



Research Article

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STANDARDIZATION OF PRACHCHANA KARMA IN STASIS DERMATITIS

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ABSTRACT

Prachchana karma is a type of Raktamokshan, in stasis dermatitis. It provides the division of only layers of skin and allows the surgeon to remove stasis, hemosiderin deposited subcutaneously; incision results in capillary bleeding. Prachchana literally means "To bleed by making incisions in skin or scarifying" and Raktamokshan is a procedure mentioned in the classics for skin diseases and Prachchana karma is adopted as a sthanika chikitsain Ekadeshashtaroga, its exact procedure and importance is not explored in a systematic way and less practiced. Hence, it is essential to standardize the Prachchana Karma for its validity. The objective of this study is to standardize operating procedure of the Prachchana karma on Stasis Dermatitis. A pilot study on 6 patients fulfilling the inclusion criteria with symptoms of stasis dermatitis were selected, Source of patients were from OPD, IPD of Shalyatantra of KLEU's BMK Ayurved Mahavidyalaya, Belgaum, India. There was significant reduction observed in ESR, AEC and Pruritus scale on 3rd day of intervention but not on 7th and 15th day. Standardisation of Prachchana karma was done and it may be practiced with multiple settings in minimal stasis for better results.

Keywords: Prachchana karma, Raktamokshan, Stasis Dermatitis.

INTRODUCTION

Sushruta, the legend in ancient Indian surgery, describes about physiological, pathological role of rakta and its importance in surgical and para surgical procedures. Raktamokshan is considered asardhachikitsa in Shalyatantra.¹ Vitiated blood should be removed from the body either by Siravyadhan, Shringa, Alaabu, and Jaloukaor Prachchana karma.² Raktaja diseases which would not be treated only by shaman or only by Shodhan; it should be treated with specific shodhana karma known as Raktamokshan.³ Prachchana karma is indicated in Pinditavastha of Rakta and it removes one angulmatradushta Rakta^{4,5}. Diseases of Skin will never occur in person indulging in blood letting.⁶ In Prachchana karma removing of stasis (dushtarakta) will be under the control of a surgeon by the desirable incisions and allows the surgeon to remove stasis, hemosiderin deposition deposited subcutaneously; incision will result in capillary bleeding. Prachchana literally means "To bleed by making incisions in skin or scarifying"⁷

MATERIAL AND METHODS

A pilot study on 6 patients fulfilling the inclusion criteria with symptoms of stasis dermatitis were selected, Source of patients were from OPD, IPD of Shalyatantra of KLEU's BMK Ayurved Mahavidyalaya, Belgaum, India CTRI No: REF /2013/08/005476, Ethical clearance no BMK/PG/11/03. Intervention was done only once and follow up was taken on 3rd, 7th and 15th day after treatment.

Inclusion Criteria

- Consented individuals, subjects with symptoms of varicose veins and stasis dermatitis, Subjects of either sex between 30-60 years of age

Exclusion Criteria

- Diabetics Mellitus, Renal disorders, Bleeding disorders, T.B and immune suppressive/compromised diseases, Avisravya (Ayogya)⁸, Patients on anticoagulant therapy

Methodology

Principle of incision (Prachchana Karma)

Incision or slit, involves making a tiny incisions in the skin (eczematous derma) with sharp edges of surgical blade no. 11; at dermo epidermal (Stratum Germinitum) junction and not beyond it at equal distance, avoiding oblique incision and vital structures underlying at effected site and only facilitate the way to stasis, hemosiderin pigments to move. Incisions are placed in the direction of lines of cleavage of the skin (Langer's lines)⁹.

Materials

Sterile Tray for the Procedure

Place the following items on a sterile drape covering a Mayo stand:

- Sterile cloth towels/hole towels-01
- OT dress, Gown, Sterile Glows, Mask and Cap
- 2 inches of sterile 4 × 4 gauze
- Sterile surgical blade with (11 no.) and BP handle no 3
- Sterile roller bandage 2"
- Murchit Taila
- Normal saline

Procedure

Pre-operative procedures

- Preoperative counselling the patient for Prachchana Karma and well informed consent of patient and relatives were taken.
- The affected part was cleaned with normal saline and the materials required for procedure was kept ready. Bandage roll was kept as a standard tourniquet for all the patients.
- Local snehan and swedan was done over affected area.

Operative Procedure

- Patient was made to lie down on the examination table, surgeon with aseptic Operation theatre (OT) dress code and donning the Gloves approaches towards the affected lower extremity of the patient. Eczematous and pigmented area of lower extremity was well cleaned with normal saline; bandage roll (2") was tied as standard tourniquet proximal to affected site¹⁰.

- The affected area of skin was stretched by applying traction with fingers, A multiple slit incisions are made by surgical blade no. 11 over affected area in such a way that penetration occur at dermo epidermal (stratum germinatum) junction and not beyond it at equal distance avoiding oblique incisions and vital structures underlying at effected site.
- 3 Incisions were limited in 1×1 cm sq area, depending upon size of eczema multiple incisions were given along the cleavage lines of epidermis, only oozing was appreciated within period of 2:30 minutes bleeding was encouraged by squeezing area where slits incision were given.

Post-operative procedure

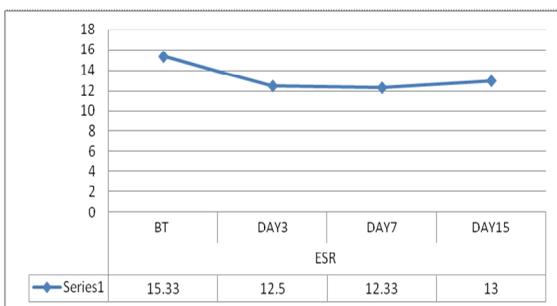
- Compression bandage was applied in case of oozing of blood; otherwise simple sterile bandage was applied.
- Patient was allowed to sit in recovery room for observation for one hour, General management of varicose veins was done like elevation of foot above pelvic line, stockings application and compression bandages.

Table 1: Effect of Prachchana Karma on 3rd day

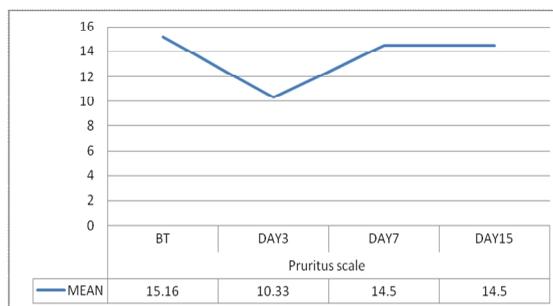
Symptoms	Mean of BT	Mean of 3 rd day	Difference in mean + SD	W value	P value	Significant? (0.05)
Pruritus Scale	15.83	12.50	3.33 + 2.503	-21.0	0.0313	Yes

Symptoms	Mean of BT	Mean of 3 rd day	Difference in mean + SD	t value	P value	Significant? (0.05)
ESR	15.83	12.5	3.33 + 2.50	3.262	0.0224	Yes
AEC	513.33	493.33	20.00 + 17.89	2.73	0.0409	Yes

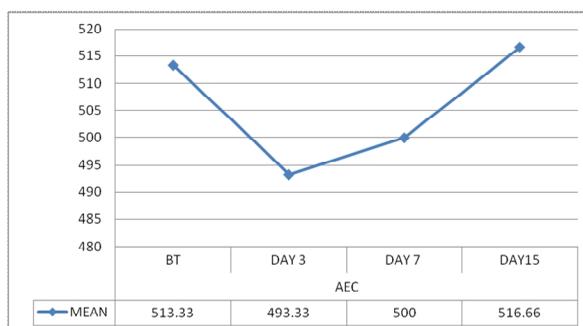
BT – Before Treatment



Graph 1: Effect of Prachchana Karma on ESR



Graph 2: Effect of Prachchana Karma on Pruritus scale



Graph 3: Effect of Prachchana Karma on AEC

RESULTS AND DISCUSSION

Data was collected before treatment and during each follow up. Analysis done using paired 't' test. There was significant reduction observed in ESR, AEC and Pruritus scale on 3rd day of intervention (with P value 0.02, 0.04, 0.03) respectively but no significant reduction was observed on 7th and 15th day of treatment (Table 1).

Description of Raktamokshan and its utility is well explained in Ayurvedic classics in various disorders. Stasis dermatitis is a disease which impacts over psychology of patient in context of pruritus and cosmetologically which we can say that kandu and twak vaivrnta which are symptoms of vitiated blood therefore raktamokshan can be performed so as to get rid of stasis. Anatomy-physiological aspects of varicose veins which are ultimately leading to formation of stasis dermatitis in abnormal state are important in understanding pathogenesis of the disease. This function is disturbed in varicose veins over lower limb in turn stasis; hemosiderin deposition itself may prove a causative factor for causing dermatitis.

Rationality behind the selection of Prachchana Karma

Skin changes related to chronic venous insufficiency mainly includes hyper pigmentation and eczema. The management requires rest, elevation of legs and use of elastic bandages or stockings. Mild topical steroids are used to relieve irritation but glucocorticoids have adverse effect of cutaneous atrophy. Here researchers hypothesized that in Prachchana karma removing of stasis (dushta rakta) would be under the control of a surgeon by the desirable incisions

Probable mode of Action

Role of raktamokshan in stasis dermatitis

Stasis of blood will result due to incompetence of venous valves which ultimately leads to chronic ambulatory venous hypertension, this can be removed by Raktamokshan by means of Prachchana karma, thus decreased venous hypertension doesn't allow RBC's to diffuse in tissue plane otherwise hemosiderin deposition results lysis of RBC's which plays prime role for the formation of stasis dermatitis. By this way Prachchana karma helps to reduce itching, ESR and AEC due to

improved microcirculation, removal of dead RBC's, hemosiderin and histamines, inflammatory mediators and stasis.

CONCLUSION

Standardisation of Prachchana karma was carried out and it may be practiced with multiple settings in minimal stasis for better results

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