WORLD JOURNAL OF PHARMACEUTICAL RESEARCH
CodenUSA: WJPRAP Impact Factor 8.63
Volume 15, Issue 21, 1861-1864. Case Study ISSN 2277–7105

EFFECT OF JALAUKAVACHARAN IN THE MANAGEMENT OF VAAM PADA DUSHTA VRANA WITH SIRA KAUTILYA: A CASE REPORT

[1*]Dr. Ayman A. Kazi, [2]Dr. Aniket G. Ahire, [3]Dr. Pankaj P.

[1]PG Scholar, Department of Panchakarma, APM's Ayurved Mahavidyalaya, Sion, Mumbai.
[2]PG Scholar, Department of Panchakarma, APM's Ayurved Mahavidyalaya, Sion, Mumbai.
[3]Tathed HOD, Department of Panchakarma, APM's Ayurved Mahavidyalaya, Sion, Mumbai.

Article Received on 05 October 2026,
Article Revised on 25 October 2026,
Article Published on 03 Nov. 2026,

https://doi.org/10.5281/zenodo.23945852

***Corresponding Author**
Dr. Ayman A. Kazi
PG Scholar, Department of Panchakarma, APM's Ayurved Mahavidyalaya, Sion, Mumbai.

How to cite this Article: [1]*Dr. Ayman A. Kazi, [2]Dr. Aniket G. Ahire, [3]Dr. Pankaj P. (2026). Effect of Jalaukavacharan In The Management Of Vaam Pada Dushta Vrana With Sira Kautilya: A Case Report. World Journal of Pharmaceutical Research, 15(21), 1861–1864.
This work is licensed under Creative Commons Attribution 4.0 International license.

ABSTRACT

Dushta Vrana is a chronic, non-healing wound condition associated with local inflammation, altered tissue healing and functional difficulty. In Ayurveda, Jalaukavacharana (leech therapy) is an established Raktamokshana procedure indicated in selected Pitta - Rakta dominant inflammatory conditions. This case report documents the successful management of A 48-year-old male teacher presented with Vaam Pada Dushta Vrana associated with Kandu, Vaam Pada Sira Kautilya and Sakashta Chankraman since six months. The patient was clinically and vitally stable and was a known case of hypertension since eight years, for which he was taking Tablet Telma 40 mg orally once daily. The patient was treated with Jalaukavacharana using three medicinal leeches on the left leg during each sitting, along with the internal medicines prescribed in the reference treatment protocol. Five sittings were performed on 07/05/2025, 14/05/2025, 30/05/2025, 14/06/2025 and 30/06/2025. The case documents the clinical use of Jalaukavacharana in a patient with chronic Dushta Vrana and associated venous tortuosity.

KEYWORD: Dushta Vrana, Jalaukavacharana, Jaloka, Sira Kautilya, chronic wound.

INTRODUCTION

Dushta Vrana represents a wound in which normal healing is disturbed and which may be associated with persistent local symptoms and difficulty in routine activities. Conventionally,

a wound that fails to progress through the normal stages of healing within a period of 4-6 weeks is classified as chronic non-healing wound.[1] In the present case, the patient had a chronic wound on the left leg associated with Kandu, venous tortuosity and difficulty in walking. The chronicity of the presentation and the associated vascular features made local therapeutic management an important component of care.

Jalaukavacharana is a classical Raktamokshana (Blood Letting therapy) procedure described in Ayurveda and is traditionally employed in conditions where local vitiation of Rakta and Pitta is considered prominent.[2] Application of medicinal leeches produces controlled bloodletting and may improve local blood flow. The present case describes the use of Jalaukavacharana in a patient with Vaam Pada Dushta Vrana (chronic wound), Vaam Pada Sira Kautilya (venous tortuosity) and Sakashta Chankraman (difficulty in walking).

CASE STUDY

A 48-year-old male patient, a teacher by profession, presented to OPD with complaints of Vaam Pada Dushta Vrana (medial aspect of left leg) associated with Kandu, Vaam Pada Sira Kautilya and Sakashta Chankraman since six months. The patient was vitally and clinically stable at presentation.

The patient was a known case of hypertension for eight years and was on regular treatment with Tab. Telma 40 mg orally once daily.

Parameter	Finding
Age / Sex	48 years / Male
Occupation	Teacher
Presenting condition	Vaam Pada Dushta Vrana
Associated complaints	Kandu; Vaam Pada Sira Kautilya; Sakashta Chankraman
Duration	6 months
General clinical status	Clinically stable
Vital status	Stable
Past medical history	Hypertension since 8 years
Current antihypertensive	Tab. Telma 40 mg OD

Treatment

After clinical assessment, the patient was prescribed Jalaukavacharana (leech therapy) for the affected left leg along with internal medicines. Three medicinal leeches were applied to the left leg during each sitting. A total of five sittings were performed.

Internal medicines

Drug	Dose	Anupana	Route of Administration
Kaishor Guggulu	250 mg TDS	Warm water	Orally
Gandhak Rasayan	250 mg TDS	Warm water	Orally
Sutshekhar Ras	250 mg TDS	Warm water	Orally
Sukshma Triphala	250 mg TDS	Warm water	Orally

Jalaukavacharana sittings

Sitting No.	Date	Leeches applied
First	07/05/2025	3 on left leg (medial aspect)
Second	14/05/2025	3 on left leg (medial aspect)
Third	30/05/2025	3 on left leg (medial aspect)
Fourth	14/06/2025	3 on left leg (medial aspect)
Fifth	30/06/2025	3 on left leg (medial aspect)

OBSERVATION

In the initial three sitting of Jalaukavacharana there was slight reduction in itching and wound discharge. After the fourth sitting of Jalalukavacharana, a significant reduction in itching, pain and wound discharge was observed. By the fifth sitting, healthy granulation tissue was evident and wound dimensions reduced considerably. Complete wound healing occurred within eight weeks. No recurrence was noted during two months follow-up period, as of 7 August 2025.

Parameter	Before treatment	After treatment
Vaam Pada Dushta Vrana	Present	Absent
Itching	Present	Mild Present
Vaam Pada Sira Kautilya	Present	Mild Present
Sakashta Chankraman	Present	Improved
VAS	7	3

DISCUSSION

In Ayurveda, Dushta Vrana represents a chronic or improperly healing wound in which normal wound healing is disturbed. The associated features in the present patient included itching (Kandu), Sira Kautilya and difficulty in walking. Jalaukavacharana was selected as the principal Panchakarma intervention.

Jalaukavacharana is a form of Raktamokshana in which a medicinal leech is applied locally. The procedure is traditionally understood to remove vitiated Rakta and to alleviate local inflammatory manifestations. Local application is particularly relevant when the pathology is concentrated in a specific anatomical region.

In the present case, three leeches were applied to the left leg during each of five sittings. The treatment was accompanied by Kaishor Guggulu, Gandhak Rasayan, Sutshekhar Ras and Sukshma Triphala, as recorded in the supplied reference protocol.

Mode of action of leech therapy (Jalaukavacharan)

In saliva of leech including hirudin, calin, destabilase, hirustasin, bdellins, hyaluronidase, eglins and vasodilatory substances are present.[3] These substances are described as contributing to anticoagulant, thrombolytic, anti-inflammatory and vasodilatory effects.

This paper also discusses vascular endothelial growth factor (VEGF) and angiogenesis in relation to chronic wound healing. [4]Such mechanisms provide a possible biomedical explanation for the use of leech therapy in selected chronic wounds.

CONCLUSION

This case describes the clinical use of Jalaukavacharana in Vaam Pada Dushta Vrana associated with itching, Vaam Pada Sira Kautilya and Sakashta Chankraman. Five sittings of Jalaukavacharana, with three medicinal leeches applied to the left leg during each sitting, were administered along with internal medicines. Jalukavacharana demonstrated promising results with improvement in all presenting complaints observed after each sitting. It may be considered a relatively simple, cost effective, and reliable treatment option for patients with chronic, non-healing venous ulcers.

REFERENCES

1. Das S. A Concise Textbook of Surgery. 10th ed. Kolkata: Dr. S. Das, 2016.
2. Vagbhata. Ashtangahrdayam with the commentaries Sarvangasundara of Arunadatta and Ayurvedarasayana of Hemadri. Edited by Paradakara HS. Introduction by Sharma PV. 11th ed. Varanasi: Chaukhambha Orientalia, 2022.
3. Raghavi S, Deva darshini B, Saravanan KM, Anbarasu K. Molecular insights into leech-derived bioactive compounds: biochemical mechanisms and therapeutic potential. Int J Mol Sci., 2026 Feb 24; 27(5): 2112. doi:10.3390/ijms27052112.
4. Johnson KE, Wilgus TA. Vascular endothelial growth factor and angiogenesis in the regulation of cutaneous wound repair. Adv Wound Care (New Rochelle), 2014 Oct; 3(10): 647-61. doi:10.1089/wound.2013.0517.