

# Effect of Panchavalkala Qwatha Parisheka Followed by Jatyadi Taila Dressing in the Management of Venous Ulcer - A Single Case Report

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## ABSTRACT

Venous ulcer is the most common type of leg ulcers which constitutes 81% of total ulcers. Increased venous hydrostatic pressure/abnormal venous hypertension in the lower 1/3rd of leg, ankle, and dorsum of foot is the cause for venous ulcers. In spite of great advancement in wound management, no treatment has proven its definite success in healing of these ulcers. Acharya Sushruta is the one who elaborately explained Vrana in his treatise. Depending on the nature of Vrana, one can wisely choose treatment among Shashti upakramas which are highly effective and curative also. A case of 50 year old male patient diagnosed with Venous Ulcer over lateral aspect of Right lower 1/3 rd of leg with profuse serous discharge and pain since 6 months was treated with Panchavalkala Qwatha Parisheka followed by Jatyadi taila dressing for 40 days. Dressing was done daily for first 20 days. After 1 week of follow up, again dressing was done daily for rest of the days. Ulcer got completely healed at the end of 40 days. Hence this simple and cost-effective treatment had proven to be effective in the management of venous ulcer.

**KEYWORDS:** Panchavalkala Qwatha parisheka, Jatyadi Taila, venous Ulcer, Vrana

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## INTRODUCTION

Ulcer refers to discontinuity in the covering epithelium, skin or mucous membrane<sup>(1)</sup>. Among ulcers, venous ulcer constitutes 81% of leg ulcers. Up to 40% of the adult population in resource-rich countries have diseases of the veins of the leg. This extraordinary prevalence along with the associated impairment in health-related quality of life makes an important area of surgical practice. India has high prevalence rate of 4.5 cases per 1000 population in a year<sup>(2)</sup>. Increased venous hydrostatic pressure/ venous hypertension in the lower 1/3<sup>rd</sup> of leg, ankle, dorsum of foot is the cause for venous ulcers. Venous ulcers are usually painless unless they are infected, having serous or sero-sanguinous discharge, hyper pigmentation, Induration and tenderness in the surrounding skin.<sup>(3)</sup>

Vrana is the disease which is as old as civilization. We find references about vrana since vedic era. Acharya Sushruta is the one who elaborately explained Vrana in his treatise. Shalyatantra explains Vrana and its management as one of its major targets. Depending on the nature of Vrana, one can

wisely choose treatment among shashti upakramas which are highly effective in the management of Vrana.

## CASE REPORT

A 50 year old male patient with the complaint of wound in the lateral aspect of right lower limb associated with serous discharge and pain since 6 months came to OPD of Taranath Govt. Ayurvedic College and Hospital, Ballari (Karnataka).

## History of Present illness:

Patient was apparently normal 6 months back. One day he noticed a small boil over lateral aspect of Right lower limb, which burst opened spontaneously with serous discharge and severe itching. Due to poor hygiene and lack of rest the condition worsened and he developed pain at the wound site.

## Treatment History

When he developed pain and profuse serous discharge, he consulted nearby physician and was treated with analgesics and antibiotics and advised for daily dressing. But he

neglected the condition and discontinued the treatment due to economical issue. Hence he consulted TGAMCH for further management.

### Personal history

Appetite-Good  
Bowel-Once/day  
Micturition-4-5 times/day  
Sleep-Disturbed due to pain  
Habit- Tobacco chewing since 20 years, Smoking since 10 years left one year back.

### Occupational History

He is a coolie worker and works for 8-10 hours/day.

### General Examination

Built-Moderate	Vitals
Pallor-Absent	P.R.-76bpm
Icterus-Absent	B.P.-130/80 mmHg
Clubbing- Absent	Temperature-98.6 F
Cyanosis- Absent	H.R.-76 bpm
Lymphadenopathy- Absent	R.R-18 cycles/min
Edema- Absent	
Systemic Examination-	
CVS-S <sub>1</sub> S <sub>2</sub> heard, no added sounds	
RS-Chest Bilaterally Symmetrical, NVBS heard	
CNS-Conscious, well oriented	
P/A- Soft, Non tender, no palpable mass.	

### Local Examination of Ulcer-

#### Inspection-

Site-lower 1/3<sup>rd</sup> of Right limb, 5 cm above lateral malleolus  
Size-4cmx6cmx1/2 mm  
Shape-Irregular  
Floor-Pinkish Granulation tissue with slight slough  
Edge-sloping  
Discharge-Serous  
Surrounding area-Black Pigmentation with dry scales

#### Palpation-

Temperature-Not raised  
Tenderness- Slightly present at the margin  
Pulsations- Dorsalis Pedis Artery:Palpable  
Posterior Tibial Artery:Palpable  
Margin- Tender, Indurated.  
Investigations-  
Hb%-11.3gm%  
WBC-6,500/ml  
ESR-20mm in 1<sup>st</sup> hour  
Diagnosis-Venous Ulcer

### Treatment Planned-

Oral Medication-  
Manjishtadi kashaya 15ml TID  
T. Amratadi guggulu 1 TID  
T. Saptamrita Loha 1BD  
External Application-

Initially wound was cleaned with Normal Saline thoroughly.

Kashaya was prepared from Panchavalkala Qwatha choorna and Parisheka was done in its warm state for 5 minutes.

Dressing was done with Jatyi Taila.

This methodology was done daily for 20 days. After 7 days of follow up again dressing was done daily for rest of the days.

### RESULTS

The ulcer got healed completely after 40 days of treatment leaving behind a scar. Patient got relief from pain and itching.



Before treatment on 11/11/2019



During Treatment on 5/12/2019



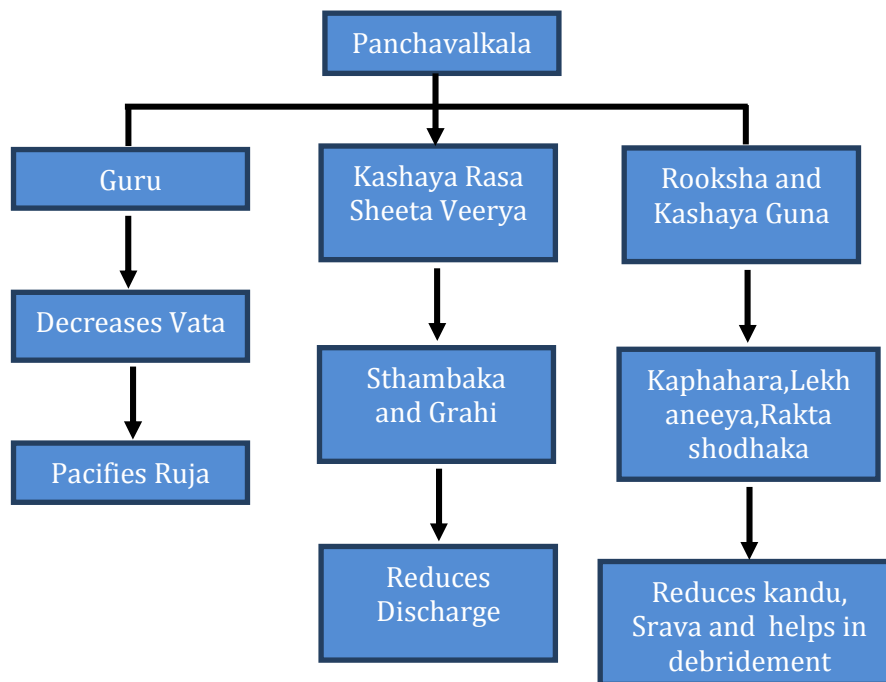
After Treatment on 20/12/2019

### DISCUSSION

Sushruta while explaining Parisheka, tells that it pacifies pain just like water pacifies fire afflicted house<sup>(4)</sup>. Depending on the involvement of doshas the drugs are selected for Parisheka. In Vata dosha involvement, kashaya prepared out of Sarpi, taila, Mamsarasa and Vatahara oushadha is used. In Pitta dosha involvement ksheera, ghrita, madhu, sharkara, ksheerivruksha kashaya are used. In Kaphaja variety taila, mutra, ksharodaka are used.

#### Mode of Action

Panchavalkala-Nyagrodha, Udumbara, Ashwattha, Plaksha, Pareesha



Composition	Pharmacological Action	Action on wound
Tannins (Vata, Udumbara)	Anti-oxidants, Antiinflammatory	a) They prevent oxidation process which delays wound healing and thus protect tissue from damage. b) Help to increase Collagen c) Help in wound contraction and increase Capillary formation.
Flavanoids (Vata, Pareesha, Plaksha, Ashwattha)	Anti-oxidants, anti-inflammatory	Prevent Prolongation of initial phase
Phytosterols	Anti-inflammatory	Prevent prolongation of initial phase, Help in wound contraction and increase Capillary formation.

### Action Of Jatyadi taila

Jatyadi Taila is already proven best Vrana shodhaka<sup>(6)</sup>.

### Composition of Jatyadi Taila

Flavanoids, Glycosides, Tannins, Essential oils, steroids	Help in wound healing.
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In vivo experiment of Jatyadi Taila shows significant increase in Protein, Hydroxyproline and Hexosamine content in the granulation tissue.

### CONCLUSION

Venous Ulcers take longer duration for healing, sometimes requiring surgical procedure for the management. We have got many formulations for wound healing in our classics, but their effectiveness have to be proved by adopting them depending upon the condition. In present scenario wound management is difficult because of its prolong duration of healing. Simplification in the management, cost effectiveness and reduction in the duration of the treatment are the need of the hour. Panchavalkala Qwatha Choorna and Jatyadi Taila are such kind of medicines which are easily available and cost-effective which have shown their significant results within minimal duration of time.

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