



AYURVEDA HEALS - VIRECHANA FOR WOUND HEALING WITH SPECIAL REFERENCE TO SHAREERIKA (PITTAJA) VRANA: A CASE REPORT

DHRITI KHANDELWAL^{1*}, RAHUL DOGRA², SHIVANI A C³, SHYAM PURUSHOTTAM WARMA⁴, PRASANNA NARASIMHA RAO⁵

^{1*,2}PG Scholar, Department of Shalya Tantra, SDM College of Ayurveda & Hospital, Hassan.

^{3,4}Assistant Professor, Department of Shalya Tantra, SDM College of Ayurveda & Hospital, Hassan.

⁵Principal & Professor, BAMS, MS (Ayu.), PhD., Department of Shalya Tantra, SDM College of Ayurveda & Hospital, Hassan.

Corresponding Author Email: dhritikhandelwal96@gmail.com Access this article online: <https://jahm.co.in>

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ABSTRACT:

Shareerika Vrana (Ulcers) also called as Nija Vrana (Ulcers) are said to be result of Doshopaplava (Imbalance of Doshas) and are Kashta Sadhya (Complex to treat) as compared to Sadyo Vrana (Traumatic wounds & Ulcers). A 43 years old female patient approached outpatient department with chief complaints of a non-healing wound in the both of her feet at the dorsal aspect associated with pain, discharge & burning sensation. On examination it was analyzed as Shareerika (Pittaja) Vrana (non-healing ulcer). Patient was treated with classical Ayurveda therapeutic measures, Shodhana Karma (Virechana Karma- Systemic Detoxification), & Ropana Karma (Bahya and Abhyantara- Internal & External Healing methods), which included daily dressing with Jatyadi Taila along with Tab. Triphala guggulu & Tab. Gandhaka rasayana internally. A remarkable improvement in the condition of the wound is observed with significant healing during treatment period with complete healing in 7 days post Virechana Karma (Purgation therapy). In this study, an attempt is made to prove the role of Virechana (Purgation therapy) in Wound Healing with special reference to Shareerika Vrana (Ulcers).

Keywords: Shareerika Vrana, Virechana Karma, Shashthi Upakrama, Ropana karma

INTRODUCTION:

In Ayurveda, vast knowledge and literature is available regarding *Vrana* (Wound). *Sushrutacharya* has elaboratively mentioned about *Vrana*, its types, *Samanya & Vishesha lakshana* (Generalized & specific features), *Sadhya-asadhyata*, *Upadrava* (Prognosis & Complications) and *Chikitsa* (Treatment). *Dushta vrana* (non-healing wound) among these are said to be *Kashta Sadhya* (Difficult to treat).^{[1][2]}

Shashthi upakrama (60 therapeutic measures) have been described in Sushruta Samhita for the management of *Dushta vrana* (non-healing wound) which include *Shodhana karma* (Detoxification), *Shastra karma* (Surgical intervention), *Ropana karma* (Healing methods) & *Vaikritapaha chikitsa* (Measures to reduce co-morbidities).^[3] Adequate *Shodhana* (Detoxification) is necessary for the proper healing of *Vrana* (Wounds). Hence, an effort is made to understand and witness the effect of *Shodhana Karma* (*Virechana Karma*- Systemic Detoxification) in management of *Vrana* (Wounds), along with internal medications in the management of *Dushta vrana* (non-healing wound), as described in the Ayurveda classics.

CASE REPORT:

A 43-year-old female patient presented with non-healing wound in the both of her feet at the dorsal aspect associated with pain, watery discharge & burning sensation from 2 weeks. The symptoms started 2 weeks ago suddenly. There was an acute onset of blister formation over both of the feet. Later she noticed bursting open of those with watery discharge. Gradually she started getting pain and

burning sensation. Lesions increased and symptoms got increased. Hence, she consulted to *Shalya Tantra* (General Surgery) OPD for the management of the same. Based on all of the symptoms, history provided, examinations, clinical and investigatory findings, patient was diagnosed with *Shareerika Vrana* (Ulcers) with *Pitta Pradhana Dushti* (Pitta Predominant Vitiation of Dosha). There was no history of any type of allergy, diabetes mellitus, hypertension, tuberculosis, or any other major systemic disorders.

Clinical findings:

On physical examination, the general condition of the patient was good, with normal vitals. On local examination, Ulcers over dorsum of bilateral foot – Right – multiple ulcers due to burst opened blisters with scaly – peeling skin – whole of the dorsum. Left - fused ulcers due to burst opened blisters with scaly – peeling skin – at the proximal 1/3rd & single ulcer at the base of the great toe. Reddish discoloration of surrounding skin was present along with serous discharge from both feet (R>L), Local rise in temperature, pitting Edema and tenderness, without the involvement of a localized lymph node.

Intervention:

After proper *Aamapachana* (Regulating metabolism), *Snehapana* (Internal medicated Ghee) was given in *Arohana Matra* (Gradually increasing dosage) with *Panchtikta guggulu ghrita* for four days, starting from 30 ml up to 190 ml. After assessing *Samyak snigdha lakshana* (signs of optimum oleation), *Sarvanga Abhyanga* (External oleation- Massage) was done with *Manjishtadi taila* followed by *Nadiswedana* (Tube Soudation) with

plain water steam was given for three days, followed by *Virechana* (Purgation therapy) with 50 g of *Trivrit lehya* and 100 ml of *Triphala kashaya* at 7 am on the next day. The patient was advised to have frequent sips of warm water and asked to count the number of *Vegas* (Total frequency of stool passed). First *Vega* was observed at 9 am, with the last *Vega* at 4 pm, and a total of 20 *Virechana vegas* were observed. The patient was advised to follow

Samsarjana krama (Post panchakarma measures) for 5 days. Simultaneously, daily dressing was done using *Jatyadi taila*. After *Samsarjana karma* (Post panchakarma measures), Tab. *Triphala guggulu 1 gram* & Tab. *Gandhaka rasayana 500 mg* twice a day with Luke warm water after food. were given for a week. The total duration of the treatment on inpatient department basis was 15 days, followed by a follow-up after 2 weeks on OPD basis.

Timeline:

Table 1

Sl. No.	Date and Day	Clinical findings
1	<ul style="list-style-type: none"> Day – 0 09/07/2023 First day of patient visit Diagnosed as Nija (Pittaja) Vrana 	<ul style="list-style-type: none"> Diffuse ulcers over B/L feet Extensive swelling +++ Serous discharge +++ Tenderness +++ Reddish discoloration +++
2	<ul style="list-style-type: none"> Day – 2 11/07/2023 <i>Snehapana</i> started in <i>Arohana Krama</i> for 4 days based on <i>Sneha Siddhi lakshana</i> (30 to 90ml) 	<ul style="list-style-type: none"> Ulcer size reduced slightly Extensive swelling +++ Serous discharge +++ Tenderness +++ Reddish discoloration +++
3	<ul style="list-style-type: none"> Day – 4 13/07/2023 	<ul style="list-style-type: none"> Ulcer size reduction Swelling ++ Serous discharge ++ Tenderness ++ Reddish discoloration ++
4	<ul style="list-style-type: none"> Day – 6 & 7 15/07/2023 & 16/07/2023 <i>Vishrama Kala</i> <i>Sarvanga Abhyanga</i> & <i>Nadi sweda</i> given 	<ul style="list-style-type: none"> Ulcers almost reduced in Rt. Foot Swelling ++ Serous discharge ++ Tenderness ++ Reddish discoloration ++
5	<ul style="list-style-type: none"> Day – 8 17/07/2023 Day of <i>Virechana</i> 	<ul style="list-style-type: none"> Ulcer healing with scab formation Swelling ++ Serous discharge +

		<ul style="list-style-type: none"> • Tenderness ++ • Reddish discoloration +
6	<ul style="list-style-type: none"> • Day – 9 • 18/07/2023 	<ul style="list-style-type: none"> • Ulcer – healing with reduced sized • Swelling + • Serous discharge - slight • Tenderness + • Reddish discoloration – mild
7	<ul style="list-style-type: none"> • Day – 11 • 20/07/2023 	<ul style="list-style-type: none"> • Ulcers over B/L feet – almost healed • Swelling – reduced by 75% • Serous discharge - absent • Tenderness - mild • Reddish discoloration - absent
8	<ul style="list-style-type: none"> • Day – 13 • 22/07/2023 	<ul style="list-style-type: none"> • Ulcers over B/L feet – almost healed • Swelling – reduced by 90% • Serous discharge - absent • Tenderness - absent • Reddish discoloration - absent
9	<ul style="list-style-type: none"> • Day – 15 • 24/07/2023 • 7th day Post <i>Virechana</i> 	<ul style="list-style-type: none"> • Ulcers over B/L feet – healed • Swelling – absent • Serous discharge - absent • Tenderness - mild • Reddish discoloration - absent

Follow-Up And Outcomes:

Patient came for follow up after 2 weeks of discharge, there was no recurrence of blisters or ulcers with complete reduction in discharge, burning sensation and pain, with minimal scar. Detailed observations of ulcer are mentioned in

timeline in Figures and Table 1 & 2. Remarkable improvement with significant healing was seen during treatment. Complete healing of ulcer with minimal scar within 7 days post *Virechana*. All symptoms were relieved completely.



Day-0 (09/07/23)



Day-8 (Virechana)
(17/07/23)



Day-15 (7th day post
Virechana) (24/07/23)



Follow up after 14
days (07/08/23)

Table 2

Factors	Before treatment	Virechana Day	After treatment
Edema	+++	++	Absent
Discharge	+++	+	Absent
Burning sensation	+++	+	Absent
Pain	+++	+	Absent
Tenderness	+++	+	Absent

DISCUSSION:

It is mentioned in *Charaka Samhita* 'Shattvam tu nativartante tritwam vatadayo yatha'^[4]. It is based on *Yukti* (Strategy) of a *Vaidya* (Physician), assessment of *Dosha-dushya sammoochana* (Conjunction of toxins & body tissues) is done which decides the line of treatment to be chosen and the outcome of it. *Shashthirupakrama* (60 therapeutic measures) of *Vrana* mentioned by *Sushrutacharya* involve a holistic approach of dealing with numerous *Dosha-Dushya Samprapti* (Pathophysiology) resulting in better Prognosis.

Shodhana Karma (Detoxification), *Virechana* here, alleviates *Shareerika Pitta Pradhana Dosha Dushti* (Systemic Pitta Predominant toxins), therefore deals with systemic pathology. Also, *Virechana* is *Pradhana Shodhana Karma* (Primary Detox therapy) for the management of *Pittaja* as well as *Adharanga Vikara* (Diseases of Lower body). *Trivrit* as has *Kapha-pittahara* (Pacifies *Kapha* & *Pitta*), *Rakta shodhaka* (Purifies Blood) & also has *Shothahara karma* (Anti-inflammatory) Hence, *Trivrit lehya* having *Mridu virechana karma* (forgiving purgative) & *Hridya* (Less discomforting) was chosen.

The *Snehapana* (Internal oleation therapy) aims to prepare the body for *Shodhana karma* (detoxification) and help in bringing the *Dosha*

situated in *Shaakha* (Periphery/systemic) to the *Koshta* (Gut), so that they can be easily expelled out, by virtue of *Vridhhi* (Accumulation) and *Vishyandana karma* ^[4]. In the present case, *Panchatiktaka ghrita* was chosen for *Snehapana* (Internal oleation therapy) as it mainly contains drugs that balance the *Tridosha* mainly *Pitta dosha* and has been indicated in *Dushta vrana* (non-healing ulcer).

Ropana Karma - Daily dressing (*Bandhana*) with *Jatyadi taila* which has proven effects – does local action of *Shodhana & Ropana* (Cleansing & healing). *Abhyantara* (Internally) – Tab. *Triphala guggulu* & Tab. *Gandhaka Rasayana* – aids in checking systemic infective & inflammatory pathology thereby fastens process of wound healing and also has *Vedana shamana karma* (Analgesic action).

CONCLUSION:

Acharya Sushruta has mentioned *Shashthi Upakramas* (60 therapeutic measures) in detail for the management of *Vrana* (Wounds & Ulcers) which include *Shodhanadi Panchakarma*, *Shastra Karma* (Surgical), *Bahya & Abhyantara Chikitsa* (External & internal therapies); having an all-inclusive, wholistic approach targeting both systemic and local pathogenesis of the condition thus, resulting in better prognosis. Non-healing ulcer and cellulitis

involving the foot in a person can have multiple causes and are prone in people with comorbidities like diabetes, varicose veins etc. originating in chronic or acute injury to the soft tissues of foot can be among other causes. Absence of any of these findings in such patients are referred as ulcer due to idiopathic cause in contemporary science. It can be concluded that, cellulitis leading to ulcers has feature of *Pittaja (Nija) Vrana*. The given protocol of treatment along with *Shodhana Karma* (Detoxification) has shown significant results which relieved patient symptomatically and improved her quality of life. Further studies are required in a larger sample size, based on the *Doshas* to demonstrate its wider acceptability and efficacy.

Declaration of patient consent

The authors confirm that they have acquired a patient consent form, in which the patient or caregiver has granted permission for the publication of the case, including accompanying images and other clinical details, in the journal. The patient or caregiver acknowledges that their name and initials will not be disclosed, and sincere attempts will be

undertaken to safeguard their identity. However, complete anonymity cannot be assured.

Patient perspective: Patient was very much satisfied as her ulcers got healed completely. Before treatment, the condition had affected her daily routine activities & quality of life.

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