

A Single Case Study of Varicose Ulcer treated with application of  
Pratisaraniya Apamarga Kshara followed by Jalauka AvacharanaMeher R<sup>1\*</sup>, Prasad CB<sup>2</sup>

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In present era, varicose veins are more common ailments causing physical impairments in daily activities. Many years of venous disease follow the formation of varicose Ulcer, mostly in the gaiter's zone. So, the varicose ulcers are most commonly seen in the age group between 40 years to 60 years. In the present study a 55-year-old male, non-hypertensive, non – diabetic patient complaint of painful non healing ulcer having slough & exudate with surrounding hyperpigmentation and itching above the ankle in the left leg. After 7 months of conventional treatment using antibiotics & anti-inflammatory drugs there was no improvement in the wound condition. As per sign & symptoms, the case was diagnosed as Pitta Pradhan Sarakta Tridosaja Dusta Vrana. So, for proper debridement, Pratisaraniya Apamarga Kshara was applied in the ulcerated lesion and for Pitta Samana & Rakta Shodhana, Jalaukavacharana was conducted along with internal administration of drugs like Arogyavardhini Vati, Gandhak Rasayan, Guggulu Tikta Kasaya, Kaishora Guggulu, Cap. Viscovas. After ayurvedic intervention the wound gets completely healed within 36 days. This shows the importance of ayurvedic treatment in chronic ulcers.

**Keywords:** Varicose Ulcer, Dusta Vrana, Pratisaraniya Ksara, Jalauka Avacharana

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## Introduction

Varicose veins are one of the most common conditions causing a physical impairment in the quality of life.[1] Majority of Varicose Ulcers which mostly occur in the gaiter's zone (the area above the medial malleolus & below the calf muscles) due to presence of large numbers of perforators follow many years of venous disease. So, the patients are usually of the age group of 40 years to 60 years.[2] Women are affected far more than men.

Two main aetiologies are responsible for formation of Varicose Ulcer. Firstly, Ulceration may be associated with visible varicose veins and secondly such Ulceration may follow thrombosis and phlebitis in the deep & perforating veins.[3] Mostly the varicose Ulcers are having sloping edge with healthy granulation tissue covered by slough & exudate in the ulcerated lesion. Almost all venous ulcers are having surrounding haemosiderosis seen as hyperpigmentation and inflammatory lesion. The most chronic ulcer develops lipodermatosclerosis with associated fibrosis of subcutaneous tissue.[4]

Based on the symptoms, the present case may be compared with *Pitta Pradhan Sarakta Tridosaja Dusta Vrana* as it is associated with symptoms like *Ragata* (inflammation), *Krishna Rakta Varnata* (blackish red colouration), *Vedana* (painful), *Putisrava* (purulent discharge), *Kandu* (itching) with presence of slough.

So, In this case study for proper debridement of Ulcer application of *Pratisaraniya Apamarga Kshara* was done. *Pittahara & Rakta Shodhana* treatment like *Jalaukavacharana* was planned along with internal administration of some *Tridosahara* drugs.

## Case Report

A 55 year old male, vendor, complaint of non healing ulcer with surrounding red irritated skin rash above the ankle on the left leg & pain in the ulcerated lesion since 7 months.

### H/O present illness

Patient was apparently healthy 7 months ago. Gradually he developed itching & redness above the medial malleolus in the left leg and an ulcer was formed. During long standing & walking, he felt pain in the ulcerated lesion. He went through various modern medication i.e. antibiotics & analgesics,

But there was no improvement on wound healing so that the patient visited the Shalya Tantra OPD of KATS Ayurvedic College & Hospital, Ankushpur, Berhampur on Dt. 28/09/2024.

### H/O Past illness

- The patient has the history of Varicose vein since 5 years.
- P/H/O skin grafting was done on the ulcerated lesion in the left hand on Dt. 27/12/2023.
- No family history rela. to disease was detected.

### Personal history

- Diet - mixed
- Appetite - moderate
- Sleep - Good, 7-8 hours/ day ,2-3 hours in the afternoon
- Micturition - 5-6 times / day
- Bowel - regular, twice / day
- Habit - tea - 2 cups / day

### Rogi Pareeksha

#### General Examination

- Tongue - uncoated
- Pulse - 76/min
- BP - 130/80 mm Hg
- Temperature - 98.4 °F
- Respiratory rate - 16 cycles /min
- Height - 142 cm
- Weight - 60 kgs

#### Systemic Examination

- Cardiovascular system examination: S1, S2 heard, no added murmurs
- Respiratory System examination: Normal vesicular breath sound heard
- Per abdomen examination: Soft, Tenderness absent, organomegaly not found.
- Central Nervous System Examination - Conscious, Orientation to time, place, person

### Examination of Ulcer

#### History

- Mode of onset - spontaneous
- Duration - 7 months

- Pain - present
- Discharge - No
- Associated disease - Varicose vein

### Local Examination

#### Inspection

- Size: 3.5 cm × 3 cm × 2.5 mm was present, the anterior part of ulcer measures about 2.5 cm
- Shape - oval
- Number - one
- Position - above the medial malleolus on left leg
- Edge - slightly indurated
- Floor - Slough present
- Discharge - purulent
- Amount - scanty
- Smell - absent
- Surrounding area - Hyper pigmented

#### Palpation

- Edge - Slightly indurated
- Margin - Slightly thickened
- Base - slightly indurated
- Depth - 3 mm
- Bleeding - on touch absent
- Surrounding skin - No marked increased temperature
- Tenderness - present at the medial aspect of Wound
- Fixity to deeper structure - absent

#### Investigation:

- Hb - 11.4 gm %
- FBS - 94 mg/dl
- PPBS - 150 mg/dl
- HIV - Non reactive
- HbsAg - Non reactive

### Methods

#### Application of *Pratisaraniya Apamarga Kshara*

The *Apamarga Kshara* was applied in the ulcerated lesion followed by irrigation of lemon juice to neutralize effect of *Kshara*. [Refer Fig 1 (a) & 1 (b)]

#### *Jalaukavacharana* (Hirudo therapy)

- At first the collected *Jalauka* was transferred to the water added with a pinch of turmeric.
- After the *Jalauka* get activated, they were taken out from the water & kept over the ulcerated site.
- The leech after getting attached to the ulcerated area attained a horse shoe shaped over the neck region.
- A wet gauze piece was spread over the body of leech to provide wet & humid environment.
- Leech was allowed to stay over the site for 45 min. If it didn't detach by itself within 45 minutes / if any pain has been occurred while sucking blood, then leech was detached by putting a small pinch of turmeric over its mouth end.
- The site of leech bite was cleaned well and the site was packed with turmeric and bandaging was done. (Refer Fig. 2)

#### Treatment:

##### Internal administration

1. *Arogyavardhini Vati* - 2 tab BD BF with LWW
2. *Gandhak Rasayana* - 2 tab BD BF with LWW
3. *Kaishora Guggulu* - 2 tab BD AF with LWW
4. *Viscavas* - 1tab TDS AF with LWW
5. *Guggulu Tikta Kasaya* - 15 ml BD AF with equal quantity of water

##### External administration

- 1st 3 days - dressing done with conventional medicines
- 4th day - 1st sitting of *Pratisaraniya Kshara* application was done
- 5th day - Normal dressing with *Vrana Ropana Taila*
- 6th day - 2nd sitting of *Pratisaraniya Kshara* application
- 7th - 10th day - dressing with *Vrana Ropana Taila*
- 11th Day - 1st sitting of *Jalauka Avacharan*
- 18th Day - 2nd sitting of *Jalauka Avacharan*
- 23rd day - 3rd sitting of *Jalauka Avacharan*
- Other days - Dressing done with *Vrana Ropana Taila*

## Observation and Results

- On the day of admission - wound was lodged with exudate and slough with purulent discharge (Refer fig 3)
- On 7th day - after application of 2nd sitting of *Pratisaraniya Kshara*, complete debridement was achieved. (Refer fig. 4)
- On 11th day - after 1st sitting of *Jalaukavacharana*: there was reduction in the depth of wound, formation of marked granulation tissue, absence of discharge. (Refer fig 5)
- On 19th day - after 2nd sitting of *Jalaukavacharana*: Reduction in wound size, Increased formation of granulation tissue having sloping edge were observed. (Refer fig. 6)
- On 24th day - after 3rd sitting of *Jalaukavacharana*; Wound size along with surrounding inflammation & edema of the leg were reduced. (Refer fig. 7)
- On 30th day - Marked reduction in wound size & depth of wound along with formation of healthy granulation tissue were noticed (Refer fig. 8)
- On 36th day - on the day of discharge : there was complete reduction in the pedal edema along with surrounding inflammation. Formation of scar tissue was initiated. (Refer fig. 9)



Figure 2

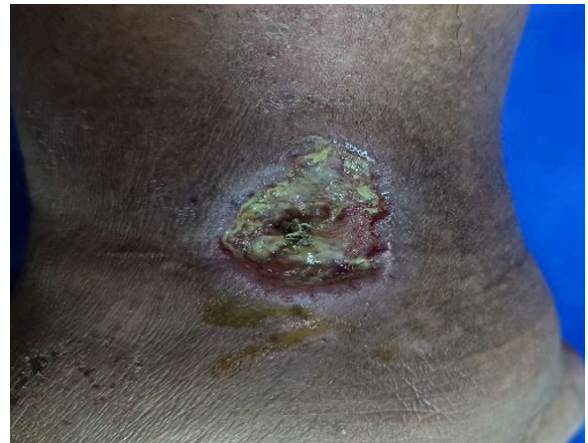


Figure 3



Figure 4



Figure 1 (a)



Figure 1 (b)



Figure 5





Figure 6



Figure 7



Figure 8

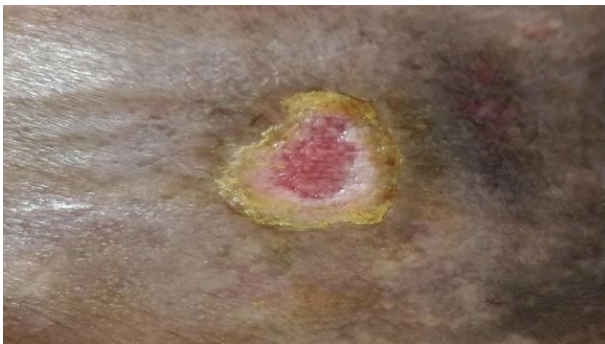


Figure 9

## Discussion

Acharya Sushruta has mentioned the application of *Pratisaraniya Kshara* in *Dusta Vrana*.<sup>[5]</sup> Due to *Lekhana*, *Shodhana* & *Ropana* properties of *Kshara*, complete debridement was achieved after application of 2 sitting of *Pratisaraniya Kshara*.<sup>[6]</sup>

Due to *Madhura* & *Sita Guna*, *Jalauka* are used in the treatment of *Pittaja rakta dusti*.<sup>[7]</sup> Because of presence of certain chemicals in leech's saliva like Hirudin (potent anticoagulant), Bdelin & Eglin (anti-inflammatory drugs), Hyaluronidase (having antibiotic action), acetylcholine (vasodilator) and some anaesthetic agents, *Jalaukavacharana* promotes blood circulation, provide capillary tissue exchange & raises the nutrition to tissue which ultimately help in regeneration of tissue. As *Vrana Ropana Taila* is indicated in *Dusta Vrana* & it's almost ingredients are having *Shodhana* & *Ropana* properties, so regular dressing with it gave tremendous result in wound healing.

## Conclusion

In varicose Ulcer, venous hypertension followed by deposition of fibrin around the capillary bed cause tissue hypoxia leading to severe uncontrolled inflammation & preventing proper regeneration of wound. The present case study due to its long association eventually caused *Raktadusti* & chronicity paved the way for vitiation of *vata* resulting pain in the ulcerated lesion. So as per Ayurvedic point of view this was diagnosed as *Pitta Pradhan Sarakta Tridosaja Dusta Vrana*. Hence *Pittahara*, *Rakta Shodhana* & *Tridosahara* treatment was planned by administering some internal medication with application of *Pratisaraniya Apamarga Kshara* & *Jalaukavacharana*. The chronic varicose Ulcer which had not healed for 7 months despite of many courses of antibiotics and anti-inflammatory therapy, healed in 36 days with ayurvedic intervention which suggests the efficacy of ayurvedic treatment in the healing of chronic ulcers.

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