# Effect of Palasha mrudu pratisaraniya kshara in the Management of Dushtavrana

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#### Abstract

Dushtavrana (Chronic non-healing wounds) are commonly encountered problem in the surgical practice and are major concern to the health care system. Presence of necrotic or devitalized tissue is commonly seen in chronic wounds which delays wound healing. Removal of necrotic tissue/slough/exudates provides a favorable environment that promotes wound healing, lowering bacterial burden and reducing malodor. Kshara is indicated in the management of chronic wounds which are difficult for shodhan [1]. Kshara karma with Palasha mrudu kshara is useful in such condition. So, here is a case presented with three non-healing wounds over anterior aspect of left leg. Palasha mrudu kshara was applied on alternative day until the Shuddha vrana laxanas were obtained; further daily dressing was done with Jatyaditaila until complete wound healing. Hence, it can be estimated that Palasha mrudu kshara possess Vranashodhana property and it can be used in the management of Dushtavrana.

Keywords: Dusta vrana; Palasha Mrudu Kshara; Non Healing Wounds; Vranashodhana.

#### Introduction

Destruction or discontinuity of the body tissue is called as Vrana [2]. When Vrana fails to heal within time, the dosha invades and does dushana and hence called as Dushtavrana [3]. It exhibits various symptoms which commonly include krishna-raktapeeta-shuklavarna, putipuya, durgandhita puyasravayukta, deerghakalaanubandhi [4].

In India, a study estimated a prevalence rate of chronic wounds in the community as 4.5 per 1000 population where as that of acute wounds was nearly doubled at 10.5 per1000 population[Shukla et al 2005] [5].

Many Chronic wounds especially in rural areas do not heal because of inadequate wound care and thus wound gets covered with slough/necrotic tissue

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160

with purulent discharge. For the purpose of wound closure or to facilitate the wound healing process all the necrotic tissue and the wound exudates must be removed. Management of Chronic wound includes debridement, irrigation and wound cleansing, debridement is often painful and whole of the necrotic tissue cannot be removed at once and wound cleansing agents are proven to delay the wound healing.

In Sushruta samhita many chapters are dedicated for the wound and its management under the heading of Vrana. Shashtiu pakrama is the unique contribution of Acharya Sushruta in the management of Dushtavrana [6]. Ksharakarma which is the 39th upakrama used as Vrana Shodhana in Dushtavrana, here we are reporting a case whichwas treated with application of palashamrudu kshara and it has given promising result.

## Case Report

A 50 year old male, non-diabetic, non-hypertensive patient presented with complaints of non-healing wounds (4x3cm, 2x2cm, 1x1cm) over the anterior aspect of left leg just below knee jointassociated with pain, slough, foul smelling discharge from the wound since 2 months. The pain was less during rest and increased during walking, there was no history of

Asma & Ramesh S. Killedar / Effect of Palasha mrudu pratisaraniya kshara in the Management of Dushtavrana: A case study

Diabetes mellitus and Hypertension, no drug allergies. On examination wounds were spherical in shape, with sloping edges and tightly adhered yellow coloured slough tissue. Blackish discoloration was seen around the wound with itching sensation and serosangueonus discharge. Blood investigations shown raised ESR and WBC count, rest of the things were normal. The treatment plan was framed by local application of Palasha mrudukshara to slough tissue and dressing with jatyadi taila along with internal medications like cap.pentaphyte P5 1 tid A/F, Gandhakarasayan 1 tid A/F until complete wound healing.



Fig. 1: PalashaMrudu Kshara mixed with Kshara Jala





Fig. 4: After application of Kshara

### Preparation of Palasha Mrudu Pratisaaraniya Kshara

Properly dried Palasha (logs of wood) about 5 kg was spread on the even land and heaped together, it was then ignited and burnt into ash and was collected separately in container. 500gm ash was dissolved in 6 parts of water and left undisturbed overnight and next morning it was filtered 21 times and obtained supernatant filtrate was treated on mild fire while it was slowly stirred by a ladle.

When it was clear, red, sharp and slimy it was refiltered and was placed again on fire after removing the separated residue. It was heated till all the filtrate evaporated and white colored powder at the bottom of the vessel was scraped and taken out of the furnace and preserved in a glass container.