

EFFICACY OF PRATISARANIYA - KSHARA IN THE MANAGEMENT OF PRAMEHA PIDIKA (CARBUNCLE) - A CASE REPORT

Harit Kumari¹, Narinder Singh², P. Hemantha Kumar³

¹Ph.D Scholar ²Assistant Professor, ³Professor & Head

P.G Department of ShalyaTantra, National Institute of Ayurveda, Jaipur, Rajasthan, India

Email: drharit79@gmail.com

ABSTRACT

Carbuncle is the infective gangrene of the subcutaneous tissue and is commonly associated with diabetic patients. In Ayurveda, carbuncles can be correlated to *prameha pidika*. Acharya Sushruta had described 10 types of such related conditions. Ayurveda offers a multifaceted approach concerning the management of *pramehapidika* through standard protocol mentioned concerning *Madhumeha* along with effective measures concerning the management of *dushtavrana* mentioned under *shashti-upkrama*. Acharya Sushruta mentioned prognosis of *Madhumehajvrana* as “*Krichrasadhya*” (difficult to treat), which is experienced even in present day practice. A case report of *prameha pidika janya Vrana* successfully treated with *Apamarga Kshara pichu* has been presented here. After the debridement therapy with *Kshara*, the healthy wound continued to heal satisfactorily. *Kshara karma* proved to be an efficient measure concerning the debridement of the slough that requires repeated surgical interventions in the management of carbuncle.

Keywords: *Shodhan, Pramehapidika, Kshara.*

INTRODUCTION

Acharya Sushruta had described 10 types of *Pramehapidika*¹ features of which are comparable to Carbuncle. Carbuncle is the infective gangrene of the subcutaneous tissue and is commonly associated with diabetic patients. Acharya Sushruta mentioned prognosis of *Madhumehajvrana* as “*Krichrasadhya*”², he also suggested that wounds of *pramehi* (dia-

betic patient) should be treated as *dushta vrana*³, further *Kshar* is indicated in the management of *dushta vrana*⁴. Thus, *Apamarga Kshara* was selected for the management of *prameha pidika janya vrana* along with adjuvant measures.

CASE REPORT

Type of study: Observational single case design.

A male patient aged 65yrs, presented at NIA Shalyatantra OPD with painful swelling & pus discharge on right scapular region since 10 days. Associated complaints were fever (on & off) and generalised weakness. The swelling gradually increased in size despite taking home remedies. He was a diagnosed case of Diabetes mellitus and was taking oral hypoglycaemic medications since 5 years. All vital parameters were within normal limits.

LOCAL EXAMINATION:

Inspection -

There was a diffuse swelling at right shoulder region with multiple pus discharging openings. Small ulcer with slough was present at the center of the swelling. Overlying skin was Red and edematous.

Palpation -

Temperature – Raised, Tenderness- Present, Consistency- soft at the centre & firm all around.

The case was diagnosed as *PramehaPidika* (Carbuncle).



MATERIALS & METHODS

Local management

- Incision & Drainage with Deroofing (Cruciate incision) under L.A. was done.
- The wound cavity thus created was daily dressed with *Apamarga Kshar Pichu* for 4 weeks.

Systemic management

- *Triphala Guggulu* 2 b.d. for 4 weeks
- Management of Diabetes.



RESULTS

On 7th day, without any surgical debridement, reduction in the amount of slough was noticed. By the end of 2nd week fresh granulation tissue started appearing on the floor of wound. After 4 weeks, floor was healthy, contracting margins appeared and discharge was completely absent.

After the debridement therapy with *Kshara*, the healthy wound continued to heal satisfactorily.

DISCUSSION

Kshara is very effective debriding agent as there was significant reduction in discharge and slough tissue of wound which was observed during clinical study. This was due to *Chedana*, *Lekhana*, *Kledahara*, and *Tridoshaghna*⁵ properties of *Kshara*, which played important role in scraping out the debris and slough from the *Vrana* and it further prevented the reoccurrence of unhealthy granulation tissue and promoted healing. It is a simple OPD level procedure, relatively painless, can be done without anesthesia and hospitalization. *Kshara karma* is cost effective and saves the time as compared to mechanical debridement.

CONCLUSION

1. On the basis of this case study it can be concluded that, *kshara karma* could be an efficient measure concerning the debridement of the slough that requires repeated surgical interventions in the management of carbuncle with potential outcomes.
2. *Pratisaraniya kshar* is very efficient in wound bed preparation.
3. No adverse drug reaction was reported in this case, so *kshara* is safe for topical application in wounds.
4. *Kshara Pichu* is a better form of *Pratisaraneeya kshara* to apply over wounds.

WOUND FORMED AFTER I&D



AFTER 1 WEEK



AFTER 2 WEEKS



AFTER 4 WEEKS



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