

ROLE OF JALAUKAVACHARNA AND KSHAR SUTRA THERAPY IN BUERGER'S DISEASE-A CASE STUDY

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ABSTRACT

Buerger's disease or(TAO) is non- atherosclerotic, inflammatory disease of peripheral blood vessels. It mainly causes occlusion of small and medium sized blood vessels so blood supply gets jeopardized resulting in limb ischemia, severe cramp like pain during walking (intermittent claudication), deep ulceration and finally gangrene of distal part(usually toes). With these features- a case of Buerger's disease was treated successfully by parasurgical process Jalaukavacharna in Right foot and kshar sutra application on gangrenous toes. After Jalaukavacharna pain and swelling was resolved in one month, and after that gangrenous toes were ligated with Kshar sutra, within next one month the gangrenous toes shed off without any complication.

KEYWORDS: Jalaukavacharna, (TAO) Thromboangitis obliterans, Kshar sutra.

INTRODUCTION

Buerger's disease or TAO, commonly seen in the age group of 20 -40 years, although a male predominance disease but several cases have been reported in women also. In Buerger's disease inflammation occur in small and medium sized blood vessels of extremities, leading to an insufficient supply of blood to the affected limb, causing pain, discoloration and finally gangrene. Smoking is the main cause of this disease and also responsible for the progression of the disease. Excessive tobacco produces severe vasospasm due to the inflammation of the vessels. Low socio-economic status, recurrent trauma to the foot, poor

hygiene is additional factors for the precipitation of the disease. In allopathic medicine, there is no specific treatment in spite of abstinence from tobacco, regular exercise and anti platelet agents, if the condition gets worsened, surgery is the last option which is very hazardous and costly for the patient. In Ayurveda, Buerger's disease can be correlated with Raktavaha srotodushti by vitiation of dos has in blood vessels present as 'sanga' or thrombus. So, the treatment of the patient was planned according to the pathology of the disease.

CASE STUDY- Observational.

TYPE OF STUDY- Single Case Design.

Study centre Rishikul Ayurvedic P.G College Campus Hospital, Haridwar, Uttarakhand Ayurved University, Uttarakhand.

A 60 Years old male patient with OPD NO 2598/10917 and IPD NO 7/1 was admitted in the Shalya-tantra department of this hospital with chief complaints of- foul smelling wound present in the base of 3rd and 4th toes of Right foot-3 months

Discolouration in 3rd and 4th toes of Right foot-2 months

Severe Pain and swelling in Right foot-2 months

Difficulty in walking and cramp like pain on walking-1 month

Before three months, the patient was absolutely alright, suddenly one day he noticed there was ulceration on his 3rd and 4th toes of the Right foot, which was not healing even after taking treatment from a local Doctor in Kashipur. Gradually discoloration started in both toes along with pain and swelling & the condition of the Right foot got worsened day by day. After one month, he felt intense pain in the Right leg which did not allow him to do his daily work and he used to take 4 to 5 tablets of pain killer but he did not get any relief in pain. Discoloration of the toes was increasing gradually and after some time toes became black in colour. Patient has difficulty in walking for more than 50 meter and used to develop cramp like pain in his leg during walking, which gradually changed into Rest pain. Patient was a chronic smoker since last 20 years. Patient had taken many Allopathic treatments for his disease but there was no any improvement, then he was advised for surgery. Then he came to this Rishikul Ayurvedic Hospital Haridwar for better management.

There was no history of Hypertension, Diabetes mellitus, Tuberculosis or any other major systemic disorder.

Local examination

Gangrenous, foul smelling two toes was present (3rd and 4th toes) in Right foot. Circular deep ulcer was seen at the base of 3rd and 4th toes of Right foot, floor- exposed, tendon visible covered with slough, discharge –foul smell purulent discharge, and extremely tender in the toes.

Swelling was present over the dorsal aspect and ankle of Right foot.

Hair loss, decreased temperature in Right foot was observed.

Brittle nails were present in Right foot.

Peripheral pulsation-Peripheral arteries-----Left lower limb Right lower limb

Dorsalis pedis absent absent

Posterior tibial present absent

Popliteal present absent

Femoral present present

Investigation-All routine blood investigations were within normal limits.

USG abdomen – Normal.

Arterial Doppler of Right lower limb-thrombosis in popliteal and post tibial arteries seen, no flow was seen in dorsalis pedis artery.

Diagnosis- TAO of Right lower limb.

Ayurvedic concept

Buerger's disease can be correlated with srotodusti of Raktavaha srotas, so the lakshnas like 'sanga' and siranam granthi are present in this disease. The Main concept behind the treatment is to remove the 'sang' (thrombus) and to subside the shotha so that the circulation of the affected limb gets improved.

Management

1-Wound management- Triphala kashaya was used for cleaning the wound and then Karanjadi ghrita soaked in sterile gauge piece was applied over the wound and dressing was done with sterile pad and sterile bandage everyday. After 15 days, Jalaukavacharna was started in Right foot.

2 -Jalaukavacharna- 4sets were made of 2 Jalaukas. Under all aseptic precaution each set of Jalauka was applied after one week. This regime were continued for 1 month. That is 4 sitting of Jalaukavacharana in 4 weeks. The Haemoglobin of the patient was also monitored.

3- Kshar sutra karma – After one month of Jalaukavacharna pain and swelling resolved but there was no change found in the gangrenous toes, so Kshar sutra was ligated, in the base of gangrenous toes. Kshar sutra was changed every week with fully aseptic precautions.

RESULT

Wound was observed to be devoid of slough and reduction in amount of discharge and foul smell after 15 days.

After jalaukavacharna

Pain & swelling got subsided in 15 days.

Local temperature-was started to raise slightly after 15 days.

Claudication distance-was improved from 50m to 100m in 15 days

Rest pain totally disappeared in one month

Gangrenous toes was shed off spontaneously in one month after kshar sutra ligation.

DISCUSSION

Karanjadi ghrita has vrana shodan and vrana ropan property primarily due to the content present in it like Haridra, Nimb, Karanj, Yashthimadhu, Anantmool, Raktchandan, Patola and jati.

Effect on Pain and Swelling

Saliva of Jalauka has hirudin which has better anticoagulant property than heparin. Hyaluronidase, Lipase and esterase, Bdelin, Eglin present in saliva of Jalauka has anti-inflammatory effect which helps in reducing pain and inflammation. A substance similar to histamine present in saliva has vasodilator effect. Due to this local blood supply improves, which helps in pain management. **For gangrenous toes** kshar sutra was ligated which is a medicated caustic thread prepared by coating linen thread (Barbour's thread no 20) with snuhi ksheer acting as a binding agent and proteolytic in nature, therefore dissolve thick tissues and even necrosed bone. Apamarga kshara as alkali, and Haridra powder as anti allergic, antiseptic and wound healer. So the kshar sutra therapy is found satisfactory in the management of gangrenous toes. Kshar sutra not only excised the gangrenous toes but also

minimized pain and complications which usually patient faces during surgery (Amputation). It enables the patient to ambulate early and carry on his routine activities. Kshar sutra therapy is also of low cost and easily affordable to the patient.

**Before Treatment****During Treatment****During Treatment****After Treatment**



After Treatment

CONCLUSION

The case study gives an idea to the line of treatment to be adopted and helps to formulate a protocol for large studies although the patient has totally stopped his smoking from the beginning of the treatment in this hospital. Ayurvedic management for TAO is result oriented, also is cost effective and it minimizes the chances of surgical interventional procedure. Kshar sutra is considered as backbone of ayurvedic surgery. Its role is clearly stood in anorectal as well as extra anorectal conditions, so in this way kshar- sutra has wide role in several surgical conditions which are a challenge for surgeons.

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