

**MANAGEMENT OF HIDRADENITIS SUPPURATIVA IN AXILLA  
THROUGH AYURVEDA USING APAMARGA KSHAR SUTRA – A  
CASE REPORT**

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**ABSTRACT**

Hidradenitis suppurativa is a painful chronic inflammatory disease affecting the skin bearing apocrine glands. It causes painful abscesses and nodules that may progress to interconnected sinus tracts, scarring and skin contractures. Women are more frequently affected than men (female: male ratio, 3:1). The condition most commonly develops in early 20's of a person, although the onset has been described in pre-pubertal children and postmenopausal women as well. This study was conducted on a single female patient of 26 years of age who came to the Shalyatantra OPD of R.A Podar Ayurvedic Hospital, Worli, Mumbai, with complaints of chronic pus discharge from Right Axilla along with pain and tenderness and history of multiple boils and small pus filled abscesses in right axilla over a period of 6 months. Patient

had taken multiple courses of antibiotics from various doctors with local dressings without any effect. On examination there was a single Sinus Tract or Nadi Vrana of 4 cm seen in the right axilla formed by connection of lesions with pus discharge which could be categorised as Hurley Stage II. Apamarga Kshar sutra was passed through the tract and tied once every week for 5 weeks on OPD basis. Pus discharge stopped in 1<sup>st</sup> week followed by healthy granulation tissue formation from 2<sup>nd</sup> week. On every consecutive week of Apamarga Kshar Sutra changing, the track shortened in length until the end of 5<sup>th</sup> week when the track was completed healed. Thus, we can conclude from the study that this Ayurveda para-surgical treatment using Apamarga Kshar Sutra plays an effective role in the management of

Hidradenitis Suppurativa.

**KEYWORDS:** Hidradenitis Suppurativa, Right Axilla, Hurley stage II, Nadi Vrana, Apamarga Kshar Sutra.

## INTRODUCTION

Hidradenitis suppurativa (HS) is a painful chronic condition characterized by swollen lesions occurring in the axilla, groin, anal, and breast regions. This disease occurs due to obstruction of hair follicles and inflammation of sweat glands such as apocrine glands. It is a progressive disease where single boil-like, pus-filled abscesses become hard lumps, then painful, deep-seated, often inflamed clusters of lesions with chronic pus seepage. Formation of chronic epithelialized and interconnected sinus tracts may also occur. Healing of affected areas is typically associated with progressive scarring or fibrosis. This condition can be debilitating but is rarely life threatening; only occurring when the bacterial infection leads to an overwhelming systemic infection in an individual with a weakened immune system. Women are more frequently affected than men (female: male ratio, 3:1). The condition most commonly develops in early 20's of a person, although the onset has been described in pre-pubertal children and postmenopausal women as well.<sup>[1]</sup> The physical extent of Hidradenitis Suppurativa can be classified using Hurley's clinical staging.<sup>[2]</sup> Hidradenitis suppurativa has a profoundly negative impact on patients' physical, social, and economic lives. Many become socially isolated or reclusive due to the pain, malodorous discharge, intimate sites of eruptions, and inappropriate medical care due to incorrect diagnosis.

According to Ayurvedic terminology, Nadi Vrana can be clinically correlated to Hurley's Stage II condition in this patient wherein a Sinus tract is formed interconnecting lesions in the Right Axilla of the patient. In Sushruta samhita, Ksharsutra is directly indicated in Nadivrana or Sinus.<sup>[3]</sup> Applying the principles laid by Acharya Sushruta, Kshar Sutra was used to treat the sinus tract formed or Nadi vrana in the patients axilla as in contemporary modern science there is no one gold-standard treatment for Hidradenitis Suppurativa but a barrage of antibiotics, immunosuppressants and ultimately surgery. Surgery can be either limited or extensive. Limited surgical interventions include exteriorization of sinus tracts (i.e., surgical removal of the "roof" of an abscess, cyst, or sinus tract, with the "floor" left intact for more rapid healing) and localized excision or more extensive excision of all hair-bearing skin in the affected region. This too has high failure and recurrence rates. Through Ayurvedic principles a para-surgical procedure, Apamarga Kshar Sutra, was used in the management of

Hidradenitis Suppurativa in axilla.

## MATERIAL AND METHODS

A female patient of 26 years of age came to the Shalyatantra OPD of R.A Podar Ayurvedic Hospital, Worli, Mumbai, with complaints of chronic pus discharge with pain and tenderness from the right armpit (axilla) intermittently for 6 months, patient gave history of the condition to start with a firm pea-sized lump that developed in the right axilla one year ago and then ruptured spontaneously in a few days and oozed pus. New similar lumps with small pus pockets then developed in an area nearby. Over the period of next 6 months even after treatment from various doctors small Narrow channel called sinus tract was formed under the right axilla skin that broke-out on the surface and leaked pus.

On examination, there was a single Sinus Tract or Nadi Vrana of 4 cm seen in the right axilla formed by connection of lesions with pus discharge which could be categorised as Hurley Stage II. Patient was advised for application of Apamarga Ksharsutra. After obtaining voluntary informed oral consent from patient this study is being reported for publication.

### Drugs used

- a) Snuhi kshira or stem latex of *Euphorbia nerifolia* or Snuhi plant
- b) Apamarga Kshar or alkali of *Achyranthes aspera* plant
- c) Turmeric powder or *Curcuma longa*.

### Method of preparation of Ksharsutra<sup>[4]</sup>

1. The surgical linen thread of size 20 is spread throughout the length and breadth of the hanger of the specially designed cabinet known as Ksharsutra Cabinet.
2. The thread is smeared with latex, uniformly and carefully, all around the thread, with the help of clean gauze piece soaked in the Snuhi Kshira. After smearing all the threads on the hanger, the hanger is placed in the Ksharsutra cabinet for drying.
3. After eleven such coatings with Snuhi Kshira, 12<sup>th</sup> coating of Snuhi Kshira is done and wet thread is then passed through a heap of finely powdered Apamarga Kshara immediately. After smearing all the threads with Apamarga Kshara, the hanger is shaken gently allowing the excess particles of Kshar to fall down. This process is repeated till seven coatings of Snuhi Ksira mixed with Apamarga Kshara is achieved, thus completing 18 coatings on the thread.
4. The remaining 3 coatings are performed with fine powder of Haridra same as

aforementioned procedure making a total 21 coatings on the thread.

5. The threads of a uniform length of about 10 cm were cut and stored in a sterile container for use on this patient.

#### **Method of application of Kshar Sutra**

1. Local treatment after cleaning the right axilla with sterile solution, wound is washed with normal saline.
2. Kshar sutra was passed through the eye of a probe and the probe was slowly pushed through an opening in the sinus tract and removed from the far end of the tract, the two ends of the thread were then tied together snugly to exert enough pressure to keep the thread taught.<sup>[5]</sup>
3. A sterile gauze piece was kept over the tied Kshar sutra and micropore sticking applied.
4. Care was taken that patient does not suffer from extreme pain or distress during procedure in every session.
5. This was done once a week for 5 weeks and after every session the changes in terms of healing of the sinus tract were observed.

#### **RESULTS**

1. Continuous foul smelling Pus discharge stopped by the end of 1<sup>st</sup> week followed by formation of healthy granulation tissue and healing of the tract cut by the kshar sutra from 2<sup>nd</sup> week onwards.
2. On every consecutive week of Apamarga Kshar Sutra changing, the tract shortened in length until the end of 5<sup>th</sup> week when the cut tract was completely healed.
3. The Kshar sutra had cut across the tract at the end of 5 weeks.



**Figure 1: Application of Apamarga Kshar Sutra**



**Figure 2: 3rd week of Kshar Sutra Application.**



**Figure 3: 5th week of Kshar Sutra Application.**



**Figure 4: After treatment.**

## DISCUSSION

Patient had already undergone extensive treatment using higher antibiotics for treating Hidradenitis Suppurativa and was suggested conventional surgical treatment of un-roofing the lesions and laying open the tract along with skin grafting if necessary to which patient refused. Keeping in mind her preference, Ayurvedic treatment by using Apamarga Kshar Sutra was suggested to the patient after explaining the process and prognosis using it. Pus discharge stopped from the sinus tract of hidradenitis suppurativa by the end of 1<sup>st</sup> week and healthy granulation tissue was seen in the tract cut by the Kshar Sutra along with steady and progressive shortening of tract in the 2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup> week. At the end of 5<sup>th</sup> the Apamarga Kshar sutra cut through the entire tract along with healing of the cut tract. Follow up was carried out for two weeks post treatment without incidence of recurrence.

**Probable mode of action**

The Ksharasutra was first mentioned by the Sushruta in Sushruta Samhita for the treatment of Nadivrana (sinus), Bhagandara (fistula-in-ano), arbuda (tumour) etc. The Kasharasutra or medicated thread helps in cutting, curetting, draining and healing of the wound track or fistulous track. Simultaneously it destroys and removes unhealthy tissue, drains the pus and promotes healing through its ksharana (corrosive, pungent, alkali) actions. It controls the infection as well through the herbs applied to the thread. This is an apt thing in the wound healing since it simultaneous helps in cutting and healing of the wound and no pocket of pus is allowed to stay back. The kshara (caustics) drugs applied on the thread are also having anti-inflammatory, anti-slough properties.<sup>[6]</sup>

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