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Treatment of Superficial big Burn Wound by *Haridra Malahara* - A Single Case Report

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Abstract:

Burn is defined as the coagulative necrosis of tissue and loss of continuity of the surface epithelium due to fire. In burn wound there is more secretion of serum and after healing, there is more chance of thick scar formation and contracture formation. Though various treatment modalities are used for dressing of burn wounds; still there are chances of more secretion of serum, contracture formation and slow healing. Whereas in *Ayurveda*, there is a variety of burn wound healing agents. One of them is haridra malahar, a combination of haridra (curcuma longa linn) *Daruharidra (Berberis aristata), manjistha (Rubia cordifolia Linn), Yasthimadhu (Glycyrrhiza glabra), Rattan jot* (Alkna Tinktoria), Siktha (bee wax), and coconut oil. A 40-year-old male patient presented with 20 % burn present on the face and both hands was treated with sterile *haridra malahar* dressing externally (for 50 days) and diclofenac sodium 50mg tablet orally (one two times a day for 10 days). At the end of the 8th week the wound had healed completely, leaving only a minimal scar and no contracture. Observations showed that less secretion of serum, less scar formation and good healing is possible with local application *Haridra Malahara*.

Key Words: Ayurveda, Burn, Contracture, *Haridra*, Scar, serum secretion, wound.

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Introduction:

Burn is defined as the coagulative necrosis of tissue and loss of continuity of the surface epithelium due to fire. [1] A burn is damage to body's tissues caused by heat, chemicals, electricity, sunlight, or radiation. Scalds from hot liquids and steam, building fires and flammable liquids and gases are the most common causes of burns.

In India, incidence of burn is 100,000 patients per year and mortality due to burns is a problem of considerable magnitude with estimated number 22,306 deaths per year. 10% of all accidental death and 7% of all suicides in India are caused by fire. This number might be increasing every year, if we can project for the gross under reporting. Burns can cause swelling, blistering, scarring and, in serious cases, shock, and even death. There are four types of burns that are First-degree burns, damage only the outer layer of skin. Second-degree burns, damage the outer layer and the layer underneath. Thirddegree burns, damage or destroy the deepest layer of skin and tissues underneath. [2]

They can also lead to infections because they damage the skin's protective barrier. Treatment for burns depends on the cause of the burn, how deep it is, and how much of the body it covers. Antibiotic creams can prevent or treat infections. For more serious burns, treatment may be needed to clean the wound, replace the skin, and make sure the patient has enough fluids

and nutrition. In modern system of medicine the proper initial care of burn wounds will definitely prevented by the use of Oral and Systemic Antibiotics. After use of antibiotic persistent serum secretion is one chief complaint and contracture formation.

In Sushruta Samhita agni karma is used to treat the diseases, but careless use of Agni karma lead to three types of iatrogenic burn namely-plusth dagdh, durdagdh and atidagdh. Durdagdh symptom is same as second degree of burn like as blister formation. [3] In Yogratnaker the langali ghrita is mentioned for agnidagadh chikitsa. [4] We have taken some content like haridra, daruharidra and vasthimadhu, of this drug and one drug rattan jot is added. We minimized drug in formulation and name given Haridra Malhar. Rattan jot is added because some folk practioners use it to make oil for all type of burn wound.

Case Report:

A 40-year-old male patient presented with burn wound that involved entire face and both hand. He complained of burning pain, increased serum secretion on a large burnt wound area as a result of fire. On examination about 20 % burn was present on the face and both hand. There was smell, serum discharge and multiple blisters. Due to burn the skin became black, multiple blisters formed. The patient had no systemic disease. He came for the first time for treatment of burn. All laboratory

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investigations were in the normal range. He was admitted in the male Shalya ward.

Treatment given:

Every morning the burn cleaned with sterile swabs. After cleaning, prepared *haridra malhar* was poured on sterile bandage and burn wound was covered with this bandage. Along with the local wound treatment, the following drugs were given orally for pain relieving, tab diclofenac sodium 50 mg. bd for 10 days only. At the end of the 8th week (the 50 day) the wound had healed

completely, leaving only a minimal scar and no contracture.

Preparation of Haridra Malahar (Anubhoot yoga):

All the ingredients (Table -1) were taken in equal quantity and made course powder and then all were collected in cotton clothes to make a pottali. The potalli was then put in coconut oil and bee wax, and boil in slow flame on gas stove for 4 hours. After that when it cool down the pottali was taken out and malahar collected in fresh and clean container.

Table-1: Ingredients of Haridra Malahar

Drug	Botanical Name	Part used	Quantity
Haridra	Curcuma Longa Linn	Rhizome	1 part
Daru haridra	Berberis aristata	Rhizome	1 part
Manjistha	Rubia cordifolia Linn	Stem	1part
Yasthi madhu	Glycerhiza glebra Linn	Stem	1 part
Rattan jota	Alkna Tinktoria		1 part
Mom/ siktha	Bee wax	wax	4 part
Narikel taila	Coconut oil	oil	4 part

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Fig-1: Before treatment superficial burn in chest and both arm



Fig-2: After 32 days of treatment



Fig-3: After healing of burn wound at chest on 36 day



Fig-4: after 42 days healing of burn wound at arm

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Discussion:

Manjistha Yasthimadhu and have *Vranaropak* properties. This both drug can be seen in many formulation which is described for wound healing. Drugs have Madhura, Tikta, Kashaya ras which help in wound healing and less secretion of serum. Haridra and daruharidra have antibacterial activity which inhibits the growth of the bacteria. Folklore medicine Alkanna tinctoria is also used to treat abscesses and inflammations.^[5]

At the time of presentation, the patient had 20 % 2nd degree burn, blackish colour and multiple blisters on skin. It was completely healed in 50 days. There were no adverse events throughout the management and healing occurred uneventfully. It shows that the drug is very useful in the treatment of burn case as a dressing agent.

Conclusion:

After use of the *Haridra Malahar* locally the a superficial large burn wound was healed within two months without any post burn hypertrophy and post burn contracture. More cases need to be studied to confirm its mode of action.

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