ROLE OF JALAUKVACHAN IN BACKACHE – A CASE STUDY

Dr. Chintamani Arun Kodolikar1* Dr. Abhaykumar Kulkarni2 Dr. Swarup P Kulkarni3

1* Associate professor, Department of Samhita Siddhant, Dr. N. A. Magadum Ayurvedic Medical College, Hospital and Research Centre, Ankali, Karnataka, India.

2 Professor and H.O.D. Department of Dravyagunvigyan, Dr. N. A. Magadum Ayurvedic Medical College, Hospital and Research Centre, Ankali, Karnataka, India.

3 Associate Professor, Department of Rachana Sharir, Dr. N. A. Magadum Ayurvedic Medical College, Hospital and Research Centre, Ankali, Karnataka, India.

ABSTRACT-
Scapular region in human body consist of anatomically two sets of muscles as muscles connects the upper extremity to vertebral column and the muscles around the scapular region. Inferior angle of scapula mainly consist of Latissimus dorsi muscle. In Ayurved, along with Panchakarma and internal medicine, the importance of local application is also utilized with very good results. Considering this, in this case study Jalaukavacharan (Leech therapy) was used locally. Jalauka are used to suck the vitiated blood and the aggravated dosha in the applied region. A case of backache with muscle sprain and discomfort due to heavy exercise which leads to sthanvagunya (pain and discomfort) on left side at subscapular region was came to my personal clinic. Treatment was given as jalaukavacharan (Leech therapy) for 3 settings by 15 days gap respectively, every time two fresh jalauka (Leeches) were used. After three settings, pain and discomfort was relived 95% and remaining 5% discomfort was subsided by internal medicines and oil application.

KEY WORDS – Jalauka, Jalaukavacharan, Scapular region etc.

INTRODUCTION-
Scapular region -
Scapular region consist of the muscles like Levator scapulae, Rhomboids Major and Minor present on medial border of the scapula. Lateral border of the scapula contains Teres Major and Minor. Scapular fosse dorsally having the muscles as Supraspinatous and Infraspinatous. Inferior angle of the scapula possess Latissimus dorsi and Serratus anterior muscles. Apart from these muscles, this region is heavily supplied by blood vessels as Descending branch of transverse cervical artery, Transverse Scapular artery, Acromial branch of thoracoacromial artery and anterior humeral circumflex artery. The painful region (scapular) also involves three groups of muscles as,

1) Intrinsic muscles
2) Extrinsic muscles
3) Stabilizing and Rotating Muscles
**Intrinsic Muscles**

Muscles of rotator cuff the Subscapularis, Teres minor, Supraspinatus and Infraspinatus.

**Action** - Internal and external rotation of shoulder joint along with humeral abduction.

**Extrinsic Muscles**

Muscles include Biceps brachi, Triceps brachi and Deltoid muscles.

**Action** - Several actions of the glenohumeral joint.

Third group of muscles responsible for stabilization and rotation of scapula muscles involved are Trapezius, Serratus anterior, Levator scapulae and Rhomboid muscles. Inferior angle of the scapula is the lowest part of the scapula and is covered by the Latissimus dorsi muscle.

**Fig. 1** - Scapular region muscles and arteries -

**Jalaukavacharan**

In Ayurved, along with Panchakarma and internal medicine, the importance of local application is also utilized with very good results. Considering this, in this case study Jalaukavacharan (Leech therapy) was used locally. Jalaukas (leeches) are used to suck the vitiated blood and the aggravated dosha in the applied region.
Leach is of two types;
1) Poisonous (Hirudo Detrimental)
2) Non poisonous (Hirudo Medicinalis)

The leach used in this patient is non poisonous type having the length of six to eight centimeters. Leach purifies the blood and helps in proper circulation of blood in respective area. According to Ayurvedic classics in this case, blood vessels, asthi (bones), peshi (muscles), sira (vessels), snayu (ligaments) and kandara (tendons) all are involved; the pain is due to the vaat and rakt (blood) vitiation. Due to heavy weight exercise (ati sahas) vaat vitiates and pain region snayu, kandara, sira etc involved (kandara, sira are mala of rakta). The treatment planned in this case was by considering the sthan dushti (region) hence jalaukavacharan was planned.² ³

CASE STUDY-

Male patient 23 years visited to O.P.D. with c/o severe backache and discomfort at sub-scapular region since two years. Patient built is strong and having history of heavy workout in Gym. Pain and discomfort is more in morning time.

- Patient age 23yeras old male.
- C/O severe backache and discomfort
- Severity increases at morning time
- Duration- since two years
- Reports- all the blood investigation reports are within normal limits
- MRI report is Normal
- No relief by physiotherapy
- H/O heavy weight Gym

During the heavy weight lifting for shoulders severe sprain at left side of at subscapular region.

**Samprapti (Pathogenesis)**

Heavy weight lift/ Ativyayam

Sthan vaigunya

Muscle sprain

Rakt(Mala) Dushti

Pain

Dosh -Vaat
Dushya- Rakt and mala(sira,kandara,sira etc)

Photo 1 – Jaluka application
Treatment -

Raktvikar chikitsa- Raktmokshan/Jalaukavacharan (leech therapy) for local blood purification

- 1st setting- two leeches applied of left side at subscapular region
- 2nd setting- (After 15 days),
  Pain reduced by 70%
  (No internal medicines were used)

Again two leeches are used in same area

- 3rd setting- (after 15 days)
  No internal medicines were used
  Pain reduced by 90%

Again two leeches are used on same area

- After 15 days-
  The pain was absent and only 5% of morning discomfort was present.

Internal medicines given as,

- Gandha tail drops (Nagarjuna Kerala) 5 drops twice a day with 250ml of milk.
- Kaishor Guggulu DS 750mg(SDM Pharma)- one guggulu twice a day with milk.
- Shuddha Bala tail (KAPL Pharma) is given for local application.

After 15 days - No Pain and Discomfort, medicines stopped, patient was recovered.

**DISCUSSION:**

Scapular region consist of intrinsic muscles, extrinsic muscles and stabilizing and rotating muscles. This region is also densely supplied by the blood vessels. In Ayurved, along with Panchkarma and internal medicine, the importance of local application is also utilized with very good results. Considering this, in this case study Jalaukavacharan (Leech therapy) was used locally. Jalaukas (leeches) are used to suck the vitiated blood and the aggravated dosha in the applied region. Patient of 23 years of old came with c/o severe backache and discomfort at subscapular region since two years, all the investigations and reports were within normal limits. Patient had a history of heavy workout in gym and during shoulder exercise developed a sprain at left side which increased gradually, by considering the local damage and involvement of vaat dosh and rakt mala raktmokshan (jalaukavacharan) was advised. Three settings of jalaukavacharan was done with the gap of 15 days each, every time two fresh leeches were applied on left side at subscapular region. In every follow up the pain and discomfort was gradually decreased. After 3rd setting there was no pain and only 5% of discomfort (only at morning hours) was the only symptom. This symptom was recovered by using internal medicines and oil application. The jalaukavacharan plays an important role in blood purification due to which the blood circulation was improved to respective area which leads in relieve from pain and discomfort.

**CONCLUSION:**

Heavy exercise is one of the causes of vaat vyadhi due to which particular area may get affected; by considering this the role of jalaukavacharan is very important in relieving the instant pain developed due to accidental history or sprain or any damage which later on may cause the blood vitiation.

**REFERENCES:**

