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# AYURVEDIC MANAGEMENT OF JALUKA VISHA - A CASE REPORT

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#### ABSTRACT

**Background**: Leech, or *jalooka*, is very commonly used in Ayurvedic treatments, especially for bloodletting purposes. There are two types of leeches: medicinal and poisonous. The secretion of medicinal leeches contains many bioactive molecules with analgesic, anti-inflammatory, and anticoagulant properties. But in posisonous leech bites, complications are seen due to their secretions. Symptoms vary from local infection to bacteremia. Infection depends on species, area of application, condition of the patient, etc. If proper treatment is not given, there is a chance of cumulative toxicity, which further leads to other complications. Materials and methods: Here we report a case of *vishaja jaluka damsa* having intense itching and blackish discoloration over bilateral foots associated with peeling of skin and oozing of blood on scratching with severe discomfort during night time since last 2 years. In the purview of the Agada Tantra, it can be considered jangama visha, and treatment was planned accordingly. Special yoga mentioned for vishaja jalooka damsa in Malayalam text books, such as prayoga samuchaya, visha Vaidya jyotsnika, and kriyakaumudi, is also used in management. Dooshivisha chikitsa and rasayana chikitsa were also done. Results: The patient got complete relief from itching, scaling, and bleeding from scratches. Conclusion: Management of poisonous bites using the principles of Agada tantra is effective. Keraleeya Visha Chikitsa books contain many effective yogas for poisoning cases.

**Key words:** Visha jalooka, Leech bite, Agada tantra, Prayoga samuchaya, Visha Vaidya jyotsnika, Kriya kaumudi

#### **INTRODUCTION**

A leech bite is generally not a serious medical concern, but it can lead to certain complications if not properly managed. Leeches are blood-sucking parasites that attach themselves to the skin of animals and humans to feed on their blood. Leeches are hermaphroditic parasites of the phylum Annelida and the class Hirudinea. <sup>[1]</sup> There are over 600 species of leeches. A minority of these are sanguinivorous, which is the cause of human morbidity. Historically, leeches have been used for medicinal purposes, with the earliest recorded being in 1500 BC. Leeches have continued to be used in modern medicine, primarily in reconstructive surgery. <sup>[2, 3, 4]</sup> leech bites may be due to swimming or bathing in leech-infested waters or by deliberate placement for reconstructive surgery. <sup>[6,7]</sup> Leech saliva contains numerous substances, including hirudin (a potent antithrombin), hyaluronidase, histamine-like vasodilators, and calin (a platelet aggregation inhibitor).<sup>[8]</sup> One of the main concerns with leech bites is the potential for infection. If the leech bite is not cleaned properly or if the wound is scratched excessively, bacteria can enter the body and cause an infection. Some individuals may be allergic to leech bites or the substances they release during feeding. Allergic reactions can lead to symptoms such as itching, swelling, redness, and a rash around the bite area. In severe cases, anaphylaxis, a potentially life-threatening allergic reaction, can occur. In Ayurveda, leeches can be correlated to jaluka. Jaluka is classified as a savisha and a nirvisha by Acharya Susrutha. [9] clinical manifestation of the savisha jaluka bite ranges from local irritation to systemic manifestations.

#### Case report:

On April 26, 2023, a 44-year-old man from Kollam, Kerala, who works in the revenue department and lives there, complained of intense itching, black discoloration over both feet, skin peeling, and oozing blood when scratched. He also reported having severe nighttime discomfort for the past two years.

He experienced bleeding after being bitten by wild leeches across both feet two years ago. The bleeding stopped in an hour, and he chose to ignore it. Later, after washing his foot

in a fish tank, he began to develop acute itching and a blackish discoloration. He sought treatment from an allopathic doctor and received momentary relief. Additionally, he discovered acute pruritus across both foot ulcerations that bled when scratched. Ulcers that have healed have left behind hyperkeratinized, hyperpigmented scars. Taking non-vegetarian food items, drinking alcohol, and other factors worsen the condition. From the evening at six o'clock until the morning at six o'clock, he had terrible discomfort.

### **Treatment history:**

Although he received therapy from a nearby allopathic doctor, he was not completely relieved.

### **General Examination:**

Patient was apparently normal. He was having multiple hyper keratinised hyperpigmented scaly lesions over extensor and medial aspects of bilateral foot.

## **Systemic Examination**:

Cardiovascular system:

Pulse –71/min.

Heart rate -71/min.

Blood pressure -120 /80 mm of Hg.

Respiratory system: Intact, chest was clear on Auscultation

Digestive system: Abdomen showed peristaltic movements. The body wall appeared smooth with no segmentation. Patient was having a regular bowel habit with no other abnormalities detected.

Description of Lesion: Multiple hyperkeratinised hyperpigmented scaly lesions around 3-4 cm over extensor and medial aspects of bilateral foot and over toes. Surrounding skin appeared as xerotic .

Treatment: Treatment was given at the IPD level.

DAY	Treatment	Medicine used	Review		
3days	Rukshana	a) Pachanamritham	Samyak rooksa		
		Kashaya <sup>[10]</sup> As panam	lakshana attained		
		b) Murvadi gulika <sup>[11]</sup> 1	and the itching and		
		tablet twice daily	thickness of lesion		
		before food.	reduced		
		c) <i>Lepana</i> with <i>sariva</i> ,			
		nisa and ghritha <sup>[12]</sup>			
After attaining ruksha lakshanas					
5days	Snehapana	Kalyanaka ghritham <sup>[13]</sup>			
		on Arohana matra			
After attaining samyak snigdha lakshanas					
3days	<i>abhyanga</i> and	Neelidaladi kera tailam			
	ushnajala snana	[14]			
1 day	virechana	Thrisodhini kashyam <sup>[15]</sup>	6 <i>vegas</i> were		
		Thriphala, Trivrit, Danthi	obtained		
		20g each boil in 1500ml			
		water and reduce in to			
		300ml then filter and			
		again boil and reduce in			
		to 100 ml			
		Take 50 ml in morning			
		7am			

After *Samsarjana Krama*, the patient was discharged. Then *rasayana* was done with *Dooshivishari gulika* <sup>[16]</sup>3 tablets early in the morning with honey, and for external application, *Neelidaladi taila* was given. At the time of discharge, flaking of the skin and bleeding on scratching were completely relieved. An 80% reduction was noticed in itching.

Before and after Snehapana Liver function test results are as shown,

	Before Snehapana	After Snehapana
SGOT	84.1 U/L	53.3 U/L
SGPT	61.1 U/L	61 U/L
T.bilirubin	1.6 mg/dl	1 mg/dl
D.bilirubin	0.8 mg/dl	0.3 mg/dl



Fig. 1: Before Treatment



Fig 2: At the time of Discharge



Fig 3



Fig 4

Follow up

After three months of discharge, there is a full decrease in itching, flakes, and bleeding from scratches. The hyperpigmentation was lessened, but not entirely removed.

# **DISCUSSION:**

*Vishaja jalūka Damsa* is uncommon, whereas *Kīta Damsa* is a typical clinical manifestation with varying *dosha* predominance. Itching and bleeding are described as the symptoms of *jalūka visha* by Prayoga Samuchaya<sup>[17]</sup> and *Vishavaidya Jyotsnika*. <sup>[18]</sup>Six of the twelve types of *jalūka* mentioned in *Kriya Kaumudi* are poisonous. <sup>[19]</sup> When a poisonous *jalūka* bites, the bite site swells and becomes extremely itchy. This patient also presented the 72

same itching symptom in this case. When *dosha* predominance is examined, the patient exhibits greater *kapha pitha* characteristics and an association with vata.

Because rukshana is the first stage of sodhana therapy, Murvadi gulika was chosen and is specifically specified in Garopahatha pvaka. <sup>[20]</sup> It is *laghu* and has *Upashoshana* property, which dries up *Dhatugata ama*. Moreover, it is *Jwarahara*, which directly implies that it is *Amahara*. *Katu rasa* <sup>[21]</sup> is carminative in nature, i.e., it has *Deepana pachana* and *Soshana* properties, which are necessary to correct *Agnimandhya*. Besides, it is *ruchya* (increases appetite) and clears *srothas* (body channels). Most drugs possess *Ushna virya* and *Katu vipaka*, which enhance *Agni*. *Moorvadi Choorna* is *Kaphavatahara* and has *Deepana Pachana* property. *The Vrishya* nature of *Kana* and *Patola*, *the Rasayana swabhava* of *Kana*, *Amrita*, and *Chitraka*, *the Soolaprasamana swabhava* of *Kana*, *Chavya*, and *Vidangam*, *and the Vishaghna* property of *Vidangam* and *Nata are* all favorable to nullifying the clinical manifestations.

Here uses *lepana yoga* for *jalūka visha*, which is *sariva*, *nisa*, and *ghritha*, as described in *Prayoga samuchaya*, *Kriya koumudi*, and *Visha vaidya jyotsnika*. *Sariba* and *Nisa* both have *kapha pitha hara* and *visha hara* properties. Research shows that *Sariva* root extract has anti-inflammatory properties in both acute and subacute inflammation, reducing inflammation brought on by carrageenan, bradykinin, and S-hydroxy tryptamine in rats. <sup>[22]</sup> It also shows adequate anti-inflammatory effects compared to diclofenac sodium gel. <sup>[23]</sup> *Sariva* may be effective in treating inflammation caused by viper venom by lowering reactive oxygen species and inflammatory cytokines. <sup>[24]</sup>

Snehapanam with the visha-specific drug kalyanaka ghritha began after achieving rooksha lakshana. *Kalyanaka ghrita* is indicated in *Visha* and *Garavisha*. In this formulation, there are a total of twenty-eight drugs, out of which nine are *sheeta veerya* and nineteen are *ushna* (hot) veerya. Compared to the properties of Visha, these drugs have sheeta, laghu, snigdha, etc. properties and hence will act to counteract the ill effects caused by *Visha*. Most of the drugs have *kaphapittahara* and *tridoshahara* properties (which pacify all the doshas). The drugs in *Kalyanaka ghrita* have *Vishaghna* (anti-poisonous), *Kushtaghna* (useful in skin disease), *Hrudya* (cardioprotective), and *Raktashodaka* (blood purifying) properties. Drugs

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like *haridra, malati pushpa, tagara, daruharidra, padmaka, manjishta,* etc. are *vishaghna* drugs, and drugs like *manjishta, chandana, padmaka*, etc. are raktashodaka (blood purifiers) in properties.

Virechana with 50 ml of trisodhini kashayam is given following the achievement of Snigdha Lakshana. Trisodhini kahayam contain trivruth, thriphala each and danthi. It is mentioned in the kushta chikitsa of charaka. Acharya mentioned this yoga for the purpose of virechana itself. There obtained 6 vegas in the virechana and after samsarjana karma, the patient gets discharged.

For *rasayana* and *Shesha Dosha harana*, we gave *Dooshivishari gutika* at a dose of 3, along with *madhu* as an *anupana*. *Dooshivishari gutika* shown significant anti-inflammatory and immunomodulatory activities.

## **CONCLUSION:**

*Vishaja jaluka damsa* is not as common as *keeta damsa*. But if not treated properly or if the toxicity is not eliminated completely, it may lead to other manifestations. There is the concept of *dushivisha*. So, it is essential to understand the concept of *visha chikitsa*. Agada tantra deals with the management of different poisonous conditions caused by *sthavara*, *jangama*, and *kritrima* origins. Keraleeya Chikitsa grandha's like Pragaga Samuchaya, Visha Vaidya Jyotsnika, and Kriya Kaumudi are making great contributions to *Visha Chikitsa*.

#### **REFERENCES:**

- Tessler M, de Carle D, Voiklis ML, Gresham OA, Neumann JS, Cios S, Siddall ME. Worms that suck: Phylogenetic analysis of Hirudinea solidifies the position of Acanthobdellida and necessitates the dissolution of Rhynchobdellida. Mol Phylogenet Evol. 2018 Oct; 127:129-134
- 2. Conforti ML, Connor NP, Heisey DM, Hartig GK. Evaluation of performance characteristics of the medicinal leech (Hirudo medicinalis) for the treatment of venous congestion. Plast Reconstr Surg. 2002 Jan;109(1):228-35.
- Joslin J, Biondich A, Walker K, Zanghi N. A Comprehensive Review of Hirudiniasis: From Historic Uses of Leeches to Modern Treatments of Their Bites. Wilderness Environ Med. 2017 Dec;28(4):355-361.

- 4. El Boussaadni Y, Babakhouya A, Amrani R, Rkain M, Benajiba N. [Leeches: An unusual cause of epistaxis in children]. Presse Med. 2017 May;46(5):545-547.
- Øregaard JS, Lang CL, Venzo A. Partial salvage of avulsed tissue after dog bite. Ann R Coll Surg Engl. 2016 Feb;98(2): e22-5.
- Adams SL. The emergency management of a medicinal leech bite. Ann Emerg Med. 1989 Mar;18(3):316-9.
- Maetz B, Abbou R, Andreoletti JB, Bruant-Rodier C. Infections following the application of leeches: two case reports and review of the literature. J Med Case Rep. 2012 Oct 25;6:364.
- 8. Koeppen D, Aurich M, Rampp T. Medicinal leech therapy in pain syndromes: a narrative review. Wien Med Wochenschr. 2014 Mar;164(5-6):95-102.
- 9. Kaviraj Ambikadattashastri, Sushruta Samhita, Chaukhambha Sanskritsansthan, Varanasi, 2018, Sutrasthan adhyaya 13, Shloka no: 11, Page no: 58
- 10. K V Krisha Vaidyan, S Gopala Pillai, Sahasrayogam, 33rd ed. Thrissur: Vidyarambham;2015, P – 36
- 11. Pandit Harisastry bhishakacharya, Ashtanga Hridayam, Varanasi, Choukambha Krishnadas academy, 2006;pg.no:906/58
- 12. Kochunni thamburan, Prayoga samuchayam, Thrissur, Kerala:Sulabha books; thriteeyaparicheda, p-251
- 13. Pandit Hari Sastri Paradakara, editor. Ashtang Hridaya of Vagbhata, Uttarast hana, Ch.6, Ver.26,281-2, Reprint ed. Varanasi: Chaukhamba Orientalia; 2000.
- 14. Kochunni thamburan, Prayoga samuchayam, Thrissur, Kerala:Sulabha books; ashta paricheda, p-228
- 15. Agnivesha. Charaka Samhita, elaborated by Charaka and Drdhabala with Ayurveda dipika commentary of Chakrapani Datta, edited by Yadavji Trikamji Acharya. Varanasi: Reprint edition 2015, Sutra sthana 7<sup>th</sup> chapter Sloka No.44 Page No.452
- 16. Kunte AM, Navre KR. Ashtanga Hridaya withSarvanga sundara Commentary of Arunadatta andAyurveda Rasayana Commentary of Hemadri Collatedby Dr. Krishna Das Academy. Varanasi, Uttaratantra:Choukamba Publicatiosn; 1994. p. 35-9, 905.
- 17. Kochunni thamburan, Prayoga samuchayam, Thrissur, Kerala:Sulabha books; thriteeyaparicheda, p-251

- 18. Vishavaidya Jyotsnika. Vishavaidya Jyotsnika An English Translation. 1st ed., Kottakkal: Department of Agada Tantra, Vaidyaratnam
- 19. P.S Varier Ayurveda College Kottakal; 2009.
- 20. VM. Kuttikrishna menon, kriya Kaumudi a Malayalam treatise on ayurvedic Toxicology.
- 21. Pandit Harisastry bhishakacharya, Ashtanga Hridayam,Varanasi,Choukambha Krishnadas academy,2006;pg.no:906/58
- 22. T. Sreekumar, Ashtanga hridaya, 2nd edition, Thrissur, publication department harisree hospital, Mannuthi, 2008 January; pg 276/17-19
- 23. Swathi S, Amareshwari P, Venkatesh K. Phytochemical and pharmacological benefits of Hemidesmus indicus: an updated review. Journal of Pharmacognosy and Phytochemistry. 2019;8(1):256-62.
- 24. Dutta MK, Sen TK, Sikda. Some preliminary observations on the anti-inflammatory properties Hemidesmus indicus in rat. Indian Journal of Pharmacology. 1982; 14:78.
- 25. Chatterjee AK, Chakravarty AG. Daboiarussellii and Najakaouthia Venom Neutralization by Lupeol Acetate Isolated from the Root Extract of Indian Sarsaparilla Hemidesmus indicus R. Br., J Ethnos pharmacology. 2016; 106(1):38