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A case study on *Dusta Vrana* (Non Healing Varicose Ulcer)

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ABSTRACT

Any kind of destruction / break / rupture / discontinuity of body tissue/part of the body is called *Vrana*. *Vrana* which doesn't heal in its natural course of healing time is said to be *Dusta Vrana* along with other pathological manifestations further. *Acharya Susruta* explains, when a person does not have control over his indriya's and follows *Apathyaja ahaar*, vihar with untimely treated wound leads to severe vitiation of *Doshas* forming *Dushta Vrana*. In classics it's been widely explained about the *chikitsa* of *Vrana*. Considering clinical features of *dusta vrana* and cause here the correlated with Non healing varicose ulcer. The Chronic non healing ulcer are the ulcers that have failed to progress through a time. Sequence of repair, or one that proceeds through the wound healing process without restoring anatomic and functional results.

Key words: *Dusta Vrana, Non Healing Ulcer, Case study*

INTRODUCTION

The concept of *Vrana* is as old as human life. The description is found most of the literatures of our science. *Sushruta* being the Father of Surgery has excellently described *Vrana* and its management by *Vranasya Shashti Upakrama*.^[3] The definition of *Vrana* is explained as "*Vrana Gatra Vichurnane, Vranayati Iti Vranaha*". *Gatra*, means tissue (body part or body tissue), *Vichurnane* means destruction, break, rupture and discontinuity (of the body tissue).^[1]

"*Doshair Adhishtito Dushtah*"^[2] It means that *Vrana* is inhibited or regulated by *Dosha* is *Dushta Vrana*. It

does not heal in the usual course of time. A number of them in comparison to *Shuddha Vrana* produces foul smell with excessive purulent discharge mixed with blood but excessive pain at site. The clinical features are mentioned by various *Acharyas*, conglomerating those are *Atisavrut, Ativiruth, Utsanna, Avasanna, Putipooyayutha, Amanoghna Darshana, Chirakari, Deerghakalanubandi*,^[3] *Bahusravi, Maharuja*.^[4]

Non Healing Ulcer / Chronic Ulcers are defined as spontaneous or traumatic lesions, typically in lower extremities that are unresponsiveness to initial therapy or that persist despite appropriate care and not proceed towards healing in defined time period with an underlying etiology that may related to systemic. A non-healing ulcer that which does not heal within 5-8 weeks, even though an attempt is made to arrest it. A study carried out reveals that in India Leprosy (40%), diabetes (23%), venous disease (11%) and trauma causes of Lower Extremity Wounds.^[5] Venous Ulcerations accounts for 70%-90% of all chronic wounds and are most commonly found in the lower extremities.^[6] As already mention from *Vranasya Shastiupakrama*, some of the *Upakrama's* are implemented.

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CASE REPORT

A 45 years old obese female approached Panchakarma OPD of Ayurveda Mahavidyalaya and Hospital, Hubballi, with complaints of Ulcer over left lower limb, in medial aspect associated with swelling, Sluffy discharged from the ulcer site with itching Painful and with trace bleeding Since 5-6 month.

Anubhandi Vedana

Difficulty while walking

History of Present Illness

Patient had mild swelling over left lower limb. Later developed a small pustule which was painful, got ruptured after 10 days, which lead to wound formation with intense pain, consulted local doctor and got treated. Then consulted a vascular surgeon, and got admitted in Modern Hospital and underwent surgical intervention-Left Radio Frequency Ablation of Great saphenous vein + Foam sclerotherapy treatment. Still the clinical condition remained the same. Hence, she approached to our hospital for further treatment.

H/O of diabetes type2 (recently detected), Non HTN, Myxoedema

Personal History

Patient was consuming more of non-vegetarian diet, with irregular sleep pattern. Also patient stands for prolonged period due to her work. (Cook in hotel)

Systemic Examination

Her Respiratory, Cardiovascular, Gastrointestinal and Central nervous systems were within normal limits.

Local Examination**Inspection**

- Number of ulcers - 03
- Position - Ulcers on the just above the medial malleolus of a left lower limb.
- Size and Shape - 8mm X7mm, 15-16mm deep, Oval in shape.

- Floor - Unhealthy granulation tissue and fibrinous exudate in the floor.
- Edge - Typically shallow with irregular sloping edges.
- Margin Fibrotic - margins
- Discharge - Sero-Purulent
- Surrounding Area - Shiny and Inflamed

Palpation

- Tenderness - Present
- Edge - Typically shallow with irregular sloping edges.
- Base - Slightly indurated
- Bleeding - Trace
- Examination of lymph node - No lymphadenopathy seen.

TREATMENT

Treatment was aimed at *Vrana Ropana* and *Shodhana* by *Sthanika* and *Abyanantara* Shodana/Shamana Chikitsa.

Shodhana Chikitsa

- ***Vrana Parisheka***^[7]

Triphala+Haridra+Kushta+Khadira+Raktachandana+Sariva+Manjishta+Nimba+Tankana Bhasma.

- ***Vrana Dhoopana***^[8]

Varti made out of *Vacha Choorna+Vidanga+Haridra* with *Tulasi Swarasa Bhavana.*

Anointed with *Lashunadhya* and *Karanja Taila.*

- ***Jalaukavacharana***^[9] - On alternate day for 7 days
- ***Vrana Basti***: 1st *Basti* with *Shodhan Taila - Shigru, Vidanga, Triphala, Haridra* and *Murchita Tila Taila.*^[10]
- ***Vrana Basti***: 2nd with *Ropana Grita*
- *Yashtimadhu + Truna Panchamoola + Musta + Haridra + Triphala*
- *Gogrita+Godugdha+Narikela Taila*

- **Anuvasana Basti:** With *Mahatiktaka Grita* fortified with *Vidanga+Karanja*.^[11]

- **Niruha Basti:** *Madhu* and *Saindava*^[12]

With *Kashaya* and *Kalka* – *Triphala* + *Nimba* + *Mustha* + *Yashti*

Sneha - *Mahatiktaka Grita* + *Vidanga* + *Karanja* in *Kala Basti* schedule.

Basti Schedule followed *Kala basti* pattern. Also, the administered in the ratio of 3 *Niruha*:1 *Anuvasana*.

(Table 1)

- *Apatarpana* - *Langhana Pachana*
- *Parishek*
- *Sweda Vimlapana* - *Shigru Yukta Kashaya Parisheka*
- *Virechana* - *Nityavirechana*
- *Lekhana* - Sluf removing in initial stage
- *Pidana*
- *Vrana Dhupana Varti* - *Dhupana Varti*
- *Kashaya* - *Gokshura, Punarnava, Triphala Kashaya Pana* on daily basis
- *Kshara Karma* - *Parisheka* - added with *Tankana* along with *Triphla Kashya*
- *Basti* - *Tiktarasatmaka* drugs
- *Banda* - Bandaging
- *Krumighna* - *Karanja, Vidanga* drugs with *Kushta, Khadira*
- *Vishagna* - *Haridra, Shigru, Chandana* drugs.
- *Ahara* - Proper diet was advised.
- *Rakshavidhana* - *Vartidhupana* were done.

Shamana Aushadi

- Combination of *Kaishor Guggulu*^[13] and *Arogyavardini Vati*^[14] fortified with *Kirat Tikta Nimba Kumari 7 Bhavana* each 1-0-1 for 30 days.
- *Laghusutashekar Rasa* 1-0-1 for 90 days
- *Chandanadi Vati* 2-0-2 for 90 days^[15]

- *Nitya Virechana* with *Aragwadh Triphala* etc. was continued for 100 days at home.

- *Gokshur Punarnava Triphala Kashaya* was given empty stomach 40ml per day throughout the treatment plan.

RESULT

The pain intensity was reduced as there was a progression of healing process. The slough formed with unhealthy granulation tissue was reduced with marked growth of new healthy tissue at wound site. Size of the wound was significantly reduced. Wound healed to normal skin level with no depression area left.

DISCUSSION

Parisheka - An uninterrupted time factor of pouring the *Dravya* and the *Rasa Gunadi Bhedas* of in total have helped in removing the slough and debris of the wound with minimal or no mechanical trauma and the healing effect may be action of the drug as well as the body capacity to replenish the healing process the hurdles are removed.

Dhoopana - it dilates blood vessel and helps in oxidation of blood. Leading to adequate tissue perfusion and oxygenation. Thus reduces the inflammation, itching and eliminates infection.

Vrana Basti acts on the basis of *Shodana* and *Ropana*. Also, by the virtue of fat/lipid metabolism depending on the media.

Shodhana - It helps in cleansing the wound, inhibits the infection rate, slough formation and accelerating the wound healing with new healthy tissue formation depending upon the media used. Here *taila* is used which is processed with drugs having *Vrana Shodana* properties.

Ropana - It is the factor which promotes or quickness the healing process. There are many measures to create favouring conditions. Usually, *Ropana* is advised after the *Shodhana* and attaining the *Shuddha Vranavastha*.

Raktamokshana - It helps in promoting venous and capillary stasis and thus helps in proper venous

drainage in the ulcer area and thus improves its healing process. It also drains of excess inflammatory phase and thus promotes swelling and pain, burning sensation instantly.

Kala Basti - The *Veerya* of *Basti* administered enters into *Pakwashaya* reaches the whole body through the channels as the action principles in water when poured at root of the tree reached the whole plant.

According to *Astanga Sangraha*, elaborated as follows at first the *Virya* of *Basti* drugs reached *Apanavaayu* and nourishes it. Then it acts on *Samana Vaayu*, after nourishing this nourishes the *Vyanavaayu*, acting on *Udaana Vaayu*, *Pranavaayu*. When all the *Virya* of *Basti* drugs nourishes, get action on *Pitta* and *Kapha* to bring them into normalcy and provide them movements. The *Virya* of *Basti* drugs is carried to *Tiryak Pradesha* by *Vyanavaayu*, *Adha Pradesha* by *Apana Vaayu* and to *Urdva Pradesha* by *Prana Vaayu*.

Just as farm gets its nourishment by water supplied through channels, the whole body gets nourishment by virtue of *Virya* of *Basti* drugs carried by *Panchavata* along with action of *Pitta* and *Kapha*.

CONCLUSION

There are so many debilitating conditions which makes the human life miserable one such is *Vrana/Ulcer*. Timely management of this condition definitely contributes to the personal and social life of an afflicted. Though are many drawback factors in treatment, where other systems of medicine make an effort to overcome. Ayurveda being science of life has a wonderful way to tackle this mentioned thousands of years ago. Hence this successful management is done of *Dusta Vrana*.

Table 1: Schedule of Basti.

Basti type	Drug	Date	Retention Time
<i>Anuvasana Basti</i>	Mahatiktaka Grita+Vidanga+Kar anja-60 ml	7,11,15,19,22 of March 2020	-
<i>Niraha Basti</i>	<i>Madhu</i> - 40ml	8,9,10,12,13, 14,16,17,18,2	Overall retention

Saindava - 10gm Sneha - Mahatiktaka Grita - 60ml Kalka and Kashaya (300ml) Triphala+Nimba+ Mustha+Yashti	0,21 of March 2020	time was observed as 5-6 minutes.
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Fig. 1: Before Treatment



Fig. 2: During the Course of Treatment



Fig. 3: After Treatment



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