

## **Impact of Jalaukavacharana (Leech Therapy) on Healing Dushta Vrana (Chronic Ulcers): A Case Study**

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### **Abstract**

**Keywords:** *Dushta vrana*  
(*Venous ulcer*)  
*Jaluakavacharan.*

**Venous ulcers /venous insufficiency ulceration/ varicose ulcers** are wounds that are thought to occur due to improper functioning of **venous** valves, usually of the legs. Venous leg ulcer is a significant problem in those aged 60 years and older. The annual prevalence of venous leg ulcer among the elderly was 1.69. The overall incidence rate was 0.76 for men and 1.42 per 100 person-years for women. A male patient of age 62 yrs old coming to LRP ayurvedic Hospital diagnosed with Dushta vrana (Venous ulcer). Patient did not get relief by modern medicine. He has given Ayurvedic Panchakarma (Jaluakavacharan) and oral medicine for 15 days and we have got good results.

### **Introduction**

A male patient of age 62 yrs old coming to LRP ayurvedic Hospital to Shalya OPD having complaints Varicose ulcer, massive discolouration and tortuous veins at Left ankle joints since 6 months.

Vaam pada shoola (+) since 6 months.

He has taken allopathic medication but not get relief. He has all the investigations needed. No history of Diabetes and Hypertension. Patient was admitted in Shalya ward.

### **General examination**

**Pulse :** 78/ min.      **Temp:** 98.7<sup>0</sup> F      **B. P.** 130/90.      **R. R.** 21/ min.

**Kshudha :** Prakrut      **Nidra:** Alpa      **Mala :** Badha      **Mutra:** Samyak

**Muscle power:** Not affected significantly- grade V.

**Dosha** – Vatapradhana Kapha.      **Dushya :** Twak, Mamsa, Sira.      **Mala :** Purisha

**Srotas:** Rasa, Rakta, Mamsa, Purisha and Manovaha.

### **Colour Doppler**

Multiple incompetent perforators seen in Left lower limb; Competent SF and FP valves; No evidence of DVT or Ischemia.

**Diagnosis:** Dushta Vrana.(Varicose Ulcer)

### **Treatment given**

1. Sarwanga snehan with Pinda taila.
2. Bashpa sweda with Dashmoola and triphala kwath.
3. Daily dressing with Shodhan and Ropan tail.
4. Three setting of Jaluavacharan done keeping gap of 7 days.
5. In each setting jaluakavacharan 3-4 Leech applied.

**Oral Treatment given:**

1. T. Kaishor Guggulu 250 mg 2 TDS with Jal.
2. T. Panchtikta Ghruta Guggulu 2 TDS with Jal.
3. Tab Jatamaunshi Ghana vati 250 mg 2 BD with Jal.
4. Triphala churna vati 500 mg 2 BD with Jal.

After 30 days of Treatment – the wound healing good almost 90 % . Rate of wound healing increased by Jaluakavacharan. Patient improved very well.

**Mode of Action**

Varicose ulcers can be correlated with Siragat Vat janya vran'. Sushruta has advocated Jalauka (Leech) as one of the most effective method of bloodletting, useful even in infected and non healing wounds.<sup>1</sup>

In Sushruta samhita Chikitsasthana, chapter 12 and 16, Sushruta has advocated that bloodletting by Leech can be practiced in all inflammatory, suppurative and painful conditions to relieve pain and inhibit suppuration including that of non healing ulcerative lesions.

Leech application corrects venous hypertension, reduces vascular congestion due to presence of Carboxypeptidase A inhibitors, Histamine like substances and Acetylcholine, 5 thus it venous valve dysfunction and extra vascular fluid perfusion. This prevents leakage of proteins and isolation of extra cellular matrix molecule and growth factors, thus helps to heal the wound.

Leech application has peripheral vasodilator effect due to presence of vasodilator constituent in the saliva which improves blood circulation and corrects "ischemia" around the wound, thus promotes wound healing. 6

**Conclusion**

**With „Leech Therapy“ and adjuvant Ayurvedic treatment, the non healing varicose ulcer completely healed within 30 days.**

**days.** In this Patient we have got good results by above mentioned treatment.

**References**

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