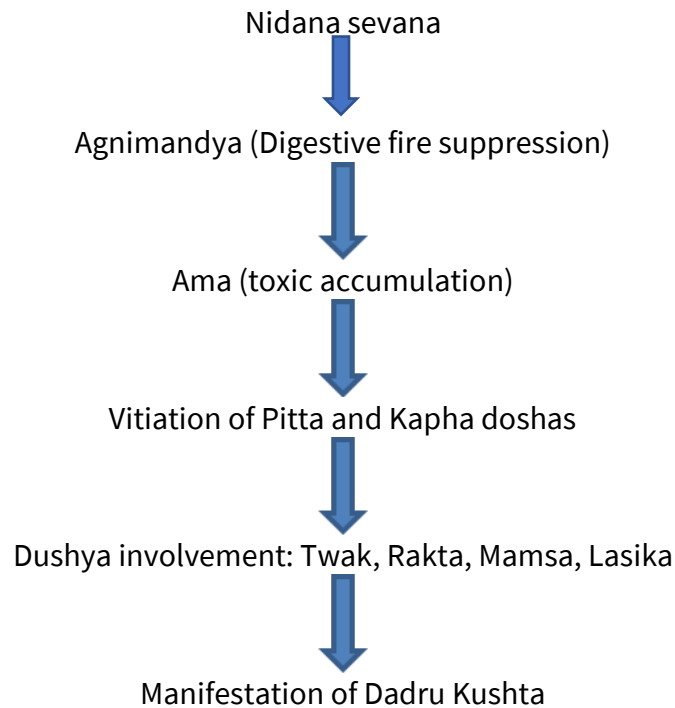
Fungal dermatophytes are primarily caused by:

Fungal pathogens: Trichophyton rubrum, T. mentagrophytes, Epidermophyton floccosum, Microsporum canis

Predisposing factors: Poor hygiene, Warm, humid environments, Occlusive clothing,

Diabetes, immunosuppression, Close contact with infected individuals or surfaces

Samprapti (Pathophysiology) Ayurvedic Samprapti



Dadru kushta lakshanas-

(Madhava Nidana, Kushta Nidana, 51)^[6]

Modern Pathogenesis^[7]

Dermatophyte fungi invade keratinized tissues (stratum corneum, hair, nails).

Fungi produce keratinase enzymes, facilitating tissue invasion.

Host inflammatory response leads to erythema, scaling, itching, and vesiculation.

Table no 1. Comparison Table: Dadru Kushta vs Dermatophytosis

Parameter	Ayurvedic View (Dadru Kushta)	Modern View (Dermatophytosis) ^[8,9,10]
Cause (Nidan)	Dosha imbalance (Pitta-Kapha), poor hygiene, viruddha ahara	Fungal infection, poor hygiene, humidity
Pathogen	Not explicitly microbial; doshic imbalance	Trichophyton, Epidermophyton, Microsporum

Pathogenesis	Ama → Dosha vitiation → Dushya involvement	Fungal enzyme activity and immune response
Symptoms	Itching, redness, circular lesions, pustules	Itching, annular lesions, scaling
Dhatu involved	Twak, Rakta, Mamsa, Lasika	Epidermis (stratum corneum)
Diagnosis	Doshic assessment, Samprapti ghataka	KOH mount, culture, Wood's lamp
Treatment Approach	Shodhana, Shamana, Rasayana, external lepa	Topical/systemic antifungals

DISCUSSION:

- The analysis reveals a close clinical resemblance between Dadru Kushta and dermatophytosis, particularly in symptoms and lesion morphology.
- Ayurvedic diagnosis emphasizes the tridoshic involvement, particularly Kapha and Pitta, which aligns with the inflammatory and moist presentation in fungal infections.
- While modern medicine targets the etiological organism (fungus) through antifungal therapy, Ayurveda focuses on internal cleansing (Shodhana), symptom management (Shamana), and immunity enhancement (Rasayana).
- Use of herbs like Khadira (*Acacia catechu*), Nimba (*Azadirachta indica*), and Manjistha (*Rubia cordifolia*) is emphasized, offering antimicrobial and immunomodulatory benefits^[11].
- An integrated approach — utilizing antifungal agents along with Ayurvedic detox and rejuvenation — may offer long-term relief and prevent recurrence.

CONCLUSION:

Dadru Kushta, as described in Ayurvedic texts, mirrors modern fungal dermatophytosis in its presentation and progression. Recognizing this correlation enables a holistic and integrated therapeutic approach. By understanding both systems' etiology and pathology, clinicians can

leverage the strengths of Ayurveda in immunity modulation and detoxification, alongside the efficacy of modern antifungal treatments. This dual strategy could reduce recurrence, improve quality of life, and align with personalized patient care. Dadru Kushta closely resembles dermatophytosis. Ayurvedic treatment offers a holistic, natural alternative. Integrative approach can yield better results in recurrent or resistant cases. Dadru Kushta and dermatophytosis share striking clinical and pathological similarities. Integrating Ayurvedic treatment principles with modern diagnostic tools can enhance therapeutic outcomes, particularly in recurrent or drug-resistant cases.

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