

**ROLE OF MESHAROMA TAILA VARTI IN THE MANAGEMENT OF
NADI VRANA W.S.R. TO SINUS – A CASE STUDY****Dr. Prabudh Kumar Praveen***

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ABSTRACT

Nadi Vrana is a common disorder in tropics due to unhygienic conditions. Clinically Nadi Vrana forms if abscess is avoid or treated improperly and ineffectively with post-operative complications and complaints of recurrences in most of the cases by the line of treatment adopted by modern surgeons. In spite of tremendous progress in the field of modern surgery, still there are greatly analysed chances of recurrence are noticed. Nadi Vrana occurs in different sites of body due to different pathogens. So a medicine which acts systemically is also required for the management of Nadi Vrana. Hence Para-surgical procedure planned which ultimately fulfils all the lacunas or pitfalls encountered in the present day management. Hence the proper, effective, simple, safe, non-emulative and non-invasive procedure i.e. Taila Vrana Varti application is advised because it is not only on innovative technique but also devoid of any complication or recurrence.

KEYWORDS: Vrana, Nadi Vrana, Sinus, Mesharoma Mashyadi Taila Varti.**➤ INTRODUCTION**

The word Vrana means to break or tearing of the body. The word is derived from the verbal root of 'Vrana'. It means anything that causing discontinuity of the skin and flesh of the effected part.^[1] Sushruta classified Vrana according to Karana Bheda i.e. Nija Vrana (Ulcer) and Agantuja Vrana (Traumatic wound), according to Lakshana Bheda i.e. Sudha Vrana (Healing Ulcer) and Dusta Vrana (Non-Healing Ulcer).^[2]

According to modern science an ulcer can be defined as break down in the continuity of the covering epithelium skin or mucous membrane. It is molecular death of surface epithelium leading to the formation.^[3]

Clinically it is of 3 types^[4]:- 1. Spreading Ulcer, 2. Healing Ulcer & 3. Callous Ulcer.

Pathologically it is again 3 types^[5]:- 1. Non Specific Ulcer, 2. Specific Ulcer & 3. Malignant Ulcer.

Sushruta explain the Nadi Vrana comes under Dusta Vrana.

When a surgeon opens an Apakwa swelling and ignores a Pakwa Vrana Shopha out of negligence or ignorance and if patient continues unhealthy food and activities, then the pus break down the unimpaired intact tissues, passes deeper and deeper destroying the Vrana Sthana, Because of its moving inside greatly it is known as Gati and since the spread is through a tube, it is called as Nadi.^[6] The term Nadi implies tube like structure. Nadi Vrana is a non-healing ulcer having a tract extending into the deeper tissues. Nadi Vrana is associated with the presence of large number of recesses or cavity in an ulcer. When excessive infiltration of pus burrows deeply, it can be called as Gati. Thus, Gati is the synonym of the Nadi Vrana.^[7]

There are 8 types of Nadi Vrana i.e. 1. Vataja, 2. Pittaja, 3. Kaphaja, 4. Vata-Pittaja, 5. Vata-Kaphaja, 6. Pitta-Kaphaja, 7. Tridoshaja and 8. Shalyaja according to Sushruta. According to Vagbhata and Madhavakara it is of five kinds, they are not considering Dwandaja Bheda.^[8]

Nadi Vrana (Sinus) comes under a non-healing ulcer. Sinus is a Latin word which means ‘a hollow’ or ‘cavity’ or ‘recess’ or cavity with a bone or any supporting channel or tract.^[9]

A Sinus is defined as a blind tract leading from surface down into the tissue and lines either by granulation tissue or by granulation tissue or by epithelial tissue. It persists due to the presence of in-depth foreign body, non-dependent drainage and infection.^[10]

It produces discomfort and trouble to the patient due to its intermittent nature of pain and chronicity.

The patient gets relief when pus drains out and again when external opening closes, pain will be produced. This phenomenon repeats as the condition become chronic.

Being the tract is line with epithelium and dense fibrosis collapse of the tract is prevented. A Nadi Vrana if not timely treated may lead to be formation of fistula by burrowing deeper and deeper into the tissue. If in case of Sinus tried unskilfully without considering the aetio-pathogenesis, there is risk of complications including tissue damage and creation of false tract. The treatment should be anti-inflammatory, analgesic and fast healing.

Sinus was first reported in 1883. Most of the sinuses are known to occur in the Perianal region. “In all types of Sinuses, Pilonidal Sinus are most commonly observed in age group 15-30 years, after age of puberty” by James De Caestecker.^[11] It is rare in more than 40 years. “Recurrence rate of sinus is 9%-27%, 19% observed after 18 months follow up” by Doll D. Krueger.^[12] The incidence of Pilonidal Sinus is 26/100000 people. It is pre-sensitive in age of 21 in male and 19 in female. Males are more frequently affected by ratio of 2.2:1.^[13]

In our classics there are descriptions about the treatment of Nadi Vrana. Sushruta explains 60 types of treatment for Vrana as Sasthi Upakram. Among the Sasthi Upakrama medicated oil is one and also Varti Karma is a treatment of Vrana.^[14] Varti are basically comes under ‘Vati kalpana’, it’s a synonym of Vati.^[15] Depending upon the organ and action, Varti are classified and named as Guda Varti, Yoni Varti, Shishna Varti, Vrana Varti, Netra Varti, Dhooma Varti, Nasa Varti and Phala Varti.^[16]

So Vrana Varti is a treatment of Vrana. In Nadi Vrana Aushadha Siddha Taila, Kwatha, Kalka etc. is inserted in the Vrana by the procedure of Vrana Varti^[17] and the mechanism of treatment is based on its Shodhana, Ropana, Lekhana etc. property. Bhava Prakash Mishra explained various treatments in Nadi Vrana Adhikara Adhyaya 49. One among them is Mesharoma Mashyadi Taila Varti.^[18]

In Ayurvedic literature Taila are mentioned, which are having good curative properties. So, the application of Taila is indicated in Vrana by various methods like – Varti, Vrana Basti, Parisinchana etc., because it is helpful in removing the vitiated Doshas covered with Dusta Mamsa.^[19]

➤ CASE REPORT

A 35 year old male patient Ashok Sah was apparently healthy 10 months back, but suddenly he was feel nodular swelling with pain. He was press multiple times then pus discharged and pain was relieved. After 1 month again pain was started with itching, burning sensation and

mild discharge. He was consult locally and intake antibiotics and NSAID medicine then pain relived but again and again complains occurs with suppuration. So patient came to the OPD of Shalya Tantra Department of Dayanand Ayurvedic Medical College & Hospital, Siwan, Bihar for better treatment.

➤ **Present Illness**

A. Chief Complaints

- Pain- Present since 10 months on & off
- Discharge- Present since 10 months on & off
- Burning Sensation- Present since 9 months on & off
- Itching- Present since 9months on & off

B. Associated Complaints

- Fever- Absent
- Constipation- Absent

➤ **Past History.**

No any systemic illness

➤ **Family History**

No any specific or related disease

➤ **Personal History**

- Ahara- Mixed
- Vihara- Sitting
- Agni- Samagni
- Kostha- Madhyama
- Nidra- Altered
- Vyasana- Tobacco, Smoking

➤ **General Examination**

- Pulse- 78/min.
- Temperature- 98.4' F
- Conjunctiva- NAD
- B.P.- 132/86mm/Hg
- Pallor- NAD

- Edema- NAD
- Weight- 89kg
- Height- 5'.8''
- Occupation- Driver
- Marital Status- Married
- Religion- Hindu
- Socio-economic- Lower middle class

➤ **Systemic Examination**

- Respiratory System- WNL
- Gastro Intestinal System- NAD
- Cardio Vascular system- S₁S₂ Normal
- Central Nervous System- WNL

➤ **Local Examination**

A. Inspection

- Number of Opening- 1
- Position of Tract- Perianal Sinus
- Surrounding granulation tissue- Present
- Discharge- Present
- Blood- Absent (Present after probing)
- Pus- Present
- Surrounding Skin- Healthy
- Scar- Absent
- Pigmentation- Present

B. Palpitation

- Tenderness- Present
- Temperature- Raised
- Induration- Absent
- Lump- Mild

C. Examination with a Probe

- Direction- Upward-Medial
- Depth- 28 mm

- Foreign Particles- Absent
- Bone Chips- Absent
- Discharge comes out on withdrawal of the probe- Present

➤ **Special Investigation**

A. Sinogram- No

B. Laboratory Examination

- HB□- 12.8□
- TLC- 7200
- ESR- 24
- RBS- 126mg/dl

➤ **Diagnosis-** As per clinical examination and with help of Probe examination it was diagnosed as Perianal Sinus.

➤ **Treatment-** Mesharoma Mashyadi Taila Vrana Varti.

➤ **MATERIALS AND METHODS**

1. The selected diagnosed patient of Perianal Sinus at OPD of Shalya Tantra Department of Dayanand Ayurvedic Medical College & Hospital, Siwan, Bihar.
2. Raw materials of Drug i.e. Mesharoma, Katu Tumbi, Katu Taila, Cow Urin purchase from market.

Mesharoma Mashi prepared by open method according to Mashi Kalpana.

Kalka of Katutumbi prepared in grinder.

Tail Kalpana prepared according to Sarangdhara Taila Kalpana Vidhi.^[29]

➤ **STUDY DURATION**

45 Days.

A. OBSERVATION

3 Days once for 10 sittings.

B. FOLLOW UP

Weekly once for 2 sittings.

➤ **POSOLOGY**^[20,21]

The Varti should be changed on every 3rd day up to 30 days.

1. POORVA KARMA

- Locally anaesthised with inj. Xylocaine
- Curettage Sinus tract with help of curette.
- Wash with normal saline.

2. PRADHAN KARMA

- The Varti is inserted into the sinus tract.

3. PASCHATYA KARMA

- Packing is to be done.

➤ **Assessment criteria with Grade**

1. Pain

- No Pain – 0
- Mild Pain – 1
- Moderate Pain – 2
- Sever Pain – 3

2. Tenderness

- Absent – 0
- Present – 1

3. Local Temperature

- Normal – 0
- Raised – 1

4. Burning Sensation

- Absent – 0
- Present – 1

5. Itching

- Absent – 0
- Present – 1

6. Length

- Length of the tract will be measured and mentioned in mm with help of probe.

7. Discharge

- Absent – 0
- Gauze is wet slightly – 1
- Gauze is wet after opening the bandage – 2
- Bandage is completely wet – 3

8. Surrounding skin

- No pigmentation of skin – 0
- Pinkish – 1
- Reddish Black – 2
- Pale/Yellow/Bluish/ Black – 3

➤ OBSERVATION

S. No.	Observation	B.T.	During Treatment										During Follow up			
			3 rd	6 th	9 th	12 th	15 th	18 th	21 st	24 th	27 th	30 th	37 th	45 th	53 rd	60 th
1.	Pain	3	3	2	2	1	1	1	0	0	0	0	0	0	0	0
2.	Tenderness	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0
3.	Local Temperature	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	Burning Sensation	2	2	1	1	1	0	0	0	0	0	0	0	0	0	0
5.	Itching	3	3	3	3	3	2	2	2	1	1	0	0	0	0	0
6.	Length	28	28	26	22	19	15	10	6	2	0	0	0	0	0	0
7.	Discharge	3	3	2	2	1	0	0	0	0	0	0	0	0	0	0
8.	Surrounding Skin	2	2	2	2	2	1	1	1	1	1	1	0	0	0	0

➤ RESULT

Good Response.

➤ DISCUSSION

The main cause of Nadi Vrana is not maintaining proper hygiene and negligence towards treatment course. Sitting in same posture for long periods is also an important predisposing factor. Varti, especially Tail Varti, is the most simple and cost effective procedure for treatment of Nadi Vrana. Mesharoma Mashyadi Taila Vrana Varti used in this case have properties like Shodhana, Lekhana, Ropana etc. Among them, Katu Tumbi having Tikta Rasa, Laghu-Ruksha Guna, Kapha-Pitta Sansodhaka, Vrana Shodhaka and Ropaka properties which is best for Dusta Vrana; Katu Taila having good Vrana Shodhana and Ropana

properties; Go-Mutra having Katu Rasa, Tikhna, Ushna, Laghu, Lekhana and also kshara property. Mashī is active carbonized form of drug which works as kshara. So all these ingredients work on Dusta Vrana like Nadi Vrana.

➤ CONCLUSION

The main cause of Nadi Vrana is unhygienic and negligency, so first remove the Nidana. Mesharoma Mashyadi Taila Vrana Varti having good curative properties for Dusta Vrana. So need more research on large scale.

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