



CLINICAL STUDY ON THE EFFECT OF JALAUKAVACHARAN IN THE MANAGEMENT OF VICHARCHIKA W.R.T ECZEMA—A PILOT STUDY

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Abstract: Vicharchika is one of the skin disorder described in all ancient texts of Ayurveda under the types of kshudrakushta. It is considered amongst the Kashtasadhya Vyadhis. It can be correlated with the eczema in modern science. As for as treatment is concerned eczema is difficult to cure and steroids are used, that has many adverse effects on the body and health. Acharya Sushruta has mentioned it, as one of the Raktaja Vyadhi, Rakta is considered as the fourth dosha and Raktamokshana is the treatment of choice for Raktaja Vyadhi, Raktamokshan is a para-surgical procedure in the Shalyatantra, in which Sushruta has mentioned different methods according to the patient, disease, site, depth of the disease and involvement of dosha dushya. There are different methods of Raktamokshana but Jalaluka is one of the anushastras and it is a type of Ashastrakrita Raktamokshana. In this study, 10 patients who are fit for jalaukavacharan, and suffering from vicharchika are selected, assessed on the basis of percentage relief and later observed for improvement in before and after treatment.

Conclusion: Jalaukavacharan has significant result in management of vicharchika.

Keywords: Jalaukavachara, vicharchika, eczema, raktamokshana.

Introduction: Vicharchika ^[1] (eczema ^[2]) refers to a chronic inflammatory skin condition, characterized by dry skin, with patches that are red and intensely itchy. These patches of eczema may ooze, become scaly, crusted, or hardened ^[3]. Symptoms can range from mild to severe. Eczema can occur anywhere on the skin; however, it is commonly found on the flexors (bends of the arms, backs of the knees). There are many types of eczema, with the most common one being atopic dermatitis. The exact cause of eczema is unknown, however, there are genetic, immunological and environmental factors that play a role. Eczema can come and go, and can migrate around the body; just as one patch clears up, another may develop. This is the chronic nature of the disease. Patients have impaired barrier function. This means that the skin barrier is broken down, loses moisture, and can allow bacteria to grow and enter the body (causing bacterial infections on the skin). The loss of water leaves the skin dry and cracked. The goal of eczema management is to replenish

moisture, and create a barrier to protect the skin. It is described in all ancient texts of Ayurveda under the types of kshudrakushta. It is considered amongst the Kashtasadhya Vyadhis ^[4]. According to sushruta it is raktaja vyadhi and rakta is fourth dosha ^[5]. Raktamokshana is the treatment of choice ^[6,7].

Aims & Objectives: To evaluate the efficacy of Jalaukavacharan in the management of Vicharcika.

Materials & Methods

Patients suffering from complaints of vicharcika were selected from opd & ipd of department of Panchakarma, govt Ayurveda hospital erragadda, hyderabad. 10 patients were registered, according to their sign and symptoms and subjected to Jalaukavacharan.

Inclusive Criteria: Patients having signs and symptoms of eczema like Kandu, strava, Vaivarnya, Pidaka ^[8], Vedana, Visarpana, Daha, Rukshata ^[9], etc. were selected irrespective of age, sex, religion.

Exclusive Criteria

1. Known cases of skin malignancies, Tuberculosis, and STD were excluded.
2. Coagulatory disorder like haemophilia. Severe systemic disorder like severe anemia, diabetes, hepatitis, HIV patients etc.

Subjective Criteria

1. Kandu (itching)
2. Srava (Discharge)
3. Shoth (swelling)
4. Skin patch

Research Methodology: Patients subjected to clinical trial were subjected to jaluakavacharan at weekly interval for 5 weeks without any oral medicine.

Process of Jaluakavacharan (Leech Therapy)^[10]

Pre Procedure

- Counseling of patient was done before Jalauka application.
- Routine hematological investigation were done.
- The affected part was cleaned.
- The entire materials viz. jaluaka, turmeric powder, shatdhauta ghrita and dressing material were kept ready.
- Saturation of jaluaka-selected numbers of leeches were kept in turmeric water (5gm turmeric powder in 100ml of fresh water in bowl) for 5 minutes.
- Then the leeches were kept in clean fresh water.
- Those saturated active leeches were ready for application.

Procedure

- Patient was asked to sit or lay down comfortably as per the site of application.
- Jalauka was taken from fresh water and applied at the site of lesion.
- In some cases, where the jalauka did not get stuck another site was tried. If Jalauka did not stick at any site, then a drop of milk was kept at the site or the site was pricked for a drop of blood.
- Jalauka was covered with fine white wet cloth except the mouth part, after it started sucking the blood. the cloth was kept wet.
- Elevation in the neck region of leech was observed when it started sucking blood.
- After sucking to its capacity the leech automatically wears off.

Post Procedure

A. Leech

- Turmeric powder was poured on the mouth of jalauka to vomit the sucked blood.
- Jalauka was then squeezed for removing the sucked blood.
- Leeches were kept in turmeric water for 5min and then transferred to fresh water.

B. Patient

- Dressing at the site of bite with shatdhauta ghrita was done.
- Dusting of raktastambhaka yoga was done in case of oozing.
- Patient was asked to stay for one hour in panchakarma theater for observation.

Criteria for Assessment: The patient subjected to clinical trials will be observed for improvement in signs and symptoms before and after the treatment, improvement will be assessed on the basis of percentage relief.

1. Excellent improvement : >75 % relief
2. Marked improvement : 50 % to 75% relief
3. Moderate improvement : 25 % to 50% relief
4. Mild improvement : <25 % relief

Results and Discussion

Table-1: Age and sex wise distribution of patients

S.N.	Age	Male	Female	Total No	%
1	10-20	1	1	2	11.76
2	20-30	1	1	2	17.64
3	30-40	2	2	4	41.17
4	40-50	2	0	2	29.47

Table-2: Prakruti wise distribution of patients

S.N.	Prakruti	No of patients	Percentage
1	Vataja	2	23.52%
2	Pittaja	5	47.05%
3	Kaphaja	3	29.41%

Table-3: Chronicity

SN	Chronicity	No. of patients	Percentage
1	1-6 months	4	41.17
2	6 months-1year	1	11.76
3	1 year – 3 year	2	17.64
4	>3years	3	29.41

Probable Mode of Action

- Leeches applied on skin, it sucks the blood from superficial might be from capillaries or extra-cellular so it may be more impure than other body channels.
- By experiment, it was measured that PO2 of leech expelled blood and PO2 of arterial blood. The suggestive findings were achieved that PO2 of leech expelled blood was comparatively less than the arterial blood of human (interaction between student and teacher RAV – New Delhi, 2003).
- Leech sucks blood from limited area and when leeches applied in only pathogenic area so it can be said that leech expelled blood from

where the pathological state is more so ultimately blood of that area comparatively more vitiated than other area. Hence, it can be said that leeches gives best effect in Vicharchika by expelling the morbid, vitiated Dosha and Dhatus. But the effect of therapy is not only by expelling the vitiated blood but leech also emits some enzymes in the wound. So Jalaukavacharana has also provided– Normalization and improvement of capillary as well as collateral blood circulation.

Expressed anti-inflammatory effect. Immuno-stimulation and immuno-modulating effect. Early wound healing effect. This action may be effect of such salivary enzymes like Hirudin anticoagulant effect with diuretics, antibiotic action, Calin–prevent blood

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coagulation, eglin, hyaluronidase, antithrombin, antitrypsin and antichymotrypsin etc.

Discussion

1. Lower limbs are mostly effected in Vicharchika. Doshik involvement-pitta dominant patients were more in number due to pitta and raktha dusti.
2. During Jalaukavacharana, involvement of tissue depths helps to improve the local blood circulation hence, healing is promoted and relief in signs and symptoms observed in patients of vicharchika.
3. Jalaukavacharana has significant result in the management of vicharchika.

Conclusion: Jalaukavacharan has significant results in the management of vicharcika.