**CASE STUDY**

**Dushta Vrana Treated with Gauradya Ghrita Vranabasti- A Case Study**

Vishesh Sharma\(^1\)* and Tanvi Mahajan\(^2\)

\(^1\)Dept. of Shalya Tantra, Shri Bhanwar Lal Dugar Ayurved Vishwabharti, Sardarshahar, Churu, Rajasthan, India

\(^2\)Dept. of RachnaSharir, Shri Bhanwar Lal Dugar Ayurved Vishwabharti, Sardarshahar, Churu, Rajasthan, India

**Abstract**

*Dushtavranas* (Chronic ulcers) are frequently encountered problem of the current population, produced commonly as complication of trauma or pathological insult. It is seen as debilitating and scaring disorder usually seen affecting the human beings at any age. Acharya Sushruta “The Father of Indian Surgery” mentioned 60 *Upakramas* for the management of Vrana and one among them is local application of Vrana Basti. In the present study *Gauradya Ghritais* selected which is cited by Acharya Yogratnakar for *Vrana Basti*. It is one of the best substitutes for chronic wound healing because of its better *shodhana*, *ropana* & *vednasthapana* effect. Here, a case report of 32 year old man was presented, having complaint of an open traumatic ulcer on the left leg having symptoms like slough, discharge, foul smell, pain, oedema and discoloured skin.

**Keywords**

*Dustavrana, Vranabasti, Shodhana, Ropana, Vednasthapana*

---

*Received 09/02/17  Accepted 15/03/17  Published 10/05/17*
INTRODUCTION

Healing of ulcer is a natural process of the body, but there are various factors which cause impediments in the natural course of healing process. So, for early & uncomplicated healing of wound, proper handling of entity is mandatory. Acharya Sushruta - The father of surgery has scientifically classified it in a systemic manner whose wealth of clinical material and the principles of management are valid even today. Acharya Sushruta explained the vranachikitsa in Shashti upakramas. In this, local application of medicated oil/ghee is one of the most important upakramas. The medicated oil/ghee is applicable with different methods like Prakshalana, Pichu, Lepa, Vranabasti on Dushta Vrana. In this case study, local application of Gauradya ghrita is done with Vranabasti which is cited by Acharya Yogratnakar in the context of vrana. It contains Haridra, Manjishtha, Sarshapa, Jtamansi, Yashtimadhu, Prapaundrika, Tagar, Mustaka, Chandana, Nimbi, Patola, Karanja, Katrohin, Madhuka, Mahamedha. These drugs possess vranashodhana, vranaropana, shothahara, durgandhahara, lekhana and vedanasthapan properties.

In Vranabasti, a wall of Mashapishti is made around the wound which is 2cm high & 0.5cm thick. In a bowl, lukewarm medicated oil/ghee is taken. This lukewarm ghrita is poured into the well on the wound by using spoon. When this medicated oil/ghee gets cooled it is taken out & warm ghrita is poured again. This process is done for 30 min.

CASE REPORT

A 32 yr old male patient came with complaints of a non-healing ulcer as shown in Fig. 1.

Fig. 1 Size of wound before treatment

One and a half month back he was injured by an iron and was wounded over the anterior surface of left leg. The patient was treated with Povidine iodine (Betadine solution) by a local doctor but the patient does not react positively to a treatment. After few days, the wound becomes infected with free flowing pus. No past history of
DM, CHD, T.B, HTN or any other major disorder was found. Local Examination:- The floor was covered by slough, edges were inflamed. Ulcer is seen over the anterior surface of left leg measuring about 6 x 4 x 0.5 cm in dimension with purulent discharge and irregular margin, surrounding indurations was also present with tenderness. No involvement of local lymph nodes was seen. No history of immunological disorder was found. All urine and blood investigations were within normal limits. Every morning the wound was cleaned with the freshly prepared lukewarm Panchvakalakwatha. After cleaning, Gauradyaghritavranabasti was locally applied and dressing was done with the sterile gauze.

**RESULTS**

By using Gauradyaghritavranabasti, the symptoms of dushtavrana were improved at the end of 1st week and at the end of 3rd week, the wound was completely healed leaving only a minimal scar. In a follow up period, no sign of recurrence has been shown by the patient.

**DISCUSSION**

*Effect on VranaVarna:*-- At the end of 14th day, the slough was completely reduced and colour of the floor becomes pinkish (twaksavarna). Healthy granulation tissue appeared at the end of 21st day due tokatu, tiktaandkshaya rasa of nimba and varnya, lekhn and kushthaghna property of sarshapa, mustaka and haridra. *Effect on VranaVedana:*-Pain and tenderness was completely reduced at the end of treatment. Throbbing pain which was present at the beginning was completely reduced at the end of 2nd week due to vedana-sthapana properties of the drugs like nimba, jtamansi, yashtimadhu, hridra, sarshapa etc. existing in Gauradyaghrita. *Effect on VranaStrava:*- By the end of 1st week, the purulent discharge from the wound was reduced and completely stopped by the end of 2nd week, this may due to the shodhan and ropan properties of Gauradyaghrita. *Effect on VranaGandha:*- At the end of 1st week treatment, foul smell present at the beginning was completely reduced. The
smell was present because of the pus and as the Vrana becomes shuddha, it decrease due to durgandahara and putihara property of chandana and nimba. Effect on VranaAakriti:- On 21st day Vrana was completely healed as shown in Fig. 3, this may due to VranaShodhana and Ropana property of Gauradyaghrita, which provided ideal environment for healing.

FURTHER SCOPE OF STUDY
The drug used showed significant promises for the management of dushta vrana, yet a research study on a larger set of patients can be carried out for further substantiate the results.

CONCLUSION
GauradyaghritaVranabsati is the new substitute for DushtaVrana. It does the action of Shodhan, Ropan, Vednasthapan, Shothhara and Durgandhnashak. Also vranabasti is a simple procedure which we can perform on O.P.D level, without anaesthesia. Vranabasti will not only remove unhealthy granulation tissue and reduce wound size, but also helps in reduction of pain.
REFERENCES

4. Pankaj B. Patil, Dissertation of Rajiv Gandhi University of Health Science, Bangluru, Karnataka 2011 Page No.81(VB Group Application)