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A STUDY OF MEDOJA GRANTHI (LIPOMA): AYURVEDIC EPICS V/S MODERN MEDICAL SCIENCE AND EXCISION OF MEDOJA GRANTHI (LIPOMA) - A CASE STUDY

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ABSTRACT

Lipoma is one of the commonest and most benign of all tumours as per modern surgery that resembles the *Granthi* in general and *Medogranthi* as per *Ayurveda*. It is Smooth, lobulated, and has soft swelling. According to *Acharya Bhoja* vitiated *Vata* along with *Meda*, and *Mansa Dhatu* they form an upright swelling it is called *Granthi*. *Meda* and *Rakta* are mainly responsible for *Dosha* in the pathogenesis of *Medogranthi*. The *Ayurvedic* classics are suggesting Incision and total Excision for the treatment of Lipoma. A 29-year-old male patient was consulted in *Shalya* OPD complaining of a large swelling and lump-like structure felt on the left forearm, it had been present for over 4years but had enlarged rapidly over the past 6 months. On palpation, the swelling was soft, mobile, smooth, encapsulated, and subcutaneous mass present on the left forearm. That case was diagnosed as *Medogranthi* (Lipoma). A 5cm*4cm mass was successfully excised.

Keywords: Lipoma, *Medogranthi, Bhedana* (Incision), *Chhedana* (Excision).

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INTRODUCTION

Medogranthi is made up of two words Meda and Granthi. According to Acharya Sushruta when vitiated of Vata Doshas, further vitiate the Mansa, Rakta Dhatu, Kapha, and Meda Dhatu resulting in round, elevated growth in the body tissue is called Granthi¹. Various types of Granthi are mentioned in our different texts. According to Acharya Sushruta six types of Granthi Vataj, Pittaj, Kaphaj, Raktaj, Mansaja, and Medaja have been described^{2,3}.

Medoja Granthi is smooth, large or small in size, less painful, and sometimes causes itching. Granthi contains an excessive amount of Meda^{3,4}. The Ayurveda suggests many preventive and curative measures for all diseases as well as Granthi. Various medicines, Lepa, Rakta Mokshana, Upnaha, and Agnikarma are described, also Shastra Karma like Bhedana (Incision), and Chhedana (Excision) has been adopted for the management of Granthi⁵. Acharya Charaka mentioned that the Granthi should be removed along with the capsule in Shoth Chikitsa⁶.

According to symptoms, we can correlate with Lipoma. Lipoma is defined as the commonest benign tumour arising from the fat cells. It is often called as Universal tumour or Ubiquitous tumour^{7,8}. It can occur anywhere in the body but the common site is the trunk, the nape of the neck, and limbs^{7,8,9}. Lipoma is soft, painless swelling that is present for a long time, usually round or egg-shaped, with smooth and lobulated surface^{7,8,9}. Different types of Lipoma are described in modern science according to their anatomical situations and Histology⁸. Subcutaneous type and encapsulated type of Lipoma are the commonest variety. A slip sign is a pathognomonic sign of Lipoma, the edge slips away from the palpating finger this is called a slip sign⁷. Dimpling signs are also positive (when the skin moved, a dimple appears on the skin due to fibrous bands connecting a Lipoma to the skin)8. Lipoma is freely mobile over the deeper structure. In modern science, complete excision is the choice of treatment in Lipoma^{7,8,9,10}, other treatment modalities like steroid injection, lipolysis, liposuction etc^{9,11}. So *Chhedana Karma* (total excision) has been chosen for the treatment of *Medogranthi* (lipoma).

Case Report

A 29-year-old male name Mr. Amol Pogde has attended the OPD (OPD no.-2101897) of *Shalya Tantra* Department, Govt. Ayurvedic college hospital Raipur with a complaint of localized swelling on the left forearm. Painless swelling was present on the left forearm for 4 years and it was increased in size day by day.

He had no family history, no medical history. Based on clinical examinations, the patient was diagnosed with a case of Lipoma. We admit him to IPD.

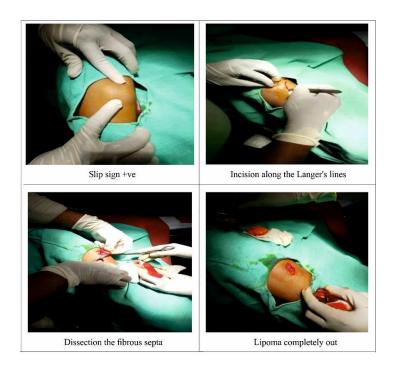
Material & Method: -

MATERIAL: -Gloves, Sterile gauze piece, Cotton pad, Spirit, Betadine solution, Gauze holding forceps, Tooth forceps, Mosquito artery forceps, Xylocaine 2%, Surgical blade (10 no.), BP handles (3 no.), Botroclot, Mars silk (3-0).

METHODS: -

- a) Pre-operative procedure: -
- Injection Tetanus Toxoid 0.5 cc IM was given.
- Informed written consent was taken.
- Xylocaine 2% sensitivity (0.03 ml/SC) test was done.
- CBC, CT, BT, HBsAg, HIV, Blood sugar, etc routine blood investigation is done before the procedure.
- b) Operative procedure: -
- Part cleans with Betadine solution & spirit then drapes it with eye towel.
- Infiltration of 3-5 ml of 2% Xylocaine in surrounding Lipoma.
- An incision along the Langer's lines over the skin.
- Incision till the capsule of Lipoma.
- Dissection of the fibrous septa over the capsule and its attachments to the surrounding tissues by Mosquito artery forceps.
- Then Lipoma is completely out.
- Achieving all Haemostasis conditions.
- The skin was closed with a Mattress suture.
- Bandaging done.
- c) Post-operative procedure: -

- Antibiotic and analgesic were given for 2 days after then *Triphala Guggulu*- 2tab (250mg.) BID, *Arogyavardhani Vati* – 2-tab (250mg) BID was given after food.
- The dressing was done for 7 days on an alternate day.
- Stitches were removed after 7 days.
- The patient was advice to follow the *Pathya* and maintain local hygiene to prevent the infection and recurrence of Lipoma.
- Wound get complete heal within 15-20 days.









DISCUSSION

Mainly *Vata & Kapha* are responsible *for Dosha* and *Dushya Rkta, Mansa & Meda* in the pathogenesis of *Granthi*. Physical examination shows a palpable mass, large, the surface was smooth and lobulated, the edge was soft but not fluctuates, mobile and slip sign & dimple sign were positive. *Acharya Sushruta*

has described the Asthavidha Shatra Karma (Chhedana, Bhedana, Lekhana, Vyadhana, Eshana, Aharana, Sravana, Seevan) in Samhita. Among these Chhedana and Bhedana are indicated in Granthi. Even modern science has also mentioned the complete excision of Lipoma with the capsule. After removal of Granthi and stoppage of bleeding Seevan

Karma (suturing) done with specified thread and needle leads to fast wound healing and minimized scar formation. Mattress sutures are providing closure for both deep and superficial layers and also allow perfect eversion and vertical opposition of the superficial skin edges. Triphala Guggulu and Arogyavardhani Vati relieved pain, redness, inflammation and protect from the infection by its anti-inflammatory & anti-bacterial properties. Most of the time, Lipomas are non-life-threatening, in rare cases, Lipomas can be problematic when they grow to a size that compresses nerves or vessels. Lipoma was removed by request of the patient, likely for cosmetic purposes.

CONCLUSION

The present study reported a case of a patient with a large Lipoma treated successfully with surgical excision. Stitches were removed after the 7th post-operative day and found a proper approximation of margins without complication. The wound healed completely within 15-20 days with no scar.

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