

Management Of Erythema Nodosum W.S.R. To *Uttana Vatarakta* – A Case Study

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Abstract:

Acharya Sushruta included Raktamokshana in Panchakarma and described it as the best procedure because it eliminates all three vitiated Doshas viz. Vata, Pitta & Kapha associated with dushta Rakta. Jaloukavacharana is type of Ashastrakruta Raktamokshana. Nirvisha Jalouka are used to treat intense pain and associated symptoms in arthritis, vascular and venous diseases, varicose vein ulcers, skin diseases like psoriasis, eczema and many others. Erythema Nodosum is a disease of deep dermis and subcutaneous fat characterized by red, tender, painful nodules. These signs and symptoms are similar to vatarakta. Jaloukavacharan helps to reduce the local swelling, tenderness, temperature, pain by removing vitiated rakta and help in healthy circulation and proper oxygenation of tissues.

Key words: Erythema nodosum, *Uttana Vatarakta*, *Jalaoukavacharana*.

Quick Response code



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Introduction:

Ayurveda is an ancient indigenous medical system. Ayurveda offers the way of having a healthy, harmonious, and long-life by its holistic approach [1,2]. Equilibrium state between dosha, dhatu and mala are important factors in maintaining the healthy condition of body [3]. To achieve this, mankind has to follow proper diet (hitakara ahara and vihara). proper sleep (nidra) and bramhacharya [4]. So, health of an individual depends solely on his / her diet and lifestyle. But nowadays, due to more urbanization and upgradation of civilization there has been an erratic variation in dietary habits and life style which makes individuals more vulnerable to metabolic disorders. These disorders may

cause functional impairment or crippling disorders like *Vatarakta*.

When aggravated *Vata* is obstructed by *dushit Rakta* and this obstructed *Vata* again vitiates the *Rakta* ^[5], this pathological condition called as *vatarakta* or *vatashonita* ^[6]is manifested

Vatarakta is mainly corelated to Hyperuricemia or Gout. Gout is a systemic disease that occurs due to the accumulation of monosodium urate crystals in tissues mainly in joints ^[7]. But by looking at symptoms mentioned in *samhitas*, *vatarakta* is not just limited to joint diseases.

Diseases like Scleroderma (Systemic Sclerosis), Systemic Lupus Erythematosus (SLE), Psoriatic Arthritis, Erythema Nodosum and many more in which we found vitiation of





vata dosha and rakta dhatu can be considered as a Vatarakta.

Erythema Nodosum (EN) is having due characteristic reaction pattern to dermis panniculitis in deep the subcutaneous fat [8]. Erythema Nodosum can occur in all ethnicities, sexes and ages, but is most common in women between the ages of 25 and 40 [9]. It is 3-6 times more common in women than in men except before puberty when the incidence is the same in both sexes [10]. It is hypersensitivity reaction to unknown cause in up to 55% of patients [11]. In other cases, it is associated with an identified infection, drug, inflammatory condition or malignancy [12]. It is characterised by nodules of 1-2 inches (25-51 mm) nodules below the skin surface, usually on the shins. They can appear anywhere on the body, but the most common sites are the shins, arms, thighs and torso. New nodule usually appears red and local increased temperature and firm to the touch [13]. Joint pain and inflammation are also common [14].

By assessing the signs and symptoms of Erythema Nodosum, they are more similar to *vatarakta*. So, presenting a case of Erythema

Systemic Examinations:

Cardio-vascular system: S1, S2 heard normal Respiratory system: AEBE clear

Nervous system: conscious, well oriented

Digestive system: normal appetite, constipation

Musculoskeletal: Oedema at bilateral ankle joints, Tenderness over shin of tibia and medial malleolus of both legs. Restricted movements of ankle joints.

Dermatological: Erythematous, firm, solid nodules are painful on palpation and localized on extensor surfaces of the legs (Shin of Tibia). Increased local temperature and severe burning was present.

Investigations:

CBC (30/05/2019) – HB -14 gm/dl, RBC – 7.17 mil/cumm, WBC – 9600 /cumm, Platelet

Nodosum with special reference to *vatarakta* and its *ayurvedic* treatment.

Case Report:

A 62-year female patient, R/O Rajawadi Ghatkopar, Mumbai, came to OPD on 15/06/2019 with chief complaints of oedema on and around both ankle joints (pitting in nature), severe burning sensation, red, tender, painful nodules over shin of tibia and difficulty in walking.

Associated complaints - Dyspnea on exertion and constipation.

Past History:

- Patient had same complaints in 2014 and had received treatment from Government Hospital and got relief.
- 2. **K/C/O** Hypertension for 12 years
- 3. **H/O** Extra pulmonary Tuberculosis 35 years ago

Past Surgical History: Tonsillectomy done 35 years ago

Medicinal History:

- 1. Tab. Nebivolol (5 mg) 1—0—0
- 2. Tab. Telmikind (40 mg) 1—0—0
- 3. Tab. Aspirin (150 mg) 1—0—1
- 4. Tab. Azathioprine (50 mg) 0—0—2
- 5. Tab. Goutnil (0.5 mg) 1—0—1
- 6. Tab. Prednisolone (8 mg) 1—0—0

count $-1,65,000/\mu L$. ESR -08 mm/hr, FBS -83 mg/dl, PLBS -76 mg/dl, Sr. Creatinine -1.8 mg/dl, LFT - WNL, HIV - Negative, $G_6PDH-17.3$. Thyroid profile $-T_3-48.3$ ng/dl, $T_4-7.6$ μ g/dl, TSH -0.90 μ IU/ml

Colour Doppler venous study (19/06/2019) of right lower limb – Mild subcutaneous tissue oedema is seen in calf and an incompetent ankle perforator is seen in mid-calf.

Throat swab for (04/07/2019) Streptococci – Negative.

Histopathological report (13/04/2019) – Possible top of Erythema Nodosum.

Based on history, clinical examination and histopathological report, patient was diagnosed as having Erythema Nodosum which was treated as *Vatarakta* according to Ayurveda.



Table-1: Personal History:

| Name: XYZ | Bala: Madhyama | Prakriti: pitta-vata | |
|------------------------------------|-------------------------|--------------------------|--|
| Age: 62 years | Sleep: Inadequate | BP: 114/80 mm of Hg | |
| Sex: Female | Addiction: Paan chewing | Pulse: 80/min | |
| | (few times) | | |
| Marital Status: married | Bowel Habit: Irregular | Respiratory Rate: 18/min | |
| Occupation: previously worked at | Appetite: Normal | Temperature: 97.4°F | |
| hospital (standing work) | | _ | |
| Menstrual History: Menopause 22 | Allergy: None | Weight: 63.2 kg | |
| years ago (at the age of 40 years) | | | |

Table-2: Ashta Vidha Pariksha:

| Nadi- 80/min | Shabda – Spashta (clear) |
|----------------------|--------------------------|
| Mala- constipation | Sparsh – Ushna |
| Mutra- normal | Drik - Normal |
| Jihva- Sama (coated) | Akriti - Madhyama |

Table-3: Gradation of symptoms according to WHO scoring pattern^[15]

| Symptoms | Grade 0 | Grade 1 | Grade 2 | Grade 3 | Grade 4 |
|---------------|-------------|-------------------|---------------|----------------|---------------|
| Swelling | No swelling | Slight swelling | Moderate | Severe | |
| | | | swelling | swelling | |
| Discoloration | Normal | Near to normal | Reddish | Slight reddish | Blackish |
| | coloration | which looks like | coloration | black | discoloration |
| | | normal to distant | | discoloration | |
| | | observer | | | |
| Burning | No burning | Mild burning | Moderate | Severe burning | |
| Sensation | | | burning | | |
| Pain | No pain | Mild pain | Moderate pain | Slightly | Much |
| | | | but no | difficulty in | difficulty |
| | | | difficulty in | moving due to | |
| | | | moving | pain | |

Table-4: Treatment and Timeline:

| Date | Symptoms | Treatment Given | | | |
|------------|------------------------|-------------------------------------|---|--------|-------------|
| 20/06/2019 | Bilateral Pedal | Abhyantar | 1. Rasasindur | 100 mg | TDS |
| | Oedema | | Sukshma Triphala | 500 mg | |
| | (left >> Right) | | Triphala Guggulu | 500 mg | |
| | Burning sensation on | | Gokshuradi Guggulu | 500 mg | |
| | both soles Red, | | Kaishor Guggulu | 500 mg | |
| | Tender, painful | | 2. Adulasa Ghan Vati | 250mg | BD |
| | nodules present over | | 3. Dashanga Lepa Vati | 250mg | TDS |
| | shin of tibia of both | Bahya 1. Yavakshar + Koshna Jala BD | | BD | |
| | legs | | Pattbandhan | | |
| | Increased local | 2. Dashanga Lepa + Ghruta BD | | BD | |
| | temperature | | (Local application) | | |
| | Difficulty in walking | Shodhana | na Raktamokshan chikitsa with Jalaukavacharan wa | | acharan was |
| | | | repeated on every 7 th day (7 sessions were done). | | |
| 02/07/2019 | Burning on Right | Abhyantar | 1. Adulasa Ghan Vati | 250mg | BD |
| | sole. Pain, tenderness | | 2. Dashanga Lepa Vati | 250mg | TDS |
| | and redness | | 3.Raktaprasadak Kwath | 30 ml | TDS |
| | reduced.Pain at both | | 4. Kaishor Guggulu | 500mg | TDS |



| | lower extremities | Bahya | Dashanga Lepa + Ghruta | | BD |
|------------|----------------------|-----------|---------------------------|-----------|-----|
| | Reduced bilateral | | (Local application) | | |
| | pedal oedema. | | | | |
| | Itching (+++) | | | | |
| 07/08/2019 | No pedal oedema | Abhyantar | 1. Adulasa Ghan Vati | 250mg | TDS |
| | Brownish, mild | | 2. Dashanga Lepa Vati | 250mg | TDS |
| | painful nodules | | 3.Raktaprasadak Kwath | 30 ml | TDS |
| | present | | 4. Kaishor Guggulu | 500mg | TDS |
| | Burning, pain and | | 5. Muktadi Vati | 250mg | TDS |
| | itching reduced | | 6. Bruhat Manjishthadi | 250mg | TDS |
| | | | Vati | | |
| | | Bahya | 1. Dashanga lepa + Ghruta | | BD |
| | | | 2. Pinda Taila | | |
| 05/09/2020 | Mild pain at toes of | Abhyantar | 1. Amrutadi Guggulu | 250mg | TDS |
| | both legs. Other | | 2. Dashanga Lepa Vati | 250mg | BD |
| | symptoms reduced | | 3. Bruhat Manjishthadi | 250mg | TDS |
| | markedly | | Vati | | |
| | | | 4. Kaishor Guggulu | 250mg | TDS |
| | | | 5. Avipattikar Churna | 5 gms | HS |
| | | Bahya | Sahachar Taila + Panchagi | una Taila | QDS |

Table-5: Result:

| Table-5. Result. | | | | | |
|-------------------|-------------------------|------------------------|--|--|--|
| Symptoms | Before Treatment | After Treatment | | | |
| | (15/06/2019) | (25/08/2019) | | | |
| Swelling | Grade 3 | Grade 0 | | | |
| Discoloration | Grade 3 | Grade 0 | | | |
| Burning Sensation | Grade 3 | Grade 0 | | | |
| Pain | Grade 4 | Grade 0 | | | |
| Sr. Uric Acid | 9.8 mg/dl (29/06/2019) | 6.4 mg/dl (17/07/2019) | | | |

Before Treatment







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After Treatment







After follow up







Discussion:

Treatment was planned according to *Shodhana* and *Shamana chikitsa*. In *Shamana chikitsa*, *abhyantara* and *bahya* medicines were used and changes were made according to the variation in stages of vitiation of *dosha* and *samprapti*.

Mode of Action:

In the initial phase, to reduce the active inflammation we used certain combination of drugs which are as follows;

Rasasindur – It is Yogavahi in nature. Mainly used in *vataroga*, dushita vrana, shotha. It acts on rasa, rakta and mamsa dhatu. So, helps to reduce the active inflammation as well as local infection.

Sukshma Triphala – It contains kajjali. kajjali is yogwahi, sookshma in nature. It acts deep

down into the *sookshma srotas* and helps in *srotoshodhan*. *Triphala* acts as a *vranashodhana* and *vranaropana*.

Triphala Guggulu – Act as shothahara, vatashamak.

Gokshuradi Guggulu – mainly used in shotha yukta vyatvyadhi.

Kaishor Guggulu – Kaishor guggulu mainly act on vata and rakta dushti, it acts on all types of skin diseases. It is kushataghna, Raktashodhaka , Raktavardhak, raktavaha srotogami [16].

Adulasa vati – It possesses tikta, kashaya, laghu and ruksha guna which act as kaphaghna and due to sheeta guna act as pittaghna. So it reduces kandu and daha. It also acta as vedanasthapaka and shothahara [17]. It is used to reduce the tendency of



bleeding inside the lesions of Erythema Nodosum.

Dashang Lepa Vati – It is used in pittaja and raktaja shotha. So, help to reduce swelling and pain.

Yavakshara – It has tikta rasa and ushna virya. *Ushna, Tikshna Guna* of *Yavakshara* causes *Strotovivaran* and *Strotoshodhan* ⁽¹⁸⁾.

Jaloukavacharan - It is the best method to pacify the vitiated Pitta and Rakta. jalouka sucks the blood and improves local blood circulation mainly by injecting histamine like substances that causes vasodilatation. After the evacuation of vitiated blood from the affected site, re-channelization of blood flow is stabilized. Bdellin present in the saliva of jalouka acts as anti-inflammatory agent thereby reducing inflammation and maintains normal circulation recovering discoloration. Anaesthetic gel present in saliva of jalouka pain tenderness reduces and giving symptomatic relief [19].

In later stage, after reduction of inflammation, removed combination having rasasindura and had added Raktaprasadak kwatha which contains drugs from varnya mahakashaya. It helps in reduction in discolouration (by reducing vitiated Pitta and Rakta).

Muktadi vati – Used in pittapradhana vyadhi. It helps to reduce daha symptom.

Bruhat manjishthadi vati - It is indicated in Vata rakta, Raktashodhaka, Tvak vikara and Kushtha. It is used as potent blood purifier contains Varuna (Crateva nurvala) which facilitates removal of toxins from the body (20). Acts as Kushtahara, Vatanulomak, Rakta, Mamsa, Meda, Asthi, Majjapachak, Raktaprasadak [21].

Pinda Taila – Mainly used in *Vatarakta vyadhi*. Help to reduced *daha*, *rakta dushit vat vyadhi* (opted to reduce intense pain).

In the last follow up, all the symptoms like burning, swelling, tenderness were reduced. Patient only had joint pain and mild discolouration, so started with *Amrutadi*

Guggulu, Kaishor Guggulu, Sahachara Taila and Panchaguna Taila which acts as vatashamaka and reduces pain. As apunarbhav chikitsa; Bruhat Manjishthadi Vati was prescribed which is raktaprasadak and helped to reduced discolouration.

Conclusion:

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Erythema Nodosum is a self-resolving disease. But the recurrence of the disease needs proper management. All the signs and symptoms are similar to *vatarakta*. So, preparations are selected on the basis of involvement of *dosha* and *dushyas* of the disease. Also *jaloukavacharana* is a major *shodhana* karma, (especially when vitiation of pitta and *rakta* and *vata* is involved) which helps to remove the localised vitiated *rakta* and reduced symptoms.

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