



MANAGEMENT OF SIRAGRANTHI (VARICOSE VAINS) THROUGH JALUKA-VACHARANA (LEECH THERAPY): A CASE STUDY

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ABSTRACT

Varicose veins are a common disease in the present era. It's mainly a lifestyle disorder, in which veins become dilated, elongated, and tortuous due to retrograde blood flow. They are often lumpy, bulging, or twisted. Incompetent valves are the most likely cause, but elevated age, weight, pregnancy, and posture are risk factors. A common site of Varicose Veins is the lower limb. It is correlated with *Siragranthi* in Ayurveda, which is *Vatavyadhi* and also involves *pitta* and *rakta*. *Vataprakopakanidanas* cause *Sankocha* (Contraction), *Sampeedana* (Pain), and *Vishoshana* (Dryness) of *Siras* (Veins) and produce *Granthi*. Modern science only provides symptomatic relief for pain and swelling. The treatment includes ligation, stripping, sclera therapy, and surgical approach like bypass surgeries. In Ayurveda treatments like *Jalaukavacharana*, *Siravedha* and various *Panchakarma* procedures help to cure *Siragranthi*. In *Jalaukavacharana* when leech sucks peripheral blood, it induces negative pressure in the vein present locally and promotes drainage smoothly. This article is a case study of a patient (age 60) with complaints of the varicose vein along with the course of a long saphenous vein, subcutaneous edema with pain, and blackish discoloration of the skin with itching on the left leg. *Jalaukavacharana* did every 7 days for 30 days.

After 4 sittings the complaints were reduced by 70% Pain and itching is completely reduced. In edema and discoloration marked differences occurred.

Keywords: *Siragranthi, Jalaukavacharana, Siravedha, Varicose vein*

INTRODUCTION

Varicose veins are becoming a day-to-day problem, particularly in middle-aged and elderly people. Among peripheral vascular diseases, varicose veins are commonest and mainly a lifestyle disorder. Occupational factors include long-standing like bus conductors, and policemen, excessive muscular activity, and lifting heavy weights. Females are more prone than males. In certain circumstances such as multiple pregnancies and obesity its worse¹. A condition, in which the vein becomes dilated, elongated, and tortuous, said to be "Varicose vein" It is correlated with "Siragranthi" in Ayurvedic texts. *Vata, Pitta* along with *Kapha*, gets aggravated and vitiates *Mamsa, Rakta&Meda* causing *Sankoch, Sampeedana, and Vishoshana* of *siras* and producing *Granthi*². In *Ash-tangaHridaya, Vagbhatacharya* mentioned that one who suddenly immerse or wash the lower limb in cold water after walking a long distance, or one who dose excessive exercise is likely to be affected by *Sirajagranthi*³. The primary cause of varicose veins is the incompetency of the valves and weakness in the walls of the veins. The secondary causes are obstruction of venous outflow due to pregnancy, fibroid, ovarian cyst, pelvic cancer, Ascites, and deep vein thrombosis. Modern science provides symptomatic relief for pain and swelling the treatment includes ligation, stripping, sclera therapy, radial surgeries,

and bypass surgery. But these treatments cause reoccurrences of this disease. As per *VagbhataAchar-yaSahacharataila* internally, *Upnaha, Basti, and Si-ravedha* are treatment principles⁴. In Ayurvedic texts, *Raktamokshana* treatments like *Siravedha, Jaluka-vacharana*⁵, & *Panchakarma* treatments like *Ab-hyanga, and Swedana* are used to cure varicose veins. In this article, a case study of varicose veins management through *Jlaukavacharana* is presented. *Rak-ta* is considered as 4th *dosha* by *SushrutaAcharya, Raktamokshan* is the ultimate treatment for vascular disease specially when *Rakta* and *Pitta* are vitiated. It is highlighted as *Ardhachikitsa* in *Shalya Chikitsa*.

Case Report: A 60-year-old male patient visited the OPD of NKJAMC Bidar (Karnataka) he presented with complaints of pain in the lower limb from thigh to dorsum of the foot on the left leg and had prominent, dilated, tortuous veins along the course of the long saphenous vein. Subcutaneous edema in the leg, ankle, and foot. Pain and blackish discoloration of the skin with itching of the left leg. **Investigation:** Venous Doppler was done to check perforators. Color Doppler of left leg:- 18-8-22 (before treatment) varicose veins are seen along GSV territory secondary to incompetent SFJ and perforators are described. **Diagnosis:** Varicose vein with clinical grade to with SFJ incompetence (*Sirajgranthi*)



Venous Doppler image of 18/8/2022 & Affected leg before treatment.

Treatment plan: *Jalukavacharana* was done every seven days for 30 days. *NirvishJalauka* is selected and 3-4 *Jalauka* are applied on the leg.

Result: After 4 sittings the complaints reduced to 70%., Pain and itching are completely reduced. In edema and discoloration of skin marked differences occurred.

Investigations: CBC (Complete blood count), BT (Bleeding time), CT (Clotting time), PT (Prothrombin time).

- 1st Picture shows discoloration of the skin has reduced slightly.
- 2nd Picture marked the difference.



DISCUSSION

The accumulation of *Rakta* and vitiation of *Vata* in *Siras* leads to *Siraakunchana* and *Vakrikarna*. This causes local congestion in that area causing *Shoola*

and *Shotha*. Repeated bloodletting by *Jalukavacharana* brings down the local *Shotha* by relieving local congestion (which contains metabolic toxins, and debris of dead tissue) by removing vitiated blood first. Leech sucks peripheral blood through capillary,

it induces negative pressure in vein present locally and promotes drainage hence relieving *Shoola* (Pain) and *Shotha* (Swelling). *Vaivarnya* (discoloration) occurs due to the stasis of blood in veins. This leads to hemolysis of blood leading to deposition of hemosiderin pigment in the skin which manifests as the blackish discoloration noted in patients with varicose veins. By *Jalaukavacharana* the *Dushtarakta* is drained out, followed by a flow of normal blood. Since there is no further stasis of blood there is no subsequent hemolysis, thereby, reducing *Vaivarnya* and restoring normal pigmentation of the skin.

CONCLUSION

Varicose veins are dilated veins due to the improper function of valves. This leads to stasis, thickening of the blood, and finally ulceration. As stasis is the main reason, *Shodhana* of *Rakta* is the best treatment. "*GrathithajalaJanmabhihi*" i.e. *Jaluka* is the best method to eliminate deep-seated thick blood. So *Jalaukavacharana* is the right choice for *Siragranthi*. Leech therapy is an inexpensive, effective and time saving, affordable and acceptable simple form of

bloodletting. It is a convenient *Panchakarma* that can be used in a variety of cases.

In this case, the patient got significant relief in all symptoms with appreciable changes in cramps, swelling, blackish discoloration of the left leg, and itching.

Conservative management with the Ayurvedic principle provides significant relief in varicose veins and improves the quality of life.

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