

Case Report

A Case Study of *Dushta Varna* with *Ayurveda* Management W. S. R. To *Atrophie Blanche*

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ABSTRACT

Skin is outer layer of our body having a lot of importance including cosmetic value. Any lesion shown over skin was important cause for physical and mental blow. Disruption of normal structure and function of skin and underlying soft tissue is wound; it is caused by trauma, infection & chronic mechanical stress. It can be divided chronologically in acute & chronic. Factors needed for healing wound are proper vascular supply, cure infection, free of necrotic tissue & moist, but some wounds not healed by proper management in bioscience and this condition is equated with *Dushta Vrana*. *Acharya Sushruta* mentioned sixty treatment modalities to treat *Vrana*. Here we present a case of *Dushta Varna* (Non-healing wound) & successful management by *Shodhana* (*Virechana*) therapy along with palliative treatment.

Keywords: Wound, *Dushta Vrana*, *Shodhana*.

INTRODUCTION

Discontinuation of skin & its underlying soft tissue is *Vrana*. Long standing and unhealed *Vrana* is known as *Dushta-Vrana*. There are different etiological factors for *Vrana*. One of them is venous ulcer. Venous hypertension of varying severity is a common consequence of venous disorder. Raised venous pressure will cause a corresponding increase in capillary pressure and if sustained over long periods with inadequate relief, will cause characteristic changes in the skin and subcutaneous tissues. [1] It is cause for progressive deterioration in skin nutrition leads to small areas of tissue death which coalesces to form an ulcer. It will always be surrounded by pigmented skin and at least some induration. In long standing ulcer the

neighbouring skin may also show a characteristic white scarring known as *atrophie blanche*. [2] It is different than other typical ulcer from characteristic and its treatment. *Acharya Sushruta* mentioned that wound appear on skin will be healed soon but self-appeared on other *Dhatu* else skin as *Mamsa* (muscle) *Shira* are difficult to treat. [3] *Acharya Sushruta* described 60 treatment modalities to treat different *Vrana* [4] (wound). They are highly beneficial in present era. Here we present a single case study on non-healing wound (*Atrophie blanche*) with significant result.

CASE REPORT

A male patient aged about 18 years visited in OPD of *Panchakarma* (OPD. Reg. No. 1102082018 & date 02/08/2018)

presenting with complaints of ulceration on dorsum of foot bilaterally, more in right side, itching, peripheral blackish discoloration, oozing of serous fluids, & foul smell, from last five years. Lesion started five years ago with bluish discoloration on dorsum of foot than it gets reddish with blister, that burst after some time & residue a wound and it gradually spread over skin with itching, serous watery secretion and foul smell. For treatment he went to allopathy hospital & investigations skin biopsy was done for diagnosis, reports are shown in table-1 & after treatment he got mild symptomatic relief but it relapses again in rainy season, it happens again in next year. Therefore, he consulted in NIA

hospital for treatment to get relief from lesion. After examination in OPD of *Panchkarma*, he was diagnosed as *Pitta-Kaphaja Dushta Varna* & treated on the line of management of *Dushta-Varna* with *Pitta-Kapha Shamana*.

On physical examination, the general condition of the patient was good; his pulse was 82/min, regular; BP was 120/70 mm of Hg and respiratory rate was 20/min regular. There were no past history of any type of allergy, diabetes and hypertension. *Astavidha Pariksha* of patient was done and it's found normal. General routine blood investigations are normal except increased ESR-47, Lymphocyte-44 and positive- CRP.

Table 1- Investigation

Skin biopsy dorsum of right foot	Date- 10/10/2013	Hyperkeratosis with subcorneal crust formation, the vesicle is filled with hemorrhagic fluid, focal thinning and spongiosis of epidermis with subepidermal cleavage and vesicle, vesicle is filled with hemorrhagic fluid and infiltration by neutrophils, eosinophils and few chronic inflammatory cells, Dermis shows edema and marked perivascular infiltration by acute and chronic infiltration cells with focal extravasation of RBC and deposition of pink eosinophilic material around blood vessels.
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METHODOLOGY

Plan of study: National Institute of Ayurveda, hospital Jaipur and single case study.

Ayurveda intervention-

1. Details of Oral drugs and *Panchkarma* procedure:

Initially oral medication was given 7 days to patient for *Pachana*. *Kaishoor Guggulu* 2 tablets (500 mg each tablet) tds, *Arogyavardhani Vati* 2 tablet (250mg each tablet) tds, *Panchkola Churna* 4 g bd and *Jatyadi Taila* for local application. In second visit (09/08/18) continue initial medication with *ChopchiniChurna* 2g, *Rasmanikya* 125mg, *Vrihat Manjishthadi Churna* 3g bd, syp. *Amritarishta* 20 ml bd with equal amount of water and *Panchvakala Kwath* [5] *Parishek* two times in day. All this medication is continuing for one month.

Shodhana Therapy-After initial medication *Shodhana* (*Virechana*) was planned and patient was admitted in NIA hospital (IPD No. 3294 & date 06/09/18). *Abhayanter SnehaPana* was given with increasing dose from 30ml to 150 ml. After

assessment of *Samyak Snigdha Lakshana*, *Sarwanga Abhyanga* & *Swedana* was given for 4 days (14/09/18 to 17/09/18). *Virechana* was given with *Trivrita Avaleha* (60gm) at morning 10:00 AM (17/09/18) with *Draksha Panaka Anupana*. First *Vega* starts at 11:20 AM and completed at 4:30 PM with total 16 *Vega*. *Sansarjana Krama* (scheduled diet regimen) was given for 5 days. Patient was discharged on 19/09/2018.

Follow up treatment-

Patient came to hospital again for follow up (OPD. No. 41408102018 & date 08/10/2018). After assessment medicine was given with diet precaution. *Kaishoor Guggulu* 2 tab.(500mg each tab) tds, *Arogyavardhani Vati* 2 tab (250mg each tab) tds, *ChopchiniChurna* 2g, *Rasmanikya* 125 mg, *Vrihat Manjishthadi Churna* 3g bd, *Mukhakantakar Lepa* [6] mentioned in *Sharangdhar Samhita* for local application. All these medications were given for one month with weekly assessment.

Patient visited in OPD for follow-up with OPD No. 33515112018 & date 15/11/2018), after proper assessment given medicine was advised *Kaishoor Guggulu* 2

tab. (500mg each tab) tds, *Arogyavardhani Vati* 2 tab (250mg each tab) tds, Syp. *Khadirarishta* 20ml bd, *Ashwagandha Churna* 2g, *Avipattikar Churna* 2g, *Pittantakayoga* 1g bd, *Nishotha Churna* 3g, *Kutki Churna* 3g hs, and *Mukhakantikar Lepa* 20g od for local application.

Table- 2: Panchkarma Procedure & Internal medication

Internal medication							
First treatment plan (02/08/2018-08/08/2018)							
Sr. No.	Drug	Dose					Anupana
1.	<i>Kashoor Guggulu</i>	2 tablets thrice a day					Lukewarm water
2.	<i>Arogyavardhani Vati</i>	2 tablets thrice a day					Lukewarm water
3.	<i>PanchkolaChurna</i>	4g twice a day					Lukewarm water
4.	<i>Jatyadi Taila</i>	For local application					
Second treatment plan (09/08/2018-08/09/2018)							
1.	<i>Kashor Guggulu</i>	2 tablets thrice a day					Lukewarm water
2.	<i>Arogyavardhani Vati</i>	2 tablets thrice a day					Lukewarm water
3.	<i>Panchkola Churna</i>	4g twice a day					Lukewarm water
4.	<i>Chopchini Churna (Smilexchina)</i> (2 gm), <i>Rasmanikya</i> 125mg <i>Vrihat Manjishthadi Churna</i> 3 gm	5.125gm twice a day					lukewarm water
5.	Syp. <i>Amritarishta</i> 4 TSF	4 TSF twice a day					With equal amount of water after meal
6.	<i>Panchvalkala Kwath</i>	10 g twice a day					For <i>Parisheka</i> (watering over wound)
7.	<i>Jatyadi Taila</i>	For Local Application					
8.	<i>Nishotha Churna</i> 3g (<i>Operculinaturpethum</i>) <i>Kutki Churna</i> 2g (<i>Picrorhizakurrooa</i>)	5 gm at night					With lukewarm water
Third treatment plan (09/09/2018-23/09/2018)							
Virechana Karma							Assessment
09/09/2018 to 13/09/2018	<i>Snehpana(Mahatikta Ghrita)</i>						<i>Till Samyaka Snigdha Lakshana attained</i>
	Date	09/09/2018	10/09/2018	11/09/2018	12/09/2018	13/09/2018	
	Amount	30ml	60 ml	90 ml	120 ml	150 ml	
	Intake time	6:50 AM	7:00 AM	6:55 AM	7:00 AM	6:50 AM	
	Appetite time	12:30PM	1:30PM	1:30PM	2:30 PM	4:00 PM	
	Stool colour & consistancy	Normal & Solid	Normal & Solid	Normal & Solid	Normal & Semi-Liquid	Normal & Liquid	
14/09/2018 to 17/09/2018	<i>Sarwanga Abhayanga & Swedana</i>						For 4 days
17/09/2018	<i>Virechana (Trivrita Avaleha- 60g)</i>						Total- 16 Vega
17/08/2018-21/09/2018	<i>Sansarjana Karma</i>						For 5 days
Fourth treatment plan (08/10/2018-14/11/2018)							
1.	<i>Kaishoor Guggulu</i>	2 tablets thrice a day					Lukewarm water
2.	<i>Arogyavardhani Vati</i>	2 tablets thrice a day					Lukewarm water
3.	<i>Chopchini Churna (Smilexchina)</i> (2 gm), <i>Rasmanikya</i> 125mg <i>Vrihat Manjishthadi Churna</i> 3 gm	5.125gm twice a day					Lukewarm water
4.	Syp. <i>Amritarishta</i> 4 TSF	4 TSF twice a day					With equal amount of water after meal
5.	<i>Mukhakantikar Lepa</i>	20g one a day					Make a past with milk and apply over scar mark for 40 minutes
Fifth treatment plan (15/11/2018-19/12/2018)							
1.	<i>Kaishoor Guggulu</i>	2 tablets thrice a day					Lukewarm water
2.	<i>Arogyavardhani Vati</i>	2 tablets thrice a day					Lukewarm water
3.	Syp. <i>Khadirarishta</i>	4 TSF twice a day					With equal amount of water after meal
4.	<i>Ashwagandha Churna</i> (<i>Withaniasomnifera</i>)2g <i>Avipattikar Churna</i> 2g <i>Pittantak Yog</i> 1gm	5g twice a day					Lukewarm water
5.	<i>Mukhakantikar Lepa</i>	20g one a day					Make a past with milk and apply over scar mark for 40 minutes
6.	<i>Nishotha Churna</i> 3g (<i>Operculinaturpethum</i>) <i>Kutki Churna</i> 2g (<i>Picrorhizakurrooa</i>)	5 gm at night					With lukewarm water

Table 3-OBSERVATION OF WOUND

Assess. Parameter	Before treatment (02/08/2018)	Before virechana (08/09/2018)	After <i>Sansarjankrama</i> (27/09/2018)	After one month of virechana (25/10/2018)	After two month of virechana (29/11/2018)
Itching	Moderate	Mild	Mild	NP	NP
Discharge	Present	NP	NP	NP	NP
Foul smell	Present	NP	NP	NP	Np
Wound size	6''x 3''	3''x1''	2''x1''	Healed	Healed
Discolouration	Peripheral black coloured skin	Blackish scare mark	Blackish scar mark	Mild lightening observed	Light blackish discolouration residue



RESULT & DISCUSSION

Dushta-Varna is one of the type of *Vrana* with the complication of difficult to treat but *Acharya Sushruta* described 60 treatment modalities to treat different type of *Vrana*. In this case according to symptoms we assess this one is *Pitta-Kaphaja Dushta Vrana* with *Agnimandhya*. So, our management protocol was *Agnidipana* with *Pitta- Kapha Shamana*. In *Shasti Upkrama* (60 treatment modalities) first one is *Apatarpana*, [7] we start with *Apatarpana* by giving oral medicine like *Panchkola Churna*, *Arogyavardhani Vati*, & *Kaishoor Guggulu* with proper diet regimen. *Panchakola* [8] having *Deepana* & *Vata-Kapha Shamaka* properties. *Arogyavardhani Vati* [9] are indicated for all type of skin disease with *Deepana* & *Pachana* properties. *Kaishoor Guggulu* [10] is indicated in *Vrana* (wound) & *Mandagni*.

After assessing *Agni* & *Bala* we add *Chopachini Churna*, *Rasmanikya*, *Vrihat Manjishthadi Churna*, with *Panchavalkala Kwatha Parisheka*. *Rasmanikya* [11] is indicated in all type of skin disease, *Manjishtha* is main ingredient in *Vrihat Manjishthadi Churna* having wound healing properties [12] and anti-inflammatory [13] properties. *Chopchini Churna* [14] was proven that it has blood purifying, immunomodulator and antimutagenic property. *Guduchi* [15] is main ingredient of *Amritarishta* having immunomodulator property. *Panchavalkala Kwath* [16] having *Vranapakshalana*, *Vranaropana*, & *Shothahara* properties. *Jatyaditaila* [17] is indicated for *Vranaropana*. *Paka* is cardinal sign for vitiated *Pitta* [18] & *Virechana* is best treatment modality for vitiated *Pitta*, [19] thus planed for *Virechana Karma*. After *Virechana Karma* *Kaishore Guggul*,

Arogyavardhani Vati will be continue with *Khadirarishtha & Ashwagandha Churna*, *Avipattikar Churna*, *Pittantaka Yoga*. *Khadirarishtha* is indicated in all skin disease. [20] *Ashwagandha* also having *RasayanGuna & Balya*. [21] *Avipattikar Churna* is indicated in *Agnimandhya-Janya Roga*. [22] *Swarna Gairika* is main ingredient in *Pittantaka Yoga* is *Vishghna* in properties. [23] *Mukhakantikar Lepa* was advice for Pasting Over Blackish scar mark because all ingredients are *Varnya* in nature.

CONCLUSION

Some conditions of *Vrana* are really difficult to treat, when after advanced management protocol available in bioscience. But by using *Ayurvedic* concept of *Vrana* management we achieve significant improvement in this type of *Dushta Vrana* condition. There is a lot of scope for further research in this field for betterment of patient & there hope for wellbeing.

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