

REVIEW OF VARICOSE VEINS WITH SPECIAL REFERENCE TO VATARAKTA

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ABSTRACT

Varicose Veins can be explained as a disorder of the veins (especially of legs) where they get affected due to the backward flow of the blood. The veins get perverted, become enlarged. The disease also shows many associated symptoms which worsens the condition of the varicose veins. Varicose veins are widely seen as medically unimportant and deserving low priority for treatment. While treating varicose veins, have limited scope in other pathies; hence there is a need to see varicosity in an ayurvedic view. The present article is an attempt to have a look on varicose veins with special reference to *Vatarakta*. *Vatarakta* is described under *Vatavyadhis*, is a very important disease in *Ayurveda*. It is an illness where both *vata* and *rakta* are afflicted by distinct etiological factors. There are 2 types of *vatarakta* i.e. *uttan vatarakta* and *gambhir vatarakta*. *Uttan vatarakta*

produces symptoms like itching, burning sensation, pain, blackish discolouration of skin. *Gambhir vatarakta* produces symptoms like swelling, hardness, tenderness, burning sensation, pain. *Sushruta* has described *Vatarakta* in the *Vatavyadhi* chapter while *Charak* gave separate chapter on *Vatarakta*. Though varicose veins also shows close resemblance with *Siraj Granthi* and *Siragat Vata*; In the present article, review for varicose veins with special reference to *Vatarakta* is attempted.

KEYWORDS: *Varicose Veins, Vatarakta, Uttan Vatarakta, Vataj Vatarakta.*

INTRODUCTION

Varicose Veins are defined as dilated, elongated & tortuous, subcutaneous veins in the upright position. It is a penalty we pay for adoption of the erect posture. Varicose veins do not threaten life and are seldom disabling, but it causes a considerable demand on medical care. It affects 10–20% of population in the Western world but in India, it is 5 %.^[1]

Risk factors of varicose veins include family history, age, and pregnancy; a possible risk factor is standing for a long period of time. High ligation and stripping is the traditional approach for varicose veins, yet a variety of alternative options of treatment should be searched.

From an Ayurvedic perspective, varicose veins is a condition showing a vitiation of *vata dosha* (particularly *vyan vayu*) in the *rakta dhatu*; extending into their *updhatu i.e.Sira*.^[2] The disease which is caused due to simultaneous vitiation of both *vata* and *rakta* is called as *vatarakta*; which is like the combination of the wind and fire.^[3] Sushruta described this condition under *Vatavyadhi*, while Charak and Vagbhat assign a separate chapter to this disease.

MATERIALS AND METHODS

For the critical understanding and analysis of Varicose Veins-contemporary medical sciences texts are referred and for *vatarakta 'Brihat-trayee'* with their commentaries is referred. The data is collected and analysed.

REVIEW OF LITERATURE

1. Varicose veins

When a vein becomes dilated, elongated & tortuous it is said to be 'Varicose'. Mostly superficial veins show varicosity. Venous drainage in the lower limb is by- Deep vein, superficial vein, Perforating or communicating veins. Superficial veins lies in the subcutaneous fat between skin & deep fascia. Long saphanous, short saphanous & its tributaries are the superficial veins in the lower limb which shows varicosity. All superficial veins shows number of bicuspid valves in it to prevent the back flow of blood.

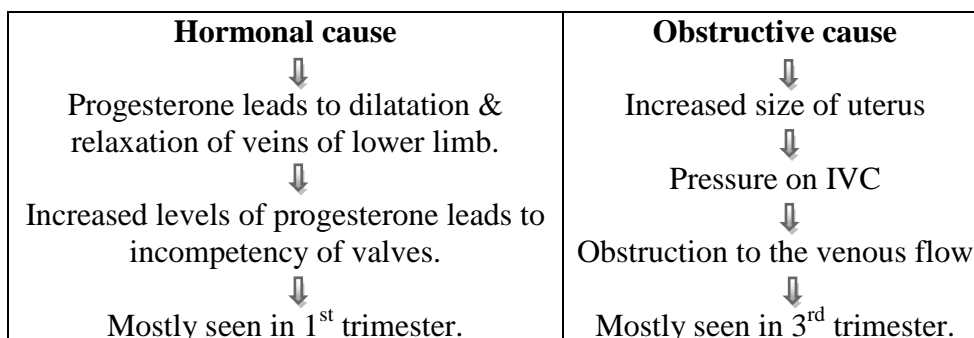
Aetiology

Veins have to drain against gravity. Superficial veins have loose fatty tissue to support them and therefore suffer from varicosity. Three types of varicosity are seen i.e. Primary, Secondary and Congenital.

Primary	Secondary	Congenital
1. Due to defect in valves- Weakness of vein wall ↓ Dilatation & separation of valve cusps ↓ Incompetent valves ↓ Varicose veins 2. More common type of varicosity	1. Due to venous obstruction e.g. Mechanical factors such as- <ul style="list-style-type: none"> • Pregnancy, • Tumours in pelvis (uterine fibroid, CA cervix, ovarian cyst etc.) Hormonal cause- Progesterone may cause varicosity in multiparous.	1. Due to congenital e.g. <ul style="list-style-type: none"> • Arteriovenous fistula or • Cavernous haemangioma

Predisposing factors

- **Prolonged standing**- Seen mostly due to occupation like traffic police, bus conductor, nurses, hair stylists, teachers etc.
 (Full Veins ⇒ Anti Gravity ⇒ Pressure on Valves ⇒ Varicosity)
- **Pregnancy**- Varicose veins are often seen in multiparous women. Pregnancy acts in varicose veins in following two ways.



- **Old Age**
- **Obesity**

Clinical Features

- Aching and heaviness in legs
- Itching and burning
- Appearance of spider veins on affected leg

- Pigmentation
- Swelling on leg
- Cramps in leg
- Minor injuries to the area may bleed more than normal
- Ulceration on leg

Complications

- Thrombophlebitis
- Haemorrhage
- Pigmentation
- Ankle flare
- Venous ulcer etc.

Treatment of varicose veins

1) Palliative treatment

- Limited scope of treatment
- Avoid prolong standing
- Use of crape bandage or elastic stocking
- Exercise to strengthen calf muscles

2) Operative treatment

- Ligation
- Ligation with stripping

2. Vatarakta

Individual vitiated *dosha*'s obstructs the path of each other causing *Vatarakta*.^[4] Generally people of tender health who indulge in sweet food, leisurely eating and sedentary habits get afflicted by *vata-rakta* because of intake of their vitiating factors.^[5] It is also known by *Khud*, *Vata-Balas*, *Aadhyavata*.

Vatarakta is of two varieties viz. *Uttan* (superficial) & *Gambhir* (deep seated). If *Vata* & *rakta* located in the *Twak* (skin) & *Mansa* (muscle tissue) is *Uttan* type of *vatarakta*; while if they are located in deeper tissue it is *Gambhir Vatarakta*.^[6] The *Uttan vatarakta* gives rise to following symptoms; *Kandu* (itching), *Daha* (burning sensation), *Ruk* (pain), *Aayam* (expansion), *Tod* (pricking pain), *Aakunchan* (contraction), *Twak vivarnata* (brownish

discolouration of skin). While *Shoth* (oedema), *Stabdh* (stiffness), *Bhrushartiman* (excruciating pain in interior of body), *Sfuran* (twitching sensation) and *Paak* (suppuration of joints) are the symptoms seen in *Gambhir Vatarakta*.^[7]

According to *dosha* predominance *vatarakta* is classified in to 4 subtypes- *Vataj*, *Raktaj*, *Pittaj* & *Kaphaj*. *Vatarakta* dominated by aggravated *vata dosha* shows some symptoms similar to varicose veins as *Sira Aayam* (dilatation of veins), *Tod* & *Sfuran* (throbbing & pricking pain), *Dhamani Sankoch* (contraction of vessels), *Shyavata* (brownish discoloration of skin), etc.^[8]

Treatment of *vatarakta* is of 2 types; *Antaparimarjan* and *Bahiparimarjan*. In the beginning, *Snehan* (oleation) should be given to the patient suffering from *vatarakta*. Thereafter, patient should be given *sneha yukt virechan* if patient is slightly unctuous. If the patient excessively unctuous, *virechan*- without *snehan* should be given. *Niruha basti* and *Anuvasan basti* should also be given as per requirement.^[9]

Uttan type of *vatarakta* should be treated with *Bahiparimarjan Chikitsa* as *Aalepan* (application of ointments), *Abhyang* (massage), *Parishek*, *Upanah* (application of hot poultice). While *Snehapan*, *Virechan*, *Niruha* etc should be given specifically in *Gambhir Vatarakta*.^[10]

DISCUSSION

Though varicose veins also shows close resemblance with *Siraj Granthi* and *Siragat Vata*; In the present article, review for varicose veins with special reference to *Vatarakta* is attempted. In disease *Vatarakta* the *Vata Dosha* gets vitiated, aggravated, & deranged by its own etiological factors. Simultaneously, its own etiological factors vitiate *Shonitha*. The vitiated *Rakta* produces obstruction to the flow of *Vata*. In latter course, the obstructed *Vayu* in tern vitiates *Rakta Dhatu*. Due to the properties of *Sukshmatwa* & *Saratwa* of *Vayu*; *Dravatwa* & *Saratwa* of *Rakta* they spread all over the body.^[11] The spreading is facilitated by *Vyana Vayu*. The vitiated *Rakta* afflicts *Raktavaha Srotas* & impairs its function. Due to impairment of *Raktavaha Srotus Vata* gets obstructed more or excessive obstruction. The *Dosha Dushya Sammurchana* occurs at the site of *Khavaigunya*.

Fluidity & mobility of *vata* & *rakta*, while moving through the vessels, get obstructed in the joints which make them further aggravated. Because of the tortuous nature of the course in

the joints, the morbid matter gets lodged there.^[12] Here *vata – rakta* produces different types of symptoms. The word *Sandhi* means not only union of two bones but also is a meeting place of any two structures in the body.^[13] (*Sharngdhar- purvakhnd 5/56, 57*) therefore superficial veins to deep veins and valves in the veins in the lower limb are also a type of *Sandi*.^[14] (*su.sha.5/28*) vitiated *vata* and *rakta* lodges at this *sandhi* due to *khavaigunya* and leads to varicosity.

Varicose veins results due to primary change in vessel wall followed by valvular changes. So, *dosh-dushya sammurchana* occurs in the *Sira* which is site of *Khavaigunya* as-

1. Leading predisposing factor in *vatarakta samprapti* is *Sthulata* and *Sukumarta*.^[15] All *dhatu shaithilya* including *sirashaithilya* is there in *sthul* (obese) persons.^[16]
2. *Siras* are originated from *medodhatu*; hence *medodushti* will lead to *siradushti*.^[17]
3. *Vata vruddhi* is directly proportional to increase in *Rukshatwa, Chalatwa aadi vata guna*. Increase in such *vata guna* affects (decreases) elasticity of valves in vessels. *Vyas* is karma of *Vruddha vata*;^[18] which leads to *Siravyas* (Dilatation of vessels).

Uttana vatarakta involves *Twak & Maansa dhatu*. That is when vitiated *vata & dushit rakta* have *Twak – Mans* as *Sthansanshraya*; it leads to *uttana* type of *Vatarakta*. Symptoms of *Uttan vatarakta- kandu* (itching), *tod* (pain), *daha* (burning) etc. are very similar to symptoms of varicose veins.

Symptoms of *Vataj Vatarakt* as *Sira Aayam* (dilatation of veins), *Tod & Sfurana* (throbbing & pricking pain), *Dhamani Sankoch* (contraction of vessels), *Shyavata* (brownish discoloration of skin), etc. are also similar to symptoms of varicose veins.

Hence inference can be drawn from the above discussion that, *dushit rakta* and *vrudha vayu* simultaneously leads to condition called as varicose veins.

On detailed review of available literature we find that the symptoms of varicose veins lie in the close proximity mostly with *vataj vatarakta, uttana vatarakta*.

CONCLUSION

The varicose vein is very common disorder in which not only dilatation and elongation of veins occur but also many associated symptoms which worsens the condition of the varicose veins. Varicose veins are widely seen as medically unimportant and deserving low priority for treatment. While treating varicose veins, have limited scope in other pathies; hence there

is a need to see varicosity in an ayurvedic view. In this article we have tried to explain with textual references that varicose veins is analogous to *Vatarakta*. Hence principles of treatment of *Vatarakta* i.e. *Virechan*, *Raktamokshan*, *Basti*, etc can be the management for Varicose veins.

REFERENCES

1. ScurrJH, Coleridge-Smith PD. Venous disorders. In: Russel RC, Bailey H, Love McN, editors. Bailey and Love's Short Practice of Surgery. Boca Raton, FL: CRC Press, 2000; 23: 235-55.
2. Charak Samhita By Agnivesh, Chakrapanidatta, Chaukhamba Prakashan, Varanasi, Chikitsasthan, 2005; 28/36.
3. Charak Samhita By Agnivesh, Chakrapanidatta, Chaukhamba Prakashan, Varanasi, Chikitsasthan, 2005; 29/4.
4. Charak Samhita By Agnivesh, Chakrapanidatta, Chaukhamba Prakashan, Varanasi, Chikitsasthan, 2005; 29/10: 11.
5. Charak Samhita By Agnivesh, Chakrapanidatta, Chaukhamba Prakashan, Varanasi, Chikitsasthan, 2005; 29/7.
6. Charak Samhita By Agnivesh, Chakrapanidatta, Chaukhamba Prakashan, Varanasi, Chikitsasthan, 2005; 29/19.
7. Charak Samhita By Agnivesh, Chakrapanidatta, Chaukhamba Prakashan, Varanasi, Chikitsasthan, 2005; 29/20: 21.
8. Charak Samhita By Agnivesh, Chakrapanidatta, Chaukhamba Prakashan, Varanasi, Chikitsasthan, 2005; 29/24: 25.
9. Charak Samhita By Agnivesh, Chakrapanidatta, Chaukhamba Prakashan, Varanasi, Chikitsasthan, 2005; 29/41.
10. Charak Samhita By Agnivesh, Chakrapanidatta, Chaukhamba Prakashan, Varanasi, Chikitsasthan, 2005; 29/43.
11. Charak Samhita By Agnivesh, Chakrapanidatta, Chaukhamba Prakashan, Varanasi, Chikitsasthan, 2005; 29/13.
12. Charak Samhita By Agnivesh, Chakrapanidatta, Chaukhamba Prakashan, Varanasi, Chikitsasthan, 2005; 29/14.
13. Sarangdhar-Samhita of Pandit Sharngdhar by Bramhanand Tripathi, Chaukhambha Surbharati Prakashan, Varanasi, Purvkhand, 5/56: 57.

14. Sushrutsamhita of maharshi Sushrut, by Anant Ram Sharma, chaukhamba prakashan, Varanasi, Sharirsthan, 2008; 5/28.
15. Charak Samhita By Agnivesh, Chakrapanidatta, Chaukhamba Prakashan, Varanasi, Chikitsasthan, 2005; 29/7,8.
16. Charak Samhita By Agnivesh, Chakrapanidatta, Chaukhamba Prakashan, Varanasi, Sutrasthan, 2005; 21/4.
17. Sushrutsamhita of maharshi Sushrut, by Anant Ram Sharma, chaukhamba prakashan, Varanasi, 2008, Sharirsthan 4/29.
18. Ashtanghrudayam By Shreevagbhata, Sarvangsundari, Motilal Banarsidas, Delhi, Sootrasthan, 2008; 12/49.