



A CONVENTIONAL CASE STUDY ON DUSHTAVRANA IN RELATION TO PANDU VIKARA

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ABSTRACT

The cure and recovery of wounds are some of the most seasoned subjects examined inside the Literature. Data of wound recuperation grants surgeons to control wounds to get most suitable outcomes in a short length. In Ayurveda non-recuperating ulcer might be related with Dushta Vrana. On other hand a great deal of comorbidities furthermore influence the recuperating e.g., Pandu, Prameha, etc. On-going paleness and DM end up being obstruction for wound mending except if they are adjusted foundationally. The foundational remedy of the pair requires either serious and costlier obtrusive treatments or long haul customary treatments. This study was wanted to evaluate the elective measure to sidestep both the costlier and tedious measures in non-recuperating ulcer the executives. Kshara Karma (Alkali Therapy) for Shodhana and Ropana of Dushta Vrana is most significant technique among Sixty upakramas implied for Vrana, related to collagen granules for faster epithelization. Kshara has chhedana (excision), Bhedana (incision), and Lekhana (scraping) properties alongside Tridoshara karma (equilibrium of Vata, Pitta, Kapha). Collagen is a fundamental developing block of the pores and skin. After application as an adjunctive injury treatment, invigorates and enlist resistant cells and fibroblasts and saints itself for corruption via MMPs (Matrix Metalloproteinases), accordingly keeping neighbourhood ECM (extra cellular matrix) shape and healing.^[1] A case report of a patient having open horrible ulcer with ongoing Anaemia, DM, HTN, that mended with utilization of Apamarga Kshara and collagen particles as an integrative methodology is introduced here in.

KEYWORD: Chronic iron deficiency, Pandu Roga, Dushta Vrana, Collagen Granules, Kshara, Kshara karma.

INTRODUCTION

Vrana is apparent as incapacitating and frightening sickness ordinarily seen influencing the person at whatever stage in life. Vrana is a direct result of Dhatu Naasha (obliteration of tissue), and portrayed by Vedana (torment), Srava (discharge), and Vikriti (disfigurement). Acharya Sushruta has depicted Shastiupakramas (60 strategies) for the board of Wound^[2], to secure suitable estimation, early recovery and legitimate scar. Among Shasthi Upakrama, Kshara karma, which is painless method, with no difficulties, does the shodhana of Dushta Vrana. It takes out all swamp/dead tissue and yield Shuddha vrana, hence supplements wound recuperating. In this way, Apamarga Kshara with collagen granules was choosed in the local administration of Dushta Vrana.

The genuine and possible issue of twisted mending in this persistent was the concurrence of co-dismal circumstances like, on-going iron deficiency, diabetes mellitus and the hypertension. The point of the review was to notice the recuperating of the injury by nearby twisted care inside the briefest period that might be conceivable, defeating the impedance of the persistent weakness, diabetes mellitus and hypertension.

CASE REPORT

Single case observational study.

Brief about Study

A 56-year-old male patient gave objection of horrible ulcer on right hand close to thumb related with torment, putrid release and excited that was non - receptive to treatment for a very long time, treated somewhere else.

Before two months, the patient endured with a mishap while going on bicycle, he was hit by a sharp stone, bringing about injury with the expanding and torment on his right hand at web space between the Thumb and the Index finger. Wound got contaminated because of ill-advised care and compromised resistance most likely because of the constant iron deficiency and the diabetes mellitus. Noxious discharge and bog additionally hampered the injury recuperating. The injury was treated with anti-infection agents by a neighbourhood specialist yet it neglected to answer. The patient likewise went to a few different clinics for treatment however it didn't respond emphatically to the treatment (however subtleties of such treatment are not accessible with the patient). Finally, he came to hospital.

Patient was known instance of persistent sickliness, Hypertension, Diabetes Mellitus with well established bleeding Hemorrhoids.

On General

GC- Stable. Patient was Conscious and well-oriented, walked on his own into Shalya OPD.

Pallor – Present. Conjunctiva Pale.

BP- 160/90mmHg on regular medication

Pulse- 87/min

Spo2- 98%

Temperature – 97°F Afebrile.

Systemic Examination

RS- B/L AE+, Clear

P/A- Soft, Non-tender

CNS: NAD; conscious & well oriented.

CVS: S1S2 +

Local examination: Ulcer was seen on right hand close to thumb and index finger web space, estimating around 3x2x0.5cm in aspect with lavish purulent release and unpredictable edges; edges were aroused. The floor was undesirable covered with bog, and unsavory painful smell was available.

Delicacy was additionally present with encompassing induration and nearby climb in temperature. Nearby lymph hubs were not involved.

Patient was having pallor (likely optional to ongoing third degree Haemorrhoid's) having side effects of Vataja Pandu i.e Ruja (torment), Angatoda (Malaise) Kampa (tremor), Anaha (Flatulence), Balakshaya (emaciating), Rooksha Shira (more vulnerable heartbeat), Gatra ruk (torment at the provocative site), Ruksha tvaka (dryness of skin and mucosa).

Examinations: The examinations affirmed the clinical Pandu as the weakness optional to the draining heaps. The odd haemoglobin rate (8.2 gm/dl) and Total Erythrocyte include and variety in the blood files like diminished P.C.V, M.C.V and M.C.H.C demonstrating frailty of both dietary and haemorrhagic aetiologies. The

arbitrary glucose levels and the pee sugar levels were characteristic of the current diabetes mellitus. The blood sugar level F-124mg/dl & PP-230mg/dl.

MATERIALS AND METHODS

In this study Apamarga Kshara with collagen granules was utilized for local application.

Items in Apamarga Kshara - Apamarga Kshara

Content of collagen granules: Sterile Collagen Particle

Treatment Plan

Wound was cleaned with Triphala Kwath (decoction) everyday, after legitimate cleaning with sterile swabs, Apamarga Kshara was privately applied once and dressing was finished with sterile bandage.

After that as long as three days just Triphala kwath Prakshalan (washing with Triphala decoction) was finished and afterward subsequent to dressing with collagen granules and wrapping done once in three days.

Absolute span of treatment was 14 days.

RESULTS

The clinical highlights of Dushta Vrana were worked on by the third day and the injury was mended totally toward the finish of second week leaving insignificant scar. (Pictures of a similar patient, taken at normal span are embedded as underneath).

During a development for a time of multi month, no indications of repeat were taken note.

DISCUSSION

Impact on Vrana Vedana (Pain at wound site)

Agony and delicacy was totally diminished toward the finish of treatment. Sireous agony present toward the start was totally diminished on third day. Apamarga kshara because of its Ushna virya³ could go about as Vedanasthapaka (Analgesic) by placating Vata.

Impact on Vrana Varna: on third day bog was totally decreased and floor was covered with red, sound granulation tissue. Laghu (softness) and Ruksha guna (dryness) are available in Apamarga. Laghu and Ruksha guna have Lekhana (scraping) property, because of which swamp was eliminated as well as the injury floor was additionally cleaned.

Impact on Vrana Srava (Wound Discharge)

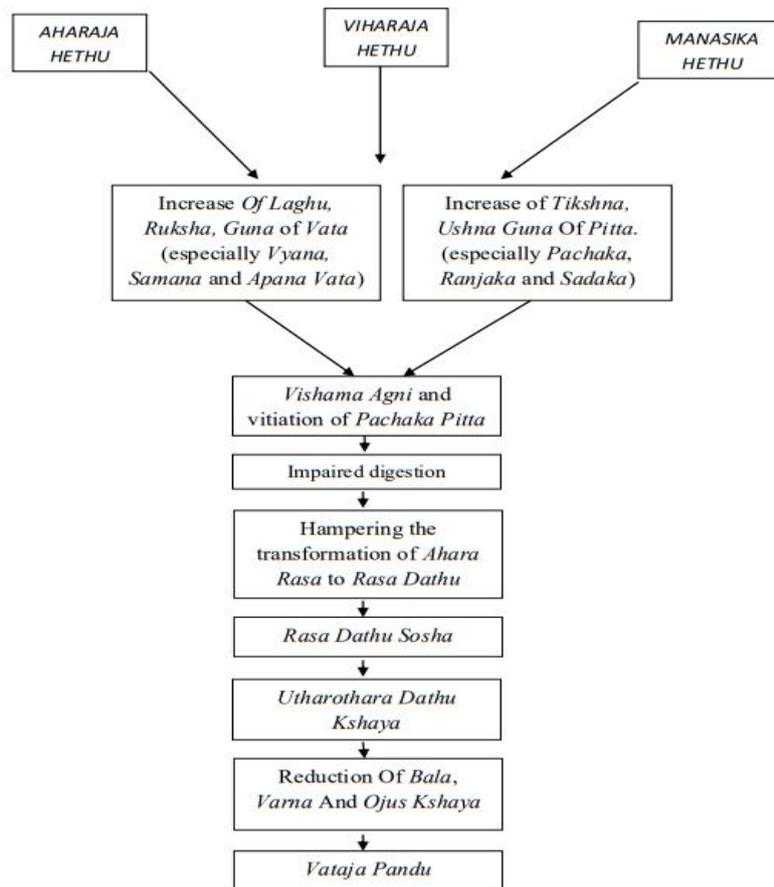
Profuse, Purulent release was totally diminished toward the finish of treatment. Purulent release present toward the start was totally diminished on third day. This might be because of Shoshana (retentive) properties present in Apamarga kshara. Wound turned out to be liberated from swamp and discharge toward the finish of third day. This is because of Shodhana property of Apamarga kshara.

Impact on Vrana Gandha (Odour of Wound)

Unpleasant smell present toward the start of treatment was totally diminished toward third day's end. The Krimighna (Antibacterial), Vishaghna (Detoxification of the bacterial poisons from the injury site), Kushthaghna (adjusting capacity of deformation auxiliary to twisted) properties of Apamarga Kshara, assisted with eliminating the contamination and foul smell.

Impact on Vrana Aakriti (Wound Shape and Size) At the finish of the treatment, Vrana totally mended with insignificant scar. Apamarga assisted with lessening the contamination, swamp and collagen granules assists with contracting twisted size by advancing recuperating and the space of compression.

Effect of Pandu on Healing



Among different Nidanas referenced for the causation of Pandu, we can isolate Vataja Pandu Nidanas. Those cause both Vata Pitta Prakopa particularly Ruksha and Laghu Guna of Vata (it is mostly because of the Dhatu kshaya auxiliary to seeping through third degree haemorrhoids that the patient is having since extensive stretch) and Tikshana Ushna Guna of Pitta. The previously mentioned Guna of Vata will cause Vishama Agni and will influence the absorption. Simultaneously Prakupita Pitta (Pachaka Pitta) additionally adds to ill-advised assimilation and both thus will hamper the sustenance of Rasa Dathu. This will prompt the sporadic sustenance of going before Dhatu, which thus lead to Varnakashaya, Ojokshaya and Rasakashaya. This plainly shows the contribution of Apatarpana kind of neurotic continuation in Vataja Pandu. Increment of Gunas, for example, Ruksha and Laghu as a resultant of Nidana Sevana will cause Dathu Kashaya, Tikshna and Ushna Guna Vriddhi of Pitta will likewise contribute in Dathu

Shoshana as well.^[4] Every one of the previously mentioned highlights could be valued clinically, additionally could be associated and deciphered through Blood Indices of the examination and the lower Haemoglobin rate and decreased absolute red platelet count of the patient.

However there is fundamental insanity with the patient's sustenance because of persistent paleness and diabetes mellitus, shockingly, the injury could to recuperate inside the ordinary time span after utilization of Apamarga Kshara followed by collagen granules. This recommends that Kshara and collagen can help the improvement of neo - angiogenesis consequently building the granulation of the injury, independent of the overall weakness. This contextual analysis, assuming demonstrated even in the bigger example size, will prompt more prominent transformation in the injury mending with coordinated approach.

CONCLUSION

Based on this contextual analysis, it tends to be presumed that, nearby use of Apamarga Kshara for synthetic debridement as Shodhana karma was viewed as extremely powerful in the administration of Dushta Vrana alongside collagen granules has the high adequacy in constriction of wound and epithelialization (Vrana ropana) with fine frightening without creating any unfavorable outcome and help in signs and side effects of Dushta Vrana. Despite the fact that recuperating relies upon the various variables like sufficient measure of haemoglobin to sustain tissue, nonappearance of sickness like DM, for this situation concentrate on both persistent paleness and diabetes mellitus were available. That was the reason for the deferred recuperating before utilization of the Kshara and Collagen granules. In the event that this integrative treatment of Kshara application followed by Collagen granules would have not been applied then presumably, the fundamental adjustment of the couple would have required either serious and costlier obtrusive treatments or long haul conventional treatments. This study could demonstrate that an elective measure to sidestep both the costlier and tedious measures in non-recuperating ulcer, does exists as integrative medicament with Kshara and collagen granules. Subsequently, it tends to be utilized as an integrative methodology for the board of Dushta Vrana i.e non mending ulcer even in comorbid conditions like Aneamia and Diabetes mellitus.

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