

## EFFECT OF JALAUKA AVACHARAN ON VATKANTAKA WITH SPECIAL REFERENCE TO ACHILLES TENDINITIS: A CASE STUDY

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### ABSTRACT

Vatkantaka, caused by vitiated Vata at Gulpha Sandhi as described under Vatavyadhi in Ayurvedic texts, leads to Shool (pain), Shoth (swelling), and Dah (burning sensation) at the Gulpha Sandhi. This condition can be correlated with Achilles Tendinitis in modern science. For the treatment of Vatkantaka, Raktavasechan has been indicated by Acharya Bhavaprakash. A 60-year-old male patient had complaints of pain, swelling, and burning sensation at the Gulpha Parshva Pradesh for 3-4 months. Pain increased during the first few steps after waking up from bed. The patient took oral painkillers and IM injections for relief. He underwent Jalauka Avacharana treatment with 2 leeches applied to the Gulpha Parshva Pradesh after 7 days for 3 consecutive sittings. After Jalauka Avacharana, the patient got relief from complaints.

**KEYWORDS:** Vatkantaka, Jalauka Avacharana, Achilles Tendinitis, Leech Therapy.

### INTRODUCTION

Vatkantaka is classified under Vat Vyadhi and is caused due to vitiated Vata dosha. Acharya Sushruta has mentioned the disease in Nidanasthana (su.ni1) in the Vatavyadhi Nidanadhyaya. Acharya Vagbhata has mentioned the disease in Vagbhata Nidanadhyaya (vag.ni. 15/53). Acharya Charaka has mentioned the disease in Chikitsasthana (Cha.Chi. 28) in the Vatavyadiadhyaya. Vatkantaka is mainly caused due to vitiated Vata dosha, occurring due to frequent walking on uneven ground or placing the feet improperly. This condition can be

correlated with Achilles Tendinitis. Achilles Tendinitis involves acute inflammation of the tendon, causing pain, swelling, and irritation. It typically involves the lower portion of the tendon where it attaches (inserts) to the heel bone (calcaneus). Achilles Tendinitis is most common in runners and workers who stand for prolonged periods. It can occur in any age group. Vatkantaka is Snayu-Asti-Sandhi Ashrita. According to Acharya Bhavaprakash, Raktavasechan has been indicated for Vatkantaka (Bhav.Madhyam. 24/161).

## A CASE REPORT

Patient Name- ABC

Age- 60years

Sex- Male

Patient Id- PT/24/2796

Address - Khaparidev chs b 806 ambedkar marg parel 12

C/o- Pain, swelling, Burning sensation at Gulpha parshwa pradesha since 3-4 months

Increase in pain during first few steps waking up from bed.

Taken oral pain killers and IM injections for it but got only temporary relief. Hence to take Ayurvedic Panchakarma treatment he came to our Opd of Panchakarma department.

Past History-No H/O- HTN/DM/KOCH'S

No Any surgical history

- **Personal History**

Occupation- Civil engineer work at construction site

Addiction- No Any

Family History- No any evidence of such symptoms in family.

- **General examination**

General condition- Good

BP- 140/90mmhg

P- 84/min

Spo2- 98% on RA

Pallor- Absent

- **Systemic Examination**

CVS - S1S2 normal

CNS- conscious oriented

RS- AEBE clear

P/A- Soft, Non tender

- **Ashtavidh Parikshan**

Nadi- Vata

Mala- prakrut

Mutra- Samyak pravrutti

Jivha- -Niram

Shabda – Spashta

Sparsha – samashitoshana

Drik- Prakrut

Aakruti- Madhyam

- **Local Examination**

Examination of both Gulpha sandhi(ankle) was done.

**Table 1:**

Examination	Symptoms	RIGHT	LEFT
INSPECTION	Swelling	Absent	Present
Redness	absent	Absent	Absent
PALPATION	Tenderness	Absent	Present
Warmth	absent	Absent	Absent
ROM	Dorsiflexion	Painless	Painful
Plantarflexion	painless	Painless	Painful

### Special Tests

- Thompson Test- Negative Both Ankle (To rule out any tendon injury/rupture)
- Heel Rise Test- positive for left ankle (pain during calf/tendon stretching)
- ARC test- Negative (no Mid portion Achilles Tendinopathy)

### INVESTIGATION

- X-ray left ankle ap/lat

### DIAGNOSIS

Based on clinical findings the patient was diagnosed with Vatkantaka (Achilles Tendinitis).

## MATERIAL AND METHOD

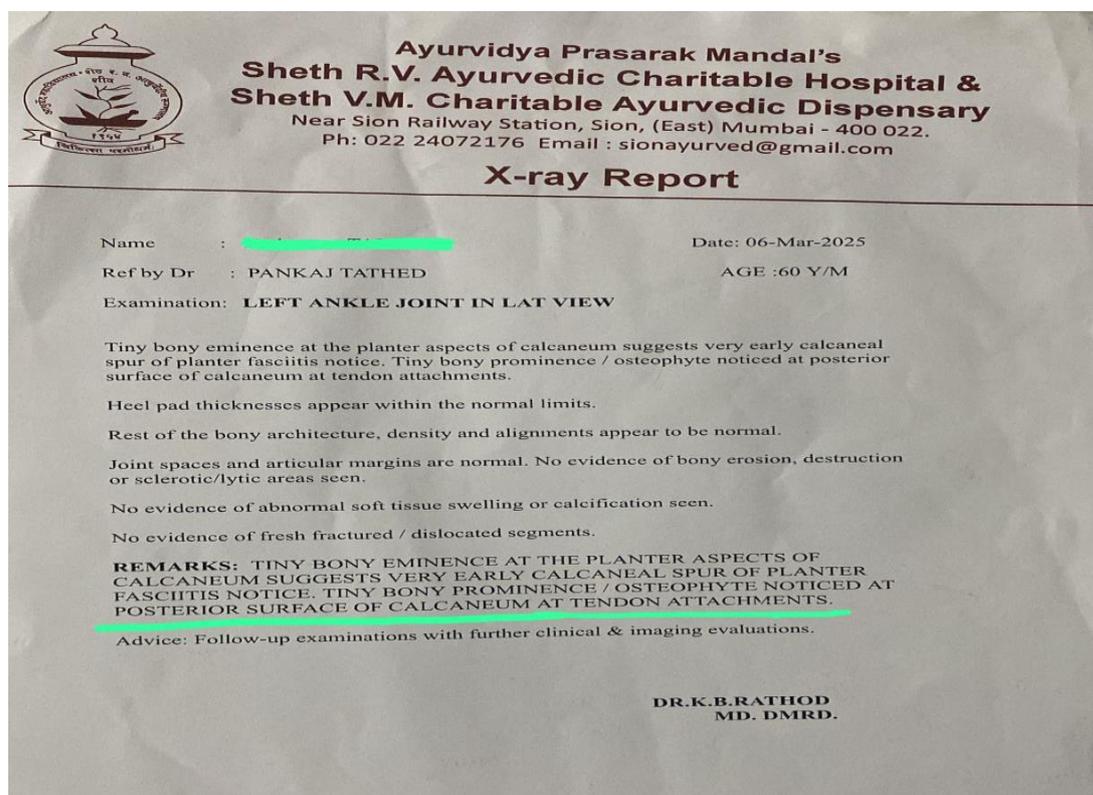
### Therapeutic Intervention

#### Jalauka Avacharana

The patient was given 3 consecutive sitting of 2 Jalauka Avacharana at a gap of 7days.No oral medication was given during the treatment.

## MATERIAL

Gloves, Haridra churna, kidney tray, Gauze pieces, cotton, Rolling bandage, Micopore tape, mackintosh sheet.



### Pre-procedure (Purva Karma)

- Informed written consent was taken from the patient after thoroughly explaining the details of the Jalauka Avacharana procedure.
- The patient was advised to take a light meal before the procedure.
- The patient was asked to lie on the bed on the right lateral side.
- Two Jalauka were kept in Haridra mixed water until they became active and then kept in clean water for 2-3 minutes.

**Procedure (Pradhan Karma)**

- Jalauka were applied over the left (vaam) Gulpha Sandhi (ankle).
- The Jalauka sucked blood, forming a horseshoe shape.
- A wet gauze was kept over the Jalauka to keep its body moist.
- The middle portion of the Jalauka slowly became swollen

**Post-procedure (Paschat Karma)**

- After the Jalauka dropped off, i.e., the procedure was done.
- A Y-shaped mark occurred at the sucking site.
- Wound dressing was done using Haridra churna after letting some blood come out.
- Then Jalauka vaman was done by using haridra churna.
- The patient was asked to change the dressing after 6-8 hours.

**Assessment Criteria****Table No. 2:**

Sr no	Signs And Symptoms	Grades			
		0	1	2	3
1	Pain	No pain	Mild	Moderate	Severe

			(Not disturbing daily routine activity and pain only during morning hours)	(Continuous pain in the morning hours and walking after rest)	(Pain throughout the day and disturbing daily routine)
2	Tenderness	No tenderness	Pain on deep pressure	Pain on slight pressure	Pain on touch
3	Swelling	No swelling	Mild Swelling	Moderate Swelling	Severe Swelling
4	Burning Sensation	No burning sensation	Mild Burning Sensation	Moderate Burning	Severe Burning Sensation
5	Redness	No redness	Mild Redness	Moderate Redness	Severe Redness

## RESULTS/ OBSERVATION

### Therapeutic assessment

Table No. 3:

Therapeutic assessment Sr. No	Signs and symptoms	Before Treatment	1st sitting (6/3/25)	2nd sitting (13/3/25)	3rd sitting (20/3/25)
1	Pain	2	1	1	0
2	Tenderness	2	1	1	0
3	Swelling	2	2	1	0
4	Burning Sensation	1	0	0	0
5	Redness	0	0	0	0

After 3 consecutive sitting of Jalauka Avacharana, patient got relief from symptoms. Patient was assessed for further 15 days, There was no recurrence of symptoms.

## DISCUSSION

After three consecutive sittings of Jalauka Avacharana, the patient got relief from symptoms. Vatkantaka can be correlated with Achilles Tendinitis. Since Sira and Kandara (tendon) are Upadhatu of Rakta Dhatu, diseases not cured by Sheeta (cold), Ushna (hot), Snigdha (smooth) and Ruksha (dry) Aushadha treatment are stated as Rakta Dushti Janya Vikara (cha.su.24/7). Therefore, Raktavasechan has been indicated for the treatment of Rakta Dhatu-related disorders. Bhavaprakash has specifically indicated Raktavasechan in the treatment of Vatkantaka. Jalauka helps reduce Shoth (swelling), Shool (pain), and Daah (burning sensation) due to the presence of special anti-inflammatory and anesthetic agents in the saliva of leeches. Thus, after Jalauka application in Vatkantaka (Achilles Tendinitis) the patient experienced relief from symptoms.

Vatkantaka (Achilles Tendinitis)

↓□

Kandara(Tendon)

↓□

Rakta Updhatu

↓□

Raktachya Ashryayane Pitta

↓□

For Rakta/Pitta

↓□

Raktavasechan(Jalauka)

## CONCLUSION

Based on this case, It can be concluded that Jalauka Avacharan can be performed for the treatment of Vatkantaka (Achilles Tendinitis).

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