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Case Report

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## A CASE REPORT-ROLE OF KSHARAKARMA IN DUSTA VRANA

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#### **ABSTRACT**

Ksharakarma is said to be one among the Anushastra karma as explained by Acharya Sushrutha. Kshara i.e. caustic alkali is considered as superior among shastra and anushastra because it does the functions like excision, cutting and srcaping. It also mitigates all the tridosha. It is versatile, because even such places that are difficult to approach by ordinary measures can be treated by kshara karma. There is a wide range of description available about kshara in many authoritative texts of ayurveda. However, Acharya Sushruta is the pioneer of kshara kalpana, as he introduced kshara kalpana in one of the specific chapter. These kshara preparations have many therapeutic usages and even proved to be effective in treating many disorders.

Application of these preparations have replaced many surgical procedure too. *Pratisaraniya kshara* in *Arshas* causes necrosis of haemorroidal mass, in case of *Bagandhara* the *kshara sutra* helps in cutting of the track followed by healing, in case of *dusta vrana kshara* helps in removing the unhealthy granulation tissue and helps in healing of the wound from the base. *Kshara karma* is milder procedure when compared to surgical procedure so application of *kshara* is found to be safe, efficacious and cost-effective method of treatment. It also has mild post-operative pain, no bleeding, minimum hospitalization and less chances of recurrence. Hence *kshara karma* plays an important role in treating the disease of *Shalya tantra*.

**KEYWORDS:** Dusta Vrana, Kshara karma, Anushastra karma.

## **INTRODUCTION**

Management of chronic ulcers has always been a challenge in the field of medicine. The worldwide prevalence of chronic ulcer is around 1-2 % of the world population and is

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growing at a rate of 3% annually and it amounts to 3% of total Health Care expenditure.

Healing of ulcer is a complex mechanism, in which various intrinsic and extrinsic factors

play an important role.

Modern biomedicine employs cleaning with antiseptics, applying topical ointments, regular

and collagen dressings and skin grafts. Results are not always satisfactory and are expensive

despite the advancement made. In this study an attempt was made to employ Local shodhana

procedure following textual advice as mentioned in Sushrutha Samhita. Kshara karma, one

among Acharya Sushrutha's Shasti Upakrama for ulcer management, was administered

based on reference in *Chikitsa Sthana* 1st Chapter.

MATERIALS AND METHODS

Source of data

Selection of patient: patient selected from IPD of SDM Ayurveda Hospital, Udupi.

Materials required

Apamarga Kshara, Guggulu extract, Haridra Churna.

Method of application

Wound was washed with triphala kwatha for whole one day, after that proper cleaning was

done with sterile swabs. Excision of growth was done, later Apamarga Kshara was locally

applied under local anaesthesia and IV sedation, washed with amla dravya and dressing was

done with sterile guaze and jatyadi taila. And bandaging was changed daily.

Study design-single case study

Case report

Name: XYZ

Age/Sex: 68 Years/Male

Religion: Hindu

Address: Davangere

DOA: 13/09/2021

DOD: 30/09/2021

**Chief complaints** 

Cauliflower like growth in the right foot of ventral and dorsal aspect since 18-20 years.

## History of present illness

A 68 years old male patient (IP number:156831) K/C/O HTN since 10years, N/K/C/O DM. Before 18-20 years back developed an cauliflower like growth in the right foot of ventral and dorsal aspect which was associated with pus discharge and foul smell. He consulted an hospital were regular dressing was advised. Hence patient visited IPD of SDM Hospital where Kshara karma was advised.

#### Local examination

Ulcer was seen on right foot of ventral and dorsal aspect measuring about 4x6CM, 6X8CM in dimensions with profuse purulent discharge, irregular margins. Edge was Rolled out (everted). The floor was unhealthy covered with slough and unpleasant intolerable smell was present. Tenderness was also present with surrounding indurations. Local raise in temperature was absent. Local lymph nodes were not involved.

# **RESULTS**

The clinical features of Dushta Vrana were improved by the end of 2<sup>nd</sup> week.





**Fig. 1: Before treatment (on 13/09/21).** 





**Fig. 2: After treatment (on 30/09/21).** 





**Fig. 3: During follow up (03/11/21).** 

#### **DISCUSSION**

Effect on Vrana Vedana: Pain and tenderness was completely reduced at the end of treatment. Severe pain present at the beginning was completely reduced at the end of 2nd week. All contents of Apamarga kshara were Ushna virya thus Vedanasthapana by pacifying Vata.

Effect on Vrana Varna: At the end of 2nd week, slough was completely reduced and floor was covered with red, healthy granulation tissue. Laghu and ruksha guna are present in Apamarga, Haridra and Guggulu. Laghu and ruksha guna has got lekhana property due to which slough was removed as well as the wound floor was also cleaned.

Effect on Vrana Srava: Profuse, Purulent discharge was completely reduced at the end of treatment. Purulent discharge present at the beginning was completely reduced at the end of 2nd week. This may be due to the Lekhana, Kushthghna Puyaupshoshana properties present in Apamarga, Guggulu and Haridra.

Effect on Vrana Gandha: Unpleasent smell present at the beginning of treatment was completely reduced by the end of 1st week. The Krimighna, Vishaghna, Kushthghna properties of the contents of Apamarga Kshara helped to remove the infection and foul smell. Effect on Vrana Aakriti: Laghu guna of Apamarga, Haridra, and Guggulu helped to reduce the wound size by promoting healing and the rate of contraction.

#### **CONCLUSION**

Sushrutha's prescription of local Shodhana for Vrana showed a significantly better outcome in wound care. As such, this case study has demonstrated the importance of textual prescriptions in managing a complex and chronic illness. The study has also demonstrated the important role of Kshara Karma in one of the primary concerns of Shalya Tantra, namely management of Vrana. The hyper granulation tissue in the floor of ulcer reduced remarkably, this was due to local Shodhana effect (which acted as chemical debridement agent) of the Apamarga Kshara. Hence chronic ulcers though considered as systemic illness; can be managed effectively by using local Shodhana procedures like Kshara Karma, when indicated.

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