

**A CASE STUDY ON EFFECTIVE MANAGEMENT OF DUSHTA VRANA (VENOUS ULCER) BY TILABHAYAADI LEPAM****Dr. Ediga Sukanya\*<sup>1</sup> and Dr. T. Srinivasa Rao<sup>2</sup>**

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**ABSTRACT**

As per Ayurveda Vrana<sup>[1]</sup> (wound/ulcer) is the condition associated with dhatu nasha (Destruction of tissue) and characterized by Vedana (Pain), Srava (Discharge) and Vikruti (Deformity). Dushta vrana (complicated ulcers) are a frequently encountered problem in present era produced commonly as a complication of trauma or pathologic insult. Vrana chikitsa (wound/ ulcer treatment) is integral part of Shalya tantra (Surgery in Ayurveda). Among various drugs explained under treatment of vrana in our ayurvedic texts, TILABHAYAADI LEPAM is selected as drug of choice for my present study due to shodhana and ropana properties and various wound healing properties of the ingredients in the drug formulation. This formulation was explained in Chakradatta text 46<sup>th</sup> chapter Bhgandhara chikitsa adhyaya.

**KEYWORDS:** Vrana, Dushta vrana, Tilabhayaadi leepam.

**INTRODUCTION**

Acharya Susrutha (800 B.C.) the father of surgery in his treatise of Susrutha Samhita expounded regarding Vrana and its management and stated Vrana as Shuddha<sup>[2]</sup> vrana and Dushta<sup>[3]</sup> Vrana. Shuddha Vrana is one which is healed by human natural healing process and does not require any treatments, whereas Dushta vrana is non-healing ulcer with lakshanas<sup>[4]</sup> opposite to that of Shuddha vrana which requires medical intervention to heal. Acharya Susrutha explained the treatment of Dushta vrana under Shashti upakramas.<sup>[5]</sup>

An ulcer<sup>[6]</sup> (Latin – Ulcus) is a lesion or eroded area on the surface of the skin or mucous membranes characterized by tissue disintegration and formation of pus. Essentially it impacts the epithelium which covers organs and surfaces of humans including both outside surfaces and inside cavities. “An ulcer is the break in the continuity of the covering epithelium, either skin or mucous membrane due to molecular death.”

Venous ulcers<sup>[7]</sup> are open skin wounds occurring in regions of leg or foot affected by venous hypertension.<sup>[8]</sup> The pathophysiology of venous ulcer is a complex process with various associated signs such as varicose veins, chronic discharge, dermatitis, hyperpigmentation, fibrosis. These ulcers generally display a characteristic irregular shape with sharp demarcated borders. They are usually located in the peri-malleolar area.<sup>[9]</sup> Even though ulcer depth is typically limited to subcutaneous layers, infection can cause deep tissue injury.

**TILABHAYAADI LEPAM<sup>[10]</sup>:** Equal quantity of Tila<sup>[11]</sup> seeds, Fruit rind of Haritaki<sup>[12]</sup> fruit, Lodhra<sup>[13]</sup> leaves, Neem<sup>[14]</sup> leaves, Haridra<sup>[15]</sup>, Rhizome of Vacha<sup>[16]</sup>, Kushta<sup>[17]</sup> roots are mixed with equal amounts of Madhu<sup>[18]</sup> and Ghritha<sup>[19]</sup> and made into fine paste.

Due to healing properties of above drugs in Tilabhayadi lepam, it has been selected for present study. Kalka is prepared at the time of application over the ulcer.

### AIM OF THE STUDY

1. To diminish the detrimental consequences associated with Chronic ulcers.
2. To integrate traditional methods explained in ancient ayurvedic texts required for healthy healing of an ulcer.
3. To develop a simple and easy therapy which is non invasive and easy to apply.

### OBJECTIVE OF THE STUDY

1. To evaluate the efficacy of Tilabhayaadi lepam in the management of Dushta vrana.

### CASE REPORT

A 53 years old male patient came to OPD of SV Ayurvedic Hospital with complains of multiple non-healing ulcers over his right leg since 2 years. It was associated with foul smell, discharge, hyperpigmentation and oedema of surrounding region of leg. Patient was suffering from Hypertension and Type 2 Diabetes Mellitus and was under medication.

Past History: Patient had history of varicosity of veins over both lower limbs since 10 years. He used pressure stockings for varicosity.

**Personal History**

Diet – Mixed Diet Appetite – Medium

Micturition – 4-5 times / day Bowel - Regular

Sleep – Disturbed Addictions – Nil

General examination: Built – Moderate Height – 5'5 feet Weight – 71 kgs

Blood pressure – 140/90 mm of Hg Pulse rate – 81 bpm

Respiratory rate – 18/min

**Local examination:** Shape: Irregular Number: Multiple

Position: Lower 2/3<sup>rd</sup> of right leg Colour: Blackish

Discharge: Serous Margins: Raised Irregular Edge: Sloping

Floor: Blackish covered with slough

Surrounding area: Hyperpigmented with oedema Edema: Present

Size of ulcer: 5.5 × 4 cms Depth: 0.4 cms

Bleeding on touch: Absent Tenderness; Present Pitting: Present

**Investigations**

Hb%; 13gm%

Tc: 1400 cells/mm<sup>3</sup> Dc: 9600 cells/mm<sup>3</sup> ESR: 55mm/hr

BT: 4'45"

CT: 9 min HIV: Negative

HbsAG: Negative

Urine Albumin: 25mg/g Sugar: 4mmol/L

Doppler study: Valvular incompetence

SFJ and SPJ are incompetent

**CLINICAL METHOD OF APPROACH**

Procedure is carried out in aseptic conditions wearing gloves.

**Purva Karma**

- Routine investigations done
- Ulcer is exposed properly and area is cleaned with Normal Saline.
- Slough is removed and area is to be dried by a cotton plug using artery Forceps.

**Pradhana Karma**

- After cleaning the ulcer, Tilabhayaadi lepa is applied over the ulcer with thickness of 0.25 cms.

**Pascat Karma**

- A dry sterile pad is placed over the ulcer and bandaging is done.
- If the bandage becomes wet completely within 24 hours re-bandaging is done.

The procedure is repeated everyday for 30 days. Follow up once a month for 3 months.

**Progress during treatment**

DATE	FINDINGS	INTERVENTION	OUTCOME
12-10-2023	Black slough over the floor of ulcer with serous discharge. Severe pain, Itching and tenderness present. Oedema present.	Ulcer cleaned with H <sub>2</sub> O <sub>2</sub> , then with Normal saline and black slough removed with artery forceps. Tilabhayaadi lepam applied. Antiseptic dressing done.	Blackish coating over the floor is slightly cleared. Discharge slightly reduced. Pain was present.
18-10-2023	Blackish slough coat slightly present. Serous discharge present. Pain, Itching present	Ulcer cleaned with NS. Slough removed. Lepam applied and bandaged.	Slough reduced. Discharge was mild. Pain present. Itching reduced. Size reduced.
24-10-2023	Red floor of ulcer seen. Mild discharge present. Itching, pain present.	Ulcer cleaned with NS. Lepam applied and bandaged.	No slough, Discharge from ulcer. Mild Itching and pain present. Size reduced
1-11-2023	Pinkish red granulation tissue on floor. Edges of ulcer were constricting.	Procedure repeated	No slough, healthy granulation tissue seen with progressive healing. No itching and pain
9-11-2023	Scar of healing ulcer seen. No discharge, pain, itching.	Procedure repeated.	Ulcer completely healed with scar tissue formation at surrounding skin level.

**IMAGES OF TREATMENT PROGRESS**



## RESULT

The clinical features of Dushta vrana were improved at the end of 1<sup>st</sup> week and wound showed signs of healing with healthy granulation tissue formation by the end of 2<sup>nd</sup> week. Ulcer healed rapidly with minimal scar tissue by the end of the month.

With the follow up for 3 months, patient has shown no signs of recurrence.

## DISCUSSION

- ❖ **Effect on Vrana Vedana:** Severe pain was present before treatment. Pain and tenderness completely reduced by the end of the treatment.
- ❖ **Effect on Vrana srava:** Profuse serous discharge with foul smell was present before treatment. Discharge reduced by the end of the 2<sup>nd</sup> week. Foul smell from ulcer reduced by the end of 1<sup>st</sup> week of treatment. Discharge completely reduced by the end of 3<sup>rd</sup> week.



- ❖ **Effect on Vrana varna:** Floor showed up with hard blackish coating of slough. Floor turned into pinkish red by the end of 2<sup>nd</sup> week. At the end of the treatment ulcer showed white scar tissue formation.
- ❖ **Effect on size of ulcer:** Ulcer was large with dimensions of 5.5×4×0.4 cms before treatment. Sized gradually reduced by the end of every week showing progressive healing. By the end of treatment no ulcer seen with scar tissue formation.
- ❖ **Effect on Itching:** Patient had itching over surrounding area of the ulcer before treatment. Itching reduced by the end of 1<sup>st</sup> week. Itching completely reduced by the end of 2<sup>nd</sup> week. No itching present by the end of treatment.

In this study, the prepared drug i.e., Tilabhayaadi lepam contains different types of phytochemicals which help in shodhana and ropana of the wound.

Properties of drug	Mode of action
Madhura rasa, Kashaya rasa	Reduce size of ulcer
Kashaya rasa and ruksha guna	Lekhana of excessive slough
Aqueous and ethanolic extracts of Lodhra	Anti-ulcer properties
Methanolic extracts of lodhra	Anti-inflammatory properties
Polyphenols in nimba	Antioxidants and anti-inflammatory
Alkaloids of nimba	Anti-microbial, Ropana
Curcumin of Haridra	Lekhaniya, Sothahara, vranaropana, vrana sodhana
Sesquiterpene, glycosides of Kushta	Anti-allergic activity
Acetone, costunolide of Kushta	Anti-ulcer properties
Tila, Ghritha	Snigdhata to vrana
Nimbidin	Sothahara
Madhu	Vrana sodhana, lekhamiya, Sangrahi properties

## CONCLUSION

In this clinical study, result is so significant symptomatically like size of ulcer, pain, discharge, colour, itching, foul smell, tenderness, floor and granulation tissue. The present trial drug formulation, Tilabhayaadi lepam is very beneficial and has got all the properties of ulcer healing like vrana sodhana and vrana ropana resulting in complete healing of an ulcer. It is simple to prepare, apply and is without any complications.

Thus it is concluded that Tilabhayaadi lepam is highly effective in the management of dushta vrana(venous ulcer).

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