

A COMPARATIVE CLINICAL STUDY ON JALOUKAVACHARANA AND SIRAVYADHA FOLLOWED BY ARKATAILA LEPA IN THE MANAGEMENT OF VICHARCHIKA W.S.R TO ECZEMA***¹Dr. Shruti T. G., ²Dr. Shivalingappa J. Arakeri, ³Dr. Mohasin Kadegaon and ⁴Dr. Ashwini Hallad**¹PG Scholar, Department of Shalyatantra, Taranath Government Ayurvedic Medical College and Hospital, Ballari, Karnataka, India.²Professor & HOD, Department of Shalyatantra, Taranath Government Ayurvedic Medical College and Hospital, Ballari, Karnataka, India.^{3,4}Assistant Professor, Department of Shalyatantra, Taranath Government Ayurvedic Medical College and Hospital, Ballari, Karnataka, India.***Corresponding Author: Dr. Shruti T. G.**

PG Scholar, Department of Shalyatantra, Taranath Government Ayurvedic Medical College and Hospital, Ballari, Karnataka, India.

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ABSTRACT

According to Ayurveda all skin diseases are referred as kushtaroga and divided into Mahakushta and kshudrakushta. Vicharchika comes under Kshudrakushta and it is Rakta pradoshaja vikara. Sushruta, the Father of Surgery has mentioned the symptoms as rukshata with kandu and raji. In *Ayurveda* various effective modalities of treatment explained which includes *Kaya Shodana*, *Raktamokshana*, *Shamanoushadhas* which are cost effective and patient friendly. Among the various methods of *Raktamokshana*, *Jaloukavacharana* and *Siravyadha* are considered as the ideal method to expels out the vitiated blood. So to compare both method, I have taken this study namely A Comparative Clinical Study on Jaloukavacharana and Siravyadha followed by Arkataila lepa in the Management of Vicharchika w.s.r to Eczema. Material and Method: This study was conducted within the facility available in the OPD & IPD of TGAMCH, Ballari. 40 cases of vicharchika were selected from the OPD & IPD of the TGAMC & H and randomly assigned into two groups namely Group A (Jaloukavacharana) & B (Siravyadha). Result: The treatment modality of Jaloukavacharana and Siravyadha are equally efficacious in the treatment of vicharchika. Clinically there is no difference in the overall effect between the two groups but in the minimizing the Pain, kandu, pidika and rukshata of vicharchika was found more effective in Siravyadha compared to Jaloukavacharana Conclusion: Both procedure have shown significant result in the parameters of vicharchika.

KEYWORDS: Kushtaroga, Kshudrakushta, Vicharchika, Jaloukavacharana, Siravyadha.**INTRODUCTION**

Vicharchika is described under *Kshudra Kushtha* in Ayurvedic texts.^[1] *Vicharchika* is having Mainly involvement of three doshas. As per *Charaka*, it is characterized by *pidika*, *kandu* and *srava* (profuse discharge).^[2] *Sushruta* has mentioned the symptoms as *rukshata* (dryness of the skin) with *kandu* (intense itching) and *raji* (marked linings).^[3] A similar clinical presentation in modern dermatology is seen in Eczema, which is defined as a non contagious inflammation of the skin characterized by erythema, scaling, oedema, vesiculation and oozing.^[4] Particularly at the site of lesion. Modern medical science treats eczema with corticosteroids, antifungal /antiseptics but the therapy gives symptomatic relief only and also the therapy has some side effects like liver and kidney failure, bone marrow depletion etc. With long term use of topical

steroids, the skin may develop permanent stretch marks (striae), bruising and it can also change the skin colour.

The Ayurvedic texts consider *Raktadushti* as one of the primary cause of skin disease and patient get relief after letting out the vitiated blood.^[6] Among various methods for bloodletting, *Jalaukaavacharana* is considered as the ideal method to expel out the vitiated blood safely, quickly and effectively.^[7] In general all the *Kushtha* are said to possess a *Tridoshaja* origin,^[8] in *Vicharchika*, *kandu* is caused due to *Kapha*, *srava* is due to *Pitta* and *shyavata* (blackish discoloration) is caused due to *Vata*. Despite of its *Tridoshaja* nature *Acharya Sushruta* categorised *Vicharchika* as *Pitta pradhan Kshudra kushtha*,^[9] and *Jalaukaavacharana* as its ideal treatment.

Siravyadha is considered as *Ardhachikitsa* so it was routinely practiced in the past and so much importance is

given in classics. *Siravyadha* is indicated in *Vicharchika* and *Acharya Sushruta* mentioned the site for *Siravyadha* i.e two angula above the *Kshipra marma*.

In Ayurvedic texts, there are hundreds of medicaments as a successful and safer remedy for treating *Vicharchika*. *Acharya Sharangadhara* had depicted one such formulation *Arka taila* for treating *Vicharchika*. *Arka taila* contains *arkapatra swarasa*, *haridra kalka* and *sarshapa taila*. All these drugs have *katu tikta rasa*, *snigdha*, *ushna guna*, *krimighna*, *kandughna*, and *kushtaghna* properties which helps in treatment of *vicharchika*.

AIMS AND OBJECTIVES OF THE STUDY

- To evaluate the efficacy of *Jaloukavacharana* followed by *Arkataila lepa* in *Vicharchika*.
- To evaluate the efficacy of *Siravyadha* followed by *Arkataila lepa* in *Vicharchika*.
- To compare the efficacy of *Jaloukavacharana* and *Siravyadha* followed by *Arkataila lepa* in the management of *Vicharchika* w.s.r to Eczema.

MATERIAL AND METHOD

Sources of data

Clinical source

Patients suffering from clinical features of *Vicharchika* were selected from O.P.D & I.P.D of Taranath

Table 29: Sample size.

Group	No of patients	Intervention
Group A	20	<i>Jaloukavacharana</i> followed by <i>Arkataila lepa</i>
Group B	20	<i>Siravyadha</i> followed by <i>Arkataila lepa</i>

Diagnostic criteria

Inclusion criteria

- Patients presenting with classical signs & symptoms of *Vicharchika* of either sex were selected with irrespective of their occupation.
- Patients between the age group 16-70 years.
- Patients with Eczema of lower extremities.

Exclusion criteria

- Patients suffering from other systemic illness like DM etc.
- Anaemia

Assessment criteria

Subjective parameters	Objective parameters
<i>Kandu</i>	<i>Shyava</i>
<i>Pidika</i>	<i>Rukshata</i>
<i>Ruja</i>	Crusting / Shedding
<i>Srava</i>	Size

Government Ayurvedic Medical College and Hospital, Ballari.

Drug source

Drug were collected and identified as per classical techniques and certified by Department of Dravyaguna. TGAMC, Ballari.

Study design: Comparative Clinical study.

Sampling technique: 40 patients clinically diagnosed as *Vicharchika* were randomly selected with irrespective of their religion & sex for this study. This study was conducted during the period of May 2022 to April 2023.

Sampling size: 40 patients diagnosed as *Vicharchika* and divided into two groups i.e Group A and Group B containing 20 patients each.

- Pregnant women & Lactating women
- Chronicity more than 3 years
- Patients suffering from HIV, HbSAg.
- Patients who were contraindicated in *Siravyadha* & *Jaloukavacharana*.

Grading of the parameters**Kandu:** Numerical rating scale

Grade	Kandu
0	Absent
1	Mild (1-3)
2	Moderate(4-6)
3	Severe (7-10)

Pidika

Grade	Pidika
0	Absent
1	Scanty eruptions in few lesions
2	Scanty eruptions in at least half of the lesions
3	All the lesions full of eruption

Ruja: VAS Scale

Grade	Ruja
0	Absent
1	Mild (1-3)
2	Moderate(4-6)
3	Severe(8-10)

Srava

Grade	Srava
0	Absent
1	Present

Shyava

Grade	Shyava
0	Normal skin color
1	Brownish red discoloration
2	Blackish red discoloration
3	Blackish discoloration

Rukshata

Grade	Rukshata
0	Absent
1	Mild - Rough and/or Scaling - No or Mild Itching - No Pain - No or minimal erythema - No fissures
2	Moderate - Rough, Moderate scaling - Mild or Moderate itching - Mild or Moderate pain - Mild erythema - May have fissure
3	Severe - Rough, Severe scaling - Severe itching - Severe Pain - Mild erythema - May have fissure

Crusting

Grade 0	Absent
Grade 1	Mild(< 5mm depth of crust), minimal shedding
Grade 2	Moderate(5mm-10mm of crusting), moderate shedding
Grade 3	severe(>10mm of crusting), profuse shedding

Size

Grade 0	Nil
Grade 1	< 2.5cm
Grade 2	2.5-5 cm
Grade 3	5-7.5cm
Grade 4	7.5-10cm
Grade 5	>10 cm

INVESTIGATIONS: HB, TC, CT, BT, ESR, RBS, HIV, HbsAg.

MATERIALS REQUIRED FOR PROCEDURE

Fig. 1: Materials required for Jaloukavacharana procedure.



Fig. 2: Materials for Siravyadha procedure.

Procedure**Group A: Jaloukavacharana**➤ **Poorvakarma**

- Nature of the study was explained to the patients and written consent was taken.
- Materials used for procedure - *Haridra choorna*, kidney tray, gauze piece, bandage, disposable needle, gloves, water.
- *Jalouka* was placed in the water mixed with *Haridra choorna* for two to three minutes so that leech gets active.

➤ **Pradhana karma**

- Patient was asked to sit or lie down comfortably
- *Jalouka* was placed at the affected part.
- If *Jalouka* failed to stick then drop of milk or blood sprinkled over the affected part or a small puncture was made on the lesion.
- Once *jalouska* started to suck the blood, its neck part was looks elevated that indicates that sucking is well and in progress
- The *jalouska* body part was covered with wet guaze.

➤ **Pashchath karma****For Jalouka**

- When *jalouska* was stopped to sucking automatically then *jalouska* was dusted with *haridra* then *jalouska* vomit the ingested blood.
- *Jalouska* was placed in water container and if it starts moving actively then it was stored in the container with the patient's name and date of therapy.

For patient

Immediately after removing the leech the local part was cleaned with normal saline and after that applied *Haridra choorna* bandage was done.

Group B: Siravyadha➤ **Poorva karma**

- Nature of the study was explained to the patient and written consent was taken.
- Advised to take food mainly consists of *yavagu*.
- *Sthanika Abhyanga* and *Sweda* was done to the affected part.

➤ **Pradhana karma**

- The patient was made to sit comfortably over the examination table.
- Then the part was cleaned with surgical spirit.

- A tourniquet was tied above the site of procedure to make the *sira* prominent.
- A sterile needle of 18 gauge no was introduced into *sira* which was present 2 angula above the kshipra marma and *siras* which were presented near the affected area in some patients.
- When needle was in situ a measuring jar was kept for the collection of blood.
- Then the needle was taken out after the blood flow stops on its own.

➤ **Pashchath karma**

- Dressing was done by cotton swabs
- The patient was asked to take rest for 10-15 minutes

➤ **Total Study Duration**

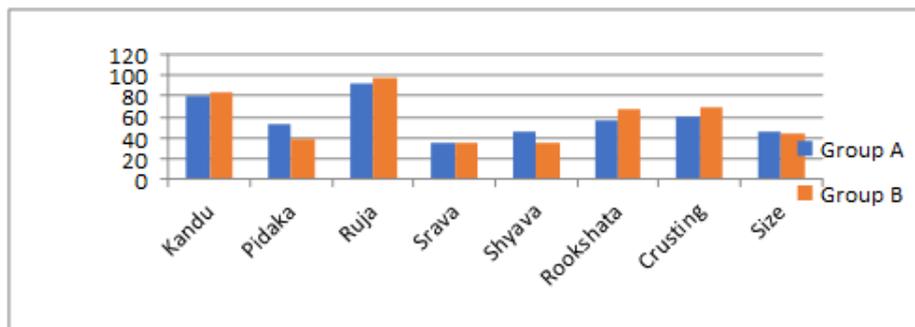
- Treatment duration :21 days
- Follow up : 14 days
- Total study duration: 35 days

Selected 40 patients of *Vicharchika* were randomly allotted into Group A & Group B containing 20 patients in each group.

RESULT

Comparative result of Group A & GroupB on each parameters

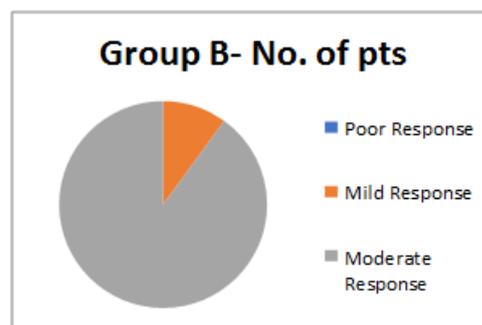
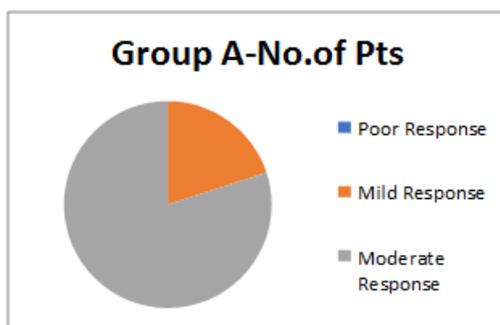
Parameters	GroupA(%)	Group B (%)
Kandu	79.19	83.33
Pidaka	52.5	38.33
Ruja	92.5	97.5
Srava	35	35
Shyava	35.83	45.81
Rukshata	57.5	67.5
Crusting	60	70
Size	45.33	43.83



ASSESSMENT OF TOTAL EFFECT OF THE THERAPY

Table 75: Effect of Treatment.

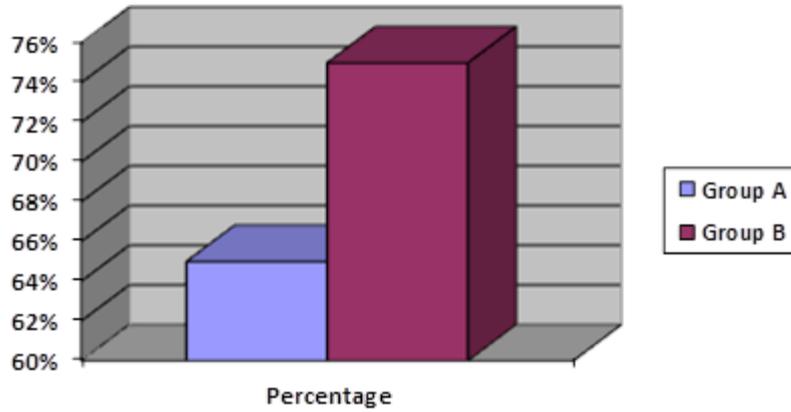
Class	Grading	No. of Patients in Group A	No. of Patients in Group B
0-25%	Poor Response	0	1
26-50%	Mild Response	04	02
51-75%	Moderate Response	16	19
76-100%	Marked Response	0	0



OVERALL EFFECT OF TREATMENT IN GROUP A & GROUP B

Overall effect of treatment in both groups

Groups	%
Group A	65%
Group B	75%



Showing overall effect of treatment in between Groups

Photos: Jaloukavacharana



Figure 3: Before treatment.



Figure 4: 1st Sitting.



Figure 5: 2nd Sitting.



Figure 6: 3rd Sitting.



Figure 7: After treatment.



Figure 8: BT. Figure 9: 1st Sitting.

Siravyadha



Figure 10: 2nd Sitting.



Figure 11: 3rd Sitting.

Figure 2: AT treatment.

DISCUSSION

Probable mode of action of Jaloukavacharana

The study is purely clinical based up on the effect of the therapy on the signs and symptoms of the disease; hence, it becomes difficult to give definite mode of action of Jalauka. But on the basis of available literatures, and its explanation as well as the results seen clinically, some hypothesis and the probable mode of action can be postulated.

- *Jalouka* takes out the vitiated *rakta* along with *dosha* specially *pitta dosha* from the near by area, which causes *srotoshodhana* locally this *shodhana* reduces the *pidika*.
- *Jaloukavacharana* procedure will reduces symptoms like *vaivarnya, paka, daha* etc which are occurring due to *pitta dosha* by removing the *dushita rakta*.
- *Sroshodhana* of *jaloukavacharana* causes *anuloma gati* of vitiated *vata*, therefore reduction in *vedana* and.

- Various biologically active substances in saliva of *jalouka* like *Bdeline*, *Egline* which are helpful in reduction of inflammation and pain.
- Leech application has counter irritant effect on the lesion, which creates new cellular division which takes place removing dead cell layer, and result in reduction of local Swelling and Lichenification.
- Histamine by its vasodilation property allows more blood to come to the site of leech application or lesion thus replacing the old stagnant blood with fresh blood. Overall biologically active substances renders thrombolytic, anti-inflammatory and immune stimulant action.
- Secondary bleeding for few hours, due to *hirudin*, causes removal of toxins along with increased circulation to that particular area, promoting faster wound healing without any scar formation.

Probable mode of action of Siravyadha

- *Siravyadha* reduces *Kandu*, *Pidika*, *Srava*, *Ruja*, *Shyavata*, *Rukshata*, *Crusting*, *Size* by relieving

venous congestion, increasing venous drainage & increasing oxygenated blood supply near the applied area.

- Siravyadha removes the avarana of pitta and kapha dosha and does srotoshodhana which helps in breakdown of samprapti and proceeds healing.
- Siravyadha expulse the morbid doshas which reduces inflammatory reaction which gives relief in pain immediately due to its vata shaman effect, by masking the sheeta guna of vata by the ushna guna of the rakta as a result of increased blood circulation by siravyadha.
- Stimulation to large sensory fibres from peripheral tactile receptors depresses the transmission of pain signals either from the same area of the body or even from the many segments.
- It reduces intravascular pressure and volume which will reduce pain and swelling.
- Siravyadha reduces breakdown of RBC in turn reduces pigmentation and itching sensation.

CONCLUSION

Vicharchika can be compared with eczema in modern science. In modern there are limited scope of treatment, but Ayurveda has many treatment modalities in which Raktamokshana is prime one which helps in cleansing the body and helps to restoring the health, hence Both procedures are the perfect solution for many skin diseases.

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