CASE REPORT

Management of dusthavrana (Non healing Wound) by Ayurveda Medicine

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ABSTRACT:

Background: The break/loss/rupture of continuity of body tissue or part of body is called Vrana(Wound). Normally wounds are healed by itself if kept clean. Contamination of bacteria, insufficient blood supply, tissue tension and radiation are the local factors for delay in wound healing. Whereas general factors include malnutrition, malignant disease, diabetes and long-term consumption of steroids and cytotoxic drugs. Acharya Shushruta mentioned 60 upakrama for management of Vrana. Acharya charakaclassified vrana into 20 types among them dusthavrana is one of them. In the case 35yr female presented at opd with complain of non-healing wound since 6 months at bilateral lower limbs with signs and symptoms of slough, pus discharge and pain. Ayurvedic management was done for 30 days which cured all the sign and symptoms. Ayurvedic management includes prakshalana by panchavalkalkwath, nimbataila for local application and arogyabardinivati, mahamanjisthakwath and kaishorguggulu per oral. Dusthavrana can be treated by ayurvedic management like panchavalkalkwatha, nimbataila, Arogyavardinivatikaishorguggulu, mahamanjisthakwath.

Keywords: Ayurveda, Dushtavrana, Non-Healing Ulcer, Panchavalkalkwatha,

INTRODUCTION:

Vrana (Wound) is healed by three way 1st is primary intention, second by secondary intention and third by tertiary intention. Sometimes wound refuses to heal and these types of wound is known as non healing wound. Wound healing process depends on both local

and general factors. In some ayurvedic literature vran is classified in 2 types sadyavrana and dushtavrana.

Wound healing is the normal phenomenon of body which involves the sequential process of phagocytosis. But at times when infection is massive surface area of wound is very large necrotic area and sloughs are formed in very

Access the article online

Quick Response Code

www.thehealerjournal.org

DOI: 10.51649/healer.45

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Submitted: 18.11.2020

Received: 20.01.2021

Revised: 21.01.2021

Accepted: 26.01.2021

large amount due to which auto cleansing activity of body becomes inadequate. Slough formation, pus discharge, foul smell, edema, chronicity of wound are the main clinical features of dushtavrana. According to acharya Shushruta there are sixty (shasti) upakramas of vranachikitsa. In this case upakramas like prakshalana, lepa and kashayapaana are done to treat dushtavrana. Prakshalana by panchawalkalkwath, local application of neem oil, per oral intake of Aarogyavardhinivati (2 tab bd) and daily intake of mahamanjisthakwath 20ml twice a day with equal amount of water for 30 days is given to the patient. All the used ayurvedic regimen has anti microbial, anti inflammatory and wound healing nature due to which dushtavrana is treated.

CASE REPORT

A 35 year old female came to our hospital with complain of unhealed wound since 6 months. There was history of pain, pus discharge, foul smelling and slough formation, slight swelling and no history of fever. There was no any aggravating and elevating factors. Patient was treated with antibiotic ointment and cleansing with povidine iodine was done but no improvement was seen. There was no history of diabetes, hypertension, malignancies and metabolic disorder. There was no any significant family history. All routine investigations were normal. Local examination: The floor was covered by slough, edges were inflamed. There was tenderness with surrounding indurations and local rise in temperature. On the basis of local examination and history given by patient it was diagnosed as dushtavarana (non healing wound).

MATERIALS AND METHODS:

Materials required: Panchawalkalakwatha, neem oil, sterile gauze, sterile bandage, 10ml syringe. At first patient was counselled about the case and consent was taken for the procedure. Vranaprakshalana was done twice a day by panchawalkalakwath. After prakshalana local application of neem oil was done. Dressing was done with sterile gauze and bandage. This process was continued for 30 days regularly.

Ayurvedic medicines used are:

Aarogyavardhinivati 2 tab twice a day for one month

Tab kaishor guggul 2 tab twice a day for one month with

Mahamanjistha 20 ml twice a day with equal amount of water for one month

Before

Before

After

Result and discussion:

Most of all the clinical features of dushtavranawere cured

by the end of one month. With follow up for a period of one month patient has shown no sign of recurrence. At the end of treatment purulent discharge was completely absent due to sodhana and ropana action of neem oil. Vranasodhana and vranaropana property of neem oil facilitates wound cleansing and wound healing. Panchavalkalkwath has vranaropana, sothahar, upadamshhara, visarpahara properties due to which fast wound healing takes place. Manjistha is well known for its ropana property in different ayurvedic literature. Kaishor guggul has anti allergic, anti bacterial and blood purifying properties due to which non healing wounds are cured. Arogyavardhinivati is classical herbomineral preparation which has mainly anti inflammatory action. In the case all the symptoms and clinical features of dushtavrana (non healing wound) was cleared.

CONCLUSION:

Ayurvedic management in dushtavrana include: Prakshalan by panchavalkalkwath, Local application of neem oil, Arogyavardhinivati, Kaishor guggul, Mahamanjisthakwath. After following the above regimen for 30 days by the end all the symptoms and clinical features were absent and hence it can be concluded that dushtavrana can be treated by ayurvedic regimen.

ABBREVIATIONS: Not applicable

ACKNOWLEDGEMENTS: Not Applicable

CONFLICT OF INTEREST: Author declares that there is no conflict of interest.

SOURCE OF SUPPORT: None

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How to cite this article:

Koju P, Shah B, Shah RK, Prasad SM, Management of dusthavrana (Non healing Wound) by Ayurveda Medicine, The Healer Journal, 2021; 2(1): 123-125.