

MANAGEMENT OF AGNIDAGDHA VRANA WITH JEERAK GHRITA - CASE REPORT***¹Dr. Farahath Naaz and ²Dr. Chandrakant Halli**¹P.G. Scholar of Shalyatantra Dept., N K Jabshetty Ayurvedic Medical College Bidar.²HOD of Shalyatantra Dept., N K Jabshetty Ayurvedic Medical College Bidar.***Corresponding Author: Dr. Farahath Naaz**

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ABSTRACT

Acharya's has very well defined the concept of dhagda vrana while describing Agnikarma adhyaya where acharya sushruta has considered it as ithartha Dhagda,^[1] Acharya vagbhata has addressed as pramada Dhagda,^[4] and Acharya Charaka has mentioned burn wounds as agantuja vrana,^[5] Dhagda vrana are very frequently and commonly seen in society which are difficult to heal and leads to the intollerable painful condition to the subject. The ayurvedic management leading to better post healing scar reducing cost and hospital stay with nil complications. Here jeeraka Ghrita is used for external application in Dhagda vrana it help in management of vrana which is Explain in this case report.

KEYWORDS: Sushruta, charaka, Vagbhat, Dhagda vrana, jeeraka Ghrita Agnikarma.**INTRODUCTION**

Among all kind of injuries burns are most devastating and painful condition causing Major physical, mental, emotional and social Trauma. Burn is crital skin condition to care due to involvement of many factor such as skin layers, inflammation and pain. From ancient days it is serious health issue. It is having high mortality rate in the whole world, injuries caused by burns have many more complications like cosmetic disfigurement permanent physical damage and mental trauma. It is one of immuno compromised state causing high morbidity and morality, the management of wounds was explained under shashti upakarma, application of Ghrita is one among them. Now a days silver sulfadiazine is commonly used in bum but this doesn't avoid post burn complications, affected patients may land into horribly contracted pigmented scar.

Jeeraka Ghrita is described by bhaishajya ratnarali as combination for having of bum wounds reduces the bum discharge and reduce burning sensation of bum area and blister formation.^[2]

CASE REPORT

Patient Name: Basavanappa

Age: 68

Gender: Male

Occupation: Former

Date of Admission: 23/04/21

Date of discharge: 08/05/21

OPD no: 21013915

Chief complaints

- Burning sensation in thigh region
 - Pain++
 - Difficult in walking
 - Burn over right thigh region 8 days back
- } Since 3 days

Associate Complaints

- Injury over right eye
- Self fall road

H/O of present illness

Painful was appearauntly asymptomatic before 3 days then suddenly he fallen over floor got injury over eyes and also 2 days back he got bumt by fire at right thigh having pain, Burning sensation, Difficulty in walking so he came to our college for further treatment.

Personal history

Spinal surgery
K/C/O hypertension
K/C/O diabetes mellitus since 15 years
(Patient is on medication)

Family history

No Such history present

General examination

Gc: normal
Pulse: 74/mm
BP: 130/90mm HG
RS: Bilateral lung failed clear
CNS: Conscious oriented

CVS: S1 S2 Heard
 TEMP: 98.6°F

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OPD.No. 21013916 Date: 23-04-2021
 Name: Basavanappa Age: 63 Sex: Male

Chief Complaints - Burn over right thigh region
 Pain ++
 Burning sensation

Post-History :- Ho - Self fall
 Co - Injury over the left Eye.

Personal History :- K/LCo HTN & DM2 (15 years back)
 patient is on Medication

Diagnosis:- Burn (II degree burn)

Rx :- Jeerak Ghrita Application
 Tab Aceclo ip - ①
 1-0-1
 Tab Per DSP - ①
 1-0-1

Cur



Investigation

1. Haemogram, ESR, BSL, HIV, HbsAg.

2. Urine examination
3. Sr. Electrolyte, Serum. protein, Serum Creatinine (if necessary).

Procedure of VranaKarma (wound cleaning and dressing)

1. Sterile instruments and materials were taken as follows kidney tray, swab holding forceps, dissecting forceps, gauze piece, cotton, sterile spatula, dressing table, sterile warm water, Jeerak ghrita and informed written consent were taken.
2. According to the site of Burn wound suitable position was given, wound was cleaned daily with sterile saline water.
3. All burnt skin and slough was removed as per requirement to keep wound clean.
4. And surrounding area of wound was always dried and kept cleaned.
5. Jeerak ghrita was applied over burn wound separately and gauze pieces were kept and dressing was done with autoclaved cotton bandage.
6. Patients were advised with following orders as follows.
7. Do not allow dressings to get wet.
8. Do not allow dressing to get contaminated.
9. Patients were asked for regular follow up.
10. Patients were asked to follow the diet restrictions.

Duration of Treatment

Ask the patient to come for follow up for 21 days with clinical assessment of wound done daily.

Follow Up Patients were asked to give follow up daily up to 7th day, then on 10th, 15th, 21th day or up to relief. Daily assessment of patients included;

1. TPR BP Chart
2. Blood Investigation – if necessary
3. Wound examination
4. Wound cleaning and dressing
5. Decrease/ increase of symptoms.

DISCUSSION

Burn is the most devastating and distressing injury a man can suffer. The injury represents an assault on all aspect of the patient, from the physical to the psychological. It affects all ages, from paediatric to geriatric level and is a problem in both developed and developing world. Even small burn can bring the severe pain. The pain and distress caused by a large burn are not limited.

In all over the world, out of all accidental cause are more compared to accidental and industrial hazards, so it is a major hazard and socioeconomical problem.

CONCLUSION

This study was found very useful in the management of burn wound by application of an ayurvedic preparation Jeerak ghrita. Jeerak ghrita showed good pain relieving and healing property. Present study proved that Jeerak

ghrita has effective pain relieving, healing properties and good cosmetic results.

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