

**APPLICATION OF DISSOLVABLE GHONTAPHALADI KSHARVARTI IN THE
MANAGEMENT OF NADI VRANA – A CASE STUDY****Sunita¹, Rajender Singh²**

¹Post Graduate Scholar, PG Department of Shalya Tantra, Shri Krishna Govt. Ayurvedic College and Hospital, Kurukshetra, India

²Associate Professor, PG Department of Shalya Tantra, Shri Krishna gov. Ayurvedic College and Hospital, Kurukshetra, India

Corresponding Author: sunitamehra0311@gmail.com<https://doi.org/10.46607/iamj6210022022>**(Published Online: February 2022)****Open Access**

© International Ayurvedic Medical Journal, India

Article Received: 22/01/2022 - **Peer Reviewed:** 03/02/2022 - **Accepted for Publication:** 04/02/2022**ABSTRACT**

Pilonidal sinus or *Shalyaj Nadi Vrana* is a wound having a track with a blind end with full of discharge. It is an acquired condition. It is a cylindrical tube-like wound with a blind end leading from the surface down to the epithelial tissue and is lined by granulation tissues. Pilonidal sinus is a disease of youngsters and drivers. It is common in males rather than females. Cut hairs from above descend into the cleft and stay there to get buried deep into the pilonidal sinus. Depth, friction movements into the natal cleft, soft skin with erosions, presence of moisture are the other precipitating factors. The disease comes under *dust vrana*, which is hard to treat because of its recurrent nature. Acharya Sushrut describes various types of *Vartis* in the management of *Nadi Vrana*. In this case study, a patient came to OPD with a complaint of pain and pus discharge intermittently from the sacrococcygeal region. After the examination, it was diagnosed as Pilonidal Sinus. Under local anaesthesia probing is done, with the removal of tufts of hairs, dissolvable *Ghontaphaladi Kshar Varti* was inserted into the sinus tract and dressing was done. The patient recovered from the disease within 10 days.

Keywords: Ayurveda, *Nadi Vrana*, Sinus, Pilonidal Sinus, *Kshar Sutra*, *Kshar Varti*.

INTRODUCTION

The term *Nadi* refers to the tube-like structure and *Nadi Vrana* is treated as a sinus. Sinus is a Latin word that means 'tract' [1]. In Ayurvedic texts, this track is defined as *Gati* which means excessive infiltration of pus borrowing deeply [2]. Pilonidal sinus comes under *Shalyaj* or *Agantuj Nadi Vrana*, in which a foreign body is embedded in the wound. In the pilonidal sinus, hairs penetrate through the skin into the subcutaneous tissue. It forms unhealthy granulation tissue in the deeper plane. It is always infective in origin and occurs in the sacrococcygeal region or the Natal cleft. Pain and discharge either serosanguinous or purulent are present with tender swelling just above the coccyx in the midline (primary sinus) and on either side of the midline (secondary sinus) may be present [3]. In modern medicine, various types of surgical procedures are described like excision with primary closure, excision with reconstructive flap, Z plasty etc. But all these therapies have limitations with high recurrence rates and long hospitalisation. Acharya Sushrut has described various treatments for *Nadi Vrana* as the application of *Kshar*, *Kshar sutra* and various *Varties*. [4]

CASE REPORT:

Patient Name: XYZ

Age: 30 yrs.

Date of 1st visit: 24/09/21

Date of recovery: 03/10/21

CHIEF COMPLAINT:

- A small opening at the sacrococcygeal region for 4 months.
- Pus discharge from the opening intermittently.
- Pain occurred off & on.

HISTORY OF PRESENT ILLNESS:

- The patient was suffering from pain and pus discharge from the opening at the sacrococcygeal region for the last 4 months.
- He had taken antibiotics and analgesics but didn't get cured of the ailment.
- For further treatment, he came to Shri Krishna Ayurvedic College, Kurukshetra.

FAMILY HISTORY:

- N/H/O HTN, DM, KOCHS or any other illness.

GENERAL EXAMINATION:

HB : 15.3 gm%

TLC : 7.01 * 10³ ul

DLC: N – 65.8 %; L - 25.9 %; M – 5.9 %; E - 2.2 %;

B - 0.2%

ESR: 09 in 1st hr

RBS: 122 mg/dl

HBsAg: Negative

HIV: Negative

BT: 3.20 min.

CT: 5.50 min.

URINE: M/E - NAD

SUGAR - Nil

ALBUMIN - Nil

SYSTEMIC EXAMINATION:

CVS: NAD

R.S.: B/L chest clear

DIGESTIVE SYSTEM: NAD

UROGENITAL SYSTEM: NAD

VITAL EXAMINATION:

Blood pressure: 130/80 mm hg

Pulse rate: 84/min.

Temp.: 98.1^oF

Respiratory rate: 18/min

LOCAL EXAMINATION:

- A Sinus opening covered with granulation tissues at the sacrococcygeal region was present.
- Pus collection inside the track.
- Tenderness ++



BEFORE TREATMENT

DIAGNOSIS:

Pilonidal Sinus or *Shalyaj Nadi Vrana*.

CHIKITSA:

Dissolvable Ghontaphaladi Kshar Varti application.

MATERIAL AND METHOD:

EQUIPMENT USED:

- An antiseptic solution like betadine, spirit etc.
- Sterile gloves
- Sterile kidney tray
- Sterile gauge pieces
- Sterile sponge holding forceps
- Sterile towels and towel clips
- Sterile probe & sinus forceps

DRUG USED: Dissolvable Ghontaphaladi Kshar Varti

METHOD:

Before starting the procedure, routine blood and urine examinations were done to avoid any infection.

PURVAKARMA:

Purvakarma refers to the work done required before starting the procedure.

- Written and informed consent taken.
- Preparation of OT and instruments.
- Preparation of the part of the patient.
- Inj. T. T 0.5 ml/ I M
- Inj. Lignocaine 2% /0.5 ml/ s c / sensitivity test done

PRADHANA KARMA:

Under all aseptic conditions, the patient shifted to OT. A prone position was given to the patient. The part was exposed and painted three times by using sponge holding forceps and sterile gauge pieces soaked in antiseptic solution. The part was covered with sterile sheets and clamped with towel clips. Under Local anaesthesia with inj. lignocaine 2%, external granulation tissues were slightly removed with artery forceps. probing was done to measure the length and direction of the tract. Tufts of hairs were removed using a sinus forcep. Then dissolvable Ghontaphaladi Kshar Varti is inserted into the track and dressing was applied over the wound.

PASCHAT KARMA:

- All vitals were recorded.
- Advised rest for 3 days in a prone position.
- Dressing on 3rd day with jatyadi tail.

OBSERVATION:

Varti dissolved on 3rd day. There was no pus, no pain, no tenderness on 3rd day. Wound healing was good on the 6th day with no further complaint and on the 10th day, the complete track was healed with the dissolution of external granulation tissue also.



AFTER TREATMENT

Follow up was done every 3rd day for 30 days and then on 45th and 60th day.

DISCUSSION

The main reason for the formation of Pilonidal Sinus or Nadi Vrana was *Shalya* of hairs that were embedded deep into the skin. Due to the inward growth of hairs a nidus formed for the infection and due to infection, there was the formation of pus. Because of the collection of pus, there was pain and tenderness. There was the formation of unhealthy granulation tissues internally and externally on the sinus track. Because of all these the track was not healed after much treatment taken by the patient. When dissolvable Kshar varti was applied after removing the hair tufts, *Ghontaphaladi Kshar* went deep in to the track. The cutting, scrapping and healing properties of Kshar, converts the granulated non-healing ulcer into a fresh wound and wound healing in minimum time.

CONCLUSION

It is a very new, cost-effective and minimally invasive technique. It promotes the healthy healing of tissues with no cutting of the track. No extra scar mark left. It is a very effective technique with recurrence almost nil.

REFERENCES

1. Bhat M Sriram. Manual of Surgery. 6th ed. New Delhi: Jaypee Brothers Medical Publishers (P) Ltd; 2019. Ch. C. P.30.
2. Shastri A.D. Sushrut Samhita. 1st ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2016. Nidana Sthana. Ch. 10. P. 347.
3. Bhat M Sriram. Manual of Surgery. 6th ed. New Delhi: Jaypee Brothers Medical Publishers (P) Ltd; 2019. Ch. 25. P. 959.
4. Shashtri A.D. Sushrut Samhita. 1st ed. Varanasi: Chaukhambha Sanskrit Sansthan; 2016. Chikitsa Sthana. Ch. 17. P. 100-102.

Source of Support: Nil

Conflict of Interest: None Declared

How to cite this URL: Sunita & Rajender Singh: Application Of Dissolvable Ghontaphaladi Ksharvarti In The Management Of Nadi Vrana – A Case Study. International Ayurvedic Medical Journal {online} 2022 {cited February 2022} Available from: http://www.iamj.in/posts/images/upload/527_530.pdf