



“Role of *Ayurveda* in Managing *Bhagna* (*Radius fracture*): A Case-Based Approach to *Radius fracture* Treatment”

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ABSTRACT

In *Ayurveda*, the treatment of bone fractures is known as *Bhagna Chikitsa*, which is a part of both surgical and para-surgical care. This concept was developed in detail by *Acharya Sushruta*, who classified fractures (*Kandbhagna*) and based on their type, shape, and the extent of displacement. *Ayurveda* offers a variety of treatment methods for managing such injuries. Traditional techniques like *Kushabandh*, *Chakrayoga*, *Taila Droni*, and *Alepa* are useful in specific cases. However, the core methods used include *Bhagna Sthapana* (realigning the bone), *Bandhana* (immobilization), and *Sukhchestaprasara* (gradual restoration of movement), often supported by surgical or para-surgical procedures. Alongside these, *Ayurvedic* and modern systems of medicine also provide symptomatic treatments to reduce pain and swelling. This holistic approach reflects the strength and relevance of *Ayurvedic* methods in managing fractures, even in today's medical practice.

Keywords: *Ayurveda*, Surgery, *Bhagna*, Fracture.

INTRODUCTION

“*Ayusho Veda: Iti Ayurveda*” *Ayurveda* means science of life. It is a medical system which is not only for treating disease but also for prevention & maintenance of health through close attention to balance in one's life, right thinking, diet, lifestyle and use of herbs.

In *Ayurveda*, *Shalya tantram* is one among the *asthanga*s of *Ayurveda* mainly deals with surgical aspects of the system and orthopaedics. The surgical knowledge and procedures that were performed and used since thousands of years ago and are useful even today. The treatment of fracture studies as separate medical speciality called as orthopaedics. Orthopaedic management comes under

Shalyatantram in *Ayurveda* orthopaedic condition is well explained and documented in *Ayurveda* as

“*BHAGNA CHIKITSA*. “The *Bhagna chikitsa* elaborately described in *Ayurveda* texts. The most scientific & systemic approach in “*Sushruta Samhita* “ The bone & joint injuries have been dealt with a very scientific manner by *Acharya Sushruta* & although at that time there were no advancements like radiology, modern anaesthesia etc. In case of fracture different manipulation has been explained to reduce them and place them in normal position. General treatment & special treatment for different types of fracture are elaborately described by *Acharya Sushruta*. The main principle of fracture treatment is *Bhagnasthapna* (reduction), *Bhagnasthreekarana* (retention) and *punerchestitapracharam* (rehabilitation).

Assessment of fracture patient

History- proper history gives a vital clue and goes long ways in arriving at a proper diagnosis.

Age- certain fractures have prediction age group e.g., supracondylar fracture of humerus in childhood.

Sex- Colle’s fracture is more common in females, posterior dislocation of elbow more common in males.

Signs & symptoms-

Symptoms – pain, swelling, deformity, inability

Signs – tenderness, swelling, deformity, abnormal mobility, crepitus, shortening, loss of transmitted movements.

INVESTIGATIONS IN FRACTURE

Radiography

- I. **X_Ray** - It is the first and most common diagnostic tool for fracture. minimum two views, anterior – posterior lateral required. Sometimes an oblique view and other views are required depending on the clinical situation
- II. **CT- scan** - It is helpful in detecting fracture of skull, pelvis, spine and identifying loose bodies in the joints
- III. **MRI** - It helps to identify soft tissue and ligament injury.

MANAGEMENT OF FRACTURE

The goal of fracture management is to restore the anatomy back to normal or as near to normal as possible.

The proper medical treatment is that which successfully copes with the disease under treatment and arrests recrudescence of a fresh one by way of sequel, and not that which though subsiding a particular distemper, is immediately followed by a new one.

Acharya Susruta “father of surgery” narrating the management of a fracture as follows-

- Depressed one fracture hanging down should be set by raising it up.
- An elevated and fractured joint should be reduced by pressing it down in case of a pushed aside bone pull it.
- In event of a lowered fracture, it should be reinstated upward.
- An intelligent physician should set all dislocation, fracture, whether fixed or immovable, by the mode of reduction known as traction pressure, compression and bandage.

Medicines

- ✓ **Parisheka** - *Nyagrodhadi kashayam, panchamula boiled milk, chakra tailam, Aama tailam.*
- ✓ *panchakarma* like *Anuvasan Vasti, nasya masthiskyam (Shiro Vasti)*
- ✓ *lepam* with *Seetha dravya, sandhaniya gana dravya*
- ✓ *Gandha tailam*
- ✓ *trapushadi tailam*
- ✓ *Swedanam*

Pathya & Apathy in fracture

Pathya - *saali* variety of rice, milk, ghee, butter, nutritious food

Apathyam-

Salt, acids, pungent, spicy food, alkaline foods, and substances, sex, exercises, exposure to heat(sun)

AIMS AND OBJECTIVES: AIM OF STUDY:

To evaluate the effectiveness of Ayurvedic method of treatment in the management of Radius fracture.

OBJECTIVES OF STUDY:

To assess the overall improvement in subjective parameters of participants following the treatment with *Bhagnasthapna* (reduction), *Bhagnasthireekarana* (retention) and *punerchestitapracharam* (rehabilitation).

MATERIAL & METHOD:

Selection of Patients: The study was completed on 15 clinically diagnosed patients of Radius fracture at OPD of Nangelil Ayurveda Hospital Nellikuzhi (P.O.), Kothamangalam, Ernakulam District, Kerala Written informed consent

was taken from each subject before the initiation of the trial.

INCLUSION CRITERIA:

- Both male and female candidates are included.
- Diagnosed case of radius fracture.

EXCLUSION CRITERIA

- Patient with structural abnormalities.

WITHDRAWAL CRITERIA

- If any serious complication occurs during clinical trial.
- During course of trial if patient wants to discontinue the treatment

Management of fracture

Equipment needed for bandaging

Splint made of bamboo or wood - 4 (according to size of patient hand)

Cotton swab - 2

Cotton thread - 3

Crepe bandage - 1

Sling - 1

Scissor

Marmanigulika grand with ghee (a traditional medicine of Nangelil family)

Karpoormarmani tailam application (a patent medicine of Nangelil pharmacy)

Mode of bandaging

1. Karpoor marmani tailam has to be applied in affected area
2. Traction along the forearm & each finger
3. Reduction of fractured bone
4. Application of Marmanigulika lepam
5. Splint bandage
6. Immobilization with sling

Bandage has to be done in case of patient who are not able to visit hospital frequently for rebandage.

Rehabilitation

- After the proper healing of fracture bone, massage with Karpoor marmani tailam & swedanam for seven days in order to bring the normal movements and strength to fractured bone & muscle.
- Bandage should be checked for tightness, looseness, softening, swelling.
- Sling should be checked particularly slackness and pudding near neck
- Dependent oedema should be treated by hand elevation & retrograde massage from fingertip to palm.

Range of movement

- Un- Involved joint active exercises e.g. to thumb, digits, elbow, shoulder.
- Involved joint exercises such as wrist movement, supination & pronation are not encouraged.
- Isometric exercises to hand muscle begin
- Activities of daily living are carried without normal unaffected hand & no weight bearing permitted with affected arm.

Exercises

1. Active wrist mobilization by keeping forearm in mid pronation over table
2. Passive wrist mobilization after 7 – 10 days with affected hand rests on edge of table
3. Indian salutation (dorsiflexion) and reverse salutation (palmer flexion)
4. Pronation & supination exercises
5. Ball squeeze muscle exercises for regain muscle strength
6. In Galeazzi fracture – self arrested, passive stretching exercises by a wand or by the collateral ha

CASE I

Registration/ OPD No. – 12666

Date- 08/05/2021

Name – Master Abhimanyu

Age / sex – 11 yrs / M

Address – Methala (H), Komsanad P.O.

Occupation- student

Chief complaints – pain & swelling on left hand forearm

History of present illness – fall

Personal history – Allergy - nil

Addiction – nil

Investigations – X-Ray left forearm (AP/lat.)

Diagnosis – fracture of left-hand radius bone fracture

Treatment –

1. Apply karpooramarmani thailam
2. Reduction & manipulation
3. Apply Marma lepam
4. Splint bandage with thick cotton pad

Internal medications –

1. Marma kashayam – 15 ml BD after meals
2. Tab. Pirocin – 1 TDS after meals
3. Tab. Caliro – 1 TDS after meals
4. Tab. Bonton – 1 TDS after meals



Follow up

Date	Daily report	Treatment / therapies /advices
10/05/2021	Pain persisted Swelling slightly reduced	Rebandaging done. Internal medicine continues
13/05/2021	Pain persisted Swelling reduced	P.O.P. applied
16/06/2021	Pain not felt	P.O.P. removed Local abhyanga with karpooramarmani thailam & hot effusion for 7 days

CONCLUSION AND DISCUSSION

Bhagna is described in *Susruta Samhita*. general treatment & special treatment for different types of fracture are elaborately described by *Acharya Sushruta*. The main principle of fracture treatment is *Bhagnasthapna* (reduction), *Bhagnasthreekarana* (retention) and *punerchestitapracharam* (rehabilitation).

The patient was given treatment for 40 days. During the treatment, the patient had taken internal medicines according to the *dosha* status and symptoms. The patient initially experienced persistent pain and swelling, which gradually reduced with continuous internal medication and rebandaging. Swelling had significantly

reduced, Over the following month, symptoms improved , and patient reported no pain. Overall, the treatment resulted in complete pain relief and progressive recovery.

References

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