



Case Study

## EFFICACY OF KAJJALIKODAYA MALAHARA IN CHRONIC POST OPERATIVE WOUND

Jayalaxmi

PhD Scholar, HOD and Associate Professor, Department of Rasa shastra and Bhaishajya Kalpana, SBAMCH, Karnataka, India.

### Article info

#### Article History:

Received: 05-01-2024

Accepted: 09-02-2024

Published: 07-03-2024

#### KEYWORDS:

Wound, *Kajjalikodaya malahara*, Surgery, *Vrana*, *Malahara*.

### ABSTRACT

Surgery is the choice of treatment in almost emergency conditions for saving the life of a patient. Sometimes it will leave post operative wound with continuous discharge even with conservative management rarely. **Methods:** A patient suffering with post operative wound with discharge since 4 yrs. on anterior lateral part of right thigh. Had undergone modern treatment with no results. On consultation, he was advised to apply *Kajjalikodaya malahara* (KJM) once in a day without any internal medications. **Results:** The results were appreciable starting from reduction in the discharge to closing the wound cavity without discharge in 60 days. **Discussion:** The results indicates that the *Malahara Kalpana* KJM (*Kajjalikodaya malahara*) therapeutically efficient as indicated in the classics that *Asadhya* (incurable) *Chira varna* (chronic wound) will also be relieved.

### INTRODUCTION

Surgery life saving modality of treatment in many medical conditions including fractures of bones. Sushruta Samhita explains any injury like falling, fighting in wars, animal attacks etc may result in fractures i.e., *Bhagna*<sup>[1]</sup>. These fractures of two types viz., *Sandhi mukta* (joint dislocation) and *Kandabhagna* (bone fracture)<sup>[2]</sup>. Should be treated with different modalities like *Anchana*, *Peedana*, *Samkshepa*, *Bandhana*<sup>[3]</sup>. In modern science fracture is defined as a break in the continuity of a bone. An injury to the musculo skeletal system can result in damage to bones, joints, muscles and tendons.<sup>[4]</sup> The present case study fracture falls in the category of traumatic fracture, where the treatment carried in 3 phases viz., Emergency care, definitive care and rehabilitation<sup>[5]</sup>. There is no doubt that these management saves many lives but sometimes leaves a small but un comfortable condition sometimes may not relieve from the conservative modalities of treatments, like wound with continuous discharge, which keeps patient in anxiety of infection, discomfort, unhygienic scarcity

which definitely affects day to day life? In such condition *Kajjalikodaya malahara -vrana ropaka malahara* mentioned in classics may work competently to heal the wound permanently.

This formulation was prepared with the ingredients with *Kajjali*, *Shodhita mriddarashringa*, *Shodhita kampillaka*, *Shodhita tuttha*, *Siktha taila* as per classical guidelines of *Malahara* preparations.

**Table 1: Showing Ingredients of *Kajjalikodaya Malahara* <sup>[6]</sup>**

Ingredients	Proportion
<i>Sikthataila</i>	48 Tola
<i>Kajjali</i>	2 Tola
<i>Shodhitamriddarashringa</i>	4 Tola
<i>Shodhitakampillaka</i>	8 Tola
<i>Shodhitatuttha</i>	3 Masha

### Case Report

A 66yr male patient consulted with the complaint of post operative wound with continuous discharge since 4yrs. Had met with RTA, and affected with ileum hemi transverse fracture with sacro ileac joint dislocation, pubic diastasis, displaced anterior column fracture-left acetabulum, un displaced posterior column fracture -left acetabulum, fracture of right femur, operated by ORIF procedure under a surgeon in modern hospital, but a wound with

#### Access this article online

Quick Response Code



<https://doi.org/10.47070/ayushdhara.v11i1.1500>

Published by Mahadev Publications (Regd.) publication licensed under a Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International (CC BY-NC-SA 4.0)

discharge was left unsolved. He then consulted the surgeon, then on advice took antibiotics etc but the wound remained unchanged. On observation wound was noticed with small opening and mild discharge continuous which keeps the wound always wet. Moderate swelling of affected area, restricted moments of thigh were noticed. The patient was advised to apply the *Kajjalikodaya malahara* on affected area and dress it properly daily and advised to visit once in 15 days to OPD.

At first visit, wound healing was started, discharge mildly reduced. After 30 days of *Kajjalikodaya malahara* application Discharge stopped, wound healing continued. After 45 days of *Kajjalikodaya malahara* application area wound affected reduced. After 60 days of *Kajjalikodaya malahara* application wound healing completed and no wound area found. Local swelling of wound was reduced and patient was able move limb without restrictions.

**Images related to *Kajjalikodaya malahara***



**Images showing ingredients of *Kajjalikodaya malahara***

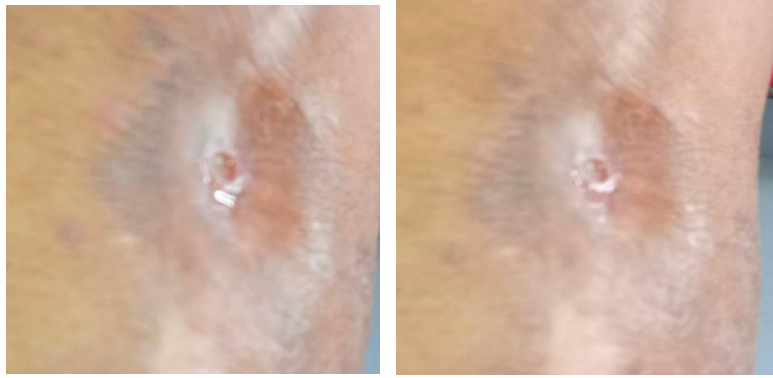


**Images showing preparation of *Kajjalikodaya malahara***

**Images of Wound Before and After the Treatment**



**Fig 1: Before treatment wound with discharge, local swelling**



**Fig 2: After 15 days of *Kajjalikodaya malahara* application reduction in wound and discharge**



**Fig 3: After 30 days of *Kajjalikodaya malahara* application wound stopped discharge and started healing**



**Fig 4: After 45 days of *Kajjalikodaya malahara* application wound healing continued**



**Fig 5: After 60 days of *Kajjalikodaya malahara* application wound healing completed**

## DISCUSSION

*Kajjalikodaya malahara* mentioned in the text *Rasatarangini* has *Shodhana-ropana* (wound cleaning and healing) properties indicated in *Vividha vrana* and also in *Nadi vrana*. It is said that *Vrana* which is not

cured by hundreds of treatment modalities or medicines, will heal fast by the application of *Kajjalikodaya malahara* [7]. As *Kajjalikodaya malahara* –contains, *Shodhita kampillaka- Vranahara, Shodhita*

*mriddarashringa - Vrana ropana, Shodhita tuttha-lekhana-twak dosha shamana* aided by *Kajjali* supported with *Siktha taila* relative therapeutic benefits are appreciated.

#### CONCLUSION

The classical reference which explains about *Kajjalikodaya malahara* as it is good for healing even in the wounds not healed by hundreds of medicines or modalities of treatment, however chronic it may be.

In the present case study, the chronic post operative wound was also healed properly just by the local application of *Kajjalikodaya malahara* without any internal medications. It reconfirms that classical formulation are proven medications of Ayurveda which still equally effective after thousands of years in the present scientific world.

#### REFERENCES

1. Acharya Sushruta, Sushruta Samhita with Nibandha Sangraha Commentary of Sri Dalhanacharya, Edited by Vaidya Yadavji Trikamji Acharya, Chaukambha Surabharati Prakashan, Varanasi, Reprint 2010, Nidana Sthana, Chapter 15, Verse 3, P.328.
2. Ibid. Nidana Sthana, Chapter 15, Verse 4, P.328.
3. Ibid. Chikitsa sthana chapter 3, verse 18-19, p.416.
4. J.Maheshwari, Essential orthopaedics, 4<sup>th</sup> edition, New Delhi, J.Maheshwari 2011, chapter 1, p.1-2.
5. Ibid. chapter 3, p.13.
6. Sadananda Sharma, Rasa Tarangini, 11 Edition, Varanasi, Motilal Banarasi Das, Publications 2012,,6 /129-132, p. 129..
7. Ibid.6/133-134,p.129

#### Cite this article as:

Jayalaxmi. Efficacy of Kajjalikodaya Malahara in Chronic Post Operative Wound. AYUSHDHARA, 2024;11(1):28-31.

<https://doi.org/10.47070/ayushdhara.v11i1.1500>

**Source of support: Nil, Conflict of interest: None Declared**

#### \*Address for correspondence

**Dr. Jayalaxmi**

PhD Scholar, HOD and Associate Professor, Department of Rasa shastra and Bhaishajya Kalpana, SBAMCH, Karnataka, India.

Email:

[drjayalaxmim@gmail.com](mailto:drjayalaxmim@gmail.com)

Disclaimer: AYUSHDHARA is solely owned by Mahadev Publications - A non-profit publications, dedicated to publish quality research, while every effort has been taken to verify the accuracy of the content published in our Journal. AYUSHDHARA cannot accept any responsibility or liability for the articles content which are published. The views expressed in articles by our contributing authors are not necessarily those of AYUSHDHARA editor or editorial board members.

