

MANAGEMENT OF MADHUMEHAJ VRANA (DIABETIC FOOT ULCER) THROUGH JALAUKAVCHARANA: CASE REPORT

Dr. Balyogeshwar Sharma

Dr Khyati

*MD Panchakarma

**PG Scholar Swasthavritta, UAC, Dehradun

DOI: 10.29322/IJSRP.11.01.2021.p10968

<http://dx.doi.org/10.29322/IJSRP.11.01.2021.p10968>

ABSTRACT

Diabetes Mellitus is a disease which hampers body functions and structure by its complications in long run. *Madumehaj Vrana* (Diabetic Foot Ulcer) is a major Complication leading to maximum number of Amputations in India and world. A report shows that 30 percent of patients gets healed with the Standard treatment in 20 weeks, which is not an encouraging situation as 70 percent of them will continuously be impacted. So there is a need of accessible affordable and fast technique for management of *Madhumehaj Vrana*. *Raktamokshana* through *Jalauka* is such a powerful Para surgical Procedure which can be the boon to society. It has been clearly mentioned by *Acharya Sushruta* that *Jalaukavcharana* can be easily done in any person who is *Parama Sukumara*, and it removes the deep seated vitiated *doshas* and improves blood circulation thereby increasing the healing of ulcer fast. In this Case study of Chronic *Madhumehaj Vrana* *Jalauka* application was done every 15 days followed by cleaning and washing with *yashtimadhu churna* and *panchavalkala kashaya* followed by dressing with *Jatyadi tail*. Patient was continued the Anti diabetic and Anti Hypertensive medications. After 2 months of treatment Ulcer healed completely.

Keywords: *Madhumehaj Vrana*, *Jalaukavcharana*, Diabetic Foot Ulcer, *Acharya Sushruta*

I. INTRODUCTION

Diabetic Foot Ulcer is the major complication of Diabetes Mellitus. It is a syndrome involving Neuropathy, Ischemia, infection, poor wound healing due to increased Blood Sugar Level, minor trauma, cutaneous ulceration, gangrene. 85% of diabetic foot ulcer leads to Amputation, resulting in disability. A study shows that 30% of Neuropathic Diabetic ulcers heals in 20 weeks with the standard treatment, which is a long duration, so we need an accessible, affordable and fast working treatment. Diabetic foot ulcer mostly occurs on

planter regions especially at the weight bearing surfaces. According to *Ayurveda* it can be correlated with *Madhumehaj Vrana*. *Acharya sushruta* in *Pramehanidana* chapter explained that a *Pramehi* whose body is filled with *Vasa* and *Meda* along with other *dushyas* and vitiated *Tridoshas* leads to formation of *Prameha pidikas* and further putrefaction leads to ulcer formation. *Acharaya Sushruta* also mentioned in *Sutrathana Krityakriyavidhi* chapter that *Madhumehaj Vrana* are *Kashtasadhya* i.e. difficult to treat because of poor wound healing. and in *chikitsa sthana* it is described that due to weakness of *Rasayanis (dhamani* that circulates *Rasa, Rakta* etc) *Doshas* cannot raise above resulting in *Pramehapidikas* in lower body only.

II. IMPORTANCE OF JALAUKAVCHARANA

Raktamokshana is considered as *Ardhachikitsa*, as it removes the vitiated *doshas* from body. *Raktamokshana* through *Jalauka* is considered best to be done in *Parama Sukumara* as it is an *Anushastra* and has less threshold to pain. *Jalauka* lives in water and is *Madhura Rasa yukta* which is why it is helpful in *Pitta* vitiated conditions. according to *ashtanga hridaya* *Jalaukavcharana* should be done when *Doshas* are deep seated i.e. *Avghada*, which means Diabetic foot ulcer can be treated with *Jaloukavcharana*.as the *Doshas* are deep seated in *Dhatus*.

III. CASE REPORT

A. AIM AND OBJECTIVES

To study the effect of *Jaloukavcharana* in Diabetic Foot Ulcer (*Madhumehaj Vrana*)

B. TYPE OF STUDY

Observational Single case design without control group.

C. **STUDY CENTRE:** AYUSH Dispensary,, Civil Hospital, Sector 4, Rewari, Haryana, India

D. STUDY DETAILS

AGE: 50 yrs GENDER: Male RELIGION: Hindu

OCCUPATION: Farmer DIET: Vegetarian

CHIEF COMPLAINTS: Non Healing Ulcer on Right Foot Planter region since 3 years

Blood discharge along with pus and unpleasant smell and swelling

BRIEF HISTORY

Patient presented with the complaint of Non healing ulcer on Right Foot Planter aspect accompanied with bloody discharge pus and swelling since 3 years. No History of trauma given by patient. No complaint of any pain. Patient is a case of Diabetes Mellitus and on Medication still Uncontrolled. Patient was a case of uncontrolled Hypertension also and not on any treatment. Patient took allopathic treatment since 3 years but got no relief.

GENERAL EXAMINATION

Vitals : BP: 200/100 mm Hg Uncontrolled

Haematological investigations: Random Blood Sugar: 417mg/dl uncontrolled throughout the course

X ray AP/Lat/Oblique- No Bony Involvement

LOCAL EXAMINATION AND ASSESSMENT

a) INSPECTION

SITE: Right Foot Planter Region

SIZE: LENGTH: 3cm WIDTH: 3 cm DEPTH: 0.5 cm

SHAPE: Irregular/oval EDGE: Rough/Irregular FLOOR: Unhealthy with slough and less granulation tissue

DISCHARGE: Blood discharge accompanied with pus SMELL: unpleasant

STATE OF VRANA: *Dushta Vrana*

b) PALPATION

EDGE: No Tenderness

Base: No Tenderness

Local Temperature: Raised

PROCEDURE

After whole assessment wound was washed and cleaned with NS. Afterwards *Jalauka* was Applied over the wound.

After about 30 minutes *jalauka* left on their own and wound was cleaned and washed with *Yashtimadhu churnalepana* and *Panchvankala Kashaya* and dressing was done with *Jatyadi tail*.

Further dressing was done on alternate days and *Jalauka* was applied once in 15 days for 5 sittings and assessment was done on Day 1, 15, 30, 45, 60. Anti Diabetic drugs(Tab Metformin and Tab Tinagliptin 5mg) were advised to continue.

Along with this oral medication of Tab *Kaishora Guggulu*, Tab *Chandraprabhavati* 2 BD each and *Triphala Churna* 5 gm BD and *Panchanimba Churna* 5 gm BD was given. Also Antihypertensive drugs Tab Amlodipine AT were started.

Observation was done upon the cardinal symptoms for healing of ulcer as follows:

Table 1: Gradation Criteria for Assessment

CARDINAL SYMPTOMS	GRADE 0	GRADE 1	GRADE 2	GRADE 3
SIZE	No discontinuity	3/4th of previous area of ulcer	1/2th of previous area of ulcer	More than 1/2th area of ulcer
PAIN	No pain	Mild localised pain on movement	Moderate pain on rest	Unbearable pain even on rest
SMELL	No smell	Bad smell	Tolerable unpleasant	Foul smell
DISCHARGE	No discharge	Mild occasional discharge	Moderate discharge needs dressing daily	Profuse discharge
EDGE	Intact skin	Smooth regular	Rough and irregular	Angry Look
FLOOR	Smooth with healthy Granulation tissue	Rough regular less granulation tissue	Unhealthy , less granulation tissue	Unhealthy no granulation tissue

IV. OBSERVATIONS

Table 2: Observations according to Assessment Criteria

CARDINAL	BEFORE TREATMENT				A.T
L					

SYMPTOMS	NT				
	DAY 1	DAY 15	DAY 30	DAY 45	DAY 60
SIZE	3	3	2	1	0
PAIN	0	0	0	0	0
SMELL	2	2	1	0	0
DISCHARGE	2	2	1	0	0
EDGE	3	2	2	1	0
FLOOR	3	2	2	1	0

V. RESULT

It has been observed that by *Jalaukavcharana*, *Madhumehaj Vrana* is healed completely in duration of two months. *Jalauka* showed its *Vrana Shodhana* and *Ropana* effects by removing the vitiated *doshas* from the affected region and increased healing by improving the blood circulation and decreasing inflammation of the planter region of the foot.

VI. CONCLUSION

Jalaukavcharana is simple, accessible, affordable and fast technique to cure such Chronic Non healing and Advanced conditions that too in an OPD. As *Madhumehaj Vrana* shows marked Improvement in 2 months it can be concluded that this bloodletting therapy is truly the *Adhachikitsa* and boon to the Society. It nearly avoided the chance for Amputation and Disability, which restored the physical level of Health.

REFERENCES

- [1] Kaviraj Ambika Dutt Shastri (Reprint 2016). "*Sushruta Samhita Ayurvedatvatvasandipika Hindi Commenary*" (Vol. Part 1). Varanasi: Chaukhamba Sanskrit Sansthan.
- [2] Kaviraj Ambika Dutt Shastri (Reprint 2016). "*Sushruta Samhita Ayurvedatvatvasandipika Hindi Commenary*" (Vol. Part 2). Varanasi: Chaukhamba Sanskrit Sansthan.
- [3] Kaviraj Atridev Gupt (Reprint 2013). "*Ashtanga Hridayam Vaidyotini Hindi Commentary*". Varanasi: Chaukhamba Prakashan.
- [4] Amarprakash P. Dwiwedi , "Case Study of Leech Application in Diabetic Foot Ulcer". *Int. J. Res. Ayur Pharm* 2012; 3(5):748-751.
- [5] Dr Jignesh Chauhan, D. D. (2017). "A Comparative Clinical Study Of Siravedha And Jalaukavcharana In The Management of MadhuMehaj Vrana(Diabetic Foot Ulcer)". *World Journal Of Pharmaceutical Research* , 6 (7), 1837-1844

- [6] Kaundal Ramesh, Sharma Omprakash, Kumar Gaurav Garg, Hiremath Jyoti, Kumar Ashwani, "Jalaukavcharana (Hirudotherapy): A Unique Parasurgical Measure". *Int. J. Ayur. Pharma Research*, 2015;3(2): 29-34.

PICTURES

FIGURE 1

Clinical Presentation DAY 1



FIGURE 2

DAY 15



FIGURE 3

DAY 30



FIGURE 4

DAY 45



FIGURE 5

DAY 60



AUTHORS

Author: Dr Balyogeshwar Sharma, MD Panchakarma.

Email ID: vasisth.yogi3@gmail.com

Contact Number: 7411377820

Correspondence Author: Dr Khyati, PG Scholar
Swasthavritta, UAC, Dehradun

Contact Number: 9878021551

Email ID: khyatikaloiya09@gmail.com