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INTEGRATIVE MANAGEMENT OF NADI VRANA (CHRONIC NON-HEALING SINUS) WITH AYURVEDIC AND MODERN INTERVENTIONS: A CASE REPORT

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ABSTRACT

Dushta Vrana (chronic non-healing ulcer) poses a significant therapeutic challenge, especially in geriatric patients with comorbidities such as uncontrolled diabetes. This case report presents the successful integrative management of a chronic right foot ulcer in a 64-year-old female using Ayurvedic treatment modalities in conjunction with supportive modern medicine. The patient showed marked improvement with combined internal and external therapy, resulting in wound healing and symptomatic relief over a six-week hospitalization period.

KEYWORDS: *Dushta Vrana, Chronic Ulcer, Diabetic Foot, Integrative Medicine, Jatyadi Taila, Dashamoola Kashaya.*

INTRODUCTION

Chronic wounds, referred to as *Dushta Vrana* in Ayurveda, are characterized by prolonged healing, infection, and associated symptoms like pain, burning sensation, and edema. Integrative approaches combining Ayurvedic therapies with contemporary medicine have shown promise in promoting tissue regeneration and controlling infection. This case highlights such an approach for a non-healing ulcer associated with diabetic pathology.

Case Presentation

Patient Profile

- Name: Lalitha (Tammegowda M.T.)
- Age/Sex: 64/F
- Residence: Mundur Village, Saligrama Taluk, Mysore District, Karnataka
- IP Reg No: IP-081010
- Admission: 27-01-2025
- Discharge: 17-03-2025

Chief Complaints:

- Non-healing wound in the right foot for 6 months
- Pain and burning sensation for 1 month
- Bilateral lower limb numbness and swelling for 1 month

Clinical Findings:

- Conscious, oriented; vitals stable
- Local examination: chronic wound with inflammatory signs
- Laboratory: Severe anemia (Hb 7.0 g/dL), elevated ESR (100 mm/hr), uncontrolled blood sugar (HbA1c 10.4%), low albumin (2.5 g/dL)

Diagnosis:

Ayurvedic Diagnosis: Dushta Vrana

Modern Correlation: Chronic non-healing diabetic foot ulcer with a sinus.

Treatment Administered

Ayurvedic Treatments

- **Internal Medications:**
  - Tab. Nishamalaki, Nimbadi Guggulu
  - Dashamoola Kashaya 15 mL BD with LWW
  - Tab.Kumarabharana DS 1-0-1 B/F with LWW
  - Novel Ayurvedic Churna 1 TSP BD with LWW

- **External Treatments**
  - *Marmani Vati* application
  - Dressing with *Jatyadi Taila*

Outcome and Follow-Up

The patient exhibited marked reduction in wound size, pain, and discharge. Hemoglobin levels improved (from 7.0 to 11.6 g/dL), and blood sugar levels were moderately controlled. On discharge, the patient was advised to continue internal medications and external applications and was scheduled for follow-up after 15 days.

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<td>Day 1 of admission
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<td>DAY 2-
TIEING KSHARASUTA TO THE SINUS</td>
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<td>DAY 4- REMOVAL OF THE KSHARA SUTRA</td>
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<td>DAY 4 – EXCISION OF SINUS</td>
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DAY 5 – LIGATION OF THE BLEEDING VESSELS		
DAY 6- SUTURING FOR APPROXIMATION OF THE EDGES		
DAY 14 – REMOVAL OF THE SUTURES PART BY PART		
DAY 17- HEALING OF THE EDGES		

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DAY 20- NECROTIC TISSUE WITH BLEEDING SPOT AFTER DEBRIDEMENT		
DAY – 21 A SMALL PART OF CALCANEAL BONE EXPOSED.		
DAY-22 CONTINOUS DEBRIDEMENT DONE		
DAY-23 CONTINOUS DEBRIDEMENT DONE FOLLOWED BR REMOVAL OF THE CHIPPED BONE FRAGMENT		
DAY-25 A SMALL SUBCUTANEOUS TISSUE IS SCRAPED AND APPLIED OVER THE EXPOSED BONE. THEN DRESSING DONE		

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DAY 26- EXPOSED BONE STARTS COVERING		
DAY 27- EXPOSED BONE COMPLETELY COVERED		
DAY 28- THE AREA OF THE WOUND STARTS REDUCING.		
DAY 30 -COMPLETE GRANULATION TISSUE APPEARS.		

DISCUSSION

Dushta Vrana management involves *Shodhana* (cleansing) and *Ropana* (healing) principles. *Jatyadi Taila* and *Dashamoola Kashaya* support wound healing through anti-inflammatory and antimicrobial properties. Integration with modern antibiotics and glycemic control was critical in achieving favorable outcomes. The combination ensured both local and systemic healing support.

CONCLUSION

This case demonstrates the effectiveness of integrative care in managing chronic non-healing ulcers. Ayurvedic therapies, when applied judiciously alongside modern medicine, can accelerate healing, reduce complications, and improve patient quality of life.