Jour. of Ayurveda & Holistic Medicine, Volume-IX, Issue-VI (Nov.-Dec.2021)

# **Journal of Ayurveda & Holistic Medicine**



www.jahm.co.in eISSN-2321-1563

CASE REPORT OPEN ACCESS

# MANAGEMENT OF SIRAGRANTHI THROUGH AYURVEDA – A CASE REPORT KAVITA SAIN<sup>1\*</sup> SANTOSH BHATTED<sup>2</sup>

#### **ABSTRACT**

Varicose Veins is a disorder of the veins (especially of legs) wherein they get affected due to the backward flow and turbulence in the circulation of the blood. The veins get perverted, become enlarged and become oedematous. In Ayurveda it can clinically compared with *Siragranthi*. This article deals with a case of varicose veins with a chronicity of 5 years, he was given Ayurveda treatment for a period of about two months along with four sittings of *Siravedha* and was observed with a marked improvement in all his symptoms. It indicates the benefits of Ayurveda treatments which may prove to be more beneficial and cost effective than the other complex treatments such as surgeries, and laser treatments.

Key words - Siragranthi, Varicose veins, Ayurveda, Siravedha

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#### INTRODUCTION

Varicose veins are tortuous, widened veins in the subcutaneous tissues of the legs and are often easily visible. Their valves are usually incompetent so that reflux of blood occurs, and the resulting venous hypertension can cause symptoms. Varicose veins are widely seen as medically unimportant and deserving low priority for treatment. They are common, affecting nearly a third of adults in Western societies, and few people with varicose veins are ever harmed by them. However, they cause concern and distress on a large scale, most of which can be dealt with by good explanation and reassurance, or by a variety of treatments which are evolving rapidly at present. Patients can now be referred for more precise assessment and a greater range of therapeutic options than ever before. [1]

**Prevalence** – Lower-limb varicose veins are relatively common, with described prevalence reaching between 10% and 30% global <sup>[2]</sup>.

**Symptoms** – Related to Varicose may not be observed in case of some affected population. If seen the symptoms at initial stages include severe pain, swelling, itching, heavy legs, and lipo-dermato-sclerosis (skin thickening). If left untreated, the further complications lead to bleeding veins, eczema, skin pigmentation or discoloration, venous ulcers, and hence complete vein incompetence. [3]

**Risk Factors** – Family history, age, gender, pregnancy, overweight, obesity and lack of movement. [4]

Causative factors – Weak or damaged valves in the veins can cause Varicose veins. After arteries deliver oxygen rich blood to your body, your veins return the blood to your heart. the veins in your legs must work against gravity to do this. Weak valves may be due to weak vein walls. when the walls of the veins are weak, they lose their normal elasticity and become like an overstretched rubber band, this makes veins walls longer wider and cause flaps of the valves to separate, when the flaps separate, blood can flow backward through the valves. The backflow of blood fills the veins and stretches the walls even more. As a result, the veins get bigger, swell and often get twisted as they try to squeeze into their normal space.<sup>[5]</sup>

Why we need a Pragmatic Plan for treating Varicose Veins – The goal of treatment is to relieve symptoms prevent complications and improve appearance. But the acclaimed treatments modalities in the market have severe complications like wound complications, nerve damage, leakage of lymph, deep vein thrombosis, pulmonary embolus, foot drop, major vascular injury (Complications of varicose veins surgery Ann R Coll Surg. Engl.1997 march). Recurrent

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Varicose veins are known to be a common problem after surgery. Recurrent veins after

surgery (REVAS) in patients is seen to be between 20% - 80% [6].

Table 1 - Treatment modalities at a glance

Physical	Compression	Surgical	Non-Surgical		
• Yoga	• Compression	• Vein	Sclerotherapy		
• Exercise	Stockings	Stripping	Ultrasound guided Foam		
<ul> <li>Massage</li> </ul>		Ambulatory	Sclerotherapy		
		Phlebotomy	Radiofrequency Ablation		
			Endo venous Ablation		

#### **Avurvedic Management**

According to the Ayurveda, Varicose Veins is a result of *Rakta-Pitta Dosha*. Thus, the *Dosha* can be removed by working either of the two mechanisms, that is by purifying the blood using the blood purifiers and blood thinners or by removing the *Pitta Dosha* (inflammation). It is suggested that the use of laxatives help in removing the *Pitta Dosha* (*Pitta Saran*). The mixture of nano ashes of pearl, conch shell, pearl oyster, cowries, coral along with latex of *Calotropis Procera* are used for the laxative effect. [7]

Varicose veins can be corelated with *Siragranthi* in Ayurveda context, according to *Acharya Shushruta* and *Acharya Vagbhatta Siragata Vata* get aggravated and causes *Shira* into *Sankocha*, *Sanskhipya*, *Vritta* and *Vakrikrita* <sup>[8, 9]</sup>. Stripping damages sural nerve, formation of numbness and tingling sensation in limbs, short saphenous vein stripping causes

bruising and sensory nerve injury in post thrombotic condition there is more chance of reoccurrences [10]. Acharya Vagbhatta deliberate Siravedha as a treatment for Granthi and Vyadhi arising out of Pitta Rakta and Kapha [11]. The importance of Shiravedha can be driven from the fact that it is considered as Ardha chikitsa in Shalya Tantra.

# **Case Report**

A Male patient came to OPD of All India Institute of Ayurveda, New Delhi on 28<sup>th</sup> October 2020.

**UHID** - 455883

Age - 58 years

Occupation - Security Guard

# **Primary Complaints**

- 1. Pain in right lower leg 4 Years
- Burning Sensation in right lower leg 4
   Years
- 3. Nocturnal cramps 2 Years

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4. Tortuous and engorged veins in right lower leg - 5 Years

H/O Present Illness — Patient was asymptomatic 5 years ago, when he gradually developed very mild tortuous and engorged veins in right lower leg (near ankle joint), he didn't take any medications for it then he gradually developed similar symptoms near sheen bone. He then gradually developed pain and burning sensation in the affected area. With nocturnal cramps on and off.

H/O Of Past Illness - There was no associated medical history found. There was no history of friction prior to the onset of lesions. His occupation involved long standing hours duty which can be one of the causative factors. There was no specific seasonal and food associated history affecting the disease presentation. There was no history of any drug intake as well as surgical intervention in

affected area. Family history was not associated with varicosity symptoms. Psychological stress was seen due to ugly appearance, pain and burning sensation.

Physical Examination - Cutaneous examination revealed asymmetrically distributed tortuous and engorged veins with diffused border and no inflammation. There was no change in colour was seen in the effected region. (Figure 1). There were no any similar symptoms over other parts of body. Examination of palms, soles, hair, nails and mucous membranes was normal. All routine biochemical and haematological tests were found within their normal range.

## Diagnosis

Varicose Veins (Siragranthi)

## **Clinical Classification**

Stage C2 Varicose Veins of Thigh Perforators Veins

Table 2 - Case Timeline

S.no	Date	Intervention			
1.	28 <sup>th</sup> October 2020	1. Kaishor Guggulu 2 TDS Before food with			
		2. 20 ml <i>Mahamanjisthadi Kwatha</i> 20 ml BD Before			
		food			
		3. Pinda Taila for local application (In Pratilom			
		(Opposite to <i>Loma Koopa</i> direction)			
		4. 1 <sup>st</sup> Sitting of <i>Shiravedha</i>			
2.	6 <sup>th</sup> November 2020	CST			
		2 <sup>nd</sup> Sitting of <i>Shiravedha</i>			
3.	16 <sup>th</sup> November 2020	CST			
		3 <sup>rd</sup> Sitting of <i>Shiravedha</i>			

4.	25 <sup>th</sup> November 2020	CST
		4 <sup>th</sup> Sitting of <i>Shiravedha</i>
5.	25 December 2020	CST
		Follow up was taken after 1 month

## Therapeutic intervention

Four sitting of *Siravedha* karma were carried out in 2 months at an interval of 15 days. Patient was advised to take liquid diet 1-2 hours prior to the procedure. Local *Snehana* (oil massage with *Pinda Taila*) and *Dashmoola Kwatha* with *Naadi* <u>Swedana</u> (hot steam

fomentation) on lower limbs was done followed with *Siravedha*, an average of 50 – 60 ml of blood was expatriate in one sitting. Average bleeding time for *Siravedha* karma was approximately 5-10 minutes (Figure 2)

#### **Assessment Scale**

**Table 3 - Visual Analogue Scale** 

VAS BT	VAS AT 1	VAS AT 2	VAS AT 3	VAS AT 4	VAS FU 1
8	6	6	4	3	3
Total Percentage	62.5 %				
improvement					



Picture 1 – Before 1<sup>st</sup> Sitting of Shiravedha



Picture 2 – After 2 Sitting of Shiravedha



Picture 3 – After 4<sup>th</sup> Sitting of Shiravedha

#### **DISCUSSION**

Varicose veins in terms of Ayurveda can be studied as an obstruction in *Rakta Vaha Srotas* 

(Circulatory system) caused due to venous insufficiency which serves as the main pathology behind manifestation of this

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ailment. The approach used here was to correct valve incompetence. In Ayurveda perspective Kapha-Medo Vruddhi (Obesity) and Dhatu Shithilta (Weak Tissues) is considered as a predominating factor to it. For which Kapha-Medo Shamana, Vata Shamana and Rakta Prasadaka treatment was planned. Hence the medicines taken into consideration worked on the principle of Kapha-Medo Hara, Vata Shamana and Rakta Prasadka. Kaishor Guggulu taken from Bhaisajya Ratnavali has Guggulu (Commiphora Mukul), Guduchi (Tinospora Cordifolia) and Triphala as chief ingredients. Guggulu (Commiphora Mukul), has Sroto Shudhikaraka (cleansing properties) and Anabhishyandi actions (Anti Obstructive properties), it was found that it possessed significantly higher antihyperlipidemic activity compared with other resinoids [12]. Guduchi has Rasayana [13] (Rejuvenation and Antiwhich Ageing) properties helped in rejuvenation of weak tissues and valve incompetence. Triphala has Rooksha and Kapha Medo hara effects [14], which helps to reduce the weight pressure on lower limbs by reducing obesity and strengthening shithila dhatu (loose and weak tissue). All these collectively work in the same line by alleviating Kapha and Meda. Mahamanjisthadi Kwatha has properties like Kapha Pitta Shamaka, Sothahara because of the Tikta (Bitter), Katu (Pungent), Kashaya (Astringent), Laghu (Light)

and Ruksha (Rough) Guna and Ushna Veerya (Hot potency) and Katu Vipaka(Pungent post digestive effect). All these properties alleviate Kapha Meda which helps in removing obstructions. Pinda Taila Abhyanga (Massage) gives strength to the effected Dhatus and works upon the pathogenesis of valve incompetence also drugs like Sariva (Hemidismus Indicus), Manjistha (Rubia Cardifolia), Sarjarasa (Shorea Robusta) all these have Rakta Prasadaka (Blood Nourishing) and *Twachya* (good for skin) properties which helps in conditions like Rakta Dushti (Disorders of blood) and also helps in Shoola (Pain)and Daha (Burning Sensation) Shamana. Raktamokshana (Shiravedhana) helps in lowering the pressure of blood on the valve by reduction in its volume for a temporary time and also removes the excess Dosha from the affected area. Meanwhile the Rakta Mokshana is done above medications were used to disrupt the Pathology involved. This is how a collective pragmatic approach is used to pacify the ailment.

# CONCLUSION

Panchakarma Therapeutic measures like *Shiravedhana* along with Ayurveda medicines can be used a potent pragmatic plan for *Samprapti Vigattana* and stopping the disease from turning into a chronic one.

Conflict of Interest – None

Source of Funding – None

#### **REFERENCES**

- 1Campbell B. Thrombosis,phlebitisandvaricose veins *BMJ* 1996; 312 :198 doi:10.1136/bmj.31 2.7025.198
- 2 M J Callam, Epidemiology of varicose veins, *British Journal of Surgery*, Volume 81, Issue 2, February 1994, Pages 167–173, <a href="https://doi.org/10.1002/bjs.1800810204">https://doi.org/10.1002/bjs.1800810204</a>.
- 3 Liang X, Yan Ni Huang, Si Wei Chen, Wen Juan Wang, Xu N., Cui S et.al.: Antidepressant-like effect of Asiatic side in mice. Pharmacology Biochemistry and Behavior. Published 2008; volume 3,444-449.
- <sup>4</sup> Sadat U and Gaunt M: Current management of varicose veins. British Journal of Hospital Medicine. Published 2008; volume 69(4), 214-217.
- 5 Guberan E, Widmer LK, Glaus L, Muller R, Rougemont A, Da Silva A, et.al. Causative factors of varicose veins: myths and facts. An epidemiological study of 610 women. Vasa. Published in 1973; Volume 2(2):115-20. PMID: 4702336.
- 6 R.G.Bush , P.Bush , J.Flanagan , Factors associated with recurrence of varicose veins after thermal ablation: results of the recurrent veins after thermal ablation study, Scientific world journal , published in 2014;;2014:505843,doi:10.1155/2014/505843, PMCID:PMC3921954,PMID:24592172.
- 7 Jagadeesh. GA, Emmi S V, Singh R, Rajput N: Ayurvedic Management of Varicose Vein and

- Varicose Ulcer. Int. J. Res. Ayurveda Pharm. Published in 2015; volume 6(2).
- 8 Vaidya Jadavji Trikamji (editor) , Commentary Nibandha Sangraha, ,Sushruta Samhita, Nidana Sthana , Chapter 11 verse 8-9 ,Choukhamba Surbharti Prakashan,2012:311.
- 9 Brahmanand Tripathi (editor) , Hindi Commentary, Srimad Vagbhatta , Ashtang Hrudayam , Uttar Sthana, chapter 29 verse 10-11 , Choukhambha Sanskrit Prakashana, 2013:1100.
- 10 Das Somen, A Manual on clinical surgery ,  $5^{th}$  edition S Das Publication Calcutta, 2008;210.
- 11 Brahmanand Tripathi (editor) , Hindi Commentary, Srimad Vagbhatta , Ashtang Hrudayam , Uttar Sthana, Chapter 30 verse 7 , Chaukhambha Sanskrit Pratisthana Prakashak , 2013:1106.
- 12 Siddiqui M Z, P M Mazumder. "Comparative Study of Hypolipidemic Profile of Resinoids of Commiphora mukul/Commiphora wightii from Different Geographical Locations." *Indian journal of pharmaceutical sciences* vol. 74,5 (2012): 422-7. doi:10.4103/0250-474X.108417

  13 Pathak P, Vyas M, Vyas H, Rasayana, effect of Guduchi Churna on the life span of Drosophila melanogaster Ayu. 2016 Jan-Mar;37(1):67-70.

10.4103/ayu.ayu\_11\_16.

Kavita Sain, Santosh Bhatted. Management of Siragranthi through Ayurveda – A Case Report.

Jour. of Ayurveda & Holistic Medicine, Volume-IX, Issue-VI (Nov.-Dec.2021)

**14** Gurjar S, Pal A, Kapur S. Triphala and its constituents ameliorate visceral adiposity from

a high-fat diet in mice with diet-induced

obesity. Alternative Therapies in Health and Medicine. 2012 Nov-Dec;18(6):38-45.

# **CITE THIS ARTICLE AS**

Kavita Sain, Santosh Bhatted. Management of Siragranthi through Ayurveda – A Case Report, *J of Ayurveda and Hol Med (JAHM)*. 2021;9(6):36-43

Source of support: Nil

Conflict of interest: None Declared