

### **Role of Apamarg-Kshar Tail in Dushta-Vrana**

Tikeshwar Karanjekar<sup>1\*</sup>, Anubhuti P. Manwar<sup>2</sup>, Subhash Y. Raut<sup>3</sup> and Arun M. Lakhapati<sup>4</sup>

<sup>1,2,3,4</sup>Shalya Dept., G. A. C. H. Nagpur, Maharashtra, India

#### **Abstract**

A wound is a break in the integrity of the skin or tissue often, which may be associated with destruction of structure and function. Wound is simply a disruption of any tissues. In surgery wound is primary pathology and infection is the most common complication of wound healing. It is encountered in every surgical speciality. Infection leads to cellular and vascular response to bacterial injury. In Ayurveda, infected wound can be compared to dushta-vrana. Vrana is a sarva-sharirgatvyadhi with tridoshaj pathology. Various treatment modalities are described in classical texts of Ayurveda. Ancient Acharyas emphasized the use of Kshar in the treatment of dushta-vrana specially Apamarg-kshar. It also gives symptomatic relief to the patient.

#### **Keywords**

*Dushta-vrana, Sarva-sharirgatvyadhi, Tridosh, Apamarg-kshar tail*



**Greentree Group**

Received 25/08/15 Accepted 07/11/15 Published 10/11/15

## INTRODUCTION

An ulcer/wound is a break in the continuity of the covering skin or mucous membrane due to molecular death of cells with varying degrees of infection, among various stages of wound healing granulation tissue formation and organisation is one of the stage<sup>1</sup>. Hypergranulation that is utsannavrana is one of the sign of dushta vrana<sup>2</sup>. Wound requires normal granulation tissues for proper healing. So for normal granulation tissue formation in hypergranulated wound various treatment modalities advised by AcharyaSushruta in dushtavrana like avasankarma, mrudu karma, vatagnasek , sneha prayog<sup>2</sup>. Amongst that AcharyaSushruta emphasized kshar application<sup>2</sup>. Here it works on wound by its kshanan property<sup>2</sup> that is avasankarma. So we used Apamargkshar tail in this case study and observed significant symptomatic relief in the patient.

### Case study

A 42 years old patient was presented with complaints of wound over ankle-joint with its hypergranulated stage since 15 days in government ayurved hospital, Nagpur. On examination the wound size was observed 3x3cm with inflammation, tenderness and difficulty in walking. The diagnosis was

confirmed as infected wound. In this patient we preferred Apamargkshar tail for local application over hypergranulated wound as treatment of choice. It was procured from REKNOWNED pharmacy and application of tail was done for five days.

### Procedure

Patient's well informed written consent wastaken.

### Following routine investigations done-

Hb in gm%, Random blood sugar, bleeding time, clotting time, HIV-1&2, HBsAg

Wound site and periphery cleaned with normal saline. Apamargkshar tail was applied over hypergranulated wound. Dry gauze was placed on the wound and dressing was completed. There was slight burning sensation after kshar tail application for approximately 1-hour. Same procedure was followed for 5 days. There were significant changes in wound and hypergranulated tissues replaced with normal granulated tissue.

### Assessment criteria

1. **Pain** -NRS-Numerical Rating Score
  - 0-1 No pain
  - 2-3 Mild pain
  - 4-5 Uncomfortable pain
  - 6-8 Distressing pain
  - 8-9 Intense pain

9-10 Worst possible pain

## 2. Inflammation-

- 0- Nil
- 1- Mild tenderness(causing patient to wince on digital pressure)
- 2- Moderate tenderness(causing patient to wince and withdraw on digital pressure)
- 3- Severe tenderness(patient does not allow to touch)

## 3. Tenderness

- 0- Nil
- 1- Mild, elicited on much pressure
- 2- Moderate, elicited on moderate pressure
- 3- Severe, elicited even on slight touch

## 4. Granulation tissue

- 0- Above 50% wound covered with Granulation tissue
- 1- 25-50% wound covered with Granulation tissue
- 2- Below 25% wound covered with Granulation tissue
- 3- No granulation tissue seen

### Table- 1

### Table Showing Gradations of Pain, Inflammation

### Tenderness and Granulation

Days	Pain	Inflammation	Tenderness	Granulation
0	10	3	3	3
1	9	2	3	2
2	7	2	2	2
3	5	1	2	1
4	2	1	1	1
5	0	0	0	0

## DISCUSSION

Hypergranulation is the condition of infected wound that delays wound healing process. In this case study we preferred Apamargkshar tail for local application. Here kshanan(cutting), shodhan property of kshar and shodhan property of Apamarg works which results in replacement of hypergranulated tissue by normal granulation tissue resulting in fast wound healing. Til-tail works as shodhan, lekhan, in the treatment of kshardagdhā, so irritation due to direct kshar application can be overcome.

## CONCLUSION

In the above case study we found excellent results of Apamargkshar tail application on hypergranulated wound. So this can be the best alternative for wound debridement procedure which is treatment of choice in

hypergranulated wound as per modern surgery. In this way complications of infected wound like delayed healing can be overcome.

## REFERENCES

1. SRB Manual of surgery-4<sup>th</sup> edition- pg No. 1
2. Vd. AmbikadattaShashtri-SushrutSamhitaPurvardh-Choukhamba Prakashan-2012- Su.Su.22/7 pg No. 123, Su.Su.21/40, Pg.No.122, Su.Chi.1/88, Pg.No.13,Su.Su.38/7,8,Pg.No.183, Su.Su.22/7,Pg.No.123, Su.Chi.1/85, Pg.No.13, Su.Chi.1/88, Pg.No.13, Su.Su.11/4,8,Pg.No.45