

AYURVEDIC MANAGEMENT OF UTTANA VATARAKTA WITH SPECIAL REFERENCE TO VARICOSE VEINS- A CASE REPORT

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ABSTRACT

WHO defines Health as “A state of complete physical, mental and social well-being and merely the absence of disease or infirmity”. The health of an Individual solely depends on his diet and lifestyle. But with the march of time in rapid modernization most dietary habits, social structures, lifestyles, and environments have been changing. The consumption of baked food, half-fried vegetables, etc causes incomplete digestion. Which is spreading its wings in remote villages too. Nowadays human being is vulnerable to many disorders due to their altered life style and food habits. *Vatarakta*, *Uttana Vatarakta*¹ is a *bahya* variety where the site of manifestation is *Twak* (skin) and *Mamsa* (Muscles), Presents signs and symptoms of blackish, reddish, or coppery coloured skin associated with itching, oozing, pain, etc. Varicose veins¹⁰ are defined as dilated, tortuous, and elongated superficial veins with reversal of blood flow due to incompetence of valves. Varicosities are more common in the lower limb due to the erect posture of the body. In this case, the cause is secondary due to occupational [standing for long hours], and signs and symptoms presented are Pain in both the lower limbs, nocturnal cramps, soreness, burning, edema, pigmentation, dermatitis, ulceration, and bleeding. It is an illness where both *Vata* and *Rakta* are afflicted by distinct etiological factors. Various *Panchakarma*³ procedures and *Ayurvedic* drugs have been proved useful for this disease.

A 48year old male subject came to DGMAMC, GADAG, with complaints of swelling and blackish discolouration over both the lower limbs for 3 months. Associated complaints with severe Itching, burning, and bleeding on scratching. Received *Ayurvedic* line of management and got relieved with signs and symptoms.

Key words: Uttana Vatarakta, Manjisthadi Kshara Basti, Varicose veins.

INTRODUCTION

Patient details:

Pradhana vedhana

A 48year old male subject came to DGMAMC, GADAG, with complaints of swelling and blackish discoloration over both lower limbs, pain while walking, and prolonged standing for 3 months. Associated complaints are severe Itching, burning, edema, pigmentation, dermatitis, and bleeding on scratching. Visited *Kayachikitsa* department with OPD NO.-22014762.

Pradhana vedhana vrittanta

The subject is said to be healthy 3months back but gradually developed pain while walking and stand-

ing, swelling, burning, and blackish discoloration on both lower limbs. Received allopathic treatment but could not find relief. Hence approached DGM Ayurvedic Hospital for Management.

Poorva vyadhi vrittanta

One year back with a history of whitish scaly lesions on the forehead, abdomen, lower limbs, lower back, and buttocks, and received *Ayurvedic* treatment and got cured. No Systemic illness was found.

Chikitsa vrittanta

Received *Ayurvedic* treatment for Kitibha kushta.

Kautumbika vrittanta

No such specific history.

Clinical examination

Table 1: Table showing *Pareeksha* based on *Ayurveda*.

ASHTASTHANA PAREEKSHA	DASHAVIDHA PAREEKSHA	VIKRITI
Naadi- 72b/min	Prakrita, Vatakapha	Dosha, Tridosha
Mala, Prakrita	Sara, Madhyama	Doosha, Rasa, Rakta, Maamsa
Mootra, Prakrita	Samhanana, Madhyama	Srotas Rasavaha, Raktavaha
Jihwa, Upalipta	Pramana, Madhyama	Srotodrushti, sangh
Shabda, Prakrits	Satmya, Madhyama	Agni, Mandagni
Sparsha, Ruksha	Satva, Pravara	Udbhavasthana, Amashaya
Druk, Prakrita	Aharashakti, Madhyama	Sancharasthana, Tiryakagatadhamani
Akruti, Prakrita	Vyayamashakti, Madhyama	Vyaktasthana twak
	Vaya, Madhyama	Rogamarga Bahya
		Sadyaasadyata kruchrasadhya

Lowerlimbs and skin examination¹⁰

Brodie-Trendelenburg test- negative
Ochsner's Mahoner, s test-positive
Pratt's test –negative

Dermal flare (Thread veins) present
Edema-itching-oozing-skin discoloration present
Fibrin cuff theory is followed for pathogenesis.

Table 2: Examination based on the scoring system.

VENOUS DISABILITY SCORING SYSTEM		
Score 0	Asymptomatic	
Score 1	Symptomatic but able to carry out activities without any therapy	yes
Score 2	Symptomatic – can do activities only with compression/limb elevation	
Score 3	Symptomatic – unable to do daily activities even with compression or limb elevation	

Laboratory investigations

AEC-620cells/cumm
Hb%-11.3G/dl
Sr. Uric acid-4.1 mg/dl

RBS-86.2 mg/dl

Pus cells-3-4/hpf

Venous Doppler study:

The right lower limb shows evidence of small varicose veins along GSV, below the knee joint. An incompetent perforator is seen distally. The Right S F junction is incompetent.

MATERIALS AND METHODS

Treatment plan

- *Sthanika Abhyanga*
- *Sthanika mridu nadi sweda*
- *Karma basti*

1. *Manjishtadi kwatha Basti*⁵ - explained by Acharya Sharangadhara

a.	<i>Manjisthadi kwatha</i>	<i>Raktashodhaka, Raktaprasadaka and Tridoshahara</i>
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2. *Kshara Basti*⁴ - explained by Acharya Chakradatta

b.	<i>Kshara Basti</i>	<i>Srotoshodaka</i>
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Preparation of *Manjisthadi Kshara Basti*

Materials required are *Saindhava Lavana, Madhu, Panchatikta grita, Kalka, Manjisthadi Kshara kashaya choorna, Khalwa Yantra, and Basti yantra.*

Method of Preparation of Basti

The different components of Basti should be mixed in the following pattern:

Saindava lavana

Madhu

Panchatikta grita

Kalka

Manjishtadhi Kshara kashaya choorna

Manjishtadhi kwatha drugs with their botanical names are:

- *Manjishta* - *Rubia cardifolia*
- *Amalaki* - *Emblica officinalis*
- *Hareetaki* - *Terminalia chebula*
- *Bibhitaki* - *Terminalia bellirica*
- *Bhunimba* - *Andrographis paniculata*
- *Nimbha* - *Azharidacta indica*
- *Haridra* - *Curcuma longa*
- *Guduchi* - *Tinospora cardifolia*

Method of Administration of *Basti*

Purvakarma

The procedure was well explained to the subject, and written consent was taken. Prior to *Anuvasana Basti, Laghu bhojana* was advised.

Pradhanakarma

Anuvasana Basti

- *Shamanaushadhi*
- *Pathya-Apathya palana*

Manjisthadi Kshara Basti- *Manjishtadhikshara basti* is an *Anubhuta yoga* (established through empirical use) and is effective in the management of *Srotava-rodha* (blocked channels).

Manjisthadi Kshara Basti is a combination of two *Basti* that is.

The Subject was subjected to *Mridu Abhyanga* with *sukoshna taila* and *Nadisweda* locally over Abdomen, buttocks, and on thighs. After *Abhyanga* and *Sweda*, the Patient was asked to lie down on the *Droni* in *Vamaparshwa* (left lateral position with right leg flexed) and asked to take a deep breath. *Sukoshna Anuvasana Dravya* was administered slowly with the help of a *Basti* syringe.

Niruha Basti

The subject was advised to come on an empty stomach, after confirming digestion of previously taken food and before developing hunger *mridu Abhyanga* with *sukoshna Mahanarayana taila* and *nadisweda* locally was done over the abdomen, buttocks, and on thighs. The patient was asked to lie down on *Droni* in *Vamaparshwa* (left lateral position with right leg flexed) and asked to take a deep breath. The anal orifice of the subject was smeared with oil for lubrication with the help of cotton wool. The tip of the catheter was also dipped in the oil or smeared with oil for lubrication. While holding the enema can in the left hand, kinks the rubber tube with the right hand to prevent leakage of the *basti* drug before administering. Enema can be elevated considerably, rubber tube was opened by releasing the kink. The *basti dravya* flows into the subject's rectum easily. At the same time, the subject was encouraged to take deep breaths. Before the enema can become completely empty, the rubber tube was once again closed by

kinking and then the catheter is withdrawn from the subject's anus to prevent the escaping of air.

Paschat Karma

As soon as the Catheter is removed, gentle strokes on the subject's buttocks for about a minute were performed. The subject was asked to lie down in a supine position gradually. In this position he was asked to rub his palms briskly against each other and at the same time should rub the subject's sole vigorously.

Further, the Subject's legs flexed towards the hip and stays for a few minutes. Then the Subject was allowed to take rest for a while.

Precaution is advised during the procedure.

- Keep cotton wool (swab) in both ears.
- Do not expose to a cold environment.
- Do not eat cold food and drink cold water.
- Do not eat hard, spicy, oily food, and also avoid mental stress for better and fast results.

Table 3: Showing schedule/Intervention.

Date	Treatment	Medicine/Procedure
3/6/22	<i>Sthanika Abhyanga Anuvasana basti</i>	<i>Mahanarayana taila Sahacharadi taila(60ml) + Shatapushpa kalka(10gms) Akrita yusha-100ml</i>
4/6/22	<i>Sthanika Abhyanga Anuvasana basti</i>	<i>Mahanarayana taila Sahacharadi taila(60ml) + Shatapushpa kalka(10gms) Akrita yusha-100ml</i>
5/6/22	<i>Sthanika Abhyanga Niruhabasti</i>	<i>Mahanarayana taila Saindava taila-5gm Madhu-20ml Panchatikta grita-30ml Kalka-10gm Manjishtadhi kshara kashaya-350ml Total-415ml Krita yusha-100ml</i>
6/6/22	<i>Sthanika Abhyanga Anuvasana basti</i>	<i>Mahanarayana taila Sahacharadi taila(60ml) + Shatapushpa kalka(10gms) Akrita yusha-100ml</i>
7/6/22	<i>Sthanika Abhyanga Niruhabasti</i>	<i>Mahanarayana taila Saindava taila-5gm Madhu-20ml Panchatikta grita-30ml Kalka-10gm Manjishtadhi kshara kashaya-350ml Total-415ml Krita yusha-100ml</i>
8/6/22	<i>Sthanika Abhyanga Anuvasana basti</i>	<i>Mahanarayana taila Sahacharadi taila(60ml) + Shatapushpa kalka(10gms) Akrita yusha-100ml</i>
9/6/22	<i>Sthanika Abhyanga Niruhabasti</i>	<i>Mahanarayana taila Saindava taila-5gm Madhu-20ml Panchatikta grita-30ml Kalka-10gm Manjishtadhi kshara kashaya-350ml Total-415ml Krita yusha-100ml</i>
10/6/22	<i>Sthanika Abhyanga Anuvasana basti</i>	<i>Mahanarayana taila Sahacharadi taila(60ml) + Shatapushpa kalka(10gms) Akrita yusha-100ml</i>
11/6/22	<i>Sthanika Abhyanga</i>	<i>Mahanarayana taila</i>

	<i>Niruhabasti</i>	<i>Saindava taila-5gm</i> <i>Madhu-20ml</i> <i>Kalka-10gm</i> <i>Manjishtadhi kashaya-350ml</i> <i>Panchatikta grita-30ml</i> <i>Total-415ml</i> <i>Krita yusha-100ml</i>
12/6/22	<i>Sthanika Abhyanga</i> <i>Anuvasana basti</i>	<i>Mahanarayana taila</i> <i>Sahacharadi taila(60ml) + Shatapushpa kalka(10gms)</i> <i>Akrita yusha-100ml</i>
13/6/22	<i>Sthanika Abhyanga</i> <i>Niruhabasti</i>	<i>Mahanarayana taila</i> <i>Saindava taila-5gm</i> <i>Madhu-20ml</i> <i>Panchatikta grita-30ml</i> <i>Kalka-10gm</i> <i>Manjishtadhi kashaya-350ml</i> <i>Total-415ml</i> <i>Krita yusha-100ml</i>
14/6/22	<i>Sthanika Abhyanga</i> <i>Anuvasana basti</i>	<i>Mahanarayana taila</i> <i>Sahacharadi taila(60ml) + Shatapushpa kalka(10gms)</i> <i>Akrita yusha-100ml</i>
15/6/22	<i>Sthanika Abhyanga</i> <i>Niruhabasti</i>	<i>Mahanarayana taila</i> <i>Saindava taila-5gm</i> <i>Madhu-20ml</i> <i>Panchatikta grita-30ml</i> <i>Kalka-10gm</i> <i>Manjishtadhi kashaya-350ml</i> <i>Total-415ml</i> <i>Krita yusha-100ml</i>
16/6/22	<i>Sthanika Abhyanga</i> <i>Anuvasana basti</i>	<i>Mahanarayana taila</i> <i>Sahacharadi taila(60ml) + Shatapushpa kalka(10gms)</i> <i>Akrita yusha-100ml</i>
17/6/22	<i>Sthanika Abhyanga</i> <i>Niruhabasti</i>	<i>Mahanarayana taila</i> <i>Saindava taila-5gm</i> <i>Madhu-20ml</i> <i>Panchatikta grita-30ml</i> <i>Kalka-10gm</i> <i>Manjishtadhi kashaya-350ml</i> <i>Total-415ml</i> <i>Krita yusha-100ml</i>
18/6/22	<i>Sthanika Abhyanga</i> <i>Anuvasana basti</i>	<i>Mahanarayana taila</i> <i>Sahacharadi taila(60ml) + Shatapushpa kalka(10gms)</i> <i>Akrita yusha-100ml</i>
19/6/22	<i>Sthanika Abhyanga</i> <i>Niruhabasti</i>	<i>Mahanarayana taila</i> <i>Saindava taila-5gm</i> <i>Madhu-20ml</i> <i>Panchatikta grita-30ml</i> <i>Kalka-10gm</i> <i>Manjishtadhi kashaya-350ml</i> <i>Total-415ml</i> <i>Krita yusha-100ml</i>
20/6/22	<i>Sthanika Abhyanga</i> <i>Anuvasana basti</i>	<i>Mahanarayana taila</i> <i>Sahacharadi taila(60ml) + Shatapushpa kalka(10gms)</i> <i>Akrita yusha-100ml</i>
21/6/22	<i>Sthanika Abhyanga</i>	<i>Mahanarayana taila</i>

	<i>Niruhabasti</i>	<i>Saindava taila-5gm Madhu-20ml Panchatikta grita-30ml Kalka-10gm Manjishtadhi kashaya-350ml Total-415ml Krita yusha-100ml</i>
22/6/22	<i>Sthanika Abhyanga Anuvasana basti</i>	<i>Mahanarayana taila Sahacharadi taila(60ml) + Shatapushpa kalka(10gms) Akrita yusha-100ml</i>
23/6/22	<i>Sthanika Abhyanga Niruhabasti</i>	<i>Mahanarayana taila Saindava taila-5gm Madhu-20ml Panchatikta grita-30ml Kalka-10gm Manjishtadhi kashaya-350ml Total-415ml Krita yusha-100ml</i>
24/6/22	<i>Sthanika Abhyanga Anuvasana basti</i>	<i>Mahanarayana taila Sahacharadi taila(60ml) + Shatapushpa kalka(10gms) Akrita yusha-100ml</i>
25/6/22	<i>Sthanika Abhyanga Niruhabasti</i>	<i>Mahanarayana taila Saindava taila-5gm Madhu-20ml Panchatikta grita-30ml Kalka-10gm Manjishtadhi kashaya-350ml Total-415ml Krita yusha-100ml</i>
26/6/22	<i>Sthanika Abhyanga Anuvasana basti</i>	<i>Mahanarayana taila Sahacharadi taila(60ml) + Shatapushpa kalka(10gms) Akrita yusha-100ml</i>
27/6/22	<i>Sthanika Abhyanga Niruhabasti</i>	<i>Mahanarayana taila Saindava taila-5gm Madhu-20ml Panchatikta grita-30ml Kalka-10gm Manjishtadhi kashaya-350ml Total-415ml Krita yusha-100ml</i>
28/6/22	<i>Sthanika Abhyanga Anuvasana basti</i>	<i>Mahanarayana taila Sahacharadi taila(60ml) + Shatapushpa kalka(10gms) Akrita yusha-100ml</i>
29/6/22	<i>Sthanika Abhyanga Anuvasana basti</i>	<i>Mahanarayana taila Sahacharadi taila(60ml) + Shatapushpa kalka(10gms) Akrita yusha-100ml</i>
30/6/22	<i>Sthanika Abhyanga Anuvasana basti</i>	<i>Mahanarayana taila Sahacharadi taila(60ml) + Shatapushpa kalka(10gms) Akrita yusha-100ml</i>
01/7/22	<i>Sthanika Abhyanga Anuvasana basti</i>	<i>Mahanarayana taila Sahacharadi taila(60ml) + Shatapushpa kalka(10gms) Akrita yusha-100ml</i>
02/7/22	<i>Sthanika Abhyanga Anuvasana basti</i>	<i>Mahanarayana taila Sahacharadi taila(60ml) + Shatapushpa kalka(10gms) Akrita yusha-100ml</i>

	<p>Pathya Laghu ahara, Vyayama Apathya Taila samskaravat ahara, Lavana, Katu, Dadhi, Matsya</p>	
	Shamanaushadhi	<p>Cap Grab 1bd with water after food Amritadi guggulu 1bd with water after food Shodhaka taila for external application twice Punarnava asava 10ml bd with sukoshna jala after food</p>

Table 4: Assessment of Results

Features	BT	AT
Daha (Burning sensation)	Present +++	Absent
Shotha (Swelling)	Present ++	Absent
Shoola (Pain)	Present	Absent
Srava (Oozing)	Present	Absent
Shyava varna (Blackish discolouration)	Dark	Light

Fig 1: Showing images before and after treatment.

BEFORE TREATMENT AFTER TREATMENT AFTER FOLLW UP



Probable mode of Action of Manjistadi Kshara basti⁶

- Manjishtadi Kshara Basti by its Raktashodaka and Rakta Prasadaka properties reduces inflammation and purifies the blood.
- The Kshara basti by its Srotoshodhaka property helps in clearing the obstruction in the lumen and improves circulation to the affected part.
- The above properties help in reducing inflammation and clots and enhance good circulation in the affected part.

DISCUSSION

- Vatarakta¹ is a disease caused by vitiation of vata as well as rakta. Aggravated Vata is blocked by

vitiated rakta, in turn leading to further aggravation of Vata.

- Nidana like Katu, Amla, Ushna, Vidahi Ahara, Adva, bhara, etc were observed in the subject and advised to avoid those by guiding with proper pathya and apathya.
- Uttana Vatarakta² mainly affects Twak (skin) and Mamsa (muscles)
- Manjishtadikshara Basti is an Anubhuta Yoga (established through empirical use) and is effective in the management of Srotoavarodha (blocked channels).
- The incidence of Vatarakta is increasing with the speed of modernization as well. Hence educating the subject with pathya ahara and vihara is important along with chikitsa simultaneously.

- By reading this article many readers will be educated about this kind of condition and can apply the Ayurvedic principle of treatment.

CONCLUSION

- The subject was happy and satisfied with the Ayurvedic line of management for his condition and followed *pathya* and *apathya* with regular follow-ups.
- Ayurvedic line of management is very effective in such conditions.

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