AYURVEDIC MANAGEMENT OF CELLULITIS WITH SPECIAL REFERENCE TO VRANA SHOPHA(CASE REPORT)

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ABSTRACT

Since the time surgery has evolved as a speciality, infection and haemorrhage have been recognised as two well known enemies of surgeons. Over a period of time, many newer antibiotics have come into existence. However, infection still dominates and it is one of the major causes of mortality and morbidity in a patient who has a 'benign disease'. This is the sad part of disease. Hence, it is important to diagnose and treat infections effectively as early as possible. As per Ayurveda it can be compared with Vrana Shopha signs and symptoms where saptopakrama are mentioned as line of treatment, where as in contemporary since it is managed by anti-biotics, anti-inflammatory, analgesics as per symptoms and dressings A case of 49years/male patient who presented with pain odema and tenderness was diagnosed as Vrana Shopha with raised ESR AND WBC count and was treated with virechana, kashayaseka and jaloukavacharana which showed marked improvement in treating the disease.

INTRODUCTION

Surgical infection is a major problem in surgical practice. Asepsis[1] (prevention of entry of organisms) and antisepsis[2] (killing of the bacteria in the skin or tissues) has made a difference in surgical practice. Epithelial surfaces act as mechanical barrier and phagocytes, antibodies; complements, macrophages, leukocytes, opsonins, etc. act as protective mechanisms.
Cellulitis is a common condition seen in both emergency and outpatient departments. Incidence comprise of 1-14% of emergency room visits and 4-7% hospital admission.\cite{3} Cellulitis is spreading localised inflammation of skin and subcutaneous tissue.\cite{4} Sources of infection by either Streptococcus or Staphylococcus, injuries either major or minor, scratch or graze, snakebite, scorpionbite, incision etc. with predisposing factors like Malnutrition, diabetes mellitus, obesity, uraemia, jaundice, malignancy, immunosuppression, radiotherapy, chemo therapy, HIV, ischaemia, foreign body, haematoma are the risk factors for surgical infections.\cite{5}

The common sites of cellulitis are lower limbs, face, scrotum, upper limbs.\cite{6} Here the affected part shows evidence of inflammation such as redness and itching followed by diffuse swelling. Skin is stretched and shiny. Pain, fever, toxemia follow later. In untreated case, suppuration, sloughing and gangrene can occur. Cellulitis can turn into an Abscess, Necrotising Fascitis, Toxemia and septicemia can precipitate keto-acidosis in a patient who has diabetes.\cite{7}

Therefore Management of cellulitis should be aimed to give quick relief and avoid further complication. In contemporary medicine appropriate anti-biotics, Glycerine and mgso4 Dressing, bed rest with foot-end elevation and if Diabetic sugar levels should be monitored. ASV in Case of Snake bite Management. But it takes almost 3 to 7 days or more to get the actual results besides of all these drug management only glycerine magnesium sulphates dressing is recommended by many physicians and surgeons. This dressing reduces oedema of the part by Osmotic effect, hygroscopic action and by its warmth it reduces pain. As per Ayurveda it can be compared with Vrana Shopha as earliest stage of vrana where Saptopakrama is line of Treatment. Jaloukavacharana and seka is indicated in acute conditions to relieve pain and to prevent paka. Leech saliva contains hirudin, bdellins and eglins which bears anti-inflammatory pharmacokinetics.

Among the panchakarmas Raktamokshana is one of the important para surgical procedure in treatment of skin disease. Raktamokshana is not only a curative but also a preventive para surgical procedure. So for this study Raktamokshana with jaloukavacharana and kashaya seka along with virechana is used to analyse the therapeutic effect in the management of cellulitis.
AIMS AND OBJECTIVES
To estimate the efficacy of Ayurvedic management i.e. evirechana, jaloukavachara and kashaya sekain vrana shopa W.S.R to cellulitis.

MATERIALS AND METHODS
TYPE OF STUDY
A Single observational study.

STUDY CENTER: Jss Ayurveda Medical College, Mysuru.

CASE REPORT
A 49yr Old male patient has come to Jss Ayurveda Hospital with complaints of pain, swelling, discoloration and itching of right leg. Patient also has raised local temperature with mild serrous discharge. From past 15 days patient had these symptoms, but from last 3 days symptoms hasaggrevated.
Geneal condition of Patient is good And Afebrile
Pulse – 74bpm
Blood pressure – 130/80 mm of Hg
Pallor – Absent

Systemic Examination
CNS – Concious and oriented
CVS – S1 S2 HEARD NO ADDED SOUNDS
RS- B/L AE+ NVBS
ON EXAMINATION
ASHTA STHANA PAREEKSHA
Nādi – 74bpm
Mala- Once per day
Mutra- 4-5 times per day
Jīwa- Liptha
Shabda- Prakrutha
Sparsha- Anushna-Sheeta
Drik- Prakrutha
Akruthi- Madhyama
SROTAPAREEKSHA

Raktavhasrotas: Local Raise of Temperature +
Discoloration +
Itching +

PAST HISTORY: Patient is N/K/C/O D.M-2, H.T.N, COPD.

PAST MEDICINE HISTORY: Patient has taken TABLET AMOX-CV 625 1-0-1 For 3 days.

INVESTIGATIONS: Complete Blood count, Rbs, Urine routine all were under normal limits Limits except ESR-60mm/hr, Wbc count-13000 per ml.

Fig.1: Before treatment.

Fig 2: After virechana and during Jalouka application.
TREATMENT GIVEN: Snehpan With Panchatikta Guggulu Ghrita And Varunadi Ghritha For 4 Days Sarvanaga Abhyanga With Mahamanjishtadi Taila Followed By Bashpa Sweeda For 3 Days Virechana With 50grms Trivruth Lehya And 100ml Triphala Kashaya Kashya Seka (Panchavalkala Kashaya) For Right Lower Lim B For 7 Days Jaloukavacharana 2 Leeches For Right Leg For 6 Days Daily Dressing With Jatyadi Taila.

DISCUSSION

Patient was diagnosed with cellulitis i.evrana Shopha with predominance of vata, pitta, rakta inadhashkah with vrana vasthu as twakratamamsa.
Here in this patient deepana and pachana was done with chitrakadivati andagnitundivati but no significant results were seen. Snehapanawas done with panchatikta guggulu ghritha and varunadi Ghrita which helped improving snigdamsha of twacha. virechana was done with trivruthlehya and Triphala kashya. Theteeekshana properties of virechanadravyas produce Chedana of dosha which are already soften by Snehana and Swedana and it mainly eliminates doshas from adhakaya Jalokavachara helped in reduction of inflammation and vasodilation by its enzymes Elgin, Acetylcholine.

Jatyadi taila dressing –by its action Lekhana, varnya, janthugna, Chedana, Amapachanaetc properties removes slough, kandu, srava, gandha, vedana in the wound this helps in formation of healthy granulation tissue.

**CONCLUSION**

However secure and well regulated civilized life may become, bacteria, protozoa, viruses, infectedfleas, lice, ticks, mosquitoes and bed bugs will always pounce for infection when neglected. Even though there is evolve of higher generation antibiotics infection still dominates and plays crucial role in morbidity and mortality rate.

One should not under estimate the cellulitis. It can spread very quickly and may progress rapidly to necrotising fasciitis it should be treated aggressively and monitored on an on-going basis Acharya sushrutha has explained Vrana Shopha in three stages i.e Amavastha, Pachchamanavastha, Pavkvastha. so one should implement Chikitsa according to the stage of sopha. Acharyasushrutha has also quoted importance of differentiating stages of sopha and intervention of treatment accordingly to attain good results.

**REFERENCES**