A CLINICAL STUDY ON THE EVALUATION OF THE EFFICACY OF JALAUKAWACHARANA (BLOOD LETTING BY LEECHES) IN THE MANAGEMENT OF DUSHTA VRANA (NON HEALING ULCERS



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SUMMARY AND CONCLUSION

This study was conducted to evaluate the efficacy of Jalaukawacharana (Blood letting by leeches application) in the management of Dushta vrana (Non healing ulcers)

Dushta vrana is not an uncommon medical entity and very larger numbers of population through out the world are suffering from this problem. No successful and satisfactory medical treatment is established yet. Therefore sufferers from this problem are facing various kinds of problems such as high cost of treatment, harmful complications and loss of man power due to prolonged illness and hospitalization etc.

Ayurveda and indigenous medicine in Sri Lanka has described dushta vrana before thousands of years in detailed with various kinds of treatments. According to the indigenous literature this entity has been described under the different names such as Dushta vrana, Aramana vrana, Bhayankara vrana and Suwanovana vrana etc. According to the ayurveda non healing or very difficult to healing effect is the common feature of the Dushta vrana.

According to the modern literature similar entity could be found as non healing ulcers. There are some co-relation between Dushta vrana and Non healing ulcers on the aetiopathogenesis and clinical features.

According to the indigenous medicine treatment of dushta vrana has been included under the Gedi Vrana vedakama (Treatment of Boils and Carbuncles) and there are very effective therapeutic measures have been mentioned.

Therefore this study has done by using two therapies of the traditional Gedi Vrana vedakama in Sri Lanka namely Raktamokshna using Jalauka (blood letting by leeches application) for the test group and Triphal Gugul kwatha with magulkaranda melluma for the control group. These kwatha and Melluma are very famous among practitioners of traditional Gedi Vrana vedakama in Sri Lanka and has done two research study successfully.

Raktamokshana (Blood letting) therapy has been described by ayurveda and traditional indigenous medicine as a very effective therapy for various kinds of diseases including Dushta vrana. Even today practitioners of traditional indigenous Gedi Vrana vedakama successfully using this therapy for the better healing effect of Dushta vrana. There fore this study was select this therapy for the test group to study evaluation of the effect of the therapy in the management of Dushta vrana (Non healing Ulcers) subjectively and objectively using modern and scientific research methodology. There are no research study has done locally or internationally regarding Raktamokshana (Blood letting) therapy and Dushta vrana (Non healing ulcers) so far.

This study was a totally clinical and literature study. The clinical study was done at the ayurvedic teaching hospital, Borella. Patients were registered for the study at the kayachikitsa clinic of the O.P.D and selected patients were admitted to the ward number 08 and 09 of the same hospital. Diagnosis of the Dushta vrana were done on the signs and symptoms mentioned in the classical texts of the ayurveda and indigenous medicine. Before the commence of clinical trial written consent were obtained from the patients and necessary laboratory investigation along with personal and clinical history were obtained

according to the clinical proforma which was specially prepared for the this study.

For this study 55 patients were selected using independent random sampling method irrespective of sex, race religion etc. Selected patients were grouped in to group A and group B. Two group were treated as follows

1-Group A-Treated with Jalaukawacharana (Leeches application)

2-Group B-Treated with Triphal Gugul kwatha internally and Magulkaranda

Melluma as external application.

Patients of group A were treated by Raktamokshana (Blood letting) by means of Jalauka (medicinal leeches). For these purpose 4 leeches of medium size were used for each patient once a week for one month duration. Patients of group B were treated by using Triphal Gugul kwatha and Magulkaranda melluma daily for one month duration. Luke warm water was use to wash and clean the ulcers in both groups and no any other medicaments were used for that purpose. All the important observations and results before and after the trial were recorded once a week. Any side effects for the treatment were also recorded under the respective patients.

Leeches application was done according to the technique used by a specialized indigenous medical practitioner who belongs to the well known traditional Gedi Vrana vedakama (Treatments for the Boils and Carbuncle) in Sri Lanka. In addition to measures mentioned in ayurveda regarding leeches application were also followed.

Selection of patients, identification of suitable leeches, application of leeches, identification of row material and preparation of drugs and collection of data

were done under the closed supervision of the supervisor and co-supervisor.

After the completion of treatment all the patients were under went two months follow up period.

According to the final results obtained after the completion of treatment of group A and B. Patients of group A and B were gained significant improvement for the respective treatment. But patients of group A were having tremendous improvement comparatively than patients of group B objectively and subjectively. This result also has been proved by the statically analyzing of the criteria of assessments.

The thesis of this study consist of six chapter and first chapter included indigenous, ayurvedic and modern review of different kinds of vrana (ulcers) including dushta vrana (non healing ulcers). In addition this chapter consist of indigenous, ayurvedic and modern review of Raktamokshana (Blood letting) therapy including Jalaukawacharana (blood letting by leeches application).

Under the literature review of vrana and dushta vrana consist of etymology, definition, synonyms, different kinds of classifications, seat of vrana, structure of the skin, aetiology, pathogenesis, premonitory symptoms, clinical features, complications, prognosis, line of treatment and regiments according to the indigenous, ayurvedic and modern medicinal view points.

Review of Raktamokshana and Jalaukawacharana consist of description of the Rakta (Blood), classification of Raktamokshana, different method of Raktamokshana including leeches application, indication and contra indications,

complications and treatments and suitable and unsuitable regiments etc according to the indigenous, ayurvedic and modern view points.

For the purpose of literature review classical texts of the respective field of medicine, research papers, medical journal and publications and magazines were used. In the case of indigenous review Athveda poth (hand books). Olla leaf and information obtained from the traditional indigenous practitioners has been included in addition to above mentioned literatures.

The second chapter consists of drug review. Under the drug review description of the Jalauka (medicinal leeches) including definition, classification, feeding, with systematic study has been done according to the indigenous, ayurvedic and zoological view points, In addition to row materials use for the preparation of Triphal Gugul kwatha and Magulkaranda malluma have been described according to the indigenous, ayurvedic and botanical view points.

Material and method of this study was included in the third chapter and it consists of detailed of clinical study and method of preparation of test drugs and procedure of administration of drugs etc.

The fourth chapter consists of results and observations. Observations have done regarding the general descriptions of the patients such as age, sex, and occupation etc. The results were obtained before and after the completion of clinical trial regarding criteria of assessment including measurements of vrana (ulcers) and total assessment of the treatments has been included in this chapter

The discussion on the results and observations has been done under the fifth chapter followed by summery and conclusion in the sixth chapter. Bibliography and appendix are followed the sixth chapter.

CONCLUSION

According to the study following conclusions could be made.

Jalaukawacharana therapy (Blood letting by leeches application) and Triphal Gugul kwatha with the Magulkaranda melluma could be used in the management of Dushta vrana (Non healing ulcers) as successful therapies.

But Jalaukawacharana therapy having better relieving effect comparatively than Triphal Gugul kwatha with the Magulkaranda melluma regarding Dushta vrana.

There is a co-relation between Dushta vrana and Non healing ulcers.

Incidence of Dushta vrana is more common in male than female and age above the 40 years.

Incidence of Dushta vrana is higher in the labour class, addicted and pittaja prakriti peoples.

Dushta vrana is commonly occurring in the Gulpa sandhi (Ankle joint) area.

Dushta vrana is commonly occurring in the persons with varicose vein, vata rakta and athisthula (over weight).

Incidence of Dushta vrana is comparatively low among the higher educated, rich socio-economical status, krusha (thin) and well nourished persons.

The religion, race, dietetic habits, marital state, family history and habitat are not relationship with the incidence of Dushta vrana,

According to this study most successful results regarding Dushta vrana could be obtain within short duration by the administration of Jalaukawacharana therapy and Triphal Gugul kwatha with the Magulkaranda melluma as a combing therapy.

This study could be proceed further by increasing the duration of treatment more than one month and by increasing the number of patients.