

AYUSCRIPT

International Journal for Empirical Research in Ayurveda

www.ayuscript.com

Volume 2, issue 4

Oct-Dec 2023

यन्कल्पे शूरको समकल्पयन् ॥१॥ विश्वकर्मोणमाद्रुयपुरीकाटकनि
नेना ॥ तत्रयोऽशसाहयस्त्रीणं चैव ब्राधकम् ॥११॥ भवनानि मनोहानि
नेयोमध्यकल्पयन् ॥ परिजातनरुचैवनासोभोगायकल्पयन् ॥१२॥ या
वानोऽष्टहास्तत्रयदुपचाशतकोटयः ॥ अन्येपि बहुवोजोकावसतिविगत
राः ॥१३॥ यन्निविविद्युक्तिकेसु सुदरं तत्र दृश्यते ॥ सर्वाङ्गिनप्रयेनाप्योप
रात्रुयस्यविद्युते ॥१४॥ अर्धोपितीरमासाद्य तन्मनस्कतया च सः ॥ सनाजि
स्तपस्तेपस्वर्यं मुदिष्टपुष्टिमात्रा ॥१५॥ वर्तनिरसनेऽप्यस्यैवं वदन्त
तः प्रसन्नो भगवान् सनाजितपुरस्थितः ॥१६॥ सर्वाङ्गिनोपितुष्टान् दृष्ट्वादि
तकरव्यतिजोरशनमस्तैस्तन्मस्तैस्वर्तौ मुखः ॥१७॥ विश्वव्यापिनमस्तै
मस्तैस्वर्तौपिणः ॥ कल्पयन्मस्तैस्तै हरिद्वयनमोस्तै ॥१८॥ गृहराजने
स्तै नमस्तै चैदुराचिद्यो ॥ वेदत्रयनमस्तैस्तै सर्वेद्वयनमोस्तै ॥१९॥ प्रसीद
द्विद्वे च सुदृष्ट्या मोदिवाकरः ॥ स्वैस्तैस्तै यमानोस्तै चैवदेवो दिवाकरः ॥२०॥
संभारो भैरवः परमेश्वरः जिनस्यार्जुनः ॥ नरैश्चैव हि प्रयत्नोत्तमैश्च यत्नैश्च



Ayurveda Management of herpes zoster through leeches- A Case report

Waghmare Manek¹, Kalmegh Manjusha², Joshi Kalindi³

1. PG scholar, Shalyatantra Department; Vidarbha Ayurvedic Mahavidyalaya, Amaravati.
2. Associate Professor & HOD, Guide Shalyatantra Department, Vidarbha Ayurvedic Mahavidyalaya, Amaravati.
3. Professor Shalyatantra Department, Vidarbha Ayurvedic Mahavidyalaya, Amaravati.

ABSTRACT:

Varicella zoster virus (VZV) reactivation within the patient's body causes painful skin rashes and blisters, which are the hallmarks of herpes zoster, an acute viral illness. Individuals who are elderly, have compromised immune systems, or are receiving biological agents are susceptible to contracting herpes zoster. The finest antiviral medication, steroids, or NSAIDS can temporarily decrease pain, but they don't significantly lessen the burning feeling. Patients with inadequate immunity have a higher likelihood of acquiring problems such as postherpetic neuralgia. Acharya Sushruta explains that the signs and symptoms of herpes zoster are quite similar to those of Kakshavyadhi. Moreover, Raktamokshan is described in chikitsa as "kaksha," particularly in cases where pitta dosha is accentuated. Pittajvyadhi is done with Jaloukavcharan. The goal of the current project was to develop a leech-based method of effectively managing adult-onset herpes zoster in a 36 -year-old female adult. A 36 -year-old patient with an acute vesicular eruption who had been complaining of pain and burning for two days presented to the outpatient department. Following a local assessment, leech therapy was selected as the course of treatment for Herpes Zoster. Herpes zoster was reported to be greatly effectively treated using leech application technique in two consecutive situations, with no adverse effects.

KEYWORDS: Kaksha, leech, jaloukavacharan, Raktamokshan, herpes zoster

Corresponding Author:

Dr Manek Atmaram Waghmare

PG scholar, Shalyatantra Department;

Vidarbha Ayurvedic Mahavidyalaya, Amaravati.

Email: manekwaghmare@gmail.com

How to cite article: Waghmare Manek, Kalmegh Manjusha, Joshi Kalindi. Ayurveda Management of herpes zoster through leeches- A Case report. AYUSCRIPT 2023;4(1):24-31 <http://doi.org/10.55552/AYUSCRIPT.2023.2404>

INTRODUCTION:

Reactivation of the varicella-zoster virus (VZV) causes the acute viral illness known as herpes zoster. The symptoms linked with herpes zoster include a painful skin rash, vesicular eruption, and fever. Herpes zoster is 5–10% common worldwide and 2–6% common in India. Reduced immunity increases the risk of the varicella-zoster. Weakened immune system also increases the risk of developing subsequent complications such as post-herpetic neuralgia, encephalitis, motor nerve palsy, and secondary infections.[1] The diagnosis is made based on the patient's fundamental signs and symptoms. Postherpetic neuralgia is the primary complication of these diseases. Since herpes zoster is an acute illness, the aim of ayurvedic treatment is to minimize consequences like post-herpetic neuralgia and secondary infection while also giving the patient rapid relief from symptoms like burning sensation and lesion pain. The ayurvedic descriptions of Kaksha [3] by Acharya Sushrut and Visarpa, Agni[2] by Acharya Charak indicate a tight relationship between herpes zoster and these conditions. According to Kshudraroga, kaksha is one of the main skin conditions. Respected acharya says that agnivisarpa is vattpittaj doshaj and kaksha is pittaj doshaj. Both herpes zoster and agni visarpa cause excruciating pain and burning sensations, and the ways in which the two diseases propagate throughout the body are comparable to those of kaksha. Pittaj Visarpa-like treatment for Kaksha vyadhi is described in Sushrut Samhita Chikitsasthan. [4] At times, Kaksha Vyadhi might be aashukari Vyadhi, meaning that it has an acute manifestation and requires immediate medical attention. When pitta dosha is aggravated, Acharya Charak in Visarpa mentions Raktamokshan[5] as a course of treatment. The Sushrut Samhita describes three primary types of Raktamokshan based on dosha. We opted for Jaloukavacharana, also known as leech therapy, which is one of those types that is utilized in pittaj vyadhi. To assess the effectiveness of leech therapy for herpes zoster, more research is being done.

A CASE STUDY: A 36-year-old male patient, who works as a gym trainer in Amravati, arrived at our hospital's Shalyatantra Department complaining of excruciating pain, a

burning feeling, and blister-like skin lesions that had been present for two days from the left side of his back to his chest. He was given a diagnosis of herpes zoster. In 20 days, Jalauka received healing when shaman medications were applied on site. Herpes zoster lesions were discovered to have fully cured after 20 days.

GENERAL EXAMINATION-

The patient had a pulse of 80 per minute and a blood pressure of 120/80 mm Hg. He had a pallid appearance. Blisters in the left side of his back to his chest.

SYSTEMIC EXAMINATION-

The results of the systemic assessment showed that the heart and lungs were both functioning normally. Patient's pupillary reflexes were within normal ranges, but he was restless and experiencing excruciating pain and burning at the nerve's location. Both superficial and deep tendon reflexes were normal.

Ashtavidha Parikshan His Nadi (~pulse) was Vatpittaj, Jivha (tongue) was Sama (~coated), Aakriti was Madhyam (~medium built), bowel habit were regular and normal. Druk (~vision) was normal.

Vaat pittaj Prakruti, Madhyam Sarta, Alpa Satva, Madhyam Satmya Avara Vyayam Shakti, Vikruti Vaatpitta Pradhan, Abhyavaharan, and Jaran Shaki were Madhyam, according to the Dashvidha Examination.

Investigations :

Hb-10.9gm%, TLC-9,300/cmm, PLT-2,80,000/cmm

ESR-15 mm/hr, S.Urea-15mg/dl, S.creatinin-0.8mg/dl, BT-3 min, CT-5 min, HBsAg-negative, HIV- negative BSL-R- 104 mg/dl

S.Electrolyte: S.Sodium-133.3 mEq/L,S.Potassium-4.1 mEq/L,S.Chloride-101.2 mEq.

Urine Examination- Protein- +, Pus cells- 3-5/hpf Epithelial cells- 6-8/hpf, RBC's- Nil

MATERIALS AND METHODS

Materials:

- *Jalouka* used as an emergency treatment
- Tab Omnacortil [prednisolone] BD
- Tab Acivir [acyclovir]400mg QID

- Tab opiz D BDD
- Tab Renerve plus BD
- Tab pregabalin 75 mg BD

Methods

A 36-year-old male patient was chosen for the current clinical investigation. Patient data was gathered through interviews, and the Shalyatantra OPD was the site of the study.

Diagnosis

The full range of Herpes zoster signs and symptoms are used for diagnosis.

Treatment plan

Patient was treated on OPD basis. When patient came with above complaints as an emergency treatment *Jalouka* i.e. leech is used then medicine is given and after that patient observed for follow up on alternate day and 3 sitting of jaloukavacharan done on alternate day.

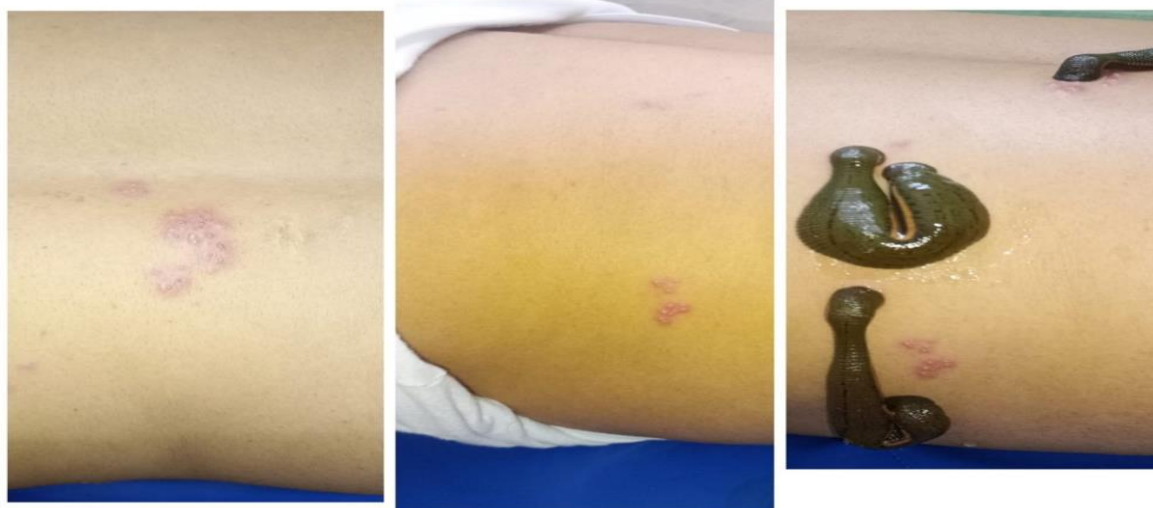
Karma	Vidhi	Duration
Raktmoshan	Jaloukavacharan with 3 jalouka	1 st day , 3 rd day and 5 th day

OBSERVATIO:

After the first Jalouka sitting, the patient experienced immediate relief from signs and symptoms such as burning sensation and pain; after the second Jalouka sitting, there was a relief from burning sensation and pain; and after the third Jalouka sitting complete relief from burning sensation and pain the patient's Herpes Zoster blisters were completely crushed and healed in 20 days.

Table 1: Observation in Signs and Symptoms of the patient.

Sign and symptoms	Before treatment	After sitting of leech [after 1 st day]	After sitting of leech [after 2 nd day]	After sitting of leech [after 3 rd day]	After sitting of leech [after 5 th day]	After complete treatment [within 20 days]
Daha [Burning sensation]	+++	++	+	-	-	-
Shool [Pain]	+++	++	+	-	-	-
Raktavarniya pidika [Blisters with redness]	+++	++	+	+	-	-



Leech Treatment in Herpes Zoaster



Leech Application



After 10 Days



After 20 Days

DISCUSSION:

There is a description of Khsudraroga in the Nidansthan of the Sushrut Samhita. Among these, Kaksha vyadhi is one that Kshudraroga describes. Near the kaksha (axilla region), there occurs the development of red blisters that are extremely painful and burning. This condition is brought on by pittaprakopa, also known as kaksha vyadhi. While Acharya Charak and Vagbhat suggested vataj & pittaj dosha for Kaksha vyadhi, Sushruta mentions pitta dosha for Kaksha. Modern research suggests a correlation between herpes zoster and Kaksha vyadhi. Intense pain, burning feeling, and Kaksha vyadhi, a condition resembling herpes zoster. The pittaj visarpa treatment described in Sushrut Samhita Chikitsasthan is comparable to that of Kaksha Vyadhi. Pittaj Visarpa describes raktamokshan therapy. Raktamokshan is the primary line of treatment for Kaksha vyadhi. In twaka, mansa, and snayu, kleda development occurs if Raktamokshan is not performed in an acute situation. Jalouka draws impure blood primarily from the surface but sometimes from deeper parts. Modern perspectives on calin and Hirudin state that Jalouka's saliva contains enzymes that act as anticoagulants and facilitate the easy suction of unclean blood. Additionally, Jalouka's salivary glands have anesthetic, antihistaminic, antibacterial, and antiviral properties.

Following Jalokavacharana treatment for herpes zoster to cleanse impure blood, patients experienced instant alleviation from discomfort and burning sensations. The patient is administered Tab Omnacortil [prednisolone]BD, Tab Acivir [acyclovir] 400 mg QID, Tab Opez D BD, Tab Renerve plus BD, and Tab pregabalin 75 mg BD.

RESULT

Herpes zoster can be effectively treated with jalaoukavcharana, which provided instant pain alleviation and a burning feeling. At follow-up, none of the patients experienced any complications.

CONCLUSION:

Leeches cause no discomfort to their victims when they take their blood. Leeches are therefore helpful in curing the illness by eliminating the bad blood, or dushit rakta as it is known in layman's terms. Leeches are effective analgesics. It aids in the elimination of skin lesions and the reduction of pain and swelling. The level of pain and rash severity thereafter decreased. In ten days, the lesions were discovered to be fully squashed and healed. There was no sign of another eruption. Medication is also beneficial in reducing edema and inflammation. It is discovered during follow-up that post-herpetic neuralgia does not exist. The pain completely disappeared. The patient was discovered without any further issues. The study concludes that jalouka is a useful treatment for herpes zoster (kaksha) and relieves discomfort.

REFERENCES:

1. Y.P. Munjal, API Textbook of Medicine, Volume 1, 10th Edition, p. 670.
2. P. Kashinath Pandey and Dr. Gorakhnath Chaturvedi, Agnivesh, Charak Samhita, Vidyotini Hindi Commentary, Varanasi: Chaukhamba Sanskrit Bhavan; Reprint 2008, Vol-2, Chikitsasthan, 21/36, p594.
3. Nidansthan 13/17, p. 556 in Dr. Sharma Anantram's Sushrut Samhita Vol-1, Choukhamba Surbharati Prakashan Varanasi. Reprint 2009, Chikitsathan, 20 ver.8, p93; Shastri Ambikadatta, Sushrut samhita ayurved tattva sampadika Hindi commentary, Choukhamba prakashan:

5. P. Kashinath Pandey and Dr. Gorakhnath Chaturvedi, Agnivesh, Charak Samhita, Vidyotini Hindi Commentary; Varanasi: Chaukhamba Sanskrit Bhavan; Reprint 2008, Vol-2, Chikitsasthan, 21/141, p611.
6. A case study on the use of Jaloukavacharan, M.S. Kalmegh, R. Gaikwad, and Dr. Lakshmikant Shukla in the treatment of herpes zoster. 2019; 8(2): 1164–1169 in WJPPS.

Source of Support: None declared

Conflict of interest: Nil

The logo for AYUSCRIPT is displayed in a blue, serif font on a light-colored, textured scroll background. The scroll is unrolled in the center, with the word 'AYUSCRIPT' written across it. The scroll has a slightly aged, parchment-like appearance with some darker shading at the edges and ends.

© 2023 **AYUSCRIPT** | An International Journal Empirical Research in Ayurveda | The Publication of **AYURVEDA RESEARCH & CAREER ACADEMY(ARCA)**.