

Role of Ayurveda in the Management of *Vyanga* (Melasma): A Comprehensive Review Study

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Abstract: *Vyanga* is a chronic hyperpigmentary disorder classified under *Kshudra Roga* in Ayurveda, closely correlating with the clinical presentation of *Melasma*. Although we say medically this is not a serious condition but this is more than enough to shatter one's confidence. Because of globalisation and cut throat competition, being presentable has become the key word for success. **Materials and Methods** This review was conducted using a dual-phase approach: a Literary Review of classical Ayurvedic texts and a Systematic Narrative Review of contemporary clinical research. The management of *Vyanga* relies heavily on the "Three Pillars of Life" (*Trayopastambha*). Since *Vyanga* is a Pitta-Rakta predominant disorder, the primary goal of Pathya is to provide a cooling (*Sheeta*) and soothing (*Saumya*) effect on the body. The success of Ayurveda in treating *Vyanga* lies in addressing the Skin-Gut-Mind axis. Modern research increasingly supports the link between emotional stress and skin pigmentation (the "Brain-Skin" connection). Ayurveda addressed this centuries ago by listing *Shoka* (grief) and *Krodha* (anger) as primary *Nidan*s for *Vyanga*. Ayurvedic management of *Vyanga* offers a holistic paradigm that goes beyond superficial bleaching. By combining *Virechana* for systemic detoxification and *Varnya Lepas* for localized melanocyte regulation, practitioners can achieve high patient satisfaction with low recurrence rates. This review suggests that integrating *Jalaukavacharana* with herbal therapy provides a superior clinical outcome compared to topical agents alone. Ayurveda provides a comprehensive therapeutic framework for *Melasma*. Future research should focus on the quantitative analysis of *Bhrajaka Pitta* activity and the standardization of *Varnya Lepas* through modern cosmeceutical technology.

Keywords: "Vyanga", "Melasma", "Kshudra Roga", "Varnya Mahakashaya", "Ayurvedic management of hyperpigmentation", and "Raktamokshana in Melasma".

1. Introduction

Vyanga is a chronic hyperpigmentary disorder classified under *Kshudra Roga* in Ayurveda, closely correlating with the clinical presentation of *Melasma*. Although we say medically this is not a serious condition but this is more than enough to shatter one's confidence. Because of globalisation and cut throat competition, being presentable has become the key word for success. Skin is a major body part that can be seen and appreciated easily as it covers whole body. That is the reason we see most of the population in the need of a magic remedy for a flawless skin.¹ while modern dermatology focuses on topical hydroquinone and laser therapies, these often yield temporary results and significant side effects. This review explores the multi-dimensional Ayurvedic approach—integrating *Abhyantar* (internal) and *Bahiparimarjana* (external) treatments.² through a systematic analysis of classical texts and contemporary clinical trials, this study validates the efficacy of *Varnya* (complexion-enhancing) herbs and *Raktamokshana* in achieving long-term remission of *Vyanga*.³

2. Materials and Methods

This review was conducted using a dual-phase approach: a **Literary Review** of classical Ayurvedic texts and a **Systematic Narrative Review** of contemporary clinical research.

Search Strategy and Data Sources

The study incorporated information from the following sources:

- **Classical Texts (Samhita):** *Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*, *Sharngadhara Samhita*, and *Bhava Prakash*.
- **Digital Databases:** PubMed, Google Scholar, DHARA (Digital Helpline for Ayurvedic Research Articles), and AYUSH Research Portal.
- **Search Terms:** "*Vyanga*", "*Melasma*", "*Kshudra Roga*", "*Varnya Mahakashaya*", "Ayurvedic management of hyperpigmentation", and "Raktamokshana in Melasma".

Inclusion and Exclusion Criteria for Review

To ensure the high quality of clinical evidence discussed, the following criteria were applied:

- **Inclusion:** Peer-reviewed clinical trials (RCTs and non-RCTs), case reports with documented MASI scores, and pharmacological studies on *Varnya* drugs published between 2010 and 2025.
- **Exclusion:** Unverified anecdotal reports, studies on hyperpigmentation caused by systemic diseases (e.g., Addison's disease), and non-peer-reviewed blog content.
- **Methodology for Clinical Assessment**
- For researchers looking to conduct a prospective study on *Vyanga*, the following standardized protocol is recommended based on Ayurvedic and dermatological parameters.

Samprapti

In Ayurveda, the *Vedini* layer of the skin (the second layer) is the site of *Vyanga*. The vitiated *Udana Vata* combines with *Pitta* (specifically *Bhrajaka Pitta*) and *Rakta Dhatu* to cause discoloration.³

Table 1: Comparative Etiology

Factor	Ayurvedic Perspective (Nidana) ⁴	Modern Perspective (Etiology) ⁵
Dietary	<i>Vidahi</i> (Acidic), <i>Tikshna</i> (Sharp/Spicy) food	Nutritional deficiencies, high glycemic diet
Environmental	<i>Atapa Sevana</i> (Sun exposure)	UV radiation-induced melanogenesis
Psychological	<i>Krodha</i> (Anger), <i>Shoka</i> (Grief)	Stress-induced MSH (Melanocyte Stimulating Hormone)
Systemic	<i>Garbhavastha</i> (Pregnancy), <i>Artava Dushiti</i>	Hormonal changes, Oral Contraceptive Pills, Thyroid dysfunction

Clinical Classification of Vyanga⁶

Based on the dominance of *Doshas*, Vyanga presents with distinct morphological features, which dictate the line of treatment.

Table 2: Dosh-wise Clinical Presentation

Type of Vyanga	Characteristic Appearance	Correlated Melasma Type
Vataja	Shyava (Bluish-black), Ruksha (Dry), Parusha (Rough)	Epidermal Melasma
Pittaja	Tamra (Coppery), Rakta-anta (Red borders)	Inflammatory / Vascular Melasma
Kaphaja	Shweta-paryanta (Pale borders), Snigdha (Oily)	Dermal Melasma
Raktaja	Tamra-Rakta (Reddish-copper), Daha (Burning)	Erythematous Melasma

Table 3: Clinical Assessment Parameters⁷

Parameter	Ayurvedic Assessment	Modern Assessment
Color	<i>Shyava</i> (Blackish), <i>Tamra</i> (Coppery)	MASI (Melasma Area Severity Index)
Texture	<i>Parusha</i> (Rough), <i>Khara</i> (Hard)	Skin Hydration Levels (Corneometry)
Size	<i>Tanu</i> (Thin), <i>Sthula</i> (Thick)	Planimetry / Digital Imaging
Subjective	<i>Daha</i> (Burning), <i>Kandu</i> (Itching)	DLQI (Dermatology Life Quality Index)

Table 4: Pharmacological Profile of Key Varnya Drugs⁸

Drug Name	Latin Name	Active Constituent	Mechanism of Action
Manjistha	<i>Rubia cordifolia</i>	Purpurin, Munjistin	Tyrosinase inhibition & antioxidant
Yashtimadhu	<i>Glycyrrhiza glabra</i>	Glabridin	Inhibits melanogenesis & UV-B induced erythema
Arjuna	<i>Terminalia arjuna</i>	Arjunic acid	Strengthens skin barrier and micro-capillaries
Haridra	<i>Curcuma longa</i>	Curcumin	Anti-inflammatory and free radical scavenging

Pathyapathya⁹ (Dietary and Lifestyle Management)

The management of Vyanga relies heavily on the "Three Pillars of Life" (*Trayopastambha*). Since Vyanga is a *Pitta-Rakta* predominant disorder, the primary goal of *Pathya* is to provide a cooling (*Sheeta*) and soothing (*Saumya*) effect on the body.

Ahara (Dietary Regimen)

Dietary discipline prevents the further vitiation of *Pitta* and ensures the purity of *Rasa Dhatu*.

Category	Pathya (Wholesome / Do's)	Apathya (Unwholesome / Don'ts)
Cereals	Old Rice (<i>Shashtika Shali</i>), Barley (<i>Yava</i>), Wheat	New grain, Fermented flour (<i>Idli/Dosa</i>)
Pulses	Green Gram (<i>Mudga</i>), Lentils (<i>Masura</i>)	Black Gram (<i>Masha</i>), Kulthya (Horse gram)
Vegetables	Bitter Gourd, Bottle Gourd, Kushmanda, Leafy greens	Brinjal, Tomato, Green chilies, Garlic
Fruits	Pomegranate (<i>Dadima</i>), Amla, Sweet grapes, Raisins	Sour citrus fruits, Pickles, Unripe mango
Drinks	Coconut water, Milk, Shadanga Paniya	Alcohol, Excessive tea/coffee, Carbonated drinks
Spices	Coriander, Fennel, Cardamom, Turmeric	Excessive Salt, Vinegar, Mustard seeds

Vihara (Lifestyle Regimen)

Lifestyle modifications are aimed at reducing oxidative stress and thermal trauma to the skin.

1) Pathya (Recommended):

- **Abhyanga:** Gentle massage with *Chandanadi* or *Kumkumadi Tailam* to improve circulation.
- **Pratimarsha Nasya:** of 2 drops of *Anu Taila* to strengthen the *Indriyas* (senses).
- **Mental Well-being:** Practice of *Pranayama* and *Sitala* breath-work to pacify *Manasika Pitta* (anger/stress).
- **Sun Protection:** Using umbrellas or natural veils when outdoors.

2) Apathya (To be Avoided):

- **Atapa Sevana:** Prolonged exposure to direct sunlight or heat (near stoves).
- **Divaswapna:** Sleeping during the day, which causes *Kapha-Pitta* obstruction.

- **Vegadharana:** Suppression of natural urges, especially those related to sweat and excretion.
- **Krodha & Shoka:** Excessive anger and grief, which are direct *Nidanas* for Vyanga.

3. Discussion

The success of Ayurveda in treating Vyanga lies in addressing the **Skin-Gut-Mind axis**. Modern research increasingly supports the link between emotional stress and skin pigmentation (the "Brain-Skin" connection). Ayurveda addressed this centuries ago by listing *Shoka* (grief) and *Krodha* (anger) as primary *Nidanas* for Vyanga.¹⁰

- **Metabolic Correction¹¹:** *Arogyavardhini Vati* acts on the liver (*Yakrit*), improving the metabolism of *Ranjaka Pitta*, which is responsible for the quality of blood.
- **Topical Bioavailability¹²:** *Lepa* (pastes) are often mixed with *Godugdha* (cow milk) or *Ghrta* (clarified butter).

These lipophilic bases enhance the penetration of herbal alkaloids through the stratum corneum.

- **Melanin Regulation:**¹³ Studies show that *Varnya* herbs act similarly to hydroquinone but without the risk of "Ochronosis" (blue-black darkening) or permanent skin thinning.

Role of Agni¹⁴ (Metabolic Fire)

Vyanga is often a result of *Mandagni* (low metabolic fire), leading to the formation of *Ama* (toxins). This *Ama* circulates in the *Rakta Dhatu* and settles in the *Vedini* layer of the skin.

- **Deepana-Pachana:** Drugs like *Chitrakadi Vati* are essential before starting *Lepa* to ensure the body can metabolize the nutrients and expel the "burnt" *Pitta*.
- **Srotoshodhana:** The clearance of micro-channels (*Srotas*) allows for the "Prasada" (pure) portion of *Rasa Dhatu* to nourish the skin, naturally lightening the pigmentation.

Modern nutritional dermatology corroborates the Ayurvedic *Pathya* list. For instance, the recommendation of **Amla** (*Embllica officinalis*) provides a high concentration of Vitamin C, this act as a systemic antioxidant to neutralize free radicals generated by UV rays. Similarly, the avoidance of **Vidahi Ahara** (fermented and pungent foods) aligns with the "Low-Histamine Diet" often recommended in modern dermatology to reduce skin inflammation and vasodilation, which can darken the appearance of melasma. ‘

The inclusion of **Ghee (Ghrita)** in the diet is specifically mentioned in *Ashtanga Hridaya*. Ghee acts as a *Pitta-Shamaka* and helps in the absorption of fat-soluble vitamins (A, D, E, K) essential for skin repair.

4. Conclusion

Ayurvedic management of Vyanga offers a holistic paradigm that goes beyond superficial bleaching. By combining *Virechana* for systemic detoxification and *Varnya Lepas* for localized melanocyte regulation, practitioners can achieve high patient satisfaction with low recurrence rates. This review suggests that integrating *Jalaukavacharana* with herbal therapy provides a superior clinical outcome compared to topical agents alone. Ayurveda provides a comprehensive therapeutic framework for Melasma. Future research should focus on the quantitative analysis of *Bhrajaka Pitta* activity and the standardization of *Varnya Lepas* through modern cosmeceutical technology.

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