

**EFFECT OF JALAUKAVACHARANA ON VARICOSE VEINS - A CASE STUDY****ArunBabu.P.S<sup>1</sup>, S.V. Shailaja<sup>2</sup>**<sup>1</sup>M.S. (Ayu), Final year Scholar, <sup>2</sup>Professor and Head, Dept. of PG Studies, ShalyaTantra, SKAMCH&RC, Bangalore, Karnataka, India**ABSTRACT**

Varicose veins are the saccular dilatations of vein, often being tortuous. Certain jobs demand prolonged standing as in bus conductors, policemen and the persons involved in these jobs often suffer from varicose veins. It may also occur in persons involved in excessive muscular contractions e.g. Rickshaw pullers and athletes<sup>1</sup>. According to Ayurveda varicose vein is usually compared to *Sirajagranthi*. As per *AcharyaSusrutha*, due to *vataprapokanidanas* like physical exertion and straining, *vayu* enters the *siras* causing *Sampeedana*, *Sankocha* and *Vishoshana* and produce *Granthi* formation in *Siras* manifesting *Sirajagranthi*<sup>2</sup>. Ayurveda reveals *Raktamokshana* to cure varicose veins. *Jalaukavacharana* is the procedure employed in the study. This is a case presentation of a 74 years old male patient with history of varicose veins, having complaints of pain, muscle cramps, blackish discolouration since 10 years. He had a history of varicose veins stripping surgery for the same complaint before 20 years. *Jalaukavacharana* was done weekly once for one month with oral administration of *MahamanjishtadiKashaya*. The patient got relief in all symptoms with appreciable change in blackish discolouration of both legs.

**Keywords:** *Sirajagranthi*, *Granthi*, *Jalaukavacharana*, *Raktamokshana*

**INTRODUCTION**

Varicose veins are the penalty of verticality against gravity<sup>3</sup>. Varicose veins frequently cause symptoms, the most common being aching or heaviness, which typically increases throughout the day or with prolonged standing and is relieved by elevation or compression stockings. Other less common symptoms include ankle swelling and itching. The presence of tortuous dilated subcutaneous veins is usually clinically obvious. These are confined to the long and short saphenous systems in approximately 60 and 20 per cent of cases, respectively<sup>4</sup>. The primary causes of varicose veins are the incompetency of the valves and the weakness in walls of the veins. When varicose veins become chronic it causes

venous insufficiency. The secondary causes are obstruction of venous outflow due to pregnancy, fibroid, ovarian cyst, pelvic cancer, ascites, and deep vein thrombosis. The common risk factors of varicose veins include prolonged standing, older age, obesity, hormonal replacement therapy etc. The adult prevalence of visible varicose veins is 25–30 per cent in women and 15 per cent in men<sup>5</sup>. The persons involved in the prolonged standing jobs e.g. Policeman, conductor, etc. often suffer from varicose veins. In modern science the treatment of varicose veins include surgical treatments like Stripping, Sclerotherapy etc. But these procedures have side effects and does not provide complete relief.

In the disease *Sirajagranthi*, the main vitiated doshas are *Vata* and *Rakta*. By doing *Jalaukavacharana*, the stagnant vitiated blood gets drained out, which helps to retain the *chalaguna* of *vata*. *Jalaukavacharana* removes the *dustarakta* and clears the pathway of dosha thereby removing *srothorodha*. Being an *anushastra* procedure it possesses *asukariguna* providing faster result in relieving the symptoms. When *jalauka* starts sucking blood it also releases some amount of *hirudin* which dilutes and keeps the blood in liquid form (anti coagulant). This *hirudin* works in preventing the clotting of blood during the procedure. *Jalaukavacharana* is a simple procedure and can be practised in OPD levels.

**CASE REPORT**

A 74 year old patient visited in OPD of SKAMC & RC, Bangalore on 14-12-2014. He presented with complaints of blackish discolouration of skin with itching from calf region to dorsum of foot of both legs and prominent dilated and tortuous veins at the medial aspect of calf region of left leg since 10 years. He had dull aching pain in calf region of left leg which aggravated on long standing accompanied with swelling since 6 months.

He had the history of varicose veins stripping done in both the limbs before 30 years. The surgery had complications which led to blackening of skin below

knee joint till the dorsum of the foot of both lower limbs. This later led to dryness of skin of that area accompanied by itching and burning sensation. He visited Muniyal Ayurveda College for the same complaint and was on medication of Cap. Viscovas 2 tablets twice daily after food. The doctor advised him *Jalaukavacharana* for the same. Later he got shifted to Bangalore and approached SKAMCH & RC for treatment.

On examination, there was pain, swelling and dilated tortuous veins present in the calf region of left lower limb. Blackish discolouration of limbs was evident in both the legs along with itching. Pain was dull aching in nature which aggravated on standing for long time especially during evening hours. Pain was relieved by elevation of legs. Homan’s sign (pain in the calf region on passive dorsiflexion of the foot) and Mose’s sign (pain in calf region on gentle squeezing of calf region) were negative in the patient.

The patient was subjected to *Jalaukavacharana* once in seven days and administered with *MahamanjishtadiKashaya* 20 ml with 60 ml lukewarm water twice daily, before food for duration of 4 weeks. Followup was done 1 month after the treatment period.

**GRADING OF ASSESSMENT PARAMETERS**

**A. SUBJECTIVE PARAMETERS**

**1. SHOOLA**

0	Absent	No pain.
1	Mild	Occasional pain after long exertion
2	Moderate	Frequent Pain.
3	Severe	Pain throughout the day.

**2. KANDU**

0	Absent
1	Present

**3. DAHA**

<b>0</b>	<b>Absent</b>
<b>1</b>	Present

**B. OBJECTIVE PARAMETERS**

**1. SHOTHA**

<b>0</b>	<b>Absent</b>
<b>1</b>	Present

**2. TORTUOSITY**

<b>0</b>	<b>Absent</b>	<b>No dialated veins.</b>
<b>1</b>	Mild	Few veins dialated after exertion.
<b>2</b>	Moderate	Multiple veins confined to calf or thigh.
<b>3</b>	Severe	Extensive involving both calf and thigh.

**3. SKIN CHANGES**

<b>0</b>	<b>Absent</b>	<b>No discolouration.</b>
<b>1</b>	Mild	Blackish patchy hyperpigmentation.
<b>2</b>	Moderate	Hyperpigmentation with eczema.

Assessment chart

**A. SUBJECTIVE PARAMETERS**

	<b>DAY 1 /BT</b>	<b>DAY 7 /DT1</b>	<b>DAY14 /DT2</b>	<b>DAY 21 /DT3</b>	<b>DAY 28 /DT4</b>	<b>DAY 58 /FU1</b>
<b>SHOOLA</b>	2	2	1	1	0	0
<b>KANDU</b>	1	1	0	0	0	0
<b>DAHA</b>	1	0	0	0	0	0

**B. OBJECTIVE PARAMETERS**

	<b>DAY 1 /BT</b>	<b>DAY 7 /DT1</b>	<b>DAY14 /DT2</b>	<b>DAY 21 /DT3</b>	<b>DAY 28 /DT4</b>	<b>DAY 58 /FU1</b>
<b>SOTHA</b>	1	1	0	0	0	0
<b>TORTUOSITY</b>	2	2	2	2	1	1
<b>SKIN CHANGES</b>	2	2	2	1	1	1

**Results**

The clinical features of varicose veins were improved at the end of 4th week. Pain, itching, oedma and burning sensation reduced considerably. Dialated and tortuous veins in the calf region reduced in size and became prominent

only during exertion. Hyperpigmentation with eczema which was present below knee joint extending to the dorsum of foot reduced considerably into patchy blackish discolouration which became scattered as evident from the Figures 1 to 5



Day 1 (FIGURE 1)



Day 7 (FIGURE 2)



Day 14 (FIGURE 3) Day 21 (FIGURE 4)



Day 28 (FIGURE 5)

## DISCUSSION

The accumulation of *rakta* and vitiation of *Vata* in *Sira* leads to *Siraakunchana* (dilatation of the veins) and *Vakrekarana* (tortuosity). This causes local congestion in that area causing *Shoola* and *Shotha*. Repeated bloodletting by *Jalaukavacharana* brings down the local *Shotha* by relieving the local congestion (which contains metabolic toxins, debris of the dead tissues) by removing vitiated blood first. So a part of *Shotha* is relieved in first phase. Healthy and nourishing blood is supplied to that tissue where the stasis is cleared off. This promotes the regaining the health of surrounding tissue as well as the vessel wall which takes little time i.e. second phase. Thus, by removing the stagnant vitiated blood

that had used *Sanga*, *Jalaukavacharana* reduces the localised intravascular pressure and volume hence relieving *Shoola* and *Shotha*.

Tortuosity was only partially relieved in the study. The reason might be its a mechanical defect and the tension in the area is only partially relieved.

*Kandu* (itching sensation) was observed in chronic sufferers of varicose veins in the study. It was seen often associated with *Shotha* due to stagnation of *dushtarakta*. The same was relieved by applied modality. *Daha* (burning sensation) gets instantly relieved by this procedure. This may be because *Daha* is the feature of *pitha* and *raktha* as per Ayurveda and the modality employed here is *Jalaukavacharana* which is

claimed to have *pittahara* and *raktahara* properties.

*Vaivarnya* (discolouration) occurs due to stasis of blood in the veins. This leads to haemolysis of blood, leading to the deposition of haemosiderin pigment in the skin which manifests as the blackish discolouration noted in patients of varicose veins. By *Jalaukavacharana* the *dushtarakta* is drained out, followed by flow of normal blood. Since there is no further stasis of blood, there is no subsequent haemolysis, thereby, reducing *Vaivarnya* and restoring normal pigmentation of skin.

## CONCLUSION

*Jalaukavacharana* showed early result in reducing the signs and symptoms of *Sirajagranthi* specially in symptoms like *Shoola*, *Daha*, *Shotha* and *Kandu*. After the followup period of one month the procedure showed no recurrence which highlights it as an effective long term remedy for varicose veins.

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