



A CASE REPORT ON SHODHANA AND ROPANA EFFECT OF GOMUTRA ARKA IN S/P FOURNIER'S GANGRENE DEBRIDEMENT

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ABSTRACT

Fournier's gangrene is necrotising fasciitis of male genitalia and Perineum which is rapidly progressing & fatal if not treated promptly, Acharya Sushruta has mentioned the “*Sheegravidahitvat*” word while explaining *Vidradhi* which tells the destructive nature of the disease and it is more suitable for Fournier's gangrene, Complete debridement of non-viable tissue is the treatment of choice instead of that mortality rate counts high if, post-operative wound management is not proper that's why Acharya Sushruta mentioned “*Vranavinischayartam*” word while defining *Shalya tantra* which tells the importance of Wound management post-operatively, Here we advised wound Cleaning & Dressing by *Gomutraarka* after debridement of Fournier's gangrene.

Keywords: Fournier's Gangrene, *Vidradhi*, Debridement, *GomutraArka*.

INTRODUCTION

Fournier's Gangrene is a necrotising fasciitis (Fasciitis) of male genitalia, Perineum and also known as vascular gangrene of infective origin¹, caused by

Haemolytic streptococci, Microaerophilic streptococci, *Satphylococci*, *E coli*, *Cl.welchi*, *Bacteroids flagilis*², It is rapidly progressing & fatal if not treated

as early as possible, mortality has been reported as high as 25%³, Risk factors for Fournier's Gangrene include Peri anal abscess, Urethral dilatation, Perianal bruise, scratch⁴, Diabetes Mellitus, Cancer, HIV, and other immunocompromised persons⁵, the infection spreads along the Dartos, Scarpa, and Colle's Fascia, Clinical signs include Fever, Perineal and Scrotal pain associated with tissue induration, Cellulitis, Eschars, Flaking skin, Necrosis, Crepitus, and toxicity may be observed sometimes the patient may undergo ARF secondary to sepsis⁶.

Complete Debridement of Non-viable tissue with broad-spectrum antibiotic is needed to prevent further spread along with proper wound care in terms of maintaining hygiene at the wound site and dressing, if there is damage to the External sphincter patient may require Colostomy, Patients may require serial debridement if post-operatively wound not managed properly and If large tissue defect is there due to extensive tissue damage reconstructive surgeries like Skin grafting may be needed. In *Astavidh-mutraGomutra* is superior⁽⁷⁾ and it is proved that it has Antimicrobial, Anti cancerous⁽⁸⁾ and Immunomodulatory properties,⁽⁹⁾ *Shodanakarma* is mentioned for *VranaRopana* by Acharya Sushruta in *Shasti-Upakrama*, *Gomutra* is mentioned in *Krimignau-pakrama*⁽¹⁰⁾ and In *VidradhiChikitsa* for *Ropana* purpose *Gomutra* is mentioned,⁽¹¹⁾ In *ArkaPrakasha*, Ravana mentioned *Arka* preparation for *VranaShodana* and *Ropana* purpose.⁽¹²⁾

CASE REPORT: Patient aged 43yrs old approached our Shalya Tantra OPD with the below-mentioned history and the patient is not a Known case of T₂DM, HTN, COPD, Asthma, Thyroid disease, or IHD.

CHIEF COMPLAINTS: A patient aged 43yrs male presented with Pain and full swelling in the perianal region for 2 days associated with Fever 3 to 4 spikes for 2 days patient says that there is not any history of trauma or surgical procedure in the perianal region, pain aggravates once patient sits on the floor and relieves by Analgesics even fever too.

ON CLINICAL EXAMINATION On inspection B/L Perianal surface area was oedematous (L>R), Necrotic patches were noted in the perianal region,

Mild to moderate Excoriation was noted at the anal verge, and on Palpation Severe tenderness was present, Fluctuation noted near the anal verge on the left side and Diagnostic aspiration yields 5ml of frank anaerobic abscess from the same site.

PURVA KARMA

- Well-informed consent for Surgery and Anaesthesia was taken
- The patient was NBM for 6 hrs before surgery
- Parts preparation was done and Soap water enema was given before surgery
- Injection TT 0.5cc I/M and Inj Lignocaine 0.2cc S/C were given as test dose
- Surgical profile investigations viz, CBC, RBS, Sr Creatinine, HIV I & II, HBsAg, HCV were done
- Under SAB, under all aseptic precaution parts painted and draped in Lithotomy position
- Abscess drained and debridement of all necrotic and non-viable tissue was done
- Haemostasis was achieved and the wound was washed with Povidine Iodine solution with Hydrogen peroxide followed by Normal saline wash and dressing.

PRADHANA KARMA From POD1

- Under all aseptic precautions in lithotomy position Wound washed with Gomutraarka thoroughly and bandaging done.
- This was repeated once every day till the formation of healthy granulation tissue and every 2nd day after healthy granulation tissue formation till complete healing.

PASCHAT KARMA

- At each follow-up before & after dressing observation was done concerned with any extension of infection, non-viability of tissues, and Granulation tissue.

RESULT: After 48 days of regular follow-up by GomutraArka dressing we got the satisfactory result because thewound has healed completely without any recurrence or spread of infection to surrounding areas

DISCUSSION

Wound healing is a natural process it influenced by both Systemic and local factors like Vascularity, Debris, Growth factors, etc, In almost all Nonhealing wounds the inflammatory phase of wound healing is disturbed because of the collection of Debris Infection Poor vascularity, etc, In present concepts, all the effects are directed to keep the wound clean and enhancing the wound healing. In Infective conditions after Incision and drainage or Debridement, all doctors will use Anti biotics which helps us to overcome the systemic toxicity but it doesn't play any role in enhancing the wound healing, we need a drug that helps in keeping the wound clean by debridement of non-viable tissue and enhances healthy granulation tissue formation by increasing the inflammatory process, In Fournier's gangrene post-operatively wound management is very important if not it spreads towards the abdomen. Here we used Gomutra Arka for Cleaning the wound every day till the formation of healthy granulation tissue and alternate day dressing after healthy granulation tissue formation, Post operatively wound was not clean enough there was slough almost all over the wound surface, and Granulation tissue was absent, Minimal purulent discharge was present, By using Gomutra Arka for dressing on 22nd

day of dressing complete healthy granulation tissue was noticed with minimal serous discharge and there was no any features of spreading and on 34th day of dressing there was highly significant wound contraction which was more than half of its original size and Complete wound healing was noticed on 48th day of follow up. The *Doshagnata* of Gomutra is *Tridoshagna* and *Arkais* also *KaphaVatashamaka*, *Kapha* and *Vata* are mainly held responsible for *Dushtavrana* along with the *Pitta*. The pus formation is due to vitiated *Kapha* and *Pitta* whereas *Prasara* of pus is due to vitiated *Vata*. Gomutra has *Ksharavaguna*, *Lekhana*, and *Ushnaguna* which helped in *Vranashodana*, and *Ksharaguna* helped in the removal of slough by the property of *Chedana*, *Bhedana*, and *Lekhana*, Because *Kshara*, *Ushnaguna*, *Chedana*, *Bhedana* and *Lekhana* property of drug irritates the tissue at the wound site which induces the Inflammation (First stage of wound healing), Once inflammation is induced at local wound site means Histamines are activated and local vasodilatation will occur which helps in bringing of more plasma proteins towards the wound site which is required for clearing infection and enhancing the healing process.



REFERENCES

1. Sriram Bhat M, SRB's Manual of Surgery, 4th Edition published by Jaypee brothers' medical publications, Page number 1148.
2. Sriram Bhat M, SRB's Manual of Surgery, 4th Edition published by Jaypee brothers' medical publications, Page number 1148.
3. Sriram Bhat M, SRB's Manual of Surgery, 4th Edition published by Jaypee brothers' medical publications, Page number 1148.
4. Henry Hamilton Bailey, Bailey & Love's Short Practice of Surgery, 27th Edition Volume 2 Published by CRC press.
5. Sriram Bhat M, SRB's Manual of Surgery, 4th Edition published by Jaypee brothers' medical publications, Page number 1148.
6. Sriram Bhat M, SRB's Manual of Surgery, 4th Edition published by Jaypee brothers' medical publications, Page number 1148.
7. Dr. R Vidyanath-Astanga Hridaya Sutrastana chapter no-5, page no-85 Choukamba Publishers.
8. Gulhane Harshad et al / International Journal of Research Ayurveda Pharm. 8 (4), 2017
9. Devesh Gosavi et.al – Immunomodulatory and Antioxidant effect of Gomutra ark in Rats- Research gate Sept-2011.
10. Vaidya Vijay Ukhalkar & Vaidya Swapnil Jimare-Shalya tantra part 1-Edition Nov 2009- Page no-121.
11. Vaidya Vijay Ukhalkar & Vaidya Swapnil Jimare-Shalya tantra part 1-Edition Nov 2009- Page no-61.
12. Dr. Indradeva Tripathi-Arkaprakasha of lankapati-Ravana-Edition 2011-Page no-97.

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