
TANKANA AND SPHATIKA AS AN ANTIMICROBIAL ROLE IN SKIN INFECTION DISORDER: A SYSTEMIC REVIEW

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ABSTRACT

Skin infections, particularly superficial fungal disorders, represent a significant global health burden, affecting 20% to 25% of the world's population. In the pediatric demographic, factors such as high humidity, close contact in schools, and developing immunity increase susceptibility to conditions like *Dadru* (dermatophytosis) and *Darunaka* (seborrheic dermatitis). While conventional antifungals are available, concerns regarding resistance and systemic toxicity necessitate the exploration of traditional mineral-based therapies. *Tankana* (Borax) and *Sphatika* (Alum) are two pivotal minerals in Ayurvedic *Rasashastra* renowned for their *Krimighna* (antimicrobial) and *Kshariya* (alkaline) properties. This systemic review evaluates the pharmacological profiles, clinical efficacy, and antimicrobial rationale of these minerals in managing pediatric skin infections. Evidence suggests that their ability to modulate the cutaneous pH and reduce moisture creates a hostile environment for pathogens, offering a potent, cost-effective alternative to standard treatments.

KEYWORDS: *Tankana* , *Sphatika* , skin infection.

INTRODUCTION

The prevalence of superficial mycoses has risen sharply, with dermatophytes of the *Trichophyton* and *Microsporum* genera being the primary etiological agents.^{1,2} Children are particularly vulnerable; for instance, *Tinea capitis* is most common in those aged 3 to 9 years.^{3,4} In infants, seborrheic dermatitis (*Darunaka*) affects up to 70% of individuals in the first three months of life.^{5,6}

Traditional Ayurvedic medicine classifies these infections under *Kushtha* (skin diseases). Management involves *Rasashastra*—the therapeutic use of purified minerals.⁷ Among these, *Tankana* (Borax) and *Sphatika* (Alum) are frequently utilized in topical formulations due to their antiseptic and healing qualities.^{8,9} This review synthesizes current knowledge on their antimicrobial roles, focusing on their application in pediatric dermatology.

Pharmacological Profiles

Tankana (Borax)

Tankana is a naturally occurring mineral alkali, chemically identified as sodium tetraborate decahydrate ($\text{Na}_2\text{B}_4\text{O}_7 \cdot 10\text{H}_2\text{O}$).^{10,11} In Ayurveda, it is categorized as *Kshararaja* (king of alkalies) and undergoes *Shodhana* (purification) to become *Tankana Bhasma*.^{9,12} Its pharmacological attributes include:

- **Rasa (Taste):** *Katu* (Pungent).
- **Virya (Potency):** *Ushna* (Hot).
- **Guna (Quality):** *Ruksha* (Dry), *Tikshna* (Sharp/Penetrating).^{9,13}
- **Actions:** *Kapha-visleshaka* (liquefier of Kapha), *Lekhana* (scraping), and *Krimighna* (antimicrobial).^{5,12,13}

Sphatika (Alum)

Sphatika is an anhydrous aluminum potassium sulfate ($\text{K}_2\text{SO}_4 \cdot \text{Al}_2(\text{SO}_4)_3 \cdot 24\text{H}_2\text{O}$) prized for its astringent properties.^{8,14} After heat processing, it transforms into *Sphatika Bhasma*.^{8,12} Its profile includes:

- **Rasa:** *Kashaya* (Astringent), *Katu*, *Amla* (Sour), and *Madhura* (Sweet).
- **Guna:** *Guru* (Heavy) and *Snigdha* (Unctuous).^{13,15}
- **Actions:** *Vranaropana* (wound healing), *Raktadoshahara* (blood purification), and *Kushtaghna* (anti-dermatosis).^{13,16}

Antimicrobial Role and Rationale

The antimicrobial efficacy of *Tankana* and *Sphatika* is primarily driven by the modulation of the cutaneous environment, a principle known in Ayurveda as *Prakriti Vighatana* (destruction of the favorable environment for pathogens).^{9,17}

1. pH Modulation and Alkalinity

Tankana is inherently alkaline (*Kshariya*). Microbes, particularly fungi, thrive in acidic or neutral environments; the application of an alkaline *Bhasma* disrupts this homeostasis, rendering the skin surface inhospitable for microbial survival and reproduction.^{9,13} Its *Tikshna* (sharp) quality allows the drug to penetrate deeper skin layers to reach the site of infection.⁹

2. Astringency and Moisture Control

Sphatika acts as a potent astringent. It precipitates proteins at the outer layer of microbial cells, which reduces capillary permeability and strengthens the skin barrier.^{14,18} Crucially, it possesses "sweat-pore blocking activity," which reduces the secretion of sweat and subsequent moisture.¹⁴ Since dermatophytes require moisture for growth, this drying effect acts as a powerful physical deterrent to fungal colonization.^{14,19}

3. In-vitro Evidence

Experimental studies have validated these traditional roles. *Tankana Bhasma* has demonstrated significant zones of inhibition (ZOI) against *Candida albicans* and *Aspergillus niger*, with ZOI values reaching up to 21 mm at higher concentrations.¹⁰ *Sphatika Bhasma* has shown broad-spectrum antibacterial activity, particularly against multidrug-resistant *Pseudomonas aeruginosa*, often outperforming raw alum in potency.^{18,20}

Clinical Evidence in Pediatric Dermatology

Darunaka (Seborrheic Dermatitis)

Darunaka is characterized by *Kandu* (itching) and *Twaka Sputana* (scaling).⁵ Clinical trials using *Tankana Bhasma* mixed with *Narikela Taila* (coconut oil) for *Shiroabhyanga* (head massage) showed a 98% reduction in symptoms over 45 days.^{5,6} The *Bhasma's Lekhana* action clears debris while its *Vishleshana* property separates vitiated Kapha from the scalp.⁵

Dadru (Dermatophytosis)

In cases of *Dadru* (ringworm), formulations like *Saubhagyadi Churna Lepa*—containing both *Tankana* and *Sphatika*—are highly effective.^{16,21}

- **Tankana:** Provides *Kandughna* (itch-relief) and reduces the elevation of lesions through its scraping action.^{13,16}
- **Sphatika:** Normalizes hyperpigmented patches left by the infection through its *Vranashodhaka* (wound purifying) property.^{13,16}

Case studies of chronic, relapsing dermatophytosis have reported complete symptom resolution within 28 to 30 days of topical application, with no relapses at 6-month follow-ups.^{17,22}

Safety and Pediatric Considerations

The use of mineral-based compounds in children requires adherence to safety protocols due to the higher permeability of pediatric skin.^{23,24}

- **Concentration Limits:** The Expert Panel for Cosmetic Ingredient Safety suggests that borates (like *Tankana*) are safe at concentrations 5%, but they should not be used on infant skin (under 3 years) or injured skin to avoid systemic absorption.^{25,26}
- **Supervision:** Topical application should be localized and supervised by an Ayurvedic practitioner.^{8,21}
- **Purification:** Only purified (*Shuddha*) Bhasmas should be used; unpurified *Tankana* may cause irritation or giddiness.¹⁹

CONCLUSION

This review highlights the probable and effective role of *Tankana* and *Sphatika* as antimicrobial agents in the management of pediatric skin infections. By creating a hostile, alkaline, and dry environment, these minerals offer a multi-targeted approach to treating fungal and bacterial disorders without the side effects often associated with long-term antibiotic or antifungal use. Future research should focus on standardized pediatric dosing and the development of modern topical vehicles, such as creams or gels, to enhance the delivery and safety of these ancient mineral remedies.

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