

**CASE STUDY OF MANAGEMENT OF HIDRADENITIS
SUPPURATIVA BY KSHARSUTRA****Dr. Sabade Pradnya Prakash***

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Article Received on
18 June 2017,

Revised on 09 July 2017,
Accepted on 30 July 2017

DOI: 10.20959/wjpr20178-9138

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ABSTRACT

Hidradenitis Suppurativa (HS) is also called acne inversa, is a long term skin disease characterised by clusters of abscesses or subcutaneous boil-like infections (often free of actual bacteria) that most commonly affects the underarms, under the breasts, inner thighs, buttocks and groin. Outbreaks are painful and may persist for years with interspersed periods of inflammation, often culminating in sudden drainage of pus. Data presented in this report is apparently a case study of its kind in surgical literature where a female patient with age of 28 years, who was suffering from HS at both the axillary regions, since last 4 years. She took the treatment from all modern skin specialists and consumed lots of medicines including anti-inflammatory,

antibiotics, steroids-drugs and local ointments. But she did not get relief from above modern treatment. The main purpose of this study was to cure this HS with advanced modalities in Ayurved, to overcome the hurdles and complications caused by the modern therapy. Ksharsutra was inserted inside the sinus tract. Patient was called for follow up in every week once. Ksharsutra was applied once a week after every 7th day. The procedure was followed for 28 weeks, with regular dressings and Ksharsutra application. It was observed that Ksharsutra helps in proper drainage and simultaneous healing of HS sinuses, causing debridement, de-sloughing of tract and chemical cauterisation. It resulted in complete healing of tract avoiding its recurrence. Thus Ksharsutra proved the promising effect in the management of HS.

KEYWORDS: Ksharsutra, Hidradenitis Suppurativa(HS), Parasurgical procedure, wound abscess, nadvirana.

INTRODUCTION

Hidradenitis Suppurativa (HS) is also called acne inversa, is a long term skin disease characterised by clusters of abscesses or subcutaneous boil-like infections (often free of actual bacteria) that most commonly affects the underarms, under the breasts, inner thighs, buttocks and groin. Outbreaks are painful and may persist for years with interspersed periods of inflammation, often culminating in sudden drainage of pus.

A sinus is a blind tract leading from surface down to the tissues. There is a persistent pus discharge from this tracts in HS. It is having one visible opening over surface. This is a rare clinical presentation occurring with pus discharge even after, even though many surgeons re operate it.

Persistent lesions may lead to the formation of sinus tracts, or tunnels connecting the abscesses or infections under the skin. At this stage, complete healing is usually not possible, and progression is variable, with some experiencing remission for months to years at a time, while others may worsen and require multiple surgeries.

Currently no cure nor any consistently effective treatment is known.

Hardly any data is available so as to cure HS.

Wound abscess may discharge spontaneously due to infective foci or unhygienic environment, inappropriate wound care and body tendency of wound healing. It may burst by tracking to the surface but may need drainage through the opening.

CAUSES

The cause of HS remains unknown and experts disagree over proposed causes.

Lesions occur in any body areas with hair follicles, although areas such as the axilla, groin, and perianal region are more commonly involved. This theory includes most of the following potential indicators:

- Post pubescent individuals are more likely to exhibit HS.
- Plugged apocrine (sweat) gland or hair follicle
- Excessive sweating
- Androgen dysfunction
- Genetic disorders that alter cell structure

- Patients with more advanced cases may find exercise intolerably painful, which may increase the rate of obesity among sufferers.

Ksharsutra acts as a specialty mode of non invasive para surgical procedure commonly used in Nadivrana, (can be correlated with sinus) and other medico-surgical conditions, as per the ancient texts and experts in Ayurved. Even patients get exhausted by visiting to the allopathic hospitals several times due to recurrence and repeated treatment. Hence it was a kind effort to heal this recurrent sinus with the help of Ksharsutra so as to avoid further complications of modern therapy.

MATERIALS AND METHODS

A 28years old female patient with well diagnosed case of Hidradenitis Suppurativa (HS) in both axillary regions was selected for the case study. She was suffering from the same from last 4 years and took all types of treatments in modern medicine. But still she got the recurrence and was getting no relief from the same and the condition was worsened.

Sinuses were cleaned properly with betadine, after the axillary region was shaved, cleaned and prepared. Pus discharge was drained.

Ksharsutra application was done once a week for 28 weeks with all aseptic precautions, regular dressing and proper hygiene maintained at the both axillary regions. We inserted Ksharsutra in multiple openings with pus discharge in HS in both axillary regions. Serous and pus discharge was drained completely every time with the help of sterile gauze rolling over it. Ksharsutra or medicated plug used for the therapy was made itself in the same institute according to the classical method of preparation i.e.11 coatings of Snuhi latex, 7 coatings of Apamarg Kshar, and 3 coatings of Haridra powder on Linen 20 thread, with appropriate sterilisation and temperature regulated in Ksharsutra preparation chamber.

Regular follow up was taken for the same. Case study was carried out in Surgery O.P.D. of M.A.Podar hospital, worli, Mumbai-18.

Informed written consent of the patient was taken before starting the treatment.

RESULTS AND DISCUSSION

It was observed that sinus was healed completely after 28 weeks. Total de sloughing and healing of the tract along with the drainage and healing of seroma was observed during the follow up.

Cavities in the small abscesses need proper cleaning after drainage and are encouraged to heal by secondary intension. All loculi need to be opened and curetted before resolution can occur. Persistent chronic abscess may lead to sinus formation. There is tissue sequestration and later calcification.

The exact standard treatment of HS is still challenging and yet to be introduced in modern medicine. We describe a patient with recurrent sinuses in HS even after frequent medication in modern science. Eventually she had a successful management of HS with the application of Ksharsutra.

Ksharsutra is having an excellent property of drainage and simultaneous healing of the sinus. It has a promising effect by its action of de sloughing, healing and chemical cauterisation. Snuhi latex and Apamarg Kshar applied to it, have an excellent property of curettage of unhealthy granulation tissue. Haridra is having an antibacterial, antiseptic and wound healing property, thus causing proper cleaning, debridement and healing of the tissue in sinus tract. Thus Ksharsutra helps in healing and de sloughing of the sinus tract leading to complete cure of HS destroying an unhealthy granulation tissue and preventing its recurrence.

CONCLUSION

Ksharsutra helps in proper drainage and simultaneous healing of sinus. It has a promising effect in the management of Hidradenitis Suppurativa by its action of de sloughing, healing and chemical cauterisation.

ACKNOWLEDGEMENT

This work was supported by the clinical administrative faculty of M.A.Podar Ayurved Hospital, Worli, Mumbai-18. It was performed in the OPD of Surgery (Shalyatantra) in our institute.

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