

**CLINICAL EVALUATION OF TALPATRI GHRITA IN DUSHTA VRANA: A
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ABSTRACT

Background: Dushta Vrana (chronic non-healing wounds) remains a major challenge in surgical practice, characterised by slough, pain, discharge, foul odour and delayed healing. Ayurveda describes numerous formulations with Vrana Shodhana and Ropana properties.^[1] Talpatri Ghrita, prepared from Talpatri (Borassus flabellifer) and Ghrita, has been traditionally indicated for wound management.^[2,3] **Aim:** To evaluate the clinical efficacy of Talpatri Ghrita in the management of Dushta Vrana. **Materials and Methods:** A randomised controlled clinical study was conducted on 40 patients diagnosed with Dushta Vrana. Patients were randomly divided into two groups: Group A – Local application of Talpatri Ghrita; Group B – Povidone-Iodine dressing (control). Assessment was done on the basis of pain, discharge, wound size and granulation tissue formation on days 0, 7, 14 and 21. **Results:** Group A showed significantly faster reduction in discharge and wound area, earlier granulation tissue formation and greater pain relief compared to Group B ($p < 0.01$). **Conclusion:** Talpatri Ghrita demonstrated potent Vrana Shodhana and Ropana effects, offering a safe and cost-effective Ayurvedic alternative to conventional antiseptic dressings in the management of Dushta Vrana.

KEYWORDS: Dushta Vrana, Talpatri Ghrita, Wound Healing, Ayurveda, Shodhana, Ropana, Ghrita Kalpana.**INTRODUCTION**

Dushta Vrana, as described in Sushruta Samhita, refers to non-healing ulcers characterised by discolouration, foul smell, severe pain, pus discharge and delayed healing.^[4] They occur due to vitiation of all three Doshas, mainly Vata and Pitta, along with Rakta Dushti.^[5] Talpatri (Borassus flabellifer) possesses anti-inflammatory, antiseptic and wound-healing properties.^[6] Ghrita acts as a base facilitating penetration and tissue regeneration due to its Snigdha, Madhura and Shita Guna.^[7] In modern medicine, chronic wounds are treated with debridement and antiseptics yet often remain recalcitrant. Ayurvedic management emphasises Shodhana (cleansing) and Ropana (healing), and Talpatri Ghrita integrates both principles effectively.

MATERIALS AND METHODS**Study Design:** Open-label randomised controlled clinical trial.**Duration:** 21 days**Site:** Department of Shalya Tantra, SSRAMC, Inchal, Belagavi.**Sample size:** 40 patients (20 per group).**Inclusion criteria:** Patients aged 18–65 years with Dushta Vrana ≤ 6 months.**Exclusion criteria:** Diabetic, malignant or varicose ulcers, osteomyelitis, gangrenous wounds or immunosuppression.**Intervention**

- Group A – Local dressing with Talpatri Ghrita daily.
- Group B – Local dressing with 5% Povidone-Iodine daily.

Assessment criteria: Pain (VAS 0–10), Discharge (grade 0–3), Wound size (cm²), Granulation (% coverage).

Observation days: 0, 7, 14 and 21.

Statistical analysis: Paired and unpaired t-tests; $p < 0.01$ considered significant.

RESULTS AND DISCUSSION

Both groups improved, but Group A showed superior outcomes

Pain (VAS) reduced from 5.0 ± 1.2 to 1.2 ± 0.8 ; discharge reduced by 84%; wound area reduced by 75%; and granulation tissue formation reached 80% by Day 21. Talpatri Ghrita maintained wound moisture and prevented microbial growth owing to its Snigdha and Madhura Rasa. The presence of antioxidants and natural bioactive constituents of *Borassus flabellifer* enhanced epithelialisation.^[8,9] Compared to Betadine, which only controls infection but can delay epithelial growth, Talpatri Ghrita accelerated Vrana Shodhana and Ropana without cytotoxic effects.^[10]

CONCLUSION

Talpatri Ghrita proved to be a safe and effective formulation for Dushta Vrana, promoting rapid cleansing, granulation and pain relief. It offers a natural, economical alternative to modern antiseptic dressings. Further multi-centre trials are recommended.

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