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The Role of *Pratisarana Kshara* in the management of External Abscess

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ABSTRACT

Abscess is an acquired condition seen all over the body. The clinical features of abscess are swelling, pain, redness, local temperature and tenderness. Salivary gland infection complications are uncommon. Submandibular abscess is caused when a salivary gland infection is left untreated, pus can collect and cause an abscess. Here, the commonly used treatment is incision and drainage followed by antibiotics which may have chance of re-occurrences. Hence, incision and drainage followed by the use of *Pratisarana Kshara* was used as the treatment modality to cure submandibular abscess.

Key words: Submandibular Abscess, Drained Abscess Cavity, *Pratisarana Kshara*.

INTRODUCTION

As abscess is a collection of pus in the body and pyogenic abscess is the commonest variety of abscess.

- Direct infection from outside due to penetrating wounds. The infection can result from reduced saliva flow, which can be due to a blockage or inflammation.
- Local extension from adjacent focus of infection.
- Lymphatic.
- Blood stream of hemorrhage

The cardinal features of acute inflammation are usually present. These are rubor (redness), dolor

(pain), calor (heat) and swelling (tumor). The suppurative infection gradually leads to cell death and liquification.^[1]

The aggravated *Doshas* vitiate the skin, blood, muscle, fat and bone tissue become localized and produce a troublesome swelling. The stages of treatment of *Vranasopha* and *Vidradhi* are similar viz, *Amavasta*, *Pachyamanavasta*, *Pakvavasta*.^[2]

Kshara possess the qualities like *Shodana* (cleansing) and *Ropana* (healing).^[3] Hence we planned the application of *Pratisarana Kshara* in the management of drained abscess cavity, as it enhances the healing property.

CASE REPORT

A 36 year old male patient came to SJG Ayurvedic Medical College, Department of Shalya Tantra with complaints of swelling over the right side of submandibular region since 4 days, associated with pricking pain and burning sensation. The swelling was gradual in onset and increasing in nature. On local examination we found 4 x 5cms swelling over the right side of submandibular region, redness, pus discharge and local rise of temperature. The swelling was suppurative in nature. Hence forth, we planned for incision and drainage followed by *Ksharakarma* with *Pratisarana Kshara* application considering the

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condition as *Pakvavastha Vidradhi*. With all aseptic measures, incision and drainage of abscess was done followed by application of *Pratisarana Kshara* (*Apamarga Kshara*) for about 60 seconds followed by *Amla Rasa* (lemon juice) wash. Only on a single sitting, followed by daily dressing by normal saline, there was no pain, discharge on local examination. Orally *Gandhaka Rasayana 2 Vati* twice a day after food and *Mahamajista Kadha* 10ml with cup of water twice a day was given. It was completely healed within 10 days. Patient was called for 2 follow-up on 2 successive 15 days until 6 months. Patient was totally feeling better and there were no signs of re-occurrences found.

DISCUSSION

Here, we adopted incision and drainage followed by *Pratisarana Kshara* application for the management of submandibular abscess.

In same case, incision and drainage followed by Betadine application, there were re-occurrence. Instead of Betadine, we used *Pratisarana Kshara* (*Apamarga Kshara*) after the incision and drainage procedure, which is more effective than Betadine. *Kshara* by it's properties like *Shodhana*, *Ropana*, *Sthambhana* and *Krimighna*, which enhances the early healing without reoccurrence.

CONCLUSION

The approach of Ayurveda *Kshara Karma* procedure in the post management of submandibular or any external abscess yields good result and it not only cures but also minimizes the rate of complication and re-occurrence. It is a good therapy in terms of cost of treatment.

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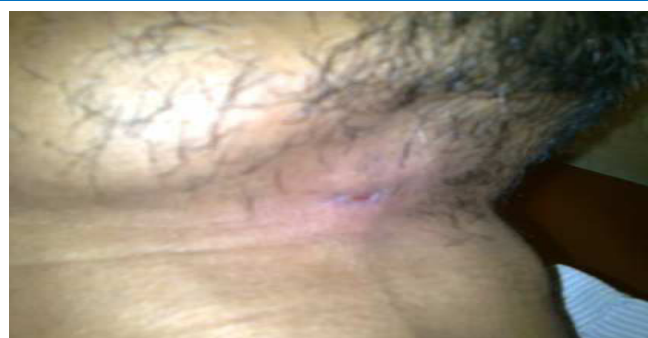
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