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CASE REPORT Jan-Feb 2021

A Case Study on Jatyadi Taila Vrana Basti in the management of Dusta Vrana with special reference to Venous Ulcer

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ABSTRACT

Wounds may be caused by trauma or by physical chemical and microbial agents or ischemia. The word "healing" means replacement of damaged or destroyed tissue by living tissue of same kind of tissue or different. The four basic processes which take place in wound healing are - Inflammation, Wound contraction, Epithelialization and Granulation tissue formation. There are many factors which influence the wound healing like age, nutrition, hormones, co-morbid conditions, place and position of wound, blood supply to the area exposure etc.^[1] But involvement of infection will not allow the wound to heal and convert it into Dusta Vrana (chronic wound). Vrana Basti (oil pooling treatment) with Jatyadi Taila helps in managing Dusta Vrana effectively by controlling the healing environment. A case of 30-year male presented with complains of non-healing ulcer in left lower limb, above the medial malleolus with slough, discharge, foul smell, discoloration of surrounding skin has been presented here. There was complete healing of the ulcer after 30 days of treatment. In this case Jatyadi Taila shows its Shodhana, Ropana and Raktaprasadana property.

Key words: Dusta Vrana, Venous Ulcer, Jatyadi Taila, Vrana Shodhana, Rakthaprasadana.

INTRODUCTION

Wounds may be caused by trauma or by physical, chemical and microbial agents or ischemia. The word "healing" means replacement of destroyed or damaged tissue by living tissue of similar type or different. The four basic processes which take place in wound healing are-Inflammation. contraction, Epithelialization and Granulation tissue

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formation. There are many factors which influence the wound healing like age, nutrition, hormones, comorbid conditions, place and position of wound, blood supply to the area, exposure etc.^[1] Vrana and its management has been given great importance in Shalya Tantra. In first chapter of Chikitsasthana, he gives the definition of Vrana as "Vrana gatra vichurnane", and Dalhana Acharya tells as "Vranayati iti vrana", means - the word Vrana means splitting or tearing of the tissue. Acharya Sushruta has mentioned two types of Vrana according to its origin i.e. Agantuja Vrana (traumatic wound) and Nija Vrana (ulcer due to Doshaprakopa) i.e. "Dvaow vranou bhavataha shareera agantusha chaeti". [2,3,4] He also explained Shashti Upakramas (sixty therapeutic measures) for wound management i.e. "tasya vrana syashasti upakramaha bhavanti", among sixty Upakramas local application of medicated oil (use of Taila) is one of most important Upakramas. The application of medicated oil can be done with different procedure like Pichu (cotton swab), Lepa

(ointment) or as *Vrana Basti* on *Dushta Vrana*.^[2-4] Among these *Vrana Shodhana* and *Ropana* are the preliminary steps in healing and both can be achieved through *Vrana Basti* ^[2,3,4] which is a modified version of *Kati Basti* or *Janu Basti*. He has enlisted plenty of formulations for the procedure.

Venous ulcer

Venous ulcer has two main etiologies. Firstly, ulceration may be associated with demonstrable varicose veins and secondly, such ulceration may follow thrombosis and phlebitis in the deep perforating veins. The second group presents as an ulcerated odematous leg with demonstratable superficial varices in only about 1/3 rd of cases, with long standing odema of leg. [1]

Treatment involves elevation of effected limb, passive movements to maintain the mobility of the foot and ankle, active movements of the calf muscles, use of venous stockings (in the absence of DVT), stripping of dilated veins, skin graft, valvular repair, regular dressing.^[1]

CASE REPORT

A male patient aged 30 yrs, not a known case of diabetes mellitus or hypertension or any systematic ailment, presented with complaint of non-healing ulcer in the left lower limb just above the medial malleolus, with slough, discharge, foul smell, discoloration of surrounding skin, and pain, in the last three years. Three years back, patient was apparently normal, as his working nature is of long standing (cook). There was visible veins and initially blackish discoloration of lower 1/3rd of left lower limb with itching. He noticed a water filled boil in the region which opened on its own and there was a wound. The wound increased in size gradually. He had taken lot of medication for the same but found no relief. He was under betadine dressing. Since he found no improvement, he consulted the Shalya OPD, at SJIIM hospital, Bengaluru.

Local Examination

Inspection

Anatomical location - 2cms above the left medial malleolus

- Size and Shape 17x5x0.5 centimeter irregular in shape
- Number One ulcer
- Position left lower limb medial malleolus region
- Edge sloping edges
- Discharge serous discharge
- Floor unhealthy granulation tissue present
- Odour Foul smell
- Base superior extensor retinaculum, flexor digitorum longus muscle with tendon, flexor hallucis longus muscle with tendon, soleus muscle.
- Surrounding skin brownish black discoloration seen

Palpation

- Tenderness Present
- Bleeding on touch Slightly present
- Peripheral pulsations palpable
- Ingunal lymph nodes not enlarged

Investigations done

CBC - within normal limits

ESR - slightly raised 30/1 hr

RBS - 86mg/dl

MATERIALS AND METHODS

Present study was carried out on OPD basis. Jatyadi Taila, Panchavalkala Kashaya, sterile gauze was among the materials required for study. Every alternate day, the wound was cleaned with Panchavalkala Kashaya. After proper cleansing, Vrana Basti was done with Jatyadi Taila. The wall of Masha Pishti (frame of Blackgram floor dough) was erected around the ulcer margins, measuring about 3cm in height & 1 cm in thickness. The Jatyadi Taila was taken, Luke warmed on hot water bath and pouring of lukewarm oil was done with help of sterile cotton wick into the pit of dough over the floor of ulcer. The oil was kept in situ for 15 mins. Later the oil was

discarded and the ulcer dressing was done. Later patient was given *Kaishora Guggulu* 1BD after/food, *Gandhaka Rasayana* 1BD after/food and *Manjistadi Kashaya* 20ml BD after/food internally.

RESULTS



Vrana Prakshalana with Panchavalkala Kashaya



Vrana after Prakshalana



Vranabasti preparation



Pouring of Jatyadi Taila into the pit



Result after 4 sitting of Vranabasti

Initially there was reduction in the discharge. After three sittings of *Vranabasti*, approximation of ulcer edges was seen. Then floor had developed healthy granulation tissue with no slough. The pain and foul smell were reduced after 7 days.

Gradual healing of ulcer was seen over a period of a month and half.

DISCUSSION

Jatyadi Taila is Tikta and Kashaya Rasa Pradhana, which is Pitta Kapharahara and have Vrana Shodhana, Ropana, Pootihara, Vedanasthapana property.

Jaati - has antibacterial, anti-inflammatory and antifungal property due to the presence of salicylic acid in it. In Nimba the active compound known as nimbine, margosin has anti-inflammatory analgesic and antibacterial property. The active ingredient of Yastimadhu is having wound healing property.

Turmeric has anti-inflammatory, anti-microbial and anti-bacterial property. *Tutta* helps in *Lekhana Karma* and *Tila Taila*, the base provides a better medium for tissue repair. Overall, it's the combined effect of the ingredients which brings about the healing effect.^[5]

With this, there is also role of *Panchavalala Kashaya* and internal medication of *Kaishora Guggulu*, *Gandhaka Rasayana* and *Majistadi Kashaya*.

Panchavalkala Kashaya - has combination of five astringent drugs named, Nyagrodha (Ficus bengaenesis Linn.), Udumbara (Ficus glomerata Roxb.), Ashwatha (Ficus religiosa Linn.), Parisha (Thespesia populanea Soland ex correa), Plaksha (Ficus lacor Buch-Ham.), which shows properties like antiseptic, anti-inflammatory, immune-modulatory, antioxidant, antibacterial, antimicrobial wound purifying and healing, astringent properties. So, by using this, the wound is cleaned. [6]

Kaishora Guggulu - Guggulu is one extraordinary drug that possesses Anabhishyandhi, Snigdha, and Sroto Shuhdhikaraka actions. And as it has the Rookshana property of drugs like Danti (Baliospermum montanum), Triphala (Terminalia chebula Retz. Terminalia bellerica, Emblica officinalis), Vidanga (Embelia ribes), and Guggulu (Commiphora mukul) are believed to act on Prakupita Kapha Dosha and Medas. Tikshna and Ushna drugs like Pippali, Vidanga, Shunthi, Maricha, Danti, and so on, are present in Kaishora Guggulu is stated to have a positive action on Sroto Vishodhana. [7]

Gandhaka Rasayana - Gandhaka Rasayana prepared according to the reference of Yogaratnakar. Sulphur (Gandhaka) is effective as a microbicidal agent, both systematically and topically. In Gandhaka Rasayana, Sulphur has been purified with ancient process of Shodhana as mentioned in Rasashastra text, so that the toxic effect of Sulphur is reduced. Other ingredients like Bibhitaki, Amalaki etc. have additional therapeutic properties and are proved to have antimicrobial activity. In Amalaki, phyllimblinis said to have antimicrobial property, Bibhitaki has antifungal and antibacterial property, Churna of Haritaki have wide spectrum of antibacterial and antifungal

property, oil from Mukula of Nagakeshar have proved to have antibacterial activity especially against Staphylococcus aureus, Guduchi has antidiabetic, antitubercular and hepato protective property and reduces cholesterol, also Bringraja has hepatoprotective and antiviral property, Shunthi has antitubercular, antibacterial and improves gastrointestinal tract functions. Tamala is antidiabetic.[8,9]

Manjistadi Kashaya - has many potent Vatahara herbs which has antioxidants like Rubia cordifolia, Cedrus deodar, Hemidesmus indicus, Tinospora cordifolia, Zingiber officinale, Sidarhombifolia, Triphala, etc. The antioxidant effect of the combination possibly makes it a very useul combination in the treatment of Vrana. [10]

CONCLUSION

Hence this can be a complete treatment protocol that can be followed in cases of non-complicated, non-healing venous ulcer, based on *Yukthi* of the *Vaidya*.

REFERENCES

- Dr. Soman Das, A Consicse Textbook of Surgery, by, 5th edition, 2008, published by Dr.S.Das, 13, Old Mayor's Court, Calcutta. Pg. no.1, 3,211 and 212.
- K.R.Srikantha Murthy, Sushruta Samhita Volume 1 and 2, 2014, published by Chaukambha Orientalia, Varnasi.(English Translation) And Dr.Kewal Krishna Thakral, Sushruta Samhita with Dalhanacharya and Sri Gayadasavyakhya, 2016, published by Chaukambha Orientalia, Varnasi.(Hindi Translation), Su. Su21/19-23, 40; Su.Su. 23/18, 19, 20; Su.Su. 22/7; Su.Su.9.
- 3. Kaviraj Atrideva Gupta, Vaghbatacharya virachita, Astanga Hridayam, 2017, published by Chaukambha Orientalia, Varnasi. AH.Utt.25/1,2-4,41,42; AH.Utt. 26/6, 7, 12, 14b, 15, 28a.
- Agnivesha, Charaka Samhita, reducted by Charaka and Dhridabala with Ayurveda Deepika commentary by Chakrapani Dutta, edited by Vaidya Yadavji Trikamji Acharya, 5th edition,2001, published by Chaukambha Orientalia, Varnasi. Ch.Su.19/7; Ch.Chi. 25/5, 6,8a.
- Pandit Parashurama Shastri, Vidyasagar- The Sharangadhara Samhita by Pandit Sharangadharacharya s/o Pandit Damodar with

commentary- Adhamalla's Dipika and Kashirama's Gudartha Dipika, 1931, Published by Nirnayasagar press-Bombay. Sha. Madhyama khanda, chap 9/168-171.

- 6. Vyas Palak, Prajapati PK, Shukla VJ. A Herbal wound healing gel prepared with panchavalkalakwatha, nimba kwatha and kumara swarasa with their physicochemical parameters. Earthjournals.org Volume 3 Issue 2 2013: 49-60. And Sakhitha et al: Formulation. Anti-Bacterial Activity and Wound Healing Property of Panchavalkaladi Ointment. IAMJ: Volume 1; Issue 4; July – Aug 2013:1-5.
- Pandit Parashurama Shastri, Vidyasagar- The Sharangadhara Samhita by Pandit Sharangadharacharya s/o Pandit Damodar with commentary- Adhamalla's Dipika and Kashirama's Gudartha Dipika, 1931, Published by Nirnayasagar press-Bombay. Sha. Madhyama khanda, chap 7/70.
- Prasanna Kumar T, Vijay Kumar GS, Yumnam DD, In-Vitro Antifungal activity of Gandhaka Rasayana, International Journal of Ayurvedic Medicine, 2010, 1(2):93-99.

- Saokar RM, Sarashetti RS, Kanthi V, Savkar M, Nagthan CV, Screening of Antibacterial and Antifungal activity of Gandhaka Rasayana- An Ayurvedic Formuation, International Journal of Recent Trends in Science and Technology, 2013: 8(12):134-137.
- Pandit Parashurama Shastri, Vidyasagar- The Sharangadhara Samhita by Pandit Sharangadharacharya s/o Pandit Damodar with commentary- Adhamalla's Dipika and Kashirama's Gudartha Dipika, 1931, Published by Nirnayasagar press-Bombay. Sha.Madhyama khanda, chap 2/137-142.

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