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A Conceptual Study on the effect of *Yashadamrita Malahara* in *Dushta Vrana* w.s.r to Diabetic Ulcer

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ABSTRACT

Diabetes is one of the most prevalent diseases in the world. Diabetic patients have up to 25% lifetime risk of developing foot ulcers as a complication of Diabetes. Incidence of Diabetic Ulcer is ~3%. Diabetic Ulcer is caused due to Diabetic Neuropathy or atherosclerosis causing ischaemia or breakdown of glucose laden tissue leading to infection and ulceration. *Vrana* which has bad odour, abnormal colour, profuse discharge, intense pain and takes a long time to heal is *Dusta Vrana*. These symptoms present in Diabetic Ulcer. The treatment modalities of Diabetic Ulcer in conventional medications, topical applications, surgical procedures which are expensive, need hospitalization and in most of the case recurrence rate is high. In *Sushruta Samhita* there is detail explanation of management of *Vrana*, where *Acharya Sushruta* mentioned 60 *Upakramas*. *Yashadamrita Malahara* mentioned in *Rasatarangini* as *Vividhavrnanaropaka*.

Key words: *Dustavrana, Diabetic Ulcer, Yashadamrita Malahara.*

INTRODUCTION

Diabetic Foot Ulcer is considered as a major source of morbidity and a leading cause of hospitalization in patient with diabetes. Recent studies have indicated multiple risk factors associated with the development of DFU like gender (male), duration of Diabetes longer than 10 years, advanced age, High Body Mass Index and other comorbidities such as Retinopathy, Diabetic Peripheral Neuropathy, Peripheral Vascular Disease, Foot deformity, high plantar pressure, infection and inappropriate foot self-care.^[1,2]

In *Ayurveda* classics, *Acharya Charaka* explains

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Upadravas due to *Prameha* among which *Pootimamsa* (gangrenous) is one of them.^[3] In context of *Pramehapidaka* describe *Avastika Chikitsa* which includes *Shastrapranidhana* and *Vrana Chikitsa* for *Vranas* formed preceded by *Paka*.^[4] According to *Acharya Sushruta Rasa* carrying *Srotas* in patients suffering from *Madhumeha* become weakened. So, *Doshas* fail to come back to the upper part of the body and ultimately give rise to *Pidaka / Vrana / Vidhradhi / ulcer*.^[16]

Even minor improvement in treatment would translate into substantial improvement in quality of life and decreases economic burden and loss of working days. *Yashada* is *Kashaya* and *Tikta* in *Rasa* known for its *Vranashodhana, Vranaropana, Vranasravarodana, Mehagna* properties. Considering these factors an attempt is made to study the effectiveness of *Yashadamrita Malahara* as stated in *Rasatarangini* in *Dushta Vrana* with special reference to Diabetic Ulcer.

Nidana

Vata, Pitta, and Kapha being aggravated by their respective causative factors get lodged in the exterior

(external pathway) of the body to give rise to endogenous type of ulcer in human beings.^[5]

Lakshana

Vrana which is too narrow, too wide, too hard, too soft, elevated, depressed, too cold, too cold, having one of the colours-black, red, yellow, white etc, frightful, full of foetid pus, moving in oblique track, having deep base, with ugly sight and foul smell, severely painful, associated with heat, suppuration, redness, itching, swelling and boils, excessively discharging vitiated blood and long standing.^[6]

Vrana which has bad odour, abnormal colour, profuse discharge, intense pain or no pain, and takes a long time to heal is *Dushta Vrana*. These symptoms present in Diabetic Ulcer.

Chikitsa

In *Dushta Vrana Urdhwa* and *Adhashodhana*, *Vishoshanaahara* and *Raktamokshana* should be done. Later *Rajavrukshadi* and *Surasadi* group of drugs should be used for topical cleaning and oil prepared with the decoction of the same drugs or with *Kshara Jala* or *Kshara* plant is used for cleaning.^[7]

Wounds due to Diabetes and leprosy should be treated by treatment prescribed for *Dushta Vrana*.^[8]

Yashadamrita Malahara as mentioned in *Rasatarangini* is used for *Vividha Vrana Ropana*.^[9]

MATERIALS

After reviewing the literature, an attempt is made here to explain the treatment adopted in the study.

Method of Preparation of *Yashadamrita Malahara*

Shodhana of Yashada^[10]

- *Nirvapa* in *Taila*, *Takra*, *Gomutra*, *Kanjika*, *Kulattha*, *Kwatha* for 7 times in each time.
- *Vishesha Shodhana* - *Nirvapa* in *Nirgundi Swarasa* for 3 times.

Marana of Yashada^[11]

- *Vishesha Shodhita Yashada* should be taken in big iron pan and melted on medium flame.

- After complete melting of *Yashada*, the process is continued with stirring through *Chalani* until complete *Yashada* is converted into powder (At 750° Celsius) in about 10 min.
- Then the heat was stopped and allowed to self-cooling and then collecting the fine powder by sieving through the cloth (*Vastragalana*).
- Remaining part of course powder of *Yashada* was once again subjected to above said procedure continued until complete *Yashada* was converted into fine powder.

Preparation of Sikta Taila

Rasatarangini has described 2 methods of preparation of *Sikta Taila*.

Method - 1^[12]

Pure bee wax - 1 part

Tila Taila - 6 parts

Mixed and melted over mild fire. When the wax melts and becomes a homogenous liquid, stop heating after cooling it becomes a soft butter like paste.

Method - 2^[13]

Pure bee wax - 1 part

Tila Taila - 5 parts

Same as above procedure

Preparation of Malahara^[9]

Sikta Taila - 3 parts

Yashada Bhasma - 1 part

Sikta Taila is melted in mild fire; *Yashada Bhasma* is added and stirred well.

Then vessel was removed from the *Agni* and allowed for self-cooling.

Source of Data

Patients of the Diabetic Ulcers having the classical features of *Dushta Vrana* attending the out-patient and in-patient dept of *Shalya Tantra*, SJIIM Hospital, Bengaluru will be selected for the study irrespective of their age, gender, caste, creed.

Preparation of Yashadamrita Malahara



Fig. 1: Ingredients of Yashadamrita Malahara – Siktha, Tila Taila, Yashada Bhasma



Fig. 2: Siktha Taila preparation



Fig. 3: Yashadamrita Malahara

Method of collection of data

A detailed history of the demographic data of patient with local and systemic findings, relevant

investigations. Patients will be analysed and selected accordingly.

Inclusion Criteria

As per Wagner Classification Diabetic foot Ulcer with Grade - 1 Superficial Ulcers involving full skin thickness.

- Patients with features of ulcer on the foot with pain, numbness, discharge and foul smell.
- Patients on medications (OAH/Insulin) with controlled Diabetic mellitus.

Exclusion Criteria

As per Wagner Classification Diabetic Foot Ulcer of Grade 2 and above.

Grade 2 - Deep ulcers, penetrating down to ligaments and muscle but no bone involvement.

Grade 3 - Deep ulcers with cellulitis or abscess formation with osteomyelitis.

Grade 4 - Localized gangrene

Grade 5 - Extensive Gangrene involving the whole foot.

1. Patients with disorders like Malignancy, Tuberculosis, Leprosy and other systemic disorders.
2. Patients who are diagnosed case of HIV, Hepatitis-B.

Note: The pathological conditions above said are ruled out with appropriate investigations before taking up of the study.

Investigations

- Fasting Blood Sugar level (FBS)
- Post Prandial Blood Sugar level (PPBS)
- Random Blood Sugar level (RBS)
- HbA1C

Sampling design

Patients of *Dushta Vrana* w.s.r. to Diabetic Ulcer fulfilling the above-mentioned criteria shall be included for the study. Under aseptic precautions, the

ulcer will be cleaned thoroughly with normal saline and dried. Debridement of necrotic tissue where ever necessary was done. By measuring initially dimensions of wound the size of gauze is selected and smeared sufficient quantity of *Yashadamrita Malahara*. This gauze is properly applied over ulcer so as to cover the wound. Wound is closed with sterile dressing is done. This procedure is carried daily once for 28 days.

The results obtained shall be statistically analysed and conclusions will be drawn.

Assessment Criteria

Subjective parameters

- Pain
- Numbness

Objective parameters

- Discharge
- Size/Area of the ulcer
- Odour
- Floor of the ulcer

The parameters will be suitably graded. Data will be analysed by using suitable statistical methods and the results will be evaluated.

DISCUSSION

Yashadamrita Malahara is the combination of drug described in *Rasatarangini* for the management in the context of *Vrana*. *Sikta* is *Sandhanakara*, *Vranaropaka*.^[14] *Tila Taila* has *Gunas* like *Sukshma*, *Vyavayi*, *Vishada*, *Sara*, *Vikasi*, *Teekshna*, *Himasparsha*.^[15] *Yashada* has *Vrana Shodhana*, *Vrana Ropana*, *Vranasravarodana*, *Mehaghna* properties. The preparation is cost effective drugs being easily available, minimum ingredients and easy to prepare.

CONCLUSION

The properties of the drugs help in *Shodhana* and *Ropana* of *Dushta Vrana*.

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