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Case Study

AYURVEDIC MANAGEMENT OF DUSHTA VRANA (VARICOSE ULCER) WITH DASHANGA LEPA

Parvinder Singh^{1*}, Anil Khamkar¹, Arya S Menon², T. Udaya Kiran³

*1PG Scholar, ²Assistant Professor, ³Professor and Head of Department, Department of Shalya Tantra, Sri Jayendra Saraswathi Ayurveda College, Chennai (Department of Ayurveda), Sri Chandrashekharendra Saraswathi Viswamahavidyalaya Kanchipuram, Tamil Nadu, India.

Article info

_____ ABSTRACT

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KEYWORDS: Dushta Varana, Dashanga Lepa, Varicose Ulcer. A wound, also known as a *Vrana*, is a condition where the body's tissues are damaged in a specific way, and after repair, the tissues become discolored, resulting in a permanent scar. Varicose ulcers are caused by persistent venous occlusion. A varicose leg ulcer occurs when blood recirculates through venous valves due to ischemia in the leg's vascular supply, caused by this insufficiency. Ignoring these lesions could lead to gangrene and infection. According to Ayurveda, varicose ulcers are associated with *'Sira Janya Dusta Vrana.'* In the medical field, *"Lepa"* can be described as a therapeutic approach where medications are applied externally to alleviate pain, reduce inflammation, or speed up recovery. This case report on varicose ulcers includes the patient's complete medical history, necessary laboratory tests, and clinical and physical examinations. The patient undergoes daily dressings on an OPD basis and is treated with various internal medications along with external procedures like the application of *Lepa*. After the administration of *Lepa*, the wound healed, and other symptoms improved significantly.

INTRODUCTION

A varicose ulcer, commonly known as a stasis ulcer or venous ulcer, is a type of chronic wound that typically develops due to increased venous hydrostatic pressure. This condition is characterized by nonhealing, open sores that usually appear on the lateral side of the leg in cases of short saphenous varicosity and on the lower one-third of the leg in cases of long saphenous varicosity. Prolonged venous hypertension elevates vein pressure and damages surrounding tissue, leading to varicose ulcers. Most varicose ulcers are superficial and shallow and are usually painless until they become infected. They are commonly associated with varicose veins^[1] for varicose ulcers includes involves the limb affected limb, actively and passively the calf muscle, passively, daily and treating treatment of the lesion. The four-layer bandage is applied; the treatment options may include saphenous vein stripping, skin grafting,

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ELVA (Endo Venous Laser Ablation), RFA (Radio Frequency Ablation), saphenofemoral ligation, and ultrasound-guided foam sclerotherapy.^[2]

Dushta Vrana ^[3] is the Vrana vitiated by Doshas. If Vrana has a bad smell (foul odour), has abnormal color with profuse discharge, severe pain intensity, and takes a long time to heal, it is known as *Dushta Vrana*. The characteristics of Dushta Vrana vary as per the predominant Dosha. The Lakshanas of Dushta Vrana are detailed in detail in Sushruta.^[4] Charaka has identified 12 types of Dushta Vrana. Charaka has also mentioned 36 Upakramas along with Samanya and Vishesh Chikitsa, while Sushruta has mentioned 60 Upkramas. Sharangadhara has mentioned Sapta Kramas for Vrana management.^[5]

Here, we are using *Lepa* to treat varicose ulcers. To illustrate the effectiveness of *Lepas*, consider how quickly a fire is extinguished by dousing it with water; similarly, the triggered *Doshas* of *Vata* (*Vedanta*, soothe, and complications of *Vata*) all disappear when *Lepa* is applied. Therefore, *Lepa's* activities such as *Sodhana*, *Utsadana*, and *Ropana* may be used for the management of *Dushta Vrana*.^[6]

The qualities of *Vrana, Shodhana, Utsadanam,* and *Ropana* are present in *Dashanga Lepa. Dashanga lepa* contains anti-inflammatory and antibacterial Parvinder Singh et al. Ayurvedic Management of Dushta Vrana (Varicose Ulcer) with Dashanga Lepa

qualities.^[7] Dashanga Lepa must first be mixed with ghritam and applied to the wound.

Ingredients	Quantity
Sirisa	1 Part
Madhuyashti	1 Part
Tagara	1 Part
Raktachandana	1 Part
Ela	1 Part
Jatamamsi	1 Part
Haridra	1 Part
Daruharidra	1 Part
Kushtha	1 Part
Valaka	1 Part

Case Report

Type of Study- Observation single case design **Study Centre**- Sri Jayendra Saraswathi Ayurveda College and Hospital, Nazarathpethai, Chennai.

History of Present Illness

A 35-year-old married male patient presents with the complaint of a non-healing ulcer, severe pain, and discharge from an ulcer in the left lower leg at the medial malleolus for 2 years. The patient was normal before 2 years. Then he developed pain in the lower leg followed by a small wound near the medial malleolus which increased in size and did not heal despite topical treatment. He received treatments from various hospitals but had no improvement in the symptoms. The patient has a previous history of DVT and varicose veins. The patient was on blood thinning medicine for DVT. Hence, he came to our hospital for further treatment. Written informed consent of the patient was taken before initiating the procedure on the patient.

Family History

No, any relevant family **Personal History** Diet – Mixed Appetite – Regular Sleep – Disturbed Bowels – Normal (two times a day) Micturition – Normal (3-4 times/ day) Habits – Tea (2-3 cups/ day) Addiction - None

General Examination

Table 1: General examination

Blood pressure	130/80 mmHg	
Respiratory rate	18/bpm	
BMI	29.4 kg/m ²	
Edema	Bilateral lower legs	
Icterus	Absent	
Pulse rate	84/bpm	

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	Height	5 feet 3 inches
	Nails	Normal
	Lymph nodes	Normal
	Heart rate	72/bpm
	Weight	62 kg
	Pallor	Absent
	Cyanosis	Absent
	Temperature	36.8 degree C
	1	

Dashvidha pariksha

Table 2: Dashvidha pariksha

Dashavida pariksha	Interpretations
Pakruti	Kapha Vata
Vikruti	Pitta Kapha
Sara	Twak Rakta
Samhanan	Madhyam
Pramana	Madhyam
Satmya	Vyamisra
Satva	Madhyam
Vaya	Madhyam
Ahara shakti	Madhyam
Vihara shakti	Madhyam

Astavidha pariksha

Table 3: Astavidha parikshaa

Table 5. Astaviana pariksnaa		
Astavidha pariksha	Interpretations	
Nadi	Kapha Vata	
Mala	Shushka	
Mutra	Alpa	
Jihwa	Nirlipta	
Shabda	Clear	
Sparsha	Sheeta	
Drika	Prakruta	
Akriti	Madhyama	

Assessment criteria

- 1. Defense and Veterans Pain Rating Scale Score before treatment -8 (severe pain)
- 2. Bates-Jensen wound assessment tool: Wound score before treatment-42

Investigation

HB	14.2 gms/dl
WBC	10230 cells/cumm
RBC	6.76 million/cumm
Platelet	3.56 lakhs/cumm
ESR	9mm/hr
RBS	98 mg/dL

Radiology

Doppler study -left lower limb vein shows:

-GSV appears dilated and tortuous throughout from the level of medial malleolus till its drainage into with incompetent perforators noted at the level of knee (-3.3 mm) and mid-calf (-6.3 mm).

- SSV appears dilated and tortuous till the calf region with two incompetent perforators noted at the mid-calf region (max-6.4 mm).

Multiple tortuous tributaries were noted at the ankle level medially.

No evidence of thrombosis of the deep veins of the left lower limb at the time of the scan. **Provisional diagnosis:** *Dushta Vranam* (varicose ulcer)

Treatment plan

The patient was treated with external procedures.

External medication:

The wound was cleaned with normal saline and *Lepa karma* was done with *Dashanga Lepa*. After the application of *Dashanga Lepa*, the dressing was done with sterile gauze and bandage once daily. This treatment plan was followed for 15 days. The therapeutic procedure is given in Table 4.

Table 4: Treatment	procedure
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Treatment procedure	From	То	Number of days
Cleaning the wound with normal saline +	10/07/2024	25/07/2024	15 days
Dashanga Lepa was applied and Wound			
dressing with sterile gauze once daily			

RESULTS

		Score		
	BT	AT		Follow up
		1 st week	2 nd week	After 15 days
Defense and Veterans Pain Rating Scale:	8	3	0	0
Bates-Jensen wound assessment tool:	42	23	13	13

Overall, both the Defense and Veterans Pain Rating Scale and the Bates-Jensen wound assessment tool demonstrate positive progress in managing pain and healing wounds, respectively. The patient's pain level has significantly decreased over time, with no pain reported in the follow-up assessments. The wound condition has also improved, with a consistent decrease in the severity score. These findings indicate the effectiveness of the clinical interventions and highlight the importance of an integrated approach to pain management and wound care in enhancing patient outcomes

Effect on Vrana Vedana (pain): Patient pain and tenderness were completely reduced at the end of

treatment. Severe pain is present at the initial stage, with more than 50% relief at the end of 1^{st} week, and complete relief at the end of 2^{nd} week.

Effect on Vrana Aakriti

After the course of treatment, *Vrana* fully recovered with little scarring. *Dashanga Lepa* accelerated the rate of contraction and healing, which helped to minimize the size of the wound. By the end of the first week, *Dushta Vrana's* clinical aspects had improved, and by the end of the second week, the wound had nearly healed, leaving hardly any scar. After a 15-day follow-up, no recurrence symptoms were seen.



Table 5: Symptoms before and after treatment

Before treatment	After treatment
Severe pain and tenderness are present at the site region	Tenderness completely relief, and pain reduce by more than 50% after 7 days of treatment
Discharge	Completely stop after 15 days
Scarring present	Minimal scarring after 15 days of treatment
Recurrence of the wound present	No signs of recurrence occurred after treatment

DISCUSSION

Complications from varicose ulcers are a frequent recurrent issue. Reducing venous congestion, improving tissue perfusion, and fostering tissue repair are the main objectives. Most patients respond to conservative treatment, which often comprises the traditional regimen of elastic stockings, elevating the leg during rest, and calf muscle training. However, ulcers become resistant to some treatment. necessitating limb amputation and causing severe impairment. Ayurvedic medications have shown efficacy in treating a wide range of difficult and chronic illnesses. Avurveda offers a variety of formulas to address skin conditions. The medications used in this case have the following properties: Rakta Shodhaka (blood purifier), Vrana Ropaka (wound healing), and Sothahara (anti-inflammatory).

Dashanga Lepa: Kashaya, Tikta, Katu, and Madhura Rasa are present in the majority of the medications used in Dashanga Lepa. It has already been shown that plants including Kashaya and Tikta *Rasa* can cure wounds.^[8] *Dashanga Lepa* possesses the qualities of Utsadanam, Ropana, and Vrana Shodhana. All four cardinal symptoms of inflammation- pain, edema, erythema, and temperature- are decreased by Dashanga lepa. Pain can be effectively managed with Dashanga Lepa. One possible explanation is a drop in prostaglandin levels. Dashanga Lepa contains flavonoids (Ana Garcia-Lafuente et al., 2009) and tannin (Watson et al., 1992) that have potent analgesic properties. Therefore, it's possible that *Dashanga Lepa* had analgesic effects on inflammation.^[9]

CONCLUSION

Based on this case study, it can be concluded that Lepam karma with Dashanga lepa was found to be very effective in the management of Dushta Vrana (varicose ulcer). Dashanga Lepa possesses high efficacy in Vrana Shodhana and Vrana Ropana with fine scaring without producing any adverse effect and it

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gives relief in signs and symptoms of Dushta Vrana (varicose ulcer). Thus, Dashanga Lepa along with internal medications quickens the process of wound healing and serves as an alternative herbal approach for the management of *Dushta Vrana* (varicose ulcer).

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*Address for correspondence **Dr. Parvinder Singh** PG Scholar. Department of Shalya Tantra, Sri Jayendra Saraswathi Ayurveda College, Chennai, Tamil Nadu. Email:

parvinder33707@gmail.com

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