



DIABETIC FOOT ULCER MANAGEMENT IN VIEW OF AYURVEDA

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INTRODUCTION

Diabetic Foot ulcer is a significant clinical problem to both clinicians and patients. 40% - 60% of all non-traumatic lower limb amputation is of diabetic ulcer. 85% of diabetic related foot amputation are preceded by foot ulcer. 4 out of 5 ulcer in diabetics are precipitated by trauma. 4% -10% is the prevalence of foot ulcer in diabetics. The number of people with diabetes worldwide was estimated at 131 million in 2000, it is projected to increase to 366 million by 2030. Previous studies have indicated that diabetic patients have up to a 25% lifetime risk of developing a foot ulcer. The annual incidence of diabetic foot ulcers is ~ 3%. Once an ulcer has developed, there is an increased risk of wound progression that may ultimately lead to amputation; diabetic ulceration has been shown to precede amputation in up to 85% of cases. According to *Acharya Susrutha*, in patients suffering from *Madhumeha Dhathu's* getting invaded by three *Doshas* together give rise to *Pidaka /Vrana /Vidhradhi /ulcer*.^[1]

Diabetic Ulcers^[2]

Causes

- Poor circulation-Poor blood circulation is a form of vascular disease in which blood doesn't flow to your feet efficiently. Poor circulation can also make it more difficult for ulcers to heal.
- High blood sugar (hyperglycemia)-High glucose levels can slow down the healing process of an infected foot ulcer, so blood sugar management is critical. People with type 2 diabetes often have a harder time fighting off infections from ulcers.
- Nerve damage-Nerve damage is a long-term effect and can even lead to a loss of feeling in your feet. Damaged nerves can feel tingly and painful at first. Nerve damage reduces your sensitivity to foot pain and results in painless wounds that can cause ulcers.
- Irritated or wounded feet-Dry skin is common in diabetes. Your feet may be more prone to cracking. Calluses, corns, and bleeding wounds may occur.

Clinical Presentation

- Presence of purulence
- Pain, swelling, ulceration, sinus tract formation, crepitation.
- Systemic infection (fever, rigors, vomiting, tachycardia, change in mental status, malaise).
- Surprisingly uncommon.
- Metabolic disorder (hyperglycemia, ketosis, azotemia).

Risk Factors

All people with diabetes are at risk for foot ulcers, which can have multiple causes. Some factors can increase the risk of foot ulcers, including

- Poorly fitted or poor quality shoes
- Poor hygiene (not washing regularly or thoroughly)
- Improper trimming of toenails
- Alcohol consumption
- Eye disease from diabetes
- Heart disease
- Kidney disease
- Obesity
- Tobacco use (inhibits blood circulation)

Treatment

- The main aim of the treatment is to create such an environment that prevent further infection and allows skin to grow across an ulcer.
- In diabetic foot before any Local treatment we should make control of Blood sugar level as it will delay the wound healing.
- The characteristics of *Dushta Vrana*^[3] like *Ativivrita* (broad base), *Bhairava* (ugly look), *Putipuyamamsa* (pus discharge), *Durgandha* (foul smell), *Vedana* (pain), *Dirghakalanubandhi* (chronic) were noted in the wound. There was deep seated blackish slough at the base of the wound and which was hard to

remove initially. but by our *Ayurvedic* line of management we can control.

According to *Ayurveda*

We can consider this as *Dushta Vrana* and can adopt Chikitsa,^[4] mentioned for that. Some of the Treatment that can adopt for Diabetic foot are

- *Shodhana*
- *Prakshalana*
- *Pichu*
- *Lepa*
- *Vrana Basthi*
- *Astavida Shastra Karmas*
- *Kshara* application

Some of the Formulations are

- Jathyadi Taila
- Kshara Thaila
- Panchavalkala Kashaya (for prakshalana)
- Triphala Kashaya

DISCUSSION

The treatment of diabetic foot with above *Ayurvedic* drugs is found quite satisfactory. These drugs not only cured the condition but are also patient friendly without any side effects unlike allopathic drugs. *Panchvalkala* decoction has *Shodhana* property, daily washing of wounds with well prepared decoction leads to cleansing of wounds. *Kshara Taila* dissolves hard fibrous tissue and generates healthy base for healing and *Jatyadi Taila* finally promotes healing of wound *Kshar Taila* dissolves hard fibrous tissue and generates healthy base for healing and *Jatyadi Taila* finally promotes healing of wound *Jatyadi* oil contains flavonoids, tannins, steroids, alkaloids and glycosides which helps in faster healing of wounds. The oil is anti microbial anti bacterial and non irritant.

CONCLUSION

Above study reveals that treating diabetic foot with above *Ayurvedic* formulations is better alternative for treating diabetic foot.

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