A CASE STUDY ON EFFECT OF RAKTAMOKSHANA AND LEPA IN SIRAGRANTHI W.S.R. TO GRADE - 2 VARICOCELE

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ABSTRACT
Varicocele is characterized by abnormal tortuosity and dilatation of the veins of the pampiniform plexus within the spermatic cord and is one of the causes related to male infertility. In Ayurveda it can be correlated with Siragranthi. According to Sushruta due to Vataprapakatanidanas such as physical exertion, straining, for debilitated persons the vitiated Vata enters the Siras causing Sankocha, Sampeedana and Vishoshana which produces Vritta and Granthi in the Siras manifesting Siragranthi and explained treatment as Raktamokshana and Jaloukaavacharana in Avaghadh and Pinditalakshana respectively. **Method:** Here a 38yrs aged male patient came to SJIIM hospital Bangalore, complaining of dull, recurring pain in left testis with azoospermia on examination and screening was diagnosed as grade 2 varicocele and was treated on the lines of Siragranthi with Jaloukaavacharana for 5 sittings weekly once and external Lepa for 35 days. **Results:** Significant changes in post doppler study and appreciable results were observed in the form lightness in the body, increased strength and libido, and there is no recurring dull pain. **Conclusion:** Shodana like Raktamokshana by Jaloukaavacharana is prime treatment modality in Siragranthi followed by Lepa.

Keywords: Raktamokshana, Siragranthi, Jaloukaavacharana, Varicocele, Dashangalepa.

INTRODUCTION
A spermatic cord holds up each testicle. The cords also contain the veins, arteries, and nerves that support these glands. In healthy veins inside the scrotum, one-way valves move the blood from the testicles to the scrotum, and then they send it back to the heart. Sometimes the blood doesn’t move through the veins like it should and begins to pool in the vein, causing it to enlarge. A varicocele develops slowly over time. Varicocele identified in 15% of healthy men, up to 35%of men with primary infertility and 80% with secondary infertility. Although varicoceles are almost always larger and more common on the left side, up to 50%of the men with varicocele, have bilateral varicoceles. If left untreated it leads to infertility, testicular atrophy, low testosterone and grade3 varicocele which requires surgical intervention hence a non-invasive treatment was tried and found to be very effective.
Objectives:
✱ To share experience and knowledge to friends and supervisors.
✱ To get feedback from the friends and supervisors
   for further improvement in knowledge and skills.
Baseline:
Subjective parameter: Testicular pain and testicular swelling.
Objective parameter: Colour doppler of the scrotum.
Case report: A moderately built 38 years male patient approached to OPD with complaints of dull reoccurring pain in left testis associated with swelling in bilateral scrotum. The pain was aggravating usually while coughing and it was getting reduced on lying down. Later on he noticed mild swelling in both the testis. For these complaints he approached SJIIM hospital, Bangalore. No related history found.

Diagnosis:
✱ Patient was a known case of azoospermia. On screening and examination, subjective findings were noted and advised for doppler study of scrotum. The doppler study revealed Grade - 2 varicocele.
✱ Ayurvedic view: Based on Lakshanas of Siragata Vata as explained in Sushruta Samhita - Sira Akunchana, Sira Sampidana and Vritta in Siras.

Treatment:
✱ 5 Sittings of Jaloukavacharana with an interval of 7 days.
✱ Application of Dashanga Lepa with Gulab Jal once in the morning for 35 days.

Observations at the midpoints:

<table>
<thead>
<tr>
<th>Sittings of Jaloukavacharana</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subjective parameters:</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Testicular pain</td>
<td>+++</td>
<td>++</td>
<td>++</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>Testicular swelling</td>
<td>+++</td>
<td>+++</td>
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<td>+</td>
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<tr>
<td>Application of Dashanga Lepa with Gulab Jala After 8 days</td>
<td>After 8 days</td>
<td>After 8 days</td>
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</tbody>
</table>

Progress of the treatment:
➢ Varicocele is defined as mass of tortuous and dilated veins of pampiniform plexus and internal testicular vein of spermatic cord usually lmk pon the left side associated with infertility and testicular pain. 
➢ As per Acharya Sushruta Vata afflicting Siras does Sankocha, Sampidana, Vishoshana and
Vritta of Siras. Rakta if afflicted due to increased Vata and hence Raktamokshana stands first\(^2\). In Avagadha and Pindita Avastha Jaloukavacharana is beneficial to overcome Raktadushti\(^5\).

- Initially the patient was afraid for the treatment after explaining about the outcome he agreed for the same. After 1\(^{st}\) sitting of the treatment the patient felt better where in the pain and swelling started gradually as the sittings of Jaloukavachara continued along with the added effect of application of Dashanga Lepa. No modifications were done during complete course of treatment.

**Outcomes at Endpoint:**
- There was a significant improvement as an outcome. The patient felt relief from all the symptoms.

**BT AT Comparison:**

<table>
<thead>
<tr>
<th>Parameters</th>
<th>Before treatment</th>
<th>After treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Testicular pain</td>
<td>Present</td>
<td>Absent</td>
</tr>
<tr>
<td>Testicular swelling</td>
<td>Present</td>
<td>Absent</td>
</tr>
<tr>
<td>Doppler study</td>
<td>Bilateral grade 2 varicocele</td>
<td>Normal scrotal doppler study</td>
</tr>
</tbody>
</table>

**DISCUSSION**

Medicinal leech is small factory to manufacture many biological active substances which reduces the symptoms by acting on the blood vessels, inflammatory mediators. Jaloukavacharana is considered as best for Raktamokshana, has Rujahara and Shothahara guna\(^6\) and also it removes vitiated Rakta which acts as a major causative factor in causing the disease.

A polyherbal compound named Dashanga Lepa contains Shirisha, Yashtimadhu, Tagara, Rakta-chandana, Ela, Jatamansi, Haridra, Daruharidra, Kushta, Hrivera has anti-oxidant, anti-inflammatory, analgesic properties which given an added effect to subside swelling and pain.

**CONCLUSION**

Varicocele has been associated with male infertility. It is a vascular abnormality of testicular venous drainage system. Current evidence suggests the central role of reactive oxygen species and the resultant oxidative stress in the pathogenesis of varicocele associated male subfertility. Bdellin, which is a protease inhibitor present in the saliva of the leech acts as anti-inflammatory helps to reduce the inflammation along with Eglin’s. Jaloukavacharana with its Shothahara and Srotoshodhanaguna helps to relieve Shotha. The ingredients of Dashanga Lepa has anti-inflammatory, analgesic, anti-oxidant properties help to combat the vitiated Vata along with Rakta. Doppler study after...
the complete course of treatment revealed normal study which gives positive outcome from the Jalou-
kavacharana and Dashanga Lepa application. The patient was only on ayurvedic medications which have proven the proper analysis and treatment based on ayurvedic parameters has helped to get good results there.

REFERENCES

3. Harrison’s principles of internal medicine,(Ed) by Dan longo; Anthony fauci; Dennis kasper; Stephen hauser; J.Jameson; Joseph loscalzo, 18th edition, Mc Graw hill publication, volume 2, 2011, pg no-2357.
4. www.wikipedia.com

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