June 2019 | Vol. 07th | Issue:3rd

National Journal of Research in Ayurved Science

Management of sirashaithilya and sirajanya dusta vrana w.s.r. to varicose vein and varicose ulcer-a case study

Vitthal Maske^{*1}, V. P. Ukhalkar²

- 1. PG Scholar,
- 2. Professor,

ayurlog

Dept. of Shalyatantra, Govt. Ayurved College, Nanded, Maharashtra.

*Corresponding Author email: <u>ankit01maske01@gmail.com</u>

ABSTRACT

A vein is called as a *varicose* vein when it is dilated and tortious.varicose vein mostly occur due to incompetence of their valve .The basic cause of varicose ulcer is abnormal valve hypertension in lower third of legs on its medial side .

According to Ayurveda, the pathology of varicose vein is due to *Mans shaithilya* and *Rakta Dushti* which further leads to varicose ulcer.

In this case study, the patient was treated with *Panchtikta Ghrit Guggulu Vati* orally and Local application of *Panchvalkala* ointment.

In Panchtikta Ghrit Guggulu Vati, most of the contents are *tikta rasa pradhana* so it helps to reduce the *rakta dushti* and *mans-sthirikaran* ultimately it helps to reduce varicose vein. In *Panchvalkala* ointment, all the contents are Kashaya Rasa Pradhan which helps in the *shodhana* and *ropana* of the varicose $ulcer^{15}$.

Keywords- Panchavalkala ointment ,Panchtikta ghrit guggulu Vati, Sirajanya Dushtavrana.

INTRODUCTION

When vein dilated, elongated, and tortuous, vein is said to be varicose vein. affect significant percentage of It population in the society. The cause of varicose vein is prolonged standing, obesity, pregnancy, old age, and athletics. This leads to venous hypertension, if venous hypertension persist for longer time ultimately leads to dilatation of vein that's called varicose vein. This stagnant blood in vein goes to subcutaneous tissue resulting in edema, breakdown of blood cells then fibrinogen deposit around the vessels and act as a barrier for nutrient and oxygen for tissue.

Fibrinogen prevents oxygen and nutrients to surrounding tissue and it leads to necrosis and ulceration^{6,7}.

Varicose ulceration is most severe and debilitating outcome of chronic venous insufficiency in lower limbs. There is significant chance that varicose ulcer will recur. It mostly developed on medial aspect of lower limbs.

In Ayurveda, Acharya Sushruta has mentioned conservative line of management for wound. Sushruta mentioned sixty different procedures for the management of wounds along with numerous herbal drugs which he had used as local applicant for curing them¹. One among them is *nyagrodhadi varga* which includes panchvalkala. If we treat only ulcer then chances of recurrences more. So in this case study we treat the both varicose vein and varicose ulcer by giving Panchtikta Ghrita Guggul Vati orally and *Panchavalkal* ointment locally on ulcer.

AIM

To evaluate the efficacy of *Panchatikta Grita Guggul Vati* and *Panchavalka Ointment* in the management of varicose vein and varicose ulcer.

OBJECTIVE

- 1. To evaluate the role of *Panchatikta Ghrita Guggul Vati* to reduce the *Shirashiathilya*.
- 2. To evaluate the role of *panchavalkal ointment* to heal the varicose ulcer and reduce the hyperpigmentation, edema and pain.

CASE DETAILS

Name of patient	; =	A B C	
Registration no	=	10259	
Age	=	55 year	
Occupation	=	Driver	
Diet Non veg	=	Veg	and
Chief complaint	·	Dain	and

Chief complaint = Pain and swelling over left lower leg

Infected wound on medial aspect of left lower leg

Skin discolorations

Serous discharge

Brief history: patient has been suffering from above symptoms since last 3yrs. He took treating at private hospital but not
get any relief, hence he came to government ayurved hospital for further management.

Past history -

No h/o HTN/ Asthma / T.B. / any other major illness.

Systemic Examination -

RS - NAD

CVS –NAD

CNS - NAD

Investigation:

HB -11.5 mg %, WBC-9000/cu mm 0f blood, RBS- 117mg/dl, Arterial and venous colour doppler – Multiple incompetent perforators seen in lt lower limb. No evidence of DVT.

Local Examination (ON day -1)

Site of ulcer aspect of lt lower leg	- g.	Medial
Size of ulcer	-	5x4 cm
Discharge	-	Present
Hyperpigmentation	-	present
Arterial Pulsation Pedis and Posteri Present	- or	Dorsalis tibial artery
Local temp	-	Normal

Diagnosis : non-healing varicose ulcer with varicose vein

Treatment plan :

Panchvalkal ointment locally and Panchtikta Ghrit Guggul Vati internally. In this case study we used to do dressing with Pachvalkal ointment twice a week with firstly cleaned with normal saline then rolled bandage applied

Total duration for treatment was 60 days and during the treatment assessment was done on day 1st, day15th day 30, day 45, day 60. Changes occur within the treatment has been noted on criteria of assessment.

OBSERVATION

Parameter and observation of varicose ulcer included pain, size of ulcer, hyperpigmentation.^{8,9}

ayurlog

		Parameter	Gradation
1	Pain	No pain	0
		Mild pain	1
		Moderate pain	2
		Severe pain	3
2	Size of ulcer	Absent	0
		25%	1
		50%	2
		Base line	3
3	Hyperpigmentation	None	0
		Slight	1
		Medium	2
		Heavy	3
4	Edema	Absent	0
		25%	1
		50%	2
		100%	3

RESULT:

In ayurvedic management varicose ulcer is completely heal within 60 days that is patient cured from non- healing ulcer. The images during and after treatment support the statement mentioned.

		After treatment Weeks			
Parameter	Before				
		2 nd	4 th	6 th	8 th
Pain	2	2	2	1	0
Size of ulcer	3	3	2	1	0
Hyper					
pigmentation	3	3	3	2	1
Edema	3	3	3	2	1

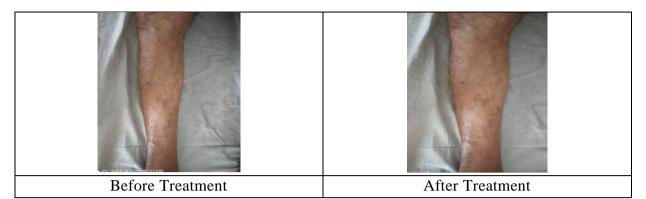
From above it shows that pain is 100% relived and ulcer is completely healed, hyperpigmentation is reduced 75% and edema is reduced 75%.

			D s	
Before T/t	After 2 nd week	after 4 th week	After 6 th Weeks	After 8 th Week

Parameters and observation for varicose vein:¹⁰

		After treatment			
Parameter	Before treatment	2 nd week	4 th week	6 th week	8 th week
Pain (vas scale)	9	7	5	4	2
Frequency of muscle cramps (in week)	5- 6 times	4	2	2	1
Maximum walking distance (in meter)	10 meter	40	50	100	200

From above observation there is significant relief in pain, frequency of muscle cramps and maximum walking distance.



PROBABLE MODE OF ACTION

A) Panchavalkala

a) Pharmacodynamic Properties of *Panchavalkala*⁵

Drug	Rasa	Guna	Veerya	Vipaka
Vata	Kashaya	Guru-Rooksha	Sheet	Katu
Udumbara	Kashaya	Guru-Rooksha	Sheet	Katu
Ashwatha	Kashaya	Guru-Rooksha	Sheet	Katu
Parisha	Kashaya	Laghu-rooksha	Sheet	Katu
Pluksha	Kashaya	Guru-Rooksha	Sheet	Katu

b) Chemical Constituent and their action of Panchavalkala.

Chemical constituent	Ingredients	Pharmacological Action	Effect on clinical features
Tannin	Vata, Udumbara	Anti-inflammatory	Reduce swelling
Phytosteroids	Vata, ashwatha	Analgesics	Reduce tenderness
Tannin	Vata	Ability to increase the	Promotion of
		collagen content	wound healing, increase the tensile strength
B-sitosteryl	Ashwatha	Antimicrobial	Reduce discharge
d-glucoside			

- Discharge = It is drug with kashaya Rasa and by the action of the Rasa it act as Stambhaka and Grahi. It also must be Atitwak Prasadaka means cleanses the skin and removes all dirt from here. Due to all these properties, it must have reduced the Strava. The Stambhan effect might also be attributed to the Sheet Virya of the drug.
- Redness = Panchavalkala are considered to be Pittaghna that is both by the action of rasa Virya. They are Pittaghna and they must decrease the Raga (redness) which is mainlydue to Pitta. By its Kashaya Pradhan Rasa, it must have acted as Rakta Shodhaka. Pitta Shamana, Varnya and Twak Prasadaka action aided to improve the skin colour by improving the local blood circulation
- 3) Swelling = In case of Panchavalkala, which is considered to be good Shothahara that which reduces swelling, due to the Kashaya Rasa of the drug it act with Peedana (act of squzeeng), Ropana and Shodhana, and Ruksha and Kaphahara property, it reduce the swelling.
- Pain = Panchavalka lis having Guru Guna so it isVatahara and thus decreased the Ruja.
- B) Panchatikta Ghruit Guggulu Vati:

Most of the ingredients of *Panchatikta Ghrit Guggul* have *Tikta Rasa^{3,4,}*, *Ushna Virya, and Madur-Katu Vipaka.* According to Ayurveda varicose vein is co-related *Sirashaithilya.* And this is due to *Mans Dhatukshaya* and

Rakta-vayu Dushti. Tikta Rasa increases the Dhatvagni. As Dhatvagni increases nutrition of all Dhatu will be increases. As a result Mans Dhatukashya will be decreases, thus it help in Samprapti Vighatna of the varicose vein. $Tikta^{11,12}$ Rasa has got Deepana, Pachana and Rochana, so it helps to decreases the Rakta Vayu Dushti. Tikta Rasa has Jwarghna and Daha Prashmana properties that it may act as antiinflammatory agent and can reduce the pain. Ghrit^{13,14} is Vat-Pitta Prashmana, Balya, Agnivardhka, Madhura, Somya, Jwarhara. Thus it Shaman the Vata. In this way Panchtikta Ghrit Guggul Vati helps in reducing the complaints of varicose vein and ulcer.

CONCLUSION:

The adjuvant ayurvedic treatment the non-healing varicose ulcer completely healed within the 8 weeks. On the basis of this case study we can roughly concluded that Ayurveda can give ray of hope in the treatment of varicose vein and ulcer. Though treating varicose vein and ulcer is a difficult task, we have managed with Panchtikta Ghrita Panchavlkal Guggul Vati and ointment. In this case study we treat both varicosevain and varicose ulcer.

While observing result *Panchvalkal* ointment and *Panchtikta Ghrit Guggul Vati* so significantly reducing the hyperpigmentation, pain, edema and completely healing of varicose ulcer.

FUTURE SCOPE:

- 1. Multi-centric trial can be carried out with large sample size.
- 2. In future it can be used as alternative option to avoid surgery.

REFERENCE

- 1. Dr. Ambikadatta shashtri,sushrut samhita, chaukhamba prakashan reprint year- 2013 page no-5, su.chi..1/8.
- Dr Ambikadatta shashtri,sushrut samhita, chaukhamba prakashan reprint year- 2013, ,page no-187, su.su. 38/48
- Dr Bramhananda tripathi, charak samhita, chaukhamba prakashan reprint year-2006, page no- 480, ch. Su 26/78.
- Dr Bramhananda tripathi, charak samhita, chaukhamba prakashan reprint year-2006, page no- 484, ch. Su 26/42
- 5. Dr Arundatta astangsangrah, chaukhamba prakashan, reprint year-2017, page no-176 a. su. 10/14-16
- 6. Dr S. Das textbook of das 6th edition chapter no 16 page no 256-272
- RCG Russell belly and love, Short practice of surgery, international student edition 24th edition, chapter no 59, page no-956-969

- 8. Dwevedi Amar Prakash, Management of non-healing varicose ulcer in Ayurveda , IAMJ, ISSN 2320 5091
- Shrivsastav Prabhat Kumar , Management of non- healing varicose ulcer in Ayurveda, IRJP, ISSN 2230 8407
- Khurana pooja ,Pareek R.K.,SarochVikas,Clinical assessment of Jaloukacharan in management of varicose ulcer IMAJ:ISSN 2320 5091.
- 11. Dr.Brahmanand Tripathi,Ashtanghrudyam,Choukh amba prakashan ,Reprint year 2007,Page no- 154, a.su.10/15
- 12. Dr. Brahmanand Tripathi, Ashtanghrudyam, Choukhamba prakashan, Reprint year 2007,Page no- 154, a.su.10/16
- 13. Dr. Brahmanand Tripathi,
- J-R Ashtanghrudyam, Choukhamba prakashan, Reprint year 2007, Page no- 154, a.su.5/38
 - 14. Dr.BrahmanandTripathi,Ashtanghrudyam,Choukhamba prakashan ,Reprint year2007, Page no-72, a.su.5/39
 - 15. Dr. Brahmanand Tripathi, Ashtanghrudyam, Choukhamba prakashan, Reprint year 2007,Page no- 154, a.su.10/20,21

Cite article:

Management of sirashaithilya and sirajanya dusta vrana w.s.r. to varicose vein and varicose ulcer-a case study Vitthal Maske, V.P. Ukhalkar Ayurlog: National Journal of Research in Ayurved Science- 2019; (7)(3): 1-7