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Review Article

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A CORRELATION OF MANAGEMENT OF ASTHIBHAGNA ACCORDING TO AYURVEDA LITERATURE ANDMODERN MEDICINE

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ABSTRACT

Subject: Ayurveda centric management of asthibhagna. Charaka Samhitaa has described Asthi Bhagna in the Dwivraniyachikitsa chapter. Sushruta Samhitaa has described asthibhagna in details in Bhagna nidan and Bhagna chikitsa adhyay. General treatment of Bhagna includes Asthi Sandhaana. Asthibhagna chikitsa can be done in samanya and vishesh chikitsakrama.

KEYWORDS: Asthibhagna, Sandhan, Kushbandhan, Kapatshayan, Vishesh chikitsa.

INTRODUCTION

- A fracture is a break in the continuity of a bone.
- Fracture can be corelated with concept of bhagna in ayurveda literature which includes Fracture (*Kandbhagna*) and Dislocation(Sandhimukta)
- Bhagna is fracture or dislocation of joint or bone.
- Charaka Samhitaa has described Asthi Bhagna in the Vrana chapter as asthibhagna is considered as vrana.
- Sushrut Samhitaa has described Asthi bhagna in detail in Nidansthana and Chikitsasthan
- It is said that a wound with a Bhagna heals with difficulty.
- General treatment of Bhagna includes Asthi Sandhaana.

GENERAL PRINCIPLES OF MANAGEMENT OF FRACTURE

Treatment of fracture can be considered in three phases

1. Phase 1: Emegency Care

- 2. Phase 2: Definitive Care
- 3. Phase 3: RehabilitationPhase 1: Emergency care Splinting of fractured site-
- (स्. चि. ३/६) ➤ It can be related to *kushabandhan* in ayurveda
- To immobilise the limb, application of proper splintage using bark of different plants like madhuka, udumbara, ashwatha, palash, etc. is advised by Acharya SushrutaImmobilisation-
- > Importance of Immobilisation is well stated by acharya Sushruta
- > n case of fracture of femur in which *Kapatshayan* is unique procedure of immobilization using seven nails while shifting of patient from one place to another.

Phase 2: Definitive care.

- Asthibhagna chikitsa can be classified according to type of the fracture.
- 1. Samanya bhagna(simple fracture).
- A fracture without damage to surrounding tissue or breaking of skin.
- Management of simple fracture is done by Reduction And immobilization.
- 2. Savrana bhagna (compound fracture)
- Managent of Savrana bhagna is done by Shodhana to avoid infection and then Treatment as Vrana
- It includes use of antiinflammatory and analgesics for the management of tissue damage and pain
- According to Ayurveda this Anti-inflammatory and analgesic effect is achieved by Parisechan And Alepana

REDUCTION

- According to Charak Samhita.
- Asthi Bhagna (fracture) or Asthi Chyuta (dislocation), the bones should be placed in the original anatomical position properly (Reduction of the fracture). (च.चि. २/६८)
- With the cotton pads (Kavalikaa) and the Kusha, using abundant Ghee (Ghrita); the bones should be placed properly and stabilized so that the reduced bone ends do not undergo displacement and result in non or mal union.
- According to Sushrut Samhita

Attempt to achieve anatomical position of the limb should be done by various procedures

like.

Ancchan – It can be corelated to traction

Pidan – It can be corelated to Manipulation

Sankshep – It can be corelated to Aposition

ANTI INFLAMMATORY AND ANALGESIC MEASURES

Parisechan

न्यग्रोधादि कषायं त् स्शीतं परिसेचने।

परिषेकं प्रदेहं च विद्यात् शीतमेव च॥ स्.चि.३/११

- It is pouring the decoctions over the wound or Bhagna site.
- The cold Nyagrodhaadi Kashaaya or Panchamoolee Ksheera should be used for this purpose.
- Pleasantly warm (Sukhoshna) Chakrataila should be used for Parisechana.
- Vaagbhata suggests use of pleasantly hot Chakrataila with Vaata pacifying drugs.
- > Alepan.

आलेपनार्थं मंजिष्ठां मध्कं रक्तचन्दनम्।

शतधौतघृतोन्मिश्रं शलिपिष्टंच संहरेत्॥ स्.चि.३/७

- It is a thick or viscid ointment which is applied on the wound.
- It should be cold or may be hot as per the condition of the *Doshas*.
- It is Stated by Acharya Sushruta for the management of Pain

RIGID IMMOBILISATION

BANDHANA

- ➤ It is Achieved By Application of Bandhana
- In the cold season, the bandage or plaster should be changed after every 7 days.
- In temperate climate (Saadhaarana), the bandage or plaster should be changed afterevery 5 days.
- In the hot season, the bandage or plaster should be changed after every 3 days.
- In general, the plaster can be changed by looking at the condition of *Dosha* at the fractured site.
- ➤ Bandha should not be loose or too tight. In either case, the bones can not be stabilized

properly.

There may be *Shopha* (oedema), *Ruk* (pain), *Paaka* (suppuration) at the site of fracture. Therefore, proper bandaging is imperative in healing of fracture.

PHASE 3 – Rehabilitation

- Because of the Cast there is significant Joint stiffness and muscle power loss
- Therefore physiotherapy is advised by the surgeon in order to achieve normal functioning of the limb
- This Phase of treatment is described by Acharya Sushruta in the context of *Hastatal Bhagna* as follows:

मृत्पिण्डं धारयेत् पूर्वं लवणं च ततः परम्।

हस्ते जातबले चापि कुर्ग्नात् पाषाणधारणम्॥सु.चि. ३/३५

SAMYAK BHAGNA SANDHANA

Signs of proper healing of fracture are as follows.

भग्नं सन्धिमनाविद्धमहीनांगनुल्बणम्।

सुखचेष्टाप्रचारं च संहितं सम्यगादिशेत्॥

स्.चि. ३/७०

अनाविद्धम् - There is no nonunion of fracture

अहिनांगम् – There is no shortening of limb

अणुल्बणम् – There is no malunion

स्खचेष्टाप्रचार- No stiffness of joints

Nonunion, Malunion, Shortening of limb, and joint stiffness are the complications offracture according to modern concepts

HEALING OF FRACTURE

• The duration of the fracture healing is described by Acharya SushrutaIn case of Children: 1 month.

In case of Adults: 2 months In case of Olg age: 3 months

The differentiation according to ayurveda can be corelated with modern with respect to time

required for the healing of the fracture with age as there are degenerative changes inold age which caused delayed Union of fracture.

CONCLUSION

Management of asthibhagna according to modern concept can be closely correlated with Asthisandhana described in Ayurveda literature in all the aspects of management as Emergency care, Definitive care and Rehabilitation.