



Role of *Panchatikta Ghrita*, *Haridra* and *Nimba Churna* Puran in *Vrana* with Respect to Bed Sore.

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ABSTRACT:

The *Vrana* means Damage or destruction of the part or tissue of body, which leaves a scar after healing. From the beginning of civilization, *Vrana* was one of the major disease which was managed by human being. In ancient Indian literature there was large number of references related to the *vrana* (wound) and *vrana ropan* (wound healing) was mentioned. The *acharya* categorised *vrana* in to mainly two parts i.e. *Nija* and *Agantuja vrana* along with this many classification, *Nidan*, *Samprapti*, *Rupa*, *Lakshanas*, *vrana pareeksha*, and treatment methods for *vrana* was mentioned in ayurvedic treaties. The healing process of *Vrana* is a natural process, which also starts immediate after injury. *Acharya Sushruta* described *Vrana* at different places in different context of *Sushrut Samhita*. The *vrana* is important topic in academic point of view, patient care and research of newer technique and drugs for easier and effective management. The management of wound is described in *Sushruta samhita* in very detail manner. He advised sixty *upakrama* (method) of treating wound is lot of different conditions known as *shashtiupakram* in *Chikitsasthanam* In this review article we have try to describe and compile the all detail description of *vrana* and try to compare the *vrana ropan* procedure with wound healing with the base of *Lakshanas* of *vrana*.

Keywords: *Vrana*, *Vrana Ropan*, Wound healing, Wound management, Bed sore , *Dushta vrana*.

INTRODUCTION

In Ayurveda, particularly *Sushruta* has mentioned various types of *Vrana* and their management, which is of prime importance in any surgical practice / procedure. In recent past, brilliant progress of surgery in various fields has immensely reduced the incidence of wound infection by decreasing the impediments associated with wound healing

to certain limits. Still wound management continues to be a matter of speculation. Healing of *Vrana* is a natural process but due to the interference of vitiated *Doshas*, *Vrana* becomes *Dushta* and normal healing process gets delayed. Achieving better wound healing with minimal scar and controlling pain effectively are the prime motto of



every surgeon.

Classics of Ayurveda have emphasized at various places to take care of wounds which occur due to vitiated *doshas* or any trauma. Sushruta, an eminent surgeon of his era, was much ahead of his time in expounding and practicing the beautiful concept of *vrana ropana* (wound healing). The *Shalya chikitsa* brings out very clearly that *vrana* (wound) is the most significant surgical entity and the knowledge of its effective management for a surgeon is the basic skill required on which the outcome of surgery revolves. There is a constant need to deal with the inflammation as well as problems in healing in different surgical disorders. The process of wound healing is almost same at the terminal stages, whereas at initial stages it shows some differences and includes a number of cellular and molecular phases till the process of healing is completed.¹ Since time immemorial, it has been an ongoing process to search out better remedy in order to overcome the previous drawbacks. Exposure to infection and prolongation of inflammatory phase plays the prime role to delay the healing process, whereas creating the favorable conditions that allow the wound to heal properly is the ultimate aim of any surgeon. There are many measures to create favorable conditions for wound healing, such as use of antiseptic solutions and antibiotics to combat the infection, inflammation and many agents to remove slough/dead tissues to shorten the inflammatory phase and thus promote the healing process.

AIMS AND OBJECTIVES

To assess the clinical efficacy of the *Panchatikta Ghrita*, *Haridra* And *Nimba Churna* (trial drug) for wound healing.

MATERIALS AND METHODS

Drug contents

An innovative compound *Panchatikta ghrita* of 5 reputed drugs having healing properties, described in the Sushruta samhita, was prepared with *ghrita kalpana* in the pharmacy of our institute .

Among the three formulation the following seven drugs were selected for this study:²

NIMBA (*azadiracta indica*)

PATOLA (*Luffa acutangula*)

GUDUCHI (*Tinospora Cordifolia*)

VASA (*Adhatoda vasica*)

VYAGHRI(*Solanum xanthocarpum*)

Ghrita (Ghee)

6.*HARIDRA*

7 *NIMBA*

Drug preparation

After identification of the raw drugs at the Pharmacognosy Laboratory, trial drug “*panchatikta ghrita*” was prepared as per the classical reference of *ghrita paka kalpana*.³

Criteria for assessment

The subjective parameters of pain, tenderness and objective parameters of size, color, floor, margin, discharge, granulation tissue and swelling were recorded on the basis of the score adopted with grading (0, 1, 2 and 3). After completion of treatment, assessment of scar was done on the basis of gradation (0, 1, 2 and 3). Criteria for assessment of total effect of therapy are given in Table 2.

Table 1: Pharmacodynamic properties of *drug*

Table 2: Criteria for assessment of total effect of therapy

CASE REPORT

A 34 yrs old female patient presented with two non-healing ulcer (bed sore) over posterior aspect of right and left gluteal region associated pus discharge since 30 days. She consulted a doctor and was treated with Povidone iodine ointment for dressing but no improvement was noticed. The ulcer became infected with pus discharge. Day by day wound getting infected and progressed deeply ,she consulted to general surgeon and plastic surgeon , they advised for debriment and correction of wound by closing upper skin tag but after some time wound get infected internally leads to re occurrence of bed sore ,patient is suffering from SLE since last 23yrs she is hemiplegic ,There was no history of Diabetes mellitus, hypertension. The family history was also not significant with the patient disorder.

METHODOLOGY

Preparation of *Vranalep*⁴

Fine powder of all ingredients are taken and mixed thoroughly. Before application of medicine, *Vranalepa* is mixed with *panchatikta Ghrita*. For 5gms of *Vranalepa*, and 3ml of *Ghrita* is required to make it into a *Kalka* / paste form.

Application

The wound is cleaned with normal saline. After drying with sterile gauze, *Vranalepa* is applied over the wound

followed by sterile pads as absorbent layer. The dressing is secured with bandages without compromising the circulation. The dressing is removed in the evening and the wound is cleaned again with normal saline.

Local examination

Location: Posterior at gluteal region bilaterally

Size: wound on right side-7x8x3cm

Wound on the left side -8x7x3.5cm

RESULT

The wound start healing within 21 days with good results in the form of normal colored scar formation without any complication, which proved the *vaikritapaham* property of the compound drug this treatment goes for more 2yrs for proper healing. Local application of *panchatikta ghrita, haridra* and *neem churna* provided good result by reduction of the wound size and promotion of healing, and it proved to be cosmetically effective with least scar formation also.

DISCUSSION

In the concept of wound management, all efforts have been made to keep the wound clean during the various stages of healing. Such cleaning process is called *Vrana Shodhana*. An ideal debriding agent should not damage to surrounding healthy tissue of a contaminated wound, should not have any undesirable effect and at the same time should be capable of performing debridement effectively. *Lepana* and *Vrana bandhana* are one among the *Shasti Upakrama*. Different forms of external applications are described for the convenience of treatment of different diseases like *Lepa Kalpana*,^[5] *Upanaha*, *Malahara kalpana* etc. *Lepa Kalpana* is the herbo-mineral preparation used for external use. In *Ayurveda*, *Lepa Kalpana* is mainly described in *Sharangadhara Samhita*, *Sushruta Samhita* and *Vagbhata Samhita*. The main basic concept of *Lepa* is that, wet drugs are pounded into fine paste form and dry drugs are pounded to fine powder form and mixed with any of the liquid media like *Swarasa*, *Kwatha*, *Ghrita*, *Taila*, *Godugdha*, *Gomutra*, *Jala* etc. according to demands of particular disease condition or need.

Lepana does *Shodhana*, *Utsadana*, *Ropana* and it is *Shophagna* in nature. Here, for the current study, A *Lepa* named *Vrana Lepa* mentioned in *Lepa Yoga Prakarana* in *Sahasrayoga* is the formulation chosen.

Wound healing is completed in three phases: Inflammatory, proliferative and remodeling. Granulation,

collagen maturation and scar formation are some of the other phases of wound healing which run concurrently but are independent of each other.⁶ *Ropana* is always associated with *shodhana* because a wound cannot be healed if it is not *shuddha*

Quite a Number of conditions and types of wounds are responsible for early healing, delay healing or incurable stages. Although much progress has been made in management of wound in past few years, management of *Vrana*(WOUND) is been significant health related issue ever since period of *Sushruta*. Numbers of procedures are performed for various steps of healing of *Vrana*. Among these, *Shuddha Vrana* is been treated by *ropana* remedies, whereas *Dushta Vrana* is managed on the basis of involvement of vitiated *doshas*, site of *Vrana*, excessive purification, and inflammatory changes. *Wound* is explained by *Sushruta* in management of various diseases like inflammatory edema, abscess etc. *Sushruta* described sixty different types of management of *Vrana* in general. He describes almost all the basic principle of *vranaupakrama* in form of seven different types of *upakrama* (management) of *sopha*. Management given by *Sushruta* is mainly in two divisions as management of *vrana* (wound) and management of *vrani* (wounded). Out of sixty procedures mentioned, forty procedures mentioned in top four categories deals with converting *Dushta Vrana* into *Shuddha Vrana*. These include measures to control vitiated *doshas*, controlling inflammation, surgical measures, and measures for nonhealing wounds. Wound bed preparation in today's practice is very much similar to this concept which was elaborated in very much detail *Sushruta Samhita*.

NEEM- The bark, seeds, leaves, fruit, extracts and oils of the Neem tree contain pharmacological constituents which offer some impressive therapeutic qualities, including the following: Anti-viral, Anti-fungal, Anti-, Antibacterial, Anti-pyretic, Anti-inflammatory, Anti-tumour, Analgesic, Anthelmintic, Antiemetic, Anti-arthritis, Anti-gastric, Anti-carcinogenic, Anti-anxiety, Anti-oxidant, Anti-fertility (prevents unwanted pregnancy). Anti-histamine, Anti-feed ant. Therefore we can see that Neem boosts the immune system on all levels while helping the body fight infections. It stimulates the production of T-cells to mount a head-on attack against infection.⁷ Unlike synthetic antibiotics, Neem does not destroy beneficial bacteria and other micro-organisms needed to maintain optimum health. Some medical experts believe that the overuse of chemical

antibiotics is contributing to the breakdown of the human immune function. Neem offers a non-toxic, zero-harm alternative to powerful and sometimes damaging prescription medicines.⁸

Neem has an almost magical effect on chronic skin conditions that often fail to respond with classical treatments. Acne, psoriasis, eczema, itching, rosacea, shingles, ringworm, athlete's foot, herpes, fungal infections, cold sores, dandruff, dry skin, hemorrhoids, rash, skin ulcers, rheumatism, sprains, pain, warts, wrinkles are among the conditions that clear up consistently when a high quality organic chemical-free, zero harm.⁹Neem product is utilized. Synthetic chemicals used to treat these conditions can produce negative side effects such as rashes, allergic reactions and redness of the skin. Studies are currently underway to try and understand the skin rejuvenating properties of Neem. It relieves the itching and pain of psoriasis while reducing the scale and redness of the patchy lesions.¹⁰

CONCLUSION

To conclude, we can say that on treatment with *panchatikta Ghrita*, the process of repair was not complicated by infection with micro-organisms. So, there was no interference with the general health of the patient. The temperature remained normal; the circulatory, gastrointestinal, nervous systems, and other functions were undisturbed; locally, the part was cool, of natural color and free from pain¹¹ It can be concluded that effect of *vrana lepa* in the wound shows the tremendous effect in the proliferation of cell which helps in wound healing of cells without any complication. Pigmentation similar to that of skin was found as another updating effect which was not seen in povidone iodine group. No untoward effects were observed during the course of treatment. Hence, from this clinical study, it can be concluded that the drug *panchatikta ghruta*, *neem churna* and *haridra churna* possesses high efficacy in “*vrana ropana*” with fine scaring without producing any adverse effect. So, it can be recommended as a cost-effective, easy to prepare and effective therapy for wound healing.

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REFERENCES

1. Clark RA. Cutaneous wound repairs. In: Goldsmith LA, editor. Physiology, Biochemistry and Molecular Biology of Skin. New York: Oxford University Press; 1991. p. 576.
2. Shastri AD, Baishjya ratnawali, Vidyotini hindi vimarsh Parishitha Samhita, Ayurvedacharya Vyakyakruta, Chaukhambha prakashan, Varanasi 18th Edition. 2009. pp. 937
3. Tripathi B, Sharangdhara, Sharangdhara Samhita. Commentator, madhyam khanda, chapter-9. Varanasi: Chaukhambha sanskrit surabharati prakashana; 2008. p. 218.
4. Rao G.P, Sahasrayoga, Chaukhambaa Sanskrita Sansthana, Varanasi, 1st Edition 2016, pg341
5. Townsend CM, Bhaava prakaasha, Vidyotini Teeka, Chaukhambaa Sanskrita Bhavan, Eleventh edition 2009
6. Townsend CM, Beauchamp DR, Evers MB, Mattox KL. Sabiston's Textbook of Surgery. 17th ed. Amsterdam: Elsevier Saunders; 2004. p. 1-15
7. NEEM - India's Miraculous Healing Plant, Ellen Norton. 2005
8. Hand book on NEEM and Allied Products, NIIR Board. 2005
9. NEEM: Application in Agriculture, Health Care & Environment, Neem Foundation, Bombay 2007.
10. THE NEEM TREE, Professor Dr. Heinrich Schmutterer, Justus-Liebig University. 2008.
11. Thompsn A, Manual of Surgery, Alexis Thompson and Alexander Miles, Chapter 1, 6th ed, Vol. 1. Oxford: Oxford Medical Publications; 1990. p. 14.

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Table 1: Pharmacodynamic properties of drug

Drug	Rasa	Guna	Virya	Vipaka	Karma
<i>Pancha tikta Ghrita</i>	<i>Tikta, Madhura, kashaya</i>	<i>Ruksha, Laghu, guru, snighda</i>	<i>Ushna</i>	<i>Katu</i>	<i>Tridoshaghna</i>
<i>Nimba churna</i>	<i>Tikta</i>	<i>Laghu, grahi</i>	<i>sheet</i>	<i>katu</i>	<i>vaatkaphaghna</i>
<i>haridra</i>	<i>Tikta, katu</i>	<i>Laghu, ruksha</i>	<i>ushna</i>	<i>katu</i>	<i>Kaphapittanuta</i>

Table 2: Criteria for assessment of total effect of therapy

SR NO	Result	Criteria
1	Cured	100% relief in the signs and symptoms along with complete healing of wound within 21 days improvement
2	Marked	76-99% relief in signs and symptoms along with complete healing of wound within 21-30 days
3	Improvement	26-75% relief in signs and symptoms along with complete healing of wound in more than 30 days
4	No improvement	Up to 25% relief in signs and symptoms without any progress toward healing of wound

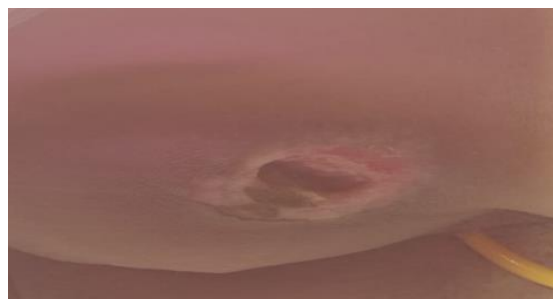


FIGURE 1 DAY 0 BEFORE TREATMENT



FIGURE 2 AFTER 10 DAYS OF TREATMENT



FIGURE 3 :- AFTER 15 DAYS OF TREATMENT



FIGURE 4 AFTER 15 DAYS OF TREATMENT

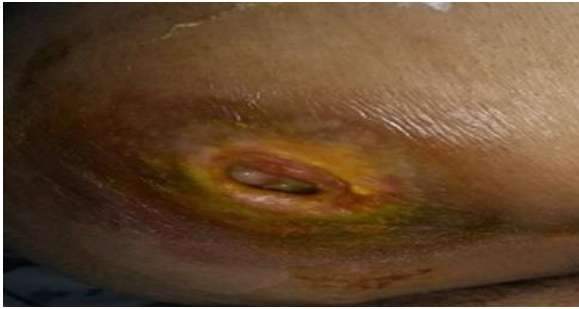


FIGURE 5 AFTER 21 DAYS OF TREATMENT



FIGURE 6 :- 21 DAYS OF TREATMENT



FIGURE 7:-AFTER 3 MONTHS OF TREATMENT



FIGURE 8:- 4 MONTH WITH TREATMENT



FIGURE 9:-AFTER 6 MONTHS WITH TREATMENT



FIGURE 10:- 1 YR OF TREATMENT



FIGURE 11- 1AND HALF YR OF TREATMENT



FIGURE 12 – RECOVERY AFTER TREATMENT

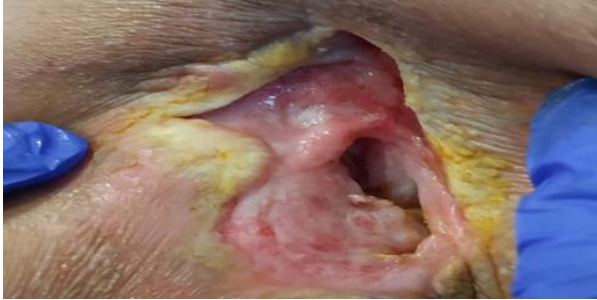


FIGURE 12 – BEFORE TREATMENT



FIGURE 13 – AFTER 15 DAYS OF TREATMENT



FIGURE 14- AFTER 21 DAYS OF TREATMENT



FIGURE 15: - AFTER 6 MONTH OF TREATMENT



FIGURE 16:- AFTER 1 YR OF TREATMENT