



WOUND HEALING EFFECT OF JATYADI TAILA AND SHALLAKI NIRYAS IN THE MANAGEMENT OF DUSTA VRANA – A CASE STUDY

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ABSTRACT

Introduction: Chronic wound are reductant to heal and delayed healing is affecting with associated factors i.e. Old age, site of wound, vascular supply, and nutritional status etc. Wound healing approach through Ayurveda principles, is based on involvement of affected *Doshas* and *Dushya*. Proper assessment and follow the wound care protocols based on Ayurveda parameter results in proper healing of wound.

Material & Method: A 23-year-old male patient; associated with slough, necrotize tissue, serous discharge and peripheral pigmentation around wound margin; approximately 3x5 cm sized, presented on back of right thigh region since 6 months, was managed with topical application of *Jatyadi Taila* and *Shallaki Niryas* along with oral Ayurveda medicines.

Result: Daily regular dressing and results in healing of wound within 6 weeks.

Discussion: application of *Jatyadi Taila* and adjuvant Ayurveda drugs results in proper healing.

Keywords: wound healing,shallaki,jatyadi taila,

INTRODUCTION:

Wound healing is a biological process that involves tissue repair and regeneration. Disruption in integrity and function in the tissues defined as wound. Bacterial infection, site of wound, movement of wound edges, nutritional deficiency, old age and obesity are certain factors, which influences the wound healing phases. Wound in chronic phase represents with increased burden to the patient and affect quality of life.^[1] A correct diagnosis is essential to avoid delay in wound healing. In Ayurveda, clinical assessment of the wound is based on involved *Dosha* and *Dushya*, *Gandha* (odor), *Varna* (skin pigmentation), *Vedna* (pain), *Srava*

(wound discharge), and *Akruti* (size) are main parameter to determine categorization of wound. Assessing these criteria, *Vrana* (wound) should be manage with *Shodhan* and *Ropan* drug formulations accordingly involved *Dosha*. Either externally or internally, administration of the formulations play key role to get in *samya-avastha* of affected *Dosha*.

Niryasa (exudates) mentioned in wound care as procedure i.e. *Dhoopana karma*^[2] (fumigation) to reduce discharge, pain. It helps in controlling infection, and promoting wound contraction. Among many of formulation described in Ayurved texts, *niryas* is used only in *Dhoopana*

karma, but it can be used as topical healing agent, on the basis of study in experimental models.

Various experimental models on oleo-gum-resins had been proved for their wound healing activity^[3]. Experimental study of alcoholic extract of *Boswellia serrata* oleo-gum-resin on excision model suggest that topical cream formulation influences the wound healing phases like collagen synthesis, increasing the tensile strength results in faster healing.^[4] Another study suggests non-toxic nature of *Boswellia serrata*'s gum resin extracts^[5]. Among them having wound healing activities of *Shallaki niryas*, it was trialed clinically in chronic wound for short time period mixed with *Jatyadi Taila* to express the wound healing activity in human being.

CASE REPORT:

A 23 years old male patient, approached to Shalya Tantra OPD at SAMC Indore, with a chronic wound present on back of Rt. thigh associated with peripheral pigmentation, slough, necrozed tissue, serous discharge, foul smell and intermittent itching since 6 months. Initially he taken treatment from local practice-nor but not healed. During history taking, it developed from accidental injury, but due to site and ignorance to the proper treatment; it results into chronic wound.

On local examination of wound, it was measured approximately 3x5 cm sized with fibrosed margin, sloughed base, slopping edges and 3mm depth. On Ayurveda parameter, based on main symptoms, it introduced in to *vata-kaphaj vrana*.^[6]

MATERIAL AND METHODS:

Wound area daily cleaned with normal saline then after dressed with *Jatyadi Taila*. Along with regular local care, orally

[Tab. *Gandhaka rasayan* (500 mg BD after meal) and Tab *Arogyavardini vati* (250 mg BD after meal)] medicines were advised for 2 weeks.

OBSERVATIONS AND RESULT:

On day 1st, wound was associated with discharge, and foul smell. [Figure: 1]. During first week, wound debridement done under local anesthesia because of wound base was associated with slough and necrotized tissue. Then after, debridement, it became clean wound and regular dressing done with *Jatyadi taila*. During 2nd week, wound was present with healthy granulation tissues with marginal contraction. [Figure. 2, and 3]. During 3rd week of treatment, 2x3.8 cm sized measured of wound. Itching with mild serous discharge was present. On 6th week, wound completely healed with well-contracted scar tissues.

DISCUSSION:

Healing of chronic wound is troublesome when it is associated with abandonment of care guidelines and debilitating disease. Involvement of *Dosha* and *Dushya* results in various symptoms that resembles the actual condition which push toward either healing or non-healing. In the present wound, *shyava varna* (greyish discoloration/pigmentation), *sheeta* (cold), *alpa-srava* (minimal discharge), *kandu* (itching), *daruna* (delayed to heal), *nistodo* (without pain sensation) are inherited which may resemble with *vata-kapha vrana lakshan*. After diagnosing the *Dosha avastha*, *vata-kapha nashak* medicines advised.

Internal administration *Gandhaka rasayan* and *Arogyavardini vati* helps in normalizing skin integrity and in reduction of discharge, and secondary infection in wound. External application of *Jatyadi*

taila, as indicated for shodhan and ropan of wound. During 3rd week of continuation of treatment, expected wound contraction not achieved. Therefore, powder of shallaki niryas mixed in Jatyadi taila (5 gm in 100 ml oil) and applied on alternate day of dressing. Topical application of niryas mixed with oil result in better

wound contraction (collagen deposition) and strengthening the scar.

CONCLUSION:

This case report determined that internal administration of Ayurveda formulation along with local wound care with addition of niryas resulted in expected healing. Further studies should verify the same.



Fig. 1: On Day 1



Fig. 2, 3 : During 2nd week



Fig. 4: During 3rd week



Fig. 5: On 6th week

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Source of support: Nil

Conflict of interest: None

Declared

Cite this Article as : [K baslingappa et al : Wound Healing Effect of Jatyadi Taila and Shallaki Niryas in the Management of Dusta Vrana – A Case Study] www.ijaar.in : IJAAR VOLUME III ISSUE VII MAR -APRIL 2018 Page No:-1129-1132