

SIRAJ GRANTHI (VARICOSE VEIN): CASE REPORT

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ABSTRACT

Siraja granthi is the peripheral vascular disease in sushrut samhita in a comprehensive manner. Aetiology, pathology, diagnosis and prognosis have been explained in sushrut samhita nidansthan.^[1] Sushrut mentioned it as *kruchrasadhya rog*. Acharya Vagbhat in *ashtan hridhaya uttarasthana* quoted the treatment for *siraj granthi* which includes *siravyadha*.^[2] Rakta is considered as fourth dosha by sushrut. Raktamokshana is the ultimate treatment for vascular diseases especially when rakta and pitta are vitiated.^[3] *Raktamokshana* has been highlighted as *Ardhachikitsa* in *shalyatantra*.^[3]

KEYWORDS: Siraj Granthi, Raktamokshana, Siravyadha, Varicose veins.

INTRODUCTION

In ayurveda classics varicose vein can be very much correlated with the sign and symptoms explained for *sirajgranthi*. Vayu getting increased invades *siras*, causing constriction, distortion, and dryness in them give rise to *granthi*, which is non-pulsating and painless is *siraj granthi*.^[6] The bodily *vayu* is weak and enfeebled persons, deranged by over-fatiguing physical exercise, straining or draws up the ramification of veins (*sira*) and speedily gives rise to a raised knotty formation which is called a *Sira-Granthi*.^[7] Varicose veins- Dilated, Tortuous and elongated superficial vein of the limb are called varicose veins.^[8]

Examples of varicosity

- 1) Short saphenous varicosity

Dashavidha Parikshana

Prakruti- Vata-Kapha

Atishrama.

Dushya- Sira

Upadhatu- Rakta

Desha- Sadharan

Bala- alpa

Local Examination

Inspection- Tortuosity of vein over left lower limb.

varicose ulcer on dorsal aspect of left foot since 3-4 years.

- 2) Long saphenous varicosity
- 3) Oesophageal varices and fundal varices
- 4) vulva varix and ovarian varix
- 5) Haemorrhoids

CASE REPORT

A 70 year old patient visited our OPD who came with complaints of tortuous, dilated vein on medial aspect of left lower limb since 4 years. History revealed that his occupation is farming with 5-6 hours standing work for the past 30-40 years. On examination, there was engorged veins over the medial aspect of the left lower limb below knee along the course of great saphenous vein. mild discoloration (*vaivarnya*), intermittent itching (*kandu*), oedema (*shotha*), swelling and varicose ulcer (*Dushta vrana*) form at dorsal aspect of left foot.

Ashtavidha Parikshana

Nadi- 82/min Vikruti- Hetu- Asatmya bhojan,

Mala- Prakrut Dosha- Vatapradhan tridosha.

Mutra-Prakrut

Jivha- Prakrut

Shabda- Prakrut

Sparsha- Prakrut

Druka- Prakrut

Akruti-Madhyam

Diagnosis- Siraj Granthi.

MATERIAL AND METHOD

Center of study: Hon. Shri. Annasaheb Dange Ayurved

college post graduate and researchcentre, Ashta, Sangli.

Simple Random single case study.

MATERIAL**Table no 1: Internal medication in case study.**

Sr. No.	Dravya	Dose	Duration	Anupana
1	Tb. Kanchanaraguggulu	250 mg	2 BD After food	Koshna jala
2	Mahamanjishthadi kashaya	20 ml	BD Before food	Koshna jala

Table no 2: Siravyadha procedure.

Poorvakarma	Pradhankarma	Paschatkarma
Written Consent of patient taken.All preprocedures investigation like CBC, BT,CTwas done and they were under normal range. All instruments required for procedure were prepared	Siravyadha done on left lowerlimb with all septic precautions.	Hemostasis achieved Diet andregimen advised to patient.

Table no 3: showing regression of symptoms during treatment.

Observation	4/09/2022	18/09/2022	02/10/2022	12/10/2022
Tortusity of vein over left lower limb(siravakrata)	+++	++	-	-
Itching(kandu)	+++	++	-	-
Varicose ulcer(dushta vrana)	+++	++	+	-
Discoloration (vaivarnya)	+++	++	+	-

Result The symptoms of siraj granthi were decreased in the 5th week. Varicosity, itching,swelling, varicose ulcer were reduced.

**Siraj Granthi****Siravyadha****Dushta vrana(varicose ulcer)**

DISCUSSION

The accumulation of Rakta and Vitation of Vata in siraj leads to siraakunchana(dilatation of veins) vakrikaran(tortocity). Which leads to local congestion in that area. Causing shotha and dushta vrana. Pada shotha(oedema on foot) is mainly due to venous capillary hydrostatic pressure and collection of tissue fluid. By Raktamokshan venous hydrostatic pressure and collection tissue fluid are reduced thus causing reduction in oedema on foot. This was better appreciated in siravhyadha probably due to drainage of fluid from intertital tissue.

Discoloration is mainly seen in lower part of leg. This is due to hemosiderin deposition from breakdown of R.B.C. which have come out of the thin walled veins. By doing Raktamokshana dead RBC along with iron in the form of hemosiderin is removed. Extravasation and breakdown of R.B.C. in the lower part of the leg stimulates histamines to deposit at the site which causes vasodilatation and decreased vascular permeability causes itching that may further leads to eczema formation. In shakhagat raktadushti, Raktamokshan is indicated as first line of treatment because it brings dosha in equilibrium and causes shodhana effect.

CONCLUSION

Siravedha showed early result in reducing the sign and symptoms of siraj granthi specially in symptoms like shotha, kandu, dushta vrana. After the followup period of one month the procedure showed no recurrence which highlights it is an effective long term remedy for varicose veins.

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