

## Role of Internal Medication (Śamana Oushadhi) and Lepa in the Management of A Surgical Case-Lymphangioma

<sup>1</sup>Savita S Angadi, <sup>2</sup>Vijaykumar S Kotrannavar

### How to cite this article:

Savita S Angadi, V S Kotrannavar / Role of Internal Medication (Śamana Oushadhi) and Lepa in the Management of A Surgical Case-Lymphangioma/Indian Journal of Ancient Medicine and Yoga, 2022;15(2): 63–65.

### Abstract

Lymphangiomas are malformations of the lymphatic system characterized by lesions that are thin-walled cysts. These are caused by development errors of the lymphatic system. The lesions can grow rapidly with infection, trauma or bleeding, resulting in disfigurement as well as severe impairment of respiration, swallow and speech. Treatment includes aspiration, surgical excision, laser and radiofrequency ablation and sclerotherapy. If the lesions are drained, they will rapidly fill back up with fluid. Surgical excision is one of the choices of treatment, but if they are not completely removed in surgery the lesions will grow and increase to a larger size. Lymphangioma can be considered as Lasika sira arbuda (tumour of lymphatic vessels) as per Ayurveda and the line of treatment mentioned in Sushruta is the first 12 upkramas (treatments) of the Shashti Upakramas (Sixty Procedures) of the vrana chikitsa along with internal medications. In this case report, a 7-year old female who presented with complaints of swelling over the right submandibular region, slowly growing in size has been treated with lepa along with shamana oushadhi (internal medicine). After 3 months of treatment there was no swelling at all. This case suggests the utility of lepa along with internal medicine in Lymphangioma.

**Keyword:** Lasika sira arbuda; Lymphangioma, Lepa, Shamana oushadhi, Kanchanaar Guggulu

**Key Message:** Present case report is of a patient with swelling over the right submandibular region, slowly growing in size, who don't want surgical intervention was treated with lepa and shamana oushadhi (internal medicine) and the treatment was found to be an effective solution in the management of Lymphangioma. Plan of care should done on the dosha - dushya involvement and go for samprapti vighatameva chikitsa.

### Introduction

Lymphatic malformations, traditionally called lymphangiomas, account for 4% of all vascular tumors and approximately 25% of all benign vascular tumors in children.<sup>1</sup> About 90% of the cases occur within 2 years of age,<sup>2</sup> except

a few cases which occur in adulthood, and approximately 75% of the lesions are located in the head and neck region. Lymphangiomas are benign lesions that result only in a soft, slow-growing, "doughy" mass. Since they have no chance of becoming malignant, lymphangiomas are usually treated for cosmetic reasons only. Rarely, impingement upon critical organs may result in complications, such as respiratory distress when a lymphangioma compresses the airway. Treatment includes aspiration, surgical excision, laser and radiofrequency ablation, and sclerotherapy. But these therapies have their own merits and demerits with limitations.

'Lepa (application of medicated paste)' is a popular treatment modality in Ayurveda, which has been advocated in disorders of abnormal growths along with internal medication. Lepa has properties of mainly vilayana (dissolving), srotoshodana (clearance of the channels), and

**Author Affiliation:** <sup>1</sup>Professor, PG Department of Shalaky Tantra, KLE University's Shri B.M. Kankanawadi Ayurveda Mahavidyalaya, Belagavi, Karnataka 590005, India, <sup>2</sup>Dean for PG Studies & Professor in PG Department of Rasashastra & BK, Shri J.G.C.H.S. Ayurvedic Medical College, Belgaum, Karnataka 591306, India.

**Corresponding Author:** Savita. S. Angadi Professor PG Department of Shalaky Tantra KLE University's Shri B.M. Kankanawadi Ayurveda Mahavidyalaya Belagavi, Karnataka 590005, India.

**E-mail:** savita.angadi@yahoo.com

**Received on:** 29.12.2021

**Accepted on:** 08.01.2022



lekhan (scraping), and so serves the purposes of dissolving the accumulated doshas, removal of obstruction from the channels, scraping etc.

### Case History

A 7-year-old female presented with the complaints of soft painless subcutaneous swelling over the right submandibular region, slowly growing in size since 2 years. This lesion was started when the child was 5 years old. Her complaint was only cosmetic. On physical examination, a painless, soft, diffuse swelling 5.0 x 3.0 x 1.2 cms in the right submandibular region [Image 01]. The remaining head and neck examination was unremarkable.

*Past history:* The patient was apparently normal 2 years back. Then she gradually developed a soft painless subcutaneous swelling over the right submandibular region. The patient was approached to doctor and had taken anti-inflammatory drugs and systemic antibiotics for few courses, but of no use. After that surgical excision was advised for correction. Then the patient approached to Ayurvedic doctor.

### Intervention

*Follow Up:* The patient was advised to follow up for once weekly for 3 months.

### Results

During 1st course of lepa there was no change in size of swelling. But in 2nd and 3rd courses of lepa along with internal medication there was marked reduction in the size of the swelling. After 3 months of treatment there was no swelling at all. (Image 02 and 03) Complete reduction in the size of swelling was confirmed by USG Neck after 5 months of treatment. (Image 04 - Before treatment USG Neck and Image 05 - After treatment USG Neck) No side effects were seen. The patient was advised not to consume guru, abhishyandi ahara. Take light easily digestible food. (laghu and supachya ahara)

### Discussion

Lasika sira arbuda is a condition in which, when tridosha gets vitiated and takes shelter in lasika sira(vahini) inturn vitiates the twak, mamsa and

**Table 1:** Bahya chikitsa (External treatment)

Name of treatment	Drugs used	Duration	Dose	Sittings	Days of treatment
Lepa	haridra and gritakumari	45 minutes	QS	1 <sup>st</sup> sitting in 1 <sup>st</sup> month	1 <sup>st</sup> – 7 <sup>th</sup> day
				2 <sup>nd</sup> sitting in 2 <sup>nd</sup> month	31 <sup>st</sup> – 37 <sup>th</sup> day
				3 <sup>rd</sup> sitting in 3 <sup>rd</sup> month	61 <sup>st</sup> – 67 <sup>th</sup> day

**Table 2:** Abhyantaroushadhi (Internal medicine)

Name of treatment	Drugs used	Dose	Anupana	Days of treatment
Abhyantaroushadhi	Triphala guggulu	125 mg thrice a day		3 months
	Kanchanar guggulu	125 mg thrice a day	Water	
	Vruddibadika vati	125 mg thrice a day		

rasadhatu resulting in srothavarodha and leads to the swelling over the submandibular region. General line of treatment mentioned in Sushruta is the first 12 upkramas (treatments) of the ShaShti (sixty) of the vrana chikitsa along with internal medications. Out of these listed treatments haridra and gritakumari lepa has a vital role to

play as this procedure is performed directly on the affected part. Haridra and gritakumari lepa possesses the qualities like shothaghna, kandughna (anti-pruritic),<sup>3</sup> and haridra is also proved as an antioxidant drug. It is indicated in swellings, skin diseases etc. The treatment principle is to clear the obstruction of lasika sira(vahini) and re-establish

the circulation.<sup>4</sup> The shothaghna, srotoshodana, lekhana and karshana properties of internal medicine namely triphala guggulu, kanchanar guggulu<sup>5</sup> and vruddhibadika vati<sup>6</sup> helps to clear the obstruction, improve the lymphatic circulation, and reduces the swelling.

As per the available treatment modalities of shotha, the local application of paste is the best one, taking into the consideration its convenience, easy adoptability, cost-effectiveness and curative results. This effectiveness of lepa along with shamanoushadis can be attributed to the shothagna properties of haridra, vruddhibadika vati and guggulu preparations.

This case study shows that Lymphangioma can be successfully managed with Ayurvedic intervention. It is supportive for further research in surgically indicated Lymphangiomas.

## References

1. Fernandez, Geover; Robert A Schwartz (2008).

"Lymphangioma". WebMD LLC. Retrieved 2008-11-04.

2. Giguère CM, Bauman NM, Smith RJ (December 2002). "New treatment options for lymphangioma in infants and children". *The Annals of Otology, Rhinology, and Laryngology*. 111 (12 Pt 1): 1066-75.
3. Shri Bhavamishra, Bhavaprakashsa Nighantu, Part I, Haritakyadi varga, 5th edition 1990, Varanasi, Chaukhamba Sanskrit sansthana, p-116.
4. Dr. Mahendra Singh, Rachana shareera Vignana, Vol-I, 1st edition, Varanasi, Chaukhamba Orientalia, p-336.
5. Pandit Sharangadharacharya, Sharangadhar Samhita, Madhyama Khand, 7/82-83 and 205/95-99, 5th edition 2002, Varanasi, Chaukhamba Orientalia, p-204, 205.
7. Kaviraj Shri Govinda das Sen, Bhaishajya Ratnavali, chapter-43/76-80, vriddhi roga chikitsa, Reprint edition 2011, Varanasi, Chaukhamba Surabharati Prakashan, p-795.

