

## ROLE OF *MADHUGRITA* IN THE MANAGEMENT OF SHUDHHA VRANA: A CASE STUDY

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### ABSTRACT

*Acharya sushruta* has stated different *avastas* of *vrana* in it he described *ashudhha vrana*, *shudhha vrana*, *ruhyaman vran*, *rudhha vrana*. In many cases it has seen that the healing get prolonged due to hypergranulation or secondary infection of wound. *Acharya* also mentioned 60 *upakramas* for *vrana* from that *madhugrita* is one. A case study of hypergranulating non healing (*shudhha vrana*) successfully treated with local application of *madhugrita* has been presented here.

**KEYWORDS:** Hypergranulating non healing wound, *Madhugrita*.

### INTRODUCTION

In healing stage of wound modern medicine has no such effective aids to fasten the healing. In many cases it has seen that healing stage prolongs due to many factors, hypergranulation is one of them. Our

classic have mentioned *madhugrita* use. *Madhugrita* has *sandhana Guna* which helps in healing.

It has *lekhana Guna* which helps reduce hypergranulation and promote the granulation i.e healing of wound.

### CASE REPORT

#### Type of study

Observational single case design.

**Study centre**

Government ayurved college and hospital, Vajirabad, Nanded.

**History of present illness**

A 50yr old male patient came to us with history of trauma over his left elbow region by some iron material and wound got infected. we done debridement of wound at our centre and discharged him but in followup dressings we observed wound getting hypergranulation. We took opinion of allopathy doctor they advised skin grafting but we planned for local application of *madhugrit* daily.

**Medical history**

No history of DM / HTN / PTB / Arterial and venous pathology / Neural pathology.

**Family history**

Maternal- NAD

Paternal –NAD

Self –NAD.

**Personal history**

Occupation -Farmer

Addition- None

Appetite- Regular.

**Local examination**

Ulcer of size 6×4×1cm in dimensions over lt elbow region with sloping edges and hypergranulation tissue, no active discharge and smell, no tenderness and no induration in adjoining area. No involvement of lymph nodes, sensations are intact, and peripheral pulsation also present.

**MATERIAL AND METHODS**

In this study Mixture of *madhu* and *grita* in equal quantities taken for local application.

**Treatment plan**

Ulcer was cleaned with normal saline daily. After that *madhugrita* applied locally and dressing were done with sterile gauze and bandage once daily.

## RESULTS

*Vrana* was completely healed at the end of 5th week, with follow up taken for 1month, no signs of recurrence seen.

## DISCUSSION

*Madhu* has *Madhura*, *kashaya rasa*, *madhura vipak*, *shita virya* and *shukshmamarganusari* (Ability to permeates micro channels) as *prabhav*. *Madhura rasa* help in healing activity and *kashaya rasa* help in scrapping Slough, granulation.

*Gruta* has *yogvahi Guna* which means it increases the activity of ingredients in which it get mix with, so it helps *madhu* to increase its activity.

Due to *lekhan Guna* of *madhugrita* hypergranulation get decreased and with *sandhan Guna* improved normal granulation and wound contractibility.

Our wound before treatment has dimension  $6 \times 4 \times 1$ cm which is  $24 \text{ cm}^2$  area. After 35 days it get healed. By mathematical calculations we derived rate of healing of *madhugrita* from above data which is about  $0.69 \text{ cm}^2/\text{day}$



**Figure 1: Before treatment.**



**Figure 2:** At end of 2<sup>nd</sup> week.



**Figure 3:** At end of 3<sup>rd</sup> week.



**Figure 4:** At end of 5<sup>th</sup> week.

## CONCLUSION

This study reveals that local application of *madhugrita* was found to be very effective in management of hypergranulating Non healing wound (*shudhha vrana*). It has potential wound

cleaning and healing activities.

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