



**RATIONALITY OF DIFFERENT AYURVEDA TREATMENT PROTOCOLS IN THE  
MANAGEMENT OF DUSHTA VRANA**

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**ABSTRACT**

The ayurveda ancient science of medicinal system described *Vrana* (wound) as a pathological condition which involves destruction or discontinuity of body tissue. Similarly non healing ulcer defined as *dushtavrana* by ayurveda texts. The healing of wound or an ulcer is the natural mechanism of the body. Naturally wound will heal in one week if no *Doshic* invasion (infection) takes place. Presence of infection is one of the important factors which impair wound healing. A healthy wound heals with minimum scar as compared to infected wound. Classics of Ayurveda especially *Sushruta* has elaborately explained details of wound & its management. A clean wound in a normal body heals earlier as compared to contaminated wound. Wound healing is mechanism where the body attempts to restore the integrity of the injured part. Here in this research paper we have discussed three cases of *Dushta vrana* with the rationality of different Ayurvedic management like *shodhana*, *ropana* and *shamana chikitsa*.

**KEYWORDS:** Dushta Vrana, Shodhana, Ropana, Shamana Chikitsa, Ayurveda.

**INTRODUCTION**

*Dushta vrana* is a common pathological condition faced by physician mainly related to the external infections, cuts or ulcer. The proper healing of progressive wound is one of the major problems in surgical practice. Even though healing of *Vrana* is a natural process of the body, the *Vrana* should be protected from *Dosha dushti* & from various microorganisms which may hamper the natural course of Wound healing. *Acharya Sushruta* explained *Vrana* in detail in classical text "*Sushruta Samhita*" as a concourse of wound healing procedures still holds its place today. *Sushruta* has described 60 measures for the comprehensive management of *Vrana* which includes local as well as the systematic use of different drugs and treatment modalities under a dedicated chapter.

**Definition**

*Vrunoti yasmaat Roodheapi Vranavastu nanashyati / Aadeha dhaarnaattasmatvranaityuccyate //*

As the scar of wound never disappears even after complete healing and its imprint persisting life long, it is called as *Vrana*. As it causes destruction of the tissue or damage of body part, so it is termed as *Vrana*.

***Dushta vrana:*** *Vrana* which has foul smell, continuously flowing putrefied pus along with blood, with cavity, since long time and has smell etc, *Vranalakshanas* are high in intensity and which is almost opposite to *Shuddha Vrana* is *Dushta Vrana*. In this context we can understand it as a non-healing or contaminated wound.

***Lakshanas of Dushta vrana:*** *Samruta* (narrow mouthed), *Kathina* (hard), *Avasanna* (depressed), *Vedonarvan* (severe pain), *Vivruta* (wide mounted), *Ushna* (hot), *Daha* (burning sensation), *Paka* (suppuration), *Puyasravya* (discharging pus).

***Ayurveda Management of dushtavrana:*** *Sushruta* has described *Shastivranopakarma's* for a wound management from its manifestation to the normal rehabilitation of the hair over the scar. Better wound healing with minimal scar formation and controlling the pain effectively are the prime motto of every surgeon.

दुष्टव्रणेषु कर्तव्यमूर्ध्वचाधश्चशोधनम्। विशेषणं तथाऽऽहारः शोणितस्य च मोक्षणम्।

कषायराजवृक्षादौसुरसादौचधावनम्।तयोरेवकषायेणतैलंशोधन  
मिष्यते।Su. Chi-2/86-87

*Vamana* and *virechana*, *Shoshana* (*langhana*), *Aahara* (*kashaya*, *tikta katu pradhana*), *Rakta mokshana*, *Vrana dhawana* with *Aragvadhadi*, *surasadi gana kashaya*, *Vrana shodhana* with *Aragvadhadi*, *surasadi gana kashaya siddha taila*, *Rasakriya-Kashaya+sphatika+Manashila +Harital+Matulunga+ Madhu*

• So by considering all above said modalities of *Dushta vrana* treatment broadly classified into two headings:

• 1) Medical management: - *Abhyanga*, *Sweda*, *Vimlapana*, *Upanaha*, *Pachana*, *Sneha*, *Vamana*, *Virecana*, *Apatarpana*, etc.

• 2) Surgical management:- *Bhedana*, *Daarana*, *Lekhana*, *Eshana*, *Aaharana*, *Vyadhana*, *Visravana*, *Seevana*, *Sandhana*, *Kshaarakarma*, *Agnikarma*, *Chedana*, etc.

**Shodhana:** *Abhyantara Shodhana* (Internal purification)  
*Bahirgata Shodhana* (External purification by application of medicine)

#### ABHAYANTARA SHODHANA

1. **Vamana** - *Vranas* above the level of *Nabhi Pradesha* with *Kapha Pradhana Lakshana* are better managed by *Vamana Karma*.

2. **Virechana** - The wounds which are affected by *Pitta Dosha* and situated middle portion of the body and non healing wound with long duration, in such cases *Virechana* plays a better role in healing.

3. **Basti** - it is advised in case of *Vrana* which is having *Vata Pradhana Dosha*, and *Margavarajanya Vrana* and wound situated in lower extremities are better treated with *Basti Chikitsa*.

4. **Shirovirechana** - *Vrana* which is situated in *Urdvajatrugata* area and *Kaphapradhana* conditions, this procedure is beneficial.

#### BAHYA SHODHANA

1. **Raktamokshana** – *Raktamokshan* is indicated since *Rakta* is mainly involved as *Dushya* in *Samprapti Ghataka*. *Raktamokshan* includes various method are commonly practiced are *Siravedhan* (vein-puncturing) and *Jalaukavacharan* (leech application). *Raktamokshan* is indicated in disorders of *Pitta* and *Rakta* involvement, thus non healing wound which has imbalance of *Pitta* and *Rakta* can be well managed with *Raktamokshan*.

2. **Ropana** - *Ropana* means a factor, which promotes or quickens the healing process. The modern system of medicine could not find such *karma* which promotes the process of healing except anti-infective and deriding agents. *Ropana* processed in the form of *Kalka*, *Kashaya*, *Varthi*, *Ghritha*, *Taila* and *Choorna* etc.

#### VRANA PRAKSHALANA

*Ropana*, *Shodhna* (*Aragvadhadi kashaya*, *Sursadigana kashaya*, *Lakshadigana kashaya* and *Panchavalkala kashaya*)

*Vrana Pichu* –*Doorvadi ghritha*, *Jatyadi taila/ghritha*, *Nimbadi taila*, *Kshara taila pichu*, *Sursadi taila* etc. is to be used for *Vrana Pichu*.

*Vrana Lepa* –*Tilakalkadi (ropana)*, *Tila nimba kalkadi (ropana + shodhana)*.

*Vrana basti* - *Jatyadi taila (ropana + shodhana)*.

#### Case Reports – 1

- A 45 years old male patient
- C/O Non healing wound on right great toe since 3 months
- Rest pain right dorsal aspect of foot
- Slough & Pus discharge 2 ½ month
- Difficulty in walking
- H/o smoking since 15 years (20 cigarettes/ day)

#### Investigations

- Colour Doppler study of right lower limb arterial system-
- Thickened wall with mildly reduced luminal size with biphasic flow of Anterior tibial, posterior tibial & dorsalis pedis arteries with atherosclerotic changes in arteries of right lower limb.

#### Chikitsa Vruttanta

- **Poorva karma**
- *Koshtashodhana*
- *Bahya snehana & swedana*
- **Pradhana karma**
- *Basti chikitsa*
- *Vrana prakshalana*
- **Pashchat karma**
- *Jaloukacharana*
- **Poorva karma**
- *Kostashodhana -Gandharvahastadi taila 70 ml +milk 100 ml*
- *Snehana swedana -Sarvanga abhyanga- Pinda taila, Parisheka sweda- Dashamoola kashaya.*

- **Pradhana karma**
- **Niruha basti-Manjishtadi kshara basti**
- *Makshika* – 80 ml, *Lavana* – 5 gms, *Taila* – *Manjishtyadi taila* - 60 ml, *Kalka* – *manjishtadi choorna* – 20 gms, *Shatapushpa choorna*- 10 gms, *Guduchi choorna* – 10 gms, *Manjishtadi kashaya* 150 ml, *Goarka* – 100 ml & *Kanji* – 100 ml.

- *Anuvasana basti -Manjishtadi taila 60 ml*

**Plan for Basti**

Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8
AB	NB	AB	NB	AB	NB	AB	AB

- *Prakshalana - Triphala kashaya*
- *Pashchat karma*
- *Jaloukacharana*
- Photo of *vrana*



Before Treatment      After Treatment

**CASE REPORTS - 2**

**Gender** –Female **Age** -55yrs **Occupation** – House wife  
**H/O present illness**

- Complaining of blackish discoloration of greater toe associated with foul discharge and also involving on the dorsal aspect of left foot with reddish discoloration and no complaints of pain or burning sensation.

**Past history-** k/c/o DM since 12yrs.

**On examination**

- Febrile and cellulites features were observed in the left lower limb with raised temperature however edema was absent.
- Vital signs were normal

**Treatment plan**

1. Amputation
2. Wound management
  - *Shodhana*
  - *Ropana*
  - *Shamana*

**DAY 1**

**a. Amputation**

- Under aseptic precautions excision of left greater toe at phalanx was done.
- Followed by cleaning with H<sub>2</sub>O<sub>2</sub> + Betadine solution, betadine soaked gauze was placed over it and compression bandage was done carefully, and IV antibiotics was started for 5 days.

**Day 2**

- Dressing- *Panchavalkala kashaya* for first 7 days followed with *Jatyadi taila*.
- *Nimbadi guggulu*- 2 BD
- *Punarnavadi kashaya*- 3tsf TID
- *Nitya virechana* with *Triphala churna* 10 gm Hs with hot water for 7 days.

**Same treatment was continued for 3 days & patient was discharged on 5<sup>th</sup> day:**

The dressing continued with *panchavalkala kashaya* for 7 days, during which the wound began to respond favorably, initially by clearance of the slough tissue, then by emergence of healthy granulation tissue and finally by wound contraction, epithelialization and scar formation.

GRBS	GRBS	GRBS	GRBS	GRBS	GRBS	GRBS
351mg/dl	321mg/dl	327mg/dl	351mg/dl	249mg/dl	142mg/dl	136mg/dl



Before Treatment      After treatment

**CASE REPORTS-3**

Name : xyz  
 Age : 61 years  
 Sex : Male  
 Occupation : Worker at mill

**Chief Complaints**

- Wound over rt. leg since 8 days
- Severe pain since 4 days
- Swelling of right limb since 4 days

**History of Present Illness**

- Patient was said to be healthy 8 days back.
- Then he fell down from bicycle and got wound over right ankle joint.
- For that he consulted nearby hospital and took treatment. The details of which are not known. But got relieved temporarily.
- Gradually pain increased in intensity. Also started complaining of pus discharge from wound.
- Since 4 days he was complaining of severe pain at whole right limb, swelling of limb and unable to walk.

**Past History**

- There is no specific medical /surgical history
- No H/O drug allergic

**Family History**

- No specific familial history

**Clinical Examination****Inspection**

- Site: Medial malleolus of right leg
- Shape: Spherical
- Size: 4×4 cm
- Number: Single
- Edge: Inflamed & edematous
- Surrounding area: Red & edematous
- Floor: Necroses skin
- Discharge: Pus
- Right limb: Edema, redness

**Palpation**

1. Local rise of temperature - present
2. Tenderness - severe
3. Pitting edema

**Vrana pariksha**

- Vrana Akroti: Vritta
- Vrana Gandha: Puya Gandhi
- Vrana Strava: Puya Yukta
- Vrana: Krishan Vrana, Atiushna
- Vrana Avasta: Dushtavrana

**Plan of Care**

- Posted for wound debridement under local anesthesia.
- Wound management
- Shodhana
- Ropana
- Shamana

**PRE-OPERATIVE**

- OT. Consent
- Inj. Xylocaine test dose 0.2 cc I/D
- Inj. TT. 0.5cc IM
- Monitor TPR. BP.

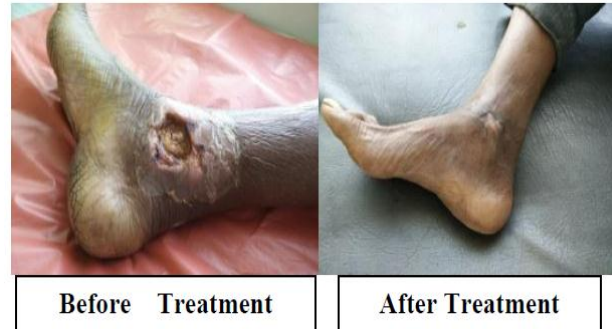
**OPERATIVE**

- Painting and draping
- Inj. lignocaine with adrenaline 2 % infiltrated around the wound
- Necroses tissue and slough was removed
- Debridement done with scoop.
- Wound cleaned with Povidone iodine solution and H<sub>2</sub>O<sub>2</sub>
- Dressing done

**POST-OPERATIVE**

- Daily dressing
- Vrana prakshalana with panchavalkala kashaya
- Vimlapana karma with jatyadi taila

- Tab *Triphala Guggulu* 1 tid
- Tab *Gandhaka Rasayana* 1 tid
- Cap. Pentaphyte P 5 1 tid

**Points to be Remember**

- The part should be kept dry and sterile.
- The part should be kept elevated.
- The part should be protected particularly the local pressure areas.
- People with diabetes should control their blood-sugar levels with proper medication.
- They should routinely examine their feet for any signs of injury or change in skin color.

**DISCUSSION**

- Acharya has described number of procedures for management of wound amongst them *Chedana*, *shodhana* and *ropana* are widely used in the management of wound.
- Treatment strategies for diabetic foot ulcers include metabolic control of diabetes mellitus, eradication of infection, promotion of ulcer healing, and removal of pressure from the ulcers.
- Most of the drugs present in *Nimbadi guggulu* are *tikta*, *kashaya* which act as *Kapha Vata hara*.
- *Punarnavadi kashaya* mainly pacifies *Kapha Vata dosha* and has anti-inflammatory effect.
- Dressing done in follow up period with *Panchavalkala* decoction has *shodhana* property (daily washing of wounds with well-prepared decoction leads to cleansing of wounds.)
- *Jatyadi taila* dissolves hard fibrous tissue and generates healthy base for healing and finally promotes healing of wound.

**CONCLUSION**

The *Vrana* should be protected from *Dosha Dusthi* and from various microorganisms, which may afflict the *Vrana* and delay the normal healing process. *Dushtavrana* is a case difficult to treat. It requires a detailed history & careful examination. Both local & systemic treatments are needed for its management, on the basis of this case study, it can be concluded that, Ayurvedic management is very effective in the *Dushta Vrana*.

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