A SINGLE CASE STUDY OF JALAUUKAVACHARAN THERAPY IN VARICOSE VEIN

Vrishali Patil¹, Dnyaneshwar Chavan²

¹PG Scholar Final Year (Shalyatantra), ²Asso Professor.
Shalyatantra Department Dr G.D. Pol Foundation’s YMT Ayurvedic College & Hospital, PG Institute, Kharghar, Navi Mumbai., Maharashtra, India

Email: patilvrishali1992@gmail.com

ABSTRACT
Varicose Veins are twisted and bulgy veins that protrude on the surface of the skin. Spider veins are similar, but less obvious. These blue and red tattoo like lines on the skin, as well as the varicose veins are commonly found in the legs and occur primarily due to enlarged and weekend vein walls due to faulty valves; this leads to a painful and discomfort that sometimes necessitates varicose vein treatment. Vascular defects and poor blood circulation are also important reasons for these vein disorders. Apart from vascular defects, some of the other causes for varicose veins are hereditary, obesity, prolonged standing, and lifestyle changes. These are typical reasons requiring varicose vein treatment. The ancient technique of Rakta Mokshan was and is still advised for varicose veins. In Ayurveda Varicose Veins is correlated with ‘Siraj Granthi’ that mentioned in Sushruta Samhita. Letting blood flow from the affected varicose veins can help reduce the pressure in the veins. In fact, Rakta Mokshan using leeches (leech therapy) is a very cheap and popular choice for the treatment of varicose veins and other diseases developed due to it like ulcers. Though there is no study to back the fact, but people have been benefited from Rakta Mokshan. It is the palliative treatment; it reduces the symptoms at some extent as well as minimize the complications due to varicose veins such as eczema and ulceration. The leech removes congested blood to allow normal circulation to retune to the tissues, thus preventing venous ulcer from starting. This is a case presentation of 53 yr. old male patient who had a history of varicose veins having complaints of pain, muscle cramps and swelling in both legs with ulceration for one year. A colour doppler ultrasound was positive for great saphenous vein varicosities in limb. Jalaukavacharan was done once in a week along with oral medication for total duration of 30 days with continuation of the previous medication to see the effect and to reduce the signs and symptoms developed due to varicosity of veins.

Keywords: Shalyatantra, Rakta Mokshan, Siraj Granthi, Sushruta Samhita, Jalaukavacharan.

INTRODUCTION
The common sites of varicosity are superficial venous system of the lower limbs, it affects either the long or short saphenous vein or both. The superficial veins and perforating veins connect the superficial with deep veins. The primary causes of varicose veins are the incompetency of the valves and weakness in the walls of veins which causes venous insufficiency. Secondary varicose veins occur due to venous obstruction caused by pregnancy, tumours in the pelvis, fibroid, ovarian cyst and deep vein thrombosis etc. In Ayurveda classics
varicose vein can be very much co related with the signs and symptoms explained for Sirajgranthis (obstructive circulation). Due to Vataprapakopaka nidanas (causative factors which increases vata) such as, physical exertion, straining, for debilitated persons the vitiated vata enters the Siras (veins) causing the Samppeedana (Squeezing), Sankocha (constriction), and Vishoshana (act of drying up) which produces round and protruded Granthi (cyst) in the Siras (Veins), manifesting Sirajgranthis (varicose vein).

In the disease Sirajgranthis, the main vitiated doshas are Vata and Raktu. By doing Jalaukavacharan, the stagnant vitiated blood gets drained out, which helps to retain the chala guna of vata. Jalaukavacharana removes the dushtarakta and clears the pathway of Dosha thereby removing srotodhata. Being anushastra procedure it possesses ashukari guna providing faster result in relieving the symptoms. When jalauka starts sucking blood it also releases some amount of hirudin which dilutes and keeps the blood in liquid form (anticoagulant). This hirudin works in preventing the clotting of blood during the procedure. Jalaukavacharana is a simple procedure and can be practised in OPD levels.

Case Report
A 53-year-old patient visited in OPD of YMT AMC, Kharghar on 02/12/2018. He presented with complaints of blackish discolouration of skin with itching from calf region to dorsum of foot of both legs and prominent dilated and tortuous veins at the medial aspect of calf region of left leg for 6 months. He had dull aching pain in calf region of left leg which aggravated on long standing accompanied with swelling for 6 months. He had the history of varicose veins stripping done in both the limbs before 1 year. The surgery had complications which lead to blackening of skin below knee joint till the dorsum of the foot of both lower limbs. This later lead to dryness of skin of that area accompanied by itching and burning sensation. He visited YMT Ayurved Medical College for the same complaint and was on medication of Mahayograj Guggul 325mg 1-tab BD, Maharasnaadi Kwath 60 ml BD, Punarnava Guggul 250 mg 1 Tab BD, Goshuradi Guggul 250 mg 1 Tb BD. He was advised for Jalaukavacharana for the same & was asked to be repeated after 1 week. On examination, there was pain, swelling and dilated tortuous veins present in the calf region of left lower limb. Blackish discolouration of limbs was evident in both the legs along with itching. Pain was dull aching in nature which aggravated on standing for long time especially during evening hours. Pain was relieved by elevation of legs, Homans’s sign (pain in calf region on passive dorsiflexion of the foot) and Mose’s sign (pain in calf region on gentle squeezing of calf region) were negative in the patient. Follow-up was done 1 month after the treatment period. Patient was assessed weekly on the basis of visual analogue scale. Before treatment pain scale was 9. After one week from the start of treatment pain grade was 7 then 5 after second week, 4 after third week, 2 after completion of treatment i.e. four weeks. Frequency of muscle cramps was 5-6 times in a week which decreased to 4 times after 1 week of treatment. At completion of the treatment it decreased to once only per week. As far as walking distance is concerned, patient was unable to walk before the treatment properly. But with the treatment maximum walking distance was 20 meter, 50 meters, 100 meters,200 meters at the completion of first, second, third and fourth week respectively.

Table 1: Observations of different parameters during treatment

<table>
<thead>
<tr>
<th>Observations</th>
<th>Before Treatment</th>
<th>After 1 week</th>
<th>After 2 weeks</th>
<th>After 3 weeks</th>
<th>After 4 weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain (VAS)</td>
<td>9</td>
<td>7</td>
<td>5</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Frequency of muscle cramps (in a week)</td>
<td>5-6 times</td>
<td>4 times</td>
<td>2 times</td>
<td>1 time</td>
<td>1 time</td>
</tr>
<tr>
<td>Maximum walking distance (Meters)</td>
<td>0</td>
<td>20</td>
<td>50</td>
<td>100</td>
<td>200</td>
</tr>
</tbody>
</table>
RESULT  The clinical features of varicose veins (varicosities) were improved at the end of 4th week. With a follow up for a period of 3 months, the patient had shown almost no signs of reoccurrence.

DISCUSSION  
The goal of Jalaukavacharan for Varicose vein is to reduce morbidity by natural, non-invasive, safe alternative healing with no side effects. Once the leeches attach themselves to the skin of the patient and start sucking blood, the saliva enters the puncture site along with enzymes and chemical compounds which are responsible for the progress of cure and treatment. Because of anti-coagulating agents the blood becomes thinner, allowing it to flow freely through the vessels. The anti-clotting agents also dissolve clots found in the vessels, eliminating the risk of travelling to the other parts of the body and blocking an artery or vein. The vaso dilating agents widen the vessel walls by dilating them and this causes the blood to flow unimpeded too. Patients feel relief from the anti-inflammatory and anaesthetic effects of the leech’s saliva. Enzymes and compounds present in the leech saliva act as anti-coagulating factor. The most prominent enzyme is hirudin which binds itself to thrombin’s, thus effectively inhibiting coagulation of the blood. Another compound that prevents coagulation is Calin. This works as an anticoagulant by binding itself to collagen. It is also an effective inhibitor of platelet aggregation caused by collagen. The saliva of leech also contains factor Xa inhibitor which blocks the action of the coagulation factor Xa.

CONCLUSION  
Ayurveda is science of life. Peculiar features of this science are tailor made treatment for each disease. Jalaukavacharan is really a useful therapy in many vata-rakta dushta vyadhi, in rakta dushta vyadhi. It is one of the times saving and instant relief therapy. Patients can easily afford this treatment as it is time saving & also have minimal side effects. So, time demands for research in this therapy to prove in scientific way.

REFERENCES  
3. Tripathi R.D. (1995); Ashtanga Sangraha; Chaukhamba Sanskrit Series; Varanasi. Uttar Tantra Ch;34 
4. www.leeches.biz/leech-therapy.htm 

Source of Support: Nil  
Conflict of Interest: None Declared