

## A CASE STUDY ON WOUND HEALING BY VRUNA SHODHAN CHIKITSA

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## ABSTRACT

An ulcer is the break in the continuity of skin or mucus membrane either by molecular death or traumatic removal<sup>1</sup>. It is essential to treat ulcer in surgical field as prevalence rate of chronic ulcer is 4.5 / 1000 population in India. These ulcers mostly caused by trauma, poor blood supply, diabetes, infections, and peripheral vascular disorders etc. Ulcers heal when the causative factor will be removed and by the proper wound management, *Acharya Sushruth*, has explained 60 *Vruna upakrams*<sup>2</sup>(60 treatment modalities for wound) for the treatment of *Dusta Vruna* (chronic ulcer), among that *Vruna Shodhan* (wound cleaning) and *Vruna Ropan* (wound healing) modalities have been applied in this case, and observed the wound healing in detail and successful results noted

**Keywords:** Ulcer, Wound, *Vruna Upakram*, *Vruna Shodhan*, *Vruna Ropan*.

## INTRODUCTION

Management of wound is a challenge to every surgeon, even after using many higher antibiotics, still wound healing became difficult task, because wounds are open to environment and they get infected very easily, this infection creates delay in wound healing, but in *Ayurveda* science there are many procedures explained for

wound management in the concept of *Shasthi upakaram*<sup>2</sup> by *Acharya Sushruth*.

Hence in this case we have adopted *Shodhan*, and *Ropan Chikitsa* as per classics and treated. Here the *Vruna Shodhan* by *Panchavalkal kashay*<sup>4</sup> helped to

cleanse the wound, reduced the inflammation and enhanced the healing, and *Ropan Chikitsa* with *Jyathyadi taila*<sup>3</sup> which is having proven healing properties, this attributed for complete healing of wound by draining the discharge and accelerating the regeneration of surrounding tissue and repaired it by granulation tissue with minimal discomfort to patient.

### Case Report

A female patient aged about 35years, with history of non-healing traumatic ulcer over the left foot from 1 month, which presented with purulent discharge, foul smell, burning pain, redness around wound, and occasional difficulty in walking. Patient visited local surgeon and got advised for wound debridement under anaesthesia, hence patient refused for the treatment and visited our OPD dept of *Shalya tantra*, BIdea's AVS AMV Vijayapur on 30/01/2019 with OPD no - 1501. On examination 3\*2.7 cm ulcer noticed at the antero lateral aspect of the right foot, with purulent foul discharge and swelling around the wound was present. Patient had no systemic disease, all laboratory investigations were in normal range, and hence patient has been taken for the study.

### Methodology:

#### Treatment Modality

*Vruna Shodhan* – by *Panchavalkal Kashay*

*Vruna Ropan* – *Jyathyadi Taila*

*Abhyantar Chikitsa* (internal medicine)

Tab. *Gandhakarasyan* – 1 tab BD for 10 days

Tab. *Kaishoreguggulu* – 1 tab BD for 10 days

### Observation of wound healing:

#### Site of wound: dorsum of foot

Day 1 – Wound was oval shape, oedematous, swollen, painful, and floor covered with slough, edges were spreading type, purulent discharge and foul smell were noted, and surrounding area was inflamed.

Measurements of wound – 3cm\*2.7cm\*3mm thick

Day 5– Oval shape, mild oedema, painful, floor with red granulation tissue, reddish purple sloping edge, no discharge and foul smell, surrounding area was with peeling and wrinkled skin layer noted.

Measurements: 2cm\*2cm\*2mm

Day 10 – Reduced oedema and pain, no discharge, reduced size.

Day 40 – Completely healed wound with scar.

## DISCUSSION

Ulcers are most common over the foot, which are difficult to treat because of stretched skin over the foot and also it is difficult to rest this part which affects day to-day activity. In this patient, the site of the ulcer is left foot which is painful, edematous, with foul discharge and smell.

This case reported our OPD on January 29<sup>th</sup>. The case history noted and investigated for the systemic disorders. Then taken for the treatment of *Vruna Shodhan* and *Ropan* with *Panchvalkal Kashay* and *Jyathyadi taila*. This wound cleansing and dressing done on every third day and orally *Kaishore Guggulu* and *Gandhak rasyan* given for 10 days. Status of the wound noted in every dressing and recorded with pictures. Pain and edema reduced by day 5<sup>th</sup> to 7<sup>th</sup>, discharge reduced by day 3<sup>rd</sup>, slough in the floor reduced gradually by 5<sup>th</sup> day, and floor replaced with red granulation tissue and wound healing progressed with every dressing and patient started walking normal by day 10<sup>th</sup>. Complete wound healing took place by day 30<sup>th</sup> with scar.

## CONCLUSION

With the above discussion and observation, wound healing by *Vruna Shodhan* and *Ropan* is very effective in chronic wound, these procedures are easy to perform on OPD base, with minimal discomfort and maximum results



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