

**A CASE REPORT TO STUDY THE CLINICAL UTILITY OF
TRADITIONAL HEALER-LEECH THERAPY IN THE MANAGEMENT
OF AXILLARY SUPPURATIVA HIDRADENITIS W.S.R NADI VRANA**

***Vd. C. D. Jagdhane¹ and Vd. Monika Sharma²**

¹Assistant Professor, Shalyatantra Dept., R.A. Podar College (Ayu), Worli, Mumbai-18.

²P.G. Scholar, Third Year, Shalyatantra Dept., R.A. Podar College (Ayu.), Worli, Mumbai-18.

Article Received on
03 Feb. 2020,
Revised on 24 Feb. 2020,
Accepted on 16 March 2020
DOI: 10.20959/wjpr20204-17074

***Corresponding Author**

Vd. C. D. Jagdhane

Assistant Professor,
Shalyatantra Dept, R.A.
Podar College (Ayu), Worli,
Mumbai-18.

ABSTRACT

Suppurativa Hidradenitis (HS) is a painful, relapsing and chronic inflammatory disease affecting the terminal follicular epithelium in the apocrine group of sweat glands preferentially including the sites like armpits (most common), genitals, groin, inframammary region, perianal region and buttocks. HS causes painful abscess and nodules with malodorous discharge that can eventually progress to interconnected sinus tracts, scarring & contractures of the skin. Management involves the surgical excision of this axillary lesion. Since Kaksha Pradesh(axilla) is one of the important Marma, hence one must avoid surgical trauma to this vital area. The movement of

Puya in this sinus tract can be co-related with the condition of Nadi -Vrana. Acharya Sushruta speaks Shodhana and Ropana as the prime treatment in Nadi Vrana. Here presenting a Case Report of a female patient suffering with Axillary Suppurativa Hidradenitis since 10 months. She was managed successfully with Para-Surgical Ayurvedic treatment. Patient was given a total of 6 sittings of Leech Therapy with the interval of six days between subsequent sittings, for total duration of 42 days. This blood letting therapy caused the expulsion of vitiated Rakta, eliminated the collected pus and toxins, pacified the involved tri-doshas and improved the blood circulation. This SHODHANA of blocked strotasa facilitated oxygen and nutrition supply at the site and led to ROPANA promoting a better Wound Healing at the affected site. The Quality of life physically, socially and cosmetically considerably improved.

KEYWORDS: Rakta visravana, Leech therapy, Nadi Vrana, Axillary Suppurativa

Hidradenitis.

INTRODUCTION

Hidradenitis Suppurativa is a chronic inflammatory skin disease with recurrent boil.^[1] It most commonly affects areas bearing apocrine sweat glands such as axilla, inner thighs, under the breast, groin and buttocks.^[2] Hidradenitis Suppurativa is due to dysfunctional apocrine glands or hair follicles^[3] and some of the aggravating factors should be taken into consideration like poor local hygiene, obesity, oral contraceptive pills, DM, rough and tight clothings, humid climates. Most common Hidradenitis area of involvement in female is axillary^[4] (about 70%). HS causes painful abscess and nodules with malodorous discharge that can eventually progress to interconnected sinus tracts, scarring & contractures of the skin.^[5]

Ayurvedic Science co-relates the condition of Hidradenitis suppurativa with **Nadi Vrana**.

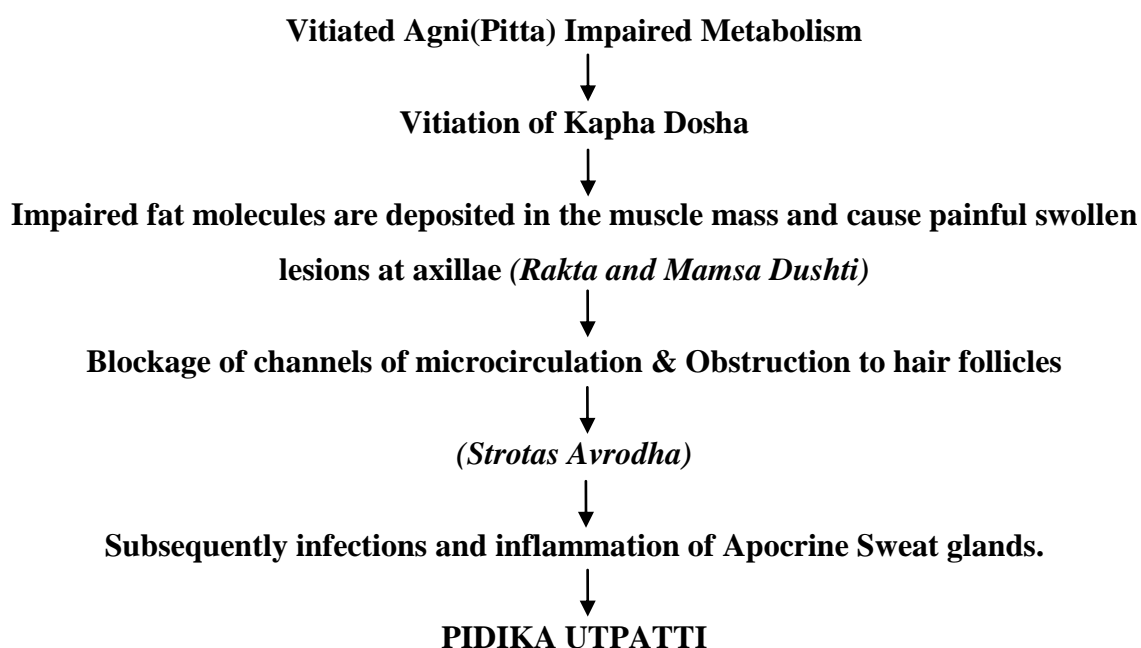
Sushruta described Nadi Vrana of which Cardinal symptom is continuous pus discharge.^[6]

‘Because of puya moving inside greatly it is known as Gati and since the spread is through a tube it is called a Nadi.

PROBABLE SAMPRAPATI

Doshas : Vata, Pitta, Kapha

Dushya : Rakta and Mamsa



CASE REPORT

A 48 years old female patient, known case of Type II DM (controlled and under treatment) and Obese (body weight 88 Kg) visited M.A Podar hospital Shalya OPD with following major complaints suffering from last 10 months -

1. Pus discharging abscess and hardened nodules (SRAVA, SHOTHA AND PAKA)
2. Throbbing pain (VEDANA)
3. Itching (KANDU)
4. Blackish discoloration (VAIVARNYATA) in both axillae

ON EXAMINATION

Lt Axilla

1. Single abscess of 3-4 mm with redness, warmth and tenderness.
2. Thick purulent discharge. \Interconnected Sinus tract beneath the abscess.
3. Blackish discoloration of axilla.

RT AXILLA- 1. One single abscess 2-3 mm with pus discharge and tenderness.
2. Blackish discoloration of axilla.

MATERIALS AND METHOD

Hirudo medicinalis leeches which are indicated for the medicinal use are applied locally at the affected sites of both the axilla. Patient was given total 6 sittings of Leech application with the interval of 6 days between subsequent sittings for a total duration of 42 days along with oral intake of Tankana Bhasma 250 mg OD & Varuna twaka churana 3gms BD after meal for the respective days.

Tankana Bhasma was given for Kleda Shoshana purpse and Varuna twaka Churana reduced the localized pus and inflammation.

Patient was advised to continue her anti diabetic medicine, maintain weight and local hygiene. After obtaining voluntary informed consent fom the patient this study is reported for publication.

CRITERIA FOR ASSESSMENT

Following parameters were taken into consideration:

- A) Vedana (Pain).
- B) KandU (Itching).

- C) Paka (inflammation)
- D) Shotha (swelling).
- E) Srava (discharge).
- G) Vaivarnyata (Discoloration)

OBSERVATION AND RESULT

Parameters	Grade 0	Grade 1	Grade 2	Grade 3	BT	AT
1.Vedana	No	Tenderness	Severe pain, un able to perform routine activity	----	Grade 1	Grade 0
2.Kandu	No	Mild & occasional	Moderate & resistible	Severe & irresistible	Grade 2	Grade 0
3.Shotha	No	Mild (<1mm)	Moderate (2-3mm)	Severe (>3mm)	Grade 3	Grade 1
4.Paka	No	Paka with puya, without pain	Paka with puya, with Pain	---	Grade 2	Grade 0
5.Srava	No	Lasika srava (watery)	Watery srava (thick)	---	Grade 2	Grade 0
6.Vaivarnyata	No	Mild discoloration	Severe discoloration	---	Grade 2	Grade 1

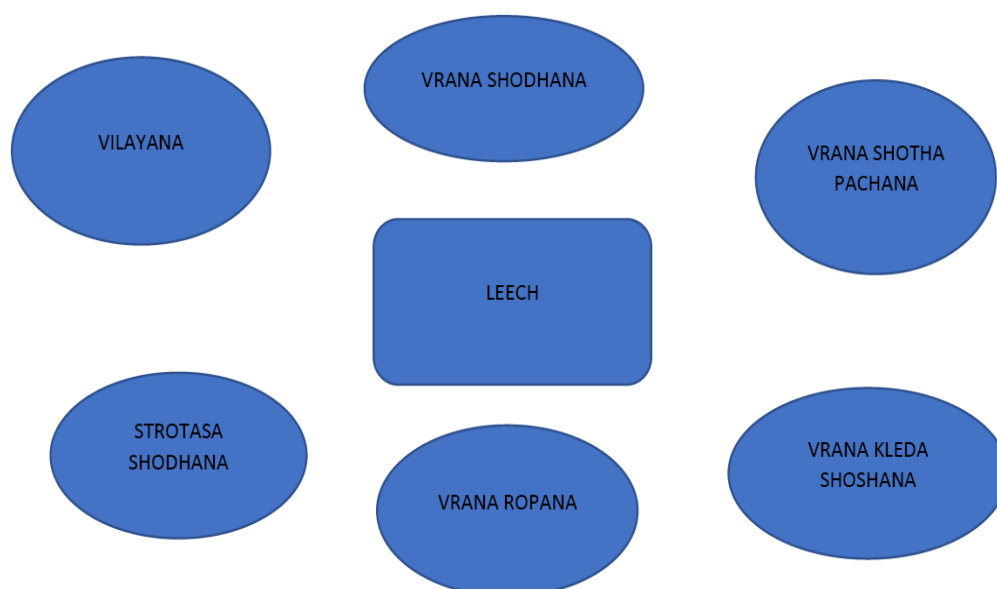
DISCUSSION

Acharya Sushruta has mentioned the Kaksha Pradesh(axilla) as a vital area called as Marma^[7] in ayurvedic terminology being supplied with rich blood vessels and lymphatics drains hence the Surgical treatment for this may lead to serious and fatal complications. Also in the chikitsa aspect of Nadi Vrana, apart from Kshara Tail purana and Kshara Sutra therapy^[8], Shodhana treatment modality is also being mentioned. To avoid surgical trauma to this vital area and to lay more emphasis on serving the purpose of Shodhana, the present case study was successfully treated with the worldwide popular Para Surgical treatment called as Leech Therapy. The prime medium that led to the manifestation of this disease is Rakta that is vitiated with tri -doshas. As Rakta Visarvana is the preferred method of Shodhana in Avgadha Rakta- Dushti and also the patient being Sukumara (female with DM) Leech therapy proved itself to be an efficient intervention in this case. No recurrence is seen since 3 months after the given treatment.

Mode of Action of Leech Therapy Explaining Its Bio Purificatory Effects

1. After leech application expulsion of impure blood takes place exhibiting its bacteriostatic and bactericidal effects, it sucks the pus and other toxins due to which local vitiated doshas are balanced.

2. Being a good strotas shodhaka, it normalizes Kapha, thereby, reducing Kandu as well as the no. and size of nodules/lesions.
3. Strotas shodhana leads to the anulomana of Vata that brings a significant relief in pain.
4. Improvement in complexion by relieving Vaivarnyata, attributed due to the shodhana of Vitiated Rakta and Pitta.
5. There was a relief in infective/inflammatory conditions of both the axilla.
6. The unhealthy granulation tissue and fibrosis tissue were completely removed from the tract.
7. It facilitates fresh blood supply providing oxygen and nutrients to the affected site hence, promoted better wound healing by formation of healthy new tissues.



Diagrammatic representation of mode of action of Leech in Axillary HS

STUDY IMAGES

(a) RIGHT AXILLA



Figure 1: Before treatment.



Figure 2: Leech application.



Figure 3: Final image of Right axilla after treatment.

(b) LEFT AXILLA



Figure 4: Before treatment (pus discharging burst abscess with interconnected sinus tracts beneath).



Figure 5: Leech application sittings done subsequently.



Figure 6: Healing stage with decreased signs & symptoms (healthy granulation),



Figure 7: Final image of Left axilla after treatment.

CONCLUSION

While conducting the present case study it can be said that this worldwide popular Anushastra^[9] and para surgical procedure - Jalouka avcharana (Leech therapy) plays a very enthusiastic, scientific and competent role providing ultimate solution for Axillary Suppurative Hidradenitis. Being adopting the Shodhana and Ropana properties along with the Ease of application, affordability, reduced side effects and acceptability – it proves to have a great therapeutic importance in curing this ailment.

REFERENCES

1. Alikhan, Ali, Lynch, Eisen Hidradenitis suppurativa a comprehensive review, J AM acad. dermat, 2009; 60(4): 539.
2. John Goligher, Surgery of the anus, rectum & colon, A.I.T.B.S publishers & distributors, Delhi, 5th edition, 2002; 215.
3. Sriram Bhat M, SRB Manual of Surgery, Jaypee publication, Delhi, 3rd edition, 2009; 38.
4. John Goligher, Surgery of the anus, rectum & colon, A.I.T.B.S publishers & distributors, Delhi, 5th edition, 2002; 21.
5. Plewing G, Steger M, Acne inversa and related disorders, London, Martin Dunitz, 1989; 345.
6. Dr Anantram Sharma, Sushruta Samhita Part 1, Chaukhamba Surbharati Prakashana, Varanasi, 1st edition, 2004; 534.
7. Dr Anantram Sharma, Sushruta Samhita Part 2, Chaukhamba Surbharati Prakashana, Varanasi, 1st edition, 2004; 90.
8. Dr Anantram Sharma, Sushruta Samhita Part 2, Chaukhamba Bharati Academy, Varanasi, Chikitsa Sthana, Viasarpa nadi stana roga chikitsa, 17/30-31-32, 307.
9. Dr Anantram Sharma, Sushruta Samhita Part 1, Chaukhamba Bharati Academy, Varanasi, Sutra Sthana, Shastra avcharniya adhyaya, 8/15: 69.