

AYURVEDIC MANAGEMENT OF CHRONIC WOUND – A CASE STUDY

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ABSTRACT

Background: In *Ayurveda Vrana* (wound) has stated as the destruction of viable tissue due to various etiology. *Vrana* can be classified into *suddha vrana* and *dushta vrana* (chronic wound). Among the drugs mentioned for *dushta vrana* *Triphala* and *Panchavalkal* are selected for their wide spectrum action on the wound. **Aim:** Management of chronic wound with topical *Triphala kwath dhava* and *Panchavalkal* ointment local application. **Material and methods:** A 50-year male patient, presented with a chronic wound over the right leg anterior aspect with pain, slough, seropurulent discharge for 3 months. The initial measurement of the wound was 20cm length-10cm width-3cm depth. The patient was given freshly prepared *guduchi swaras* orally along with washing of the wound with *Triphala kwath* daily and application of wound dressing with *Panchavalkal* ointment were done daily. **Result:** The wound was completely healed with normal skin by the sixth week. **Conclusion:** Topical use of *Triphala kwath dhavan* with *Panchavalkal* ointment and oral use of *Guduchi patra swaras* were found effective for chronic wound healing.

Keywords: *Ayurveda, vrana, Triphala kwath, dhavan, Panchavalkal, chronic wound.*

INTRODUCTION

A wound is a break in the integrity of the skin or tissue often, which may be associated with disruption of the structure and function [1]. Based on the time elapsed wound is classified into acute and chronic wounds [2]. The systemic diseases that affect wound healing are Diabetic Mellitus, rheumatoid arthritis, peripheral vascular diseases, and its treatment- use of corticosteroids, and immunosuppressant [3]. The risk factor that delays wound healing includes bacterial infections, nutritional deficiencies, certain drugs such as antineoplastic, and the anatomical site of the wound [4]. The conventional medicinal approach is usually aimed at proper wound-based maintenance, sharp debridement, pressure prevention, vascular intervention, and prevention of chronic infection. Despite the advances that have been made, the management of chronic wounds is still a challenge for the clinician. Hence there is a need to search for alternative treatments for chronic wounds.

In *Ayurveda*, *Acharya Sushruta* was quite aware of the importance of wound management and describe *Shashti upakrama* (sixty measure) for *vrana ropana* (wound healing) [5]. *Acharya Sushruta* primary approach involves *shodhan* (purification) and *ropana* (healing) of *vrana*. In addition to a local application, oral administrations of herbs are also specified to enhance wound healing.

In this case study, the chronic wound was treated with topical *Triphala kwath dhavan* with *Panchavalkal* ointment and oral *Guduchi patra swaras* which led to complete healing within six weeks.

CASE REPORT:

A 50year male patient, presented with a chronic wound on the right leg anterior aspect for 3 months, having a history of unknown bites. Then he gradually developed cellulitis (*Vrana shotha*) over the right leg. He complained of pain, slough, seropurulent discharge, and difficulty in walking. He was taken allopathic treatment for that, and cellulitis subsides but the wound remains. He took treatment for the wound but did not get relief. Hence patient got admitted to the *Shalyatantra* department Government Ayurved

College and hospital Osmanabad for further management and treatment.

PAST HISTORY:

No h/o DM, Koch's, surgical illness, and drug allergy.

{The any H/O is not significant with the patient disease.}

PERSONAL HISTORY:

1. Appetite – good
2. Diet - mix diet
3. Sleep – normal
4. Bowel – normal
5. Micturation – normal
6. Addiction – Tobacco chewing for 30yrs

GENERAL EXAMINATION:

The general condition of the patient was good,

- Pulse -90/min, regular
- BP -136/70 mmHg
- RR - 20/min, regular

No evidence of icterus, pallor, and lymphadenopathy.

SYSTEMIC EXAMINATION:

RS – AE=BE, clear

CVS – S₁S₂ normal, no abnormal sound added

CNS – conscious & oriented

P/A – soft and non-tender

ASTHAVIDH PARIKSHAN:

Ashtavidh Parikshan of the patient was done and it is found normal.

INVESTIGATION: Day 1

Hb %-14.7 gm%

BSL (Random)-90 mg/dl

BT-1.37"/min CT-4.5"/min

Urine routine- nil

HBsAg and HIV- negative

LOCAL EXAMINATION:

- Wound size – 20cm-10cm-3cm
- Site – right leg anterior aspect
- Discharged – seropurulent present
- Foul-smelling – mild
- Margins – irregular and inflamed
- Edges – fibrosed edges
- Tenderness was present with surrounding induration and local rise in temperature.

- Granulation: Unhealthy granulation
- Base – Bone (tibia)
- Slough – present

MATERIAL AND METHODS:

1. After the assessment wound was with freshly prepared *Triphala kwatha*. The wound was cleaned and dressing with *Panchavalkal* ointment done daily.

2. The dressing was changed daily, the total duration for treatment was six weeks and during the treatment, the assessment was done on the 1st week, 2nd week, 3rd week, 4th week, 5th week, and 6th week.
3. The patient was advised to take freshly prepared *Guduchi Patra swaras* -20ml two times in day daily.

ASSESSMENT CRITERIA:

Subjective criteria:

Parameter	Grade					
Size	Baseline-100%	4-75%	3-50%	2-25%	1-5%	0-0%
Unhealthy Granulation	Baseline-100%	4-75%	3-50%	2-25%	1-5%	0-0%
Discharge	Baseline-100%	4-75%	3-50%	2-25%	1-5%	0-0%
Odor	Baseline-100%	4-75%	3-50%	2-25%	1-5%	0-0%
Slough	Baseline-100%	4-75%	3-50%	2-25%	1-5%	0-0%
Pain	Baseline-100%	4-75%	3-50%	2-25%	1-5%	0-0%

Objective criteria:

The wound was measured during treatment and photographic images were also taken every week of treatment for six weeks.





RESULT:

It was observed that the deep-seated slough started to resolve from the base and the wound started to heal after one week. At this time he reports less discharge, odor, and pain. The clinical feature of vrana was improved by the sixth week(fig.no6). wound get

completely closed, the skin around the affected area became pinkish and healthy tissue appeared. At the end of the sixth week of discharge, the foul smell was completely stopped. At the follow-up of six months, the patient reports no sign of recurrence of symptoms.

Progression report

Parameter	Grade					
	1 st week	2 nd	3 rd	4 th	5 th	6 th
Size	Baseline-100%	4	3	2	1	0
Unhealthy granulation	Baseline-100%	3	2	1	0	0
Discharge	Baseline-100%	3	2	1	0	0
Odor	Baseline-100%	2	1	0	0	0
Slough	Baseline-100%	3	2	1	0	0
Pain	Baseline-100%	2	1	0	0	0

DISCUSSION

In the current report the patient had been treated for chronic wounds with allopathic medicine for 1 month, but he reports no improvement from that treatment.

By *Ayurvedic* therapies like local application and oral administration of herbs as given below wound healing was achieved by us within six weeks.

Triphala:

Triphala consists of three herbs- *Amalaki* (*Embllica Officinalis*), *Haritaki* (*Terminalia chebula*), and *Bibhitaki* (*Terminalia bellirica*). It balances all three *dosas* [6]. *Triphala* has properties of *vra*na *shodhan* and *ropana* [7] when made in kwath and used as a wound cleanser, it reduces infection and pain [8]. Studies have shown that *Triphala* possesses antioxidant, anti-inflammatory, analgesic, antibacterial, and anti-mutagenic qualities. *Triphala* reduces bacterial count and enhances wound closure with improved levels of collagen, hexosamine, and uronic acid [9].

Panchavalkal:

Panchavalkal is a combination of five herbs – *Vata* (*Ficus bengalensis* Linn), *Udumbara* (*Ficus glomerata* Roxb), *Avastha* (*Ficus religiosa* Linn), *Parisa* (*Thespesia populenoides*), and *Plaksa* (*Ficus locarbuch-ham*) having properties of *shodhana* (cleaning) and *ropana* (healing) of the wound [10]. Individual drugs and in combination have *kashaya* (Astringent) dominant and useful in the management of *vra*na (wound) as well as *shotha* (inflammation) [11].

Guduchi:

Guduchi patra swaras are used for wound healing because it possesses *Dhatuvaradhan*, *Rasayana*, and *Tridoshashamak* [12]. It also has anti-inflammatory, antimicrobial, immunomodulatory, antiulcer activity,

antioxidants, and anti-allergic properties [13]. Aqueous extracts have been also reported to influence cytokine production, mutagenicity, and stimulate, and activation of immune effector cells [14].

CONCLUSION

The result of this study shows the complete resolution of chronic wounds after six weeks of treatment. There were no adverse events throughout the management and healing accrued uneventfully. The mode of treatment was to be cost-effective, safe, and easy to implement.

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