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Case Report

AYURVEDIC MANAGEMENT OF NON-HEALING SNAKE BITE ULCER- A CASE STUDY

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ABSTRACT

A female patient of age 35 years with complaints of gangrenous non-healing viper bite ulcer with swelling, secretions, burning sensation and offensive smell over dorsum of left foot just below the ankle joint associated with thirst and yellowish discoloration of body, eyes and urine since 2 months. She didn't get any relief from allopathic medications. The bite was diagnosed to be that of a Russell's viper from the symptoms and by the descriptions of the victim. *Kshalana* was advised along with other internal medications. After the treatment for three weeks, significant changes were seen in the dimension of the ulcer along with the development of good granulation tissue. Pus, swelling, burning sensation and foul smelling discharge got cured to a very great extent. This paper discusses in detail a treatment protocol that can be practiced in post snake bite ulcer management. Ayurvedic therapeutics are found to be very effective in non-healing post bite ulcers instead of fasciotomy and amputation.

Keywords: Snake Bite Ulcer, *Kshalana*, Non-Healing Ulcer, *Vilwadi gutika*, *Pancha valkala twak*

INTRODUCTION

Snake bite is an important preventable health hazard. Patients with snake envenomation present as emergencies with significant morbidity and mortality. Viperine bites are common in areas of south-India and they present with hemotoxicity, in forms of various degrees of coagulation dysfunction following systemic envenomation¹. Snake bite remains a significant cause of morbidity and mortality, particularly in the rural occupational sector. In India on an average, about 80,000 snake bites are reported every year. This is only the tip of an iceberg because many cases are not reported and will not come in the statistics. Development of non-healing ulcers following a snakebite is very common in victims who survives the bite. The severity of symptoms depends on the potency of venom. Swelling of the bitten part and spreading cellulitis are the most common manifestations. In the event of recovery, surviving patients may develop necrosis of the skin, muscles, tendons, and even bone tissues. Various secondary infections leading to suppuration and gangrene may necessitate an amputation² or fasciotomy in the allopathic practice. Surgical repair of the wound may lead to complications like contractures. Ayurvedic intervention in these cases have given good results which reveals the true essence and efficacy of the science.

CASE REPORT

A female patient of age 35 years came to OPD with complaints of non-healing ulcer with swelling, secretions, burning sensation and offensive smell over dorsum of left foot just below the ankle joint associated with severe thirst and yellowish discoloration of body, eyes and urine since 2 months. The history of the patient revealed an incidence of snake bite two months before. The bite was diagnosed to be that of Russell's viper from the symptoms and by the descriptions of the victim. The victim underwent allopathic treatment at a hospital nearby. ASV administration was done and she survived the bite. But the bite ulcer was not healing and was increasing rapidly. Again they took allopathic medicines but didn't get any relief. Then the patient was referred to SDM college of Ayurveda, AgadaTantra department for better relief.

She was admitted at IPD for 21 days. The patient was in a state that she can't sit or sleep because of the severe burning sensation and thirst. For that, two doses of *Laajamanda* were given and the thirst got reduced. From the first day onwards, *kshalana*³ with *pancha valkala twak kashaya* was done on the ulcer along with application of *Jatyadi gritha*⁴. Two doses of *Punarnava shtakam kashaya*⁵ was given twice daily for four days by which the swelling got reduced. From fifth day

onwards, *Patolakaturohinyadi kashaya*⁶, *Vilwadi*⁷ tablet and *Manibhadra*⁸ granules were given for 16 days. The yellowish discoloration of skin, eyes and urine got normalized within 3 days. After the treatment for three weeks, significant changes were seen in the dimension of the ulcer along with the development of good granulation tissue. Swelling, burning sensation and foul smelling discharge got cured to a very great

extent. Ayurvedic therapeutics are found to be very effective in non-healing post snake bite ulcers.

CONCLUSION

These results show that Ayurvedic treatment is simple, reliable and an economical approach for effective management of non-healing snake bite ulcers and the best alternative when the management of snake bite ulcers is a matter of great concern.



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