

## ROLE OF JALAUKAVACHARAN AND BALA TAILA PARISECHAN IN THE MANAGEMENT OF BUERGER'S DISEASE (TAO) - A CASE STUDY

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### ABSTRACT

TAO (Buerger's disease) is also called as chronic smoker disease. It is usually affect the arterial system, mainly involves medium and distal arteries. Usually occurs on lower limbs and affected to age between 20-40 years. In early stage it involve only one limb and gradually on both limbs. The peculiarity of the disease is that, about 90% of affected cases with TAO having the addiction of Cigarette smoking. Causes also include hypersensitivity to cigarette, minor feet injuries, poor hygiene and altered autonomic system. Intermittent claudication, discolouration of limbs, decreased local temperature, rest pain, ulcerations, feeble distal arterial pulsation, and recurrent

thrombophlebitis are the main symptoms. There are many modern treatment modalities are described regarding the TAO, such as vasodilators, pentoxifylline. Chronic cases may include amputation due to gangrene formation. Surgical management include sympathectomy, omentoplasty etc. Many modern conservative treatment fails to cure the chronic cases because of its vigorous complication and associated symptoms.<sup>[10,11]</sup> According to Ayurvedic literature The *Swarupa* and *Lakshanas* mainly related to *Twak*, *Rakta*, *Mansa*, *Asthi* and *Vayu dushti*. Treatment also apply according to *Srotovaignya*. *Jalaulavacharan* is very authentic treatment described in Ayurveda for *Twak*, *Rakta* and *Mansa dushti*. *Parisechan* (*dharasweda*) with *Balataila* is very effective to treat *Vata* and *Ashti dushti*. The combination of these two treatment regresses the further *Samprapti* of disease.<sup>[1,2,3]</sup>

**KEYWORD:** Buerger's disease(TAO), *Jalaukavacharan*, *Bala taila parisechan*.

## INTRODUCTION

The main causative factor is chronic smoking, this case also include same cause since 22 years. And smoking index was >300, As we know that smoke contains carbon monoxide and nicotinic acid which convert the oxyhaemoglobin to carboxyhaemoglobin, leads to vasospasm and affect vessel wall (Tunica intima of artery) then thrombus formation, further leads to obliteration to blood circulation.<sup>[12]</sup> As mentioned above all symptoms, and related treatment such as use of vasodilator like aspirin may hold the progression of disease for while but not so effective. Surgical procedures are very expensive and not having reliable results.<sup>[9]</sup>

In Ayurveda there are so many combined *Yogas* described which having very reliable because it acting on basic cause of disease. The treatment of *Srotodushti* is very important to treat disease. *Jalukavacharan* mainly described by *Acharya Sushruta* which is the basic treatment of all *Raktagat vyadhi*. *Bala taila* described by *Acharya vagbhata* in *Vata rakta vyadhi*, *swedana* with *Bala taila* in TAO is very beneficial as it hamper the further progressive pathology of diseases.<sup>[1,3]</sup>

## A CASE SUDY

A male patient of age 38 years, Hindu religion, Truck driver by occupation, come to OPD of Shalyatantra, at Govt. Ayurvedic College. The patient was asymptomatic before 1 year then gradually developed intense pain at lower at right feet, which hampers the patients daily work, also involves intermittent claudication with pain full walk. There was discolouration of limb and ulcer formation on greater toe which was unhealed since 6 months. He was took many modern medicines but didn't get relief.

### General examinations

G/C- moderate

PR- 84/min.

BP- 130/70

T- 98.6 F

Skin and eyes- No pallor.

### Systemic examinations

RS – AEBE clear

CVS – S1 S2 normal

CNS- Conscious oriented.

**Past history**

No H/O any major illness

No H/O HTN/DM/PTB/Asthma

No history of any surgical illness

History of drug allergy- patient was not known allergic

To any drug or substance allergy

**Personal history**

Diet - mixed

Appetite - good

Sleep - normal

Bowel – normal

Micturition - normal

Occupation – driver

Addiction – chronic smoking

(9 packets of cigarette per day from 22 years)

Tabacco chewing

**Family history-** No any

**Local examinations**

Discolouration over right leg

Shiny skin with hair loss

Redness

Non healing ulcer over right greater toe with slough.

Peripheral pulsation-

Right lower limb-

Dorsalis pedis artery- Absent

Posterior tibial artery- Absent

Popliteal artery- Sluggish

Femoral artery- Present

Left lower limb-

All peripheral arterial pulsation are present

**Investigations**

HB- 10.5 gms

WBC- 5400 /cmm

RBC- 4.3 million/mm<sup>3</sup>

BT- 1 min 7 sec

CT- 4 min 5 sec

BSL(R)- 110 mg/dl

HIV and HBsAg- noo reactive

Colour Doppler study-

Impression reveals thrombosis at femoral, popliteal, and tibial artery.

**DIAGNOSIS**

Buerger's disease (TAO).

**MANAGEMENT AND OBSERVATIONS**

TAO is obliteration at distal arteries of limbs. According to *Ayurveda* is related to *Srotovaigunya*, and treatment applied according to *Dhatudushti*. *Jalaukavacharan* is very effective in *Rakta*, *mansa* and *twakdushti*. And *Balataila* is very beneficial in *Vata* and *Asthi Dushti*. Combination of both this treatment relieves inflammation, pain, discolouration, thrombus formation eventually improves peripheral circulation.

**METHODOLOGY*****Jalaukavacharan***

According to *Ayurveda Nirvish Jalauka* preferred for therapy. 4 to 5 *Jalauka* under all aseptic precaution directly applied over lower limb of right leg, alternately after 3 days. Once used *jalauka* was made into use after next 7days. This treatment was given up to one month. The HB of patient was monitored.<sup>[1]</sup>

***Bala taila parisechan***

*Bala taila parisechan* was given one next day of *Jalaukavacharan* after each setting up to 1 month. Slightly lukewarm *taila* was used for *parisechan* for 20 min in twice a day.<sup>[3]</sup>

Daily dressing of ulcer was done with *Nimbadi taila* and exercise was explained to the patient.

## OBSERVATION AND RESULTS

After treatment was started pain was relieved in 10 days. Redness and inflammation subsided in 1 week, claudication distance was improved from 50 m to 100m in 15 days, then 500m in 1 month. Peripheral pulsation at dorsalis pedis and posterior tibial was felt in 15 days and completely felt after 1 month. Hair growth was gradually improved, Ulcer size is also reduced in 15 days with regular aseptic dressing and completely healed in 1 month.

## DISCUSSION

*Jalauka* means Leech (*Hirudina medicinalis*) saliva secretes Hirudin which has thrombus-reducing properties. Also reduces inflammation and redness subsequently relieves pain. It also improves collateral circulation, and then local temperature. Peripheral circulation well maintained. *Sthanik Rakta*, *twak*, and *Mansa dushti* also treated.

*Abhyanga* therapy is described in *Ayurveda*, which is very effective in skin diseases and hampered blood circulation. It also maintains the life and healthy tone of skin.

## CONCLUSION

Treatment of Buerger's disease (TAO) with *Ayurvedic* therapy is very beneficial, reliable, cost-effective, easily applicable. It also reduces risk of surgery and its further complication.

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