

Utility of Vrana Basti in the management of Venous Ulcer. A Single Case Report

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Abstract

Varicose ulcer or Venous ulcer is open wounds in the skin that occurs with sustained venous hypertension and improper functioning of venous valve, usually in the lower limbs. It is one of the most serious chronic venous insufficiency complications, accounting for 80% of lower extremity ulcerations. Gangrene, cellulitis and risk of amputation are the complications if it is left untreated. Symptomatology of venous ulcer indicate the correlation towards sirajanyadushtavrana, which is explained in Sushruta Samhita. A case of 26- Year- old male who presented with complaints of venous ulcer in medial aspect of lower 1/3rd of left leg associated with pain, swelling, and discoloration of the skin since 3 months has been taken for the current study. Vranabasti for 5 days was done Followed by cleaning and dressing with NS and jatyaaditaila. oral medicines are Sahacharaadikashaya two times a day, tab Kaishoraguggulu three times a day, cap viscovas three times a day, khadiraaristha two times a day, sahacharaaditaila for local application twice a day. There was Significant improvements in the size of the wound and nature of tissues.

Keywords: Venous ulcer, Jatyaaditaila, Vranabasti, Sahacharaadi taila

Introduction

A venous leg ulcer is the wound occur due to chronic venous insufficiency. It is due to improper function of venous valves of the leg and raised intravenous pressure secondary to deep vein thrombosis, obesity, injury, chronic constipation and long-standing occupation.

Varicose veins which eventually causes chronic venous hypertension causes haemosiderin deposition in the subcutaneous plane from lysed RBCs results into Eczema, Dermatitis, Lipodermatosclerosis, Fibrosis, Anoxia and finally result in ulceration.^[1]

Venous ulcer size is large shallow, vertically and oval in shape, irregular margin, sloping edge, floor cover with unhealthy granulation tissue, base is fix, painless, serous discharge.^[2] Venous ulcer is usually recurrent, and an open ulcer can persist for weeks to many years. Severe complications include cellulitis, osteomyelitis.

Conservative treatment consists of combination of topical dressings, compression therapy, foot elevation, and antibiotics. Surgical management consist of ultrasound - guided foam sclerotherapy, Endo venous laser ablation, Radio Frequency ablation, Saphenofemoral ligation and long saphenous vein stripping, skin grafting, etc.^[3]

In Ayurveda prakupitavata dosha compresses, raises and squeezes the network of veins. Acharya Sushruta considers the rakta as dosha because the blood plays main role in the pathogenesis of many disorders. Because blood vessels are involved, there is definitive involvement of pitta dosha. Along with pitta, vata alone or vata and kapha are vitiated in the site of affliction i.e., in weight bearing area like calf and ankle. Ultimately the imbalanced doshas disturb the vessels and blood of that particular area. Thus, the blood is stagnated due to obstruction of the pathway of the blood vessels leading to the cause of dushta vrana.^[4] Vranabasti is the modified form of kati basti or janu basti. It is unique procedure wherte retaining of warm medicated oil with in specially form frame over the wound. It performs the action of Shodhana & Ropana.^[5]

Case Report

A 26- Year- old male patient presented with wound over medial aspect of lower 1/3rd of lower leg since 3 month. Pt had H/O multiple varicosities over entire left leg. Before three months gradually he developed eczematic changes with itching sensation over medial aspect of lower 1/3rd of left leg leads to ulcer associated with pain, swelling, blackish discoloration around lower 1/3rd of leg and ankle region Since 3 month. He had no H/O systemic disease. Hence, He approached Shalya tantra OPD of Taranath Government Ayurveda Medical College, Ballari for investigation.

Personal History

Diet - Vegetarian

Appetite - Good

Bowel - 1-2 times/day

Micturition - 3-4 times/day

Sleep - Disturbed

Habit - No h/o smoking, tobacco chewing.

General Examination

Pallor - Absent

Lymphadenopathy - Absent

Icterus - Absent

Eodema - Present

Cyanosis - Absent

Clubbing - Absent

Systemic examination

CVS - S1 S2 heard, no any added sounds

RS - Normal vesicular breath sounds

P/A - Soft, normal bowel sounds, no organomegaly.

Local examination

Inspection

Site - Over the medial 1/3rd of left lower limb.

Size - 2cm×3cm

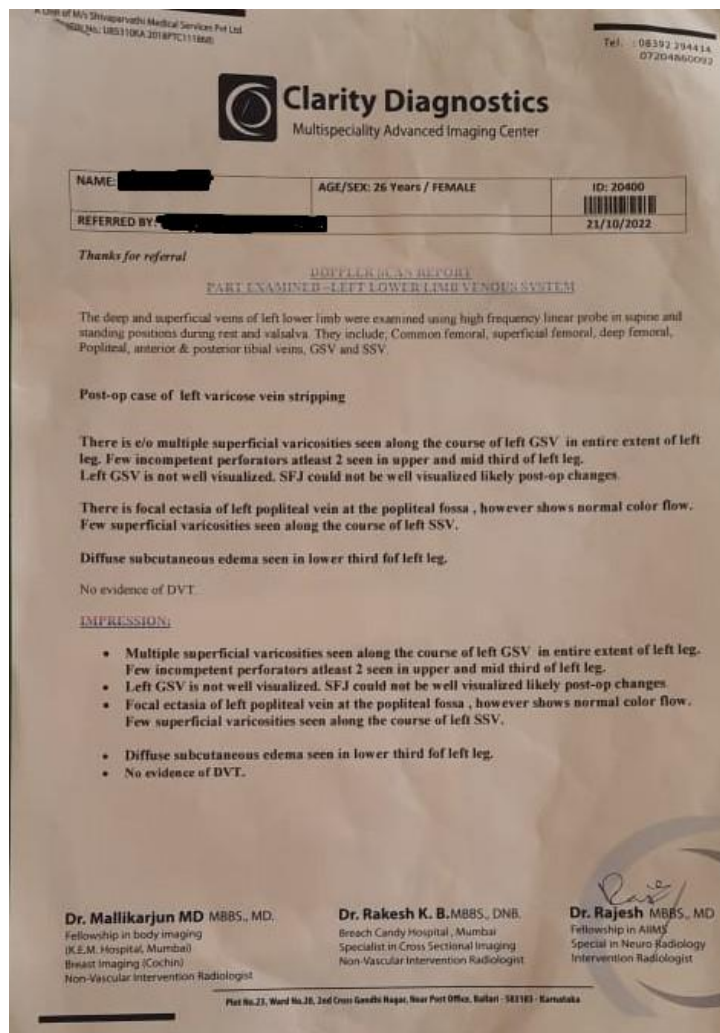
Shape - Oval

Edge - Sloping edge

Floor - Unhealthy tissue
Surrounding area - Blackish discoloration
Discharge - Absent

Investigations

HB -14.7gm% HIV- negative
TC - 6.4 cell/mm³
Platelet count - 6.4cells/mm³ HbsAg - negative
Clotting time - 5 min
Bleeding time - 3 min



Diagnosis

A venous ulcer - Dustavrana

Treatment given:

vrnanabasti for 5days was done with jatyaditaila.

The wound was cleaned with normal saline and applied jatyaditaila with sterile gauge piece & sterile dressing was done for 10 days.

Syp Sahacharaadikashaya BD A/F

Tab Kaishoraguggulu TID A/F

Cap viscovas TID A/F

Each for 21 days given.

Syp khadiraaristha BD

Oil sahacharaaditaila for L/A

Advise- Elevation of leg above the level of Heart.

Within 21-24 Days the dusthavrana was turned into shuddhavrana with marked reduction in size, pain,ulcer with healthy granulation tissue.

Figure 1



Table 1: Improvement in Subjective & Objective Parameters

Symptoms	Day 1	Day 7	Day 14	Day 21
Pain	Moderate	++	+	-
Localized Oedema	Present	+++	++	+
Itching	Present	++	-	-
Hyperpigmentation	Blackish Discoloration surrounding skin	++	++	+
Ulcer Size	2×3cm	2×3 cm	1×2 cm	Healed
Granulation Tissue	Covered with unhealthy granulation tissue with mild slough	++	+	Healthy granulation tissue

Foot Note- Mild (+)

Moderate (++)

Severe (+++)

Discussion

Vranabasti- it mainly depends upon the factors like nature of drugs, temperature of medicaments, drug & wound contact time which helps in both Shodhanartha & Ropanartha. Here for Shodhanartha normal saline and Jatyaditaila is used which helps in removal of slough, reduces discharge, oedema, removes impediments of wound, increase tissue perfusion, promotes angiogenesis & epithelisation.

For Ropanartha the taila used acts by virtue of its lipid keep the wound moist, Pliable & protects wound from external mechanic stress & act as barrier for secondary infection, helps in re-epithelisation, migration of endothelial cells, dermal myofibroblast.

Jatyaditaila - is tikta & kashaya rasa pradhana, pitta kaphahara, have vranashodhana, ropana, pootihara, vedanasthapana properties. Due to presence of salicylic acid in Jaati it acts as antibacterial, anti-inflammatory, & antifungal. In Nimba the chemical constituentnimbine, margosine has anti-inflammatory, analgesic & antibacterial action. Yastimadhu is having wound healing property. Haridra has anti-inflammatory, anti-microbial & antibacterial property. Tutta helps in lekshana karma. Tilataila, the base provides a better medium for tissue repair. Overall, it's the combined effect of the ingredients which brings about the healing effect.

Kaishoraguggulu-

Guggulu possesses Anabhisyandhi, Snigdha, & Srotosuddhikaraka properties. Drugs like danti, triphala, vidanga & guggulu are having rookshana properties are believed to act on prakupita kapha dosha & medas. Teekshna & ushna drugs like pippali, vidanga, shunthi, maricha, danti are act as srotovishodhana.

Sahacharadikashaya & taila-

Sahacharadi Kashaya and taila are used in the treatment of SiragataVata. having Vatakaphahara, Raktashodhana, Shothahara, Kanduhara, Vedanaprashamana actions helps in reducing most of the

symptoms associated with Sirajagranthi. The formulationis having pharmacologic actions such as Anti-inflammatory, anti-atherosclerotic, antiplatelet, antioxidant, antibacterial, antifungal, antitumoral, carbonyl reductase activity, anti-serotonergic, analgesic, inotropic (altering the force of muscular contractions), inhibition of prostaglandin release, Spasmolytic, antiviral, antiseptic, cutaneous activity, immunomodulatory activity etc.

Viscovas-

The contents of the medicine reduce endothelial damage to arteries, reduce platelet aggregation and improves the arterial and venous circulation.

Conclusion

Vranabasti play a significant role in the management of wound by virtue of its shodhana&ropana property which influences on wound outcome.After use of jatyaditaila locally with vatahara&vranaropakadravyas internally wound was healed completely within 21 days.

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