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RESEARCH ARTICLE

VARICOSE VEIN AND NATUROPATHY TREATMENT OPTION- A CASE REPORT

Dr. Kajal Gupta, Professor Dr. Satya Lakshmi, Dr. Sathyanath D. and Dr. Shrikanth Muralidharan

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Abstract

Varicose veins are a challenge to manage, since the long standing cases do not recover completely. With the cost of Allopathic treatments; affordability is always a matter of concern. So also the complications of allopathic treatment may be taxing to a few patients. Here a case report is discussed which dealt with the treatment of Varicose veins by Naturopathy means to successfully manage the case in a short span of 8 days.

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Introduction:-

Varicose veins are veins that are tortuous and widened in the subcutaneous tissues of the lower limbs which are easily visible. The valves of these veins are incompetent. Hence the back flow of the blood takes place resulting in venous hypertension. The dilated branches of the great and the small saphenous veins leads to varicose veins. Its prevalence is about 10-30%.¹ A strong family history, age, pregnancy, long standing jobs are all common risk factors for this condition.² The cases with varicose report of discomfort, aching, pain, itching or eczema, and deep vein thrombosis (DVT).³ Symptomatic patients require therapy in order to manage chronic venous insufficiency, superficial thrombophlebitis, and bleeding.⁴ This is a common clinical feature among elderly people especially women and a full recovery is always questionable. Here a case is discussed wherein the Nature cure regimen was adopted to cure a case of varicose veins successfully after 8 days of intervention with no prolapse.

Case presentation

A 72 year old female reported to the OPD of the National Institute of Naturopathy with the chief complaint of pain in both the limbs (calf region) since 2 months. She also had bluish patches on the skin (of upper and lower limbs) on left and right side since 1 month. She was diagnosed with Varicose vein since 2 months. On recording the systemic history, the patient revealed that she also had numbness of both soles of the lower limbs since 2 years, pain with shoulder and thumb joint pain for more than 2 years. She was also suffering from bronchial asthma since 40 years. Her weight was 64 kg and BMI was 30 kg/m². The patient was suffering from multiple joint pain including shoulder, thumb, wrist and lower back. The pain started after attack of chikungunya 4 years back. Pain aggravated while standing and physical exertion. It was relieved with rest and oral allopathic medication. The varicose vein aggravated since the last 2 months; with a simultaneous increase in calf pain and feet numbness.

Personal history taking of the patient revealed that she had a good appetite, took approximately 2 liters of water per day and had no issues with sleeping pattern, bowel movements. She was addicted to consuming 6-7 cups of tea per day. Menopause set in at the age of 55 years. The vitals of the patient were all normal and well under control. On physical examination; icterus was seen along with peripheral cyanosis and the overlying skin was dry. Auscultation revealed presence of wheezing sounds and the vocal resonance was decreased. No other abnormalities were observed or reported by the patient.

Corresponding Author:- Dr. Kajal Gupta

The following features were prominently seen on diagnosis by Naturopathy means-

1. Mixed Encumbrance
2. White coat on the tongue
3. The Iris diagnosis revealed the following-

Right Iris	Left Iris
<ul style="list-style-type: none"> • ArcusSenilius 	<ul style="list-style-type: none"> • Arcus Senilius around theiris • Yellowish colouration insclera • Whitepigmentationin6'oclockpositionin second minor of 3rd majorzone³

The patient reported of consuming the following medications for her problems-

1. Foracort Cipla- 200mg rota cap – 10-15times/month since 2yrs.
2. Thioasthalin- 50mg tablet-3-4times/month since 3yrs.
3. Ultra-cet (tramadol)- 400mg- 1tablet/day since 6months
4. Giloy (ayurvedic)- 400mg tab/day since 5yrs.

The O₂ levels in the periphery were as follows-

1. In fingers of hand SpO₂ levels are 91-92%
2. In fingers of feet SpO₂ levels are around 84-85%, except for toes it is 99%

Based on the clinical presentation and the history; the final diagnosis was made as Varicose Veins Grade: CEAP-C2S [Varicose veins with symptoms i.e. (symptomatic)].⁵

The Naturopathy Regimen provided was as follows

Day	Treatments	Duration
1-3	<ol style="list-style-type: none"> 1. Neutral Hand Pack(b/l) 2. Acupressure to Hands andFeet 3. Hot Foot Arm Bath with EpsomSalt. 	<ol style="list-style-type: none"> 1. 30mins 2. 10mins 3. 15mins
4	<ol style="list-style-type: none"> 1. Neutral LegPack 2. Hot Sand Fomentation (Hips &Back) 3. Acupressure toFeet 	<ol style="list-style-type: none"> 1. 30mins 2. 15mins 3. 10mins
5	<ol style="list-style-type: none"> 1. Mustard Pack to LowerBack 2. SteamBath 	<ol style="list-style-type: none"> 1. 15mins 2. 15mins
6	<ol style="list-style-type: none"> 1. Oil + Infrared Ray toCalf 2. Acupressure toFeet (Ingham Method) 3. Hot Foot Arm Bath with EpsomSalt 	<ol style="list-style-type: none"> 1. 10mins 2. 10mins 3. 15mins
7	<ol style="list-style-type: none"> 1. Acupressure to Leg(b/l) 2. Neutral LegPack 3. Infrared Ray to (b/l) WristJoints 	<ol style="list-style-type: none"> 1. 10mins 2. 30mins 3. 10mins
8	<ol style="list-style-type: none"> 1. Acupressure to Feet andPalms 	<ol style="list-style-type: none"> 1. 15mins

	2. Cold LegPack	2. 30mins
	3. Cold FootBath	3. 5mins

The patient was advised to follow air + Sun Bath: 30mins, Yoga Therapy: 30mins (asana: Utthan-pad Asana, Naukasana, Shalabh Asana; Pranayama: Anulom-Vilom, Bhramari, AUM, Deep Breathing); Hands +Leg Massage Therapy (30drops of grape seed oil + 3table spoon of olive oil): 30mins and to wearcompression stocking daily.

The following dietary pattern was advised to the patient

Timing		Diet Recommended
Morning:	7am	1Spoon Methi Seeds + Hot Water
	8am	Ginger Tea (no milk and sugar) – can add jaggery to taste
	10am	Fruit Salad (Oranges, Pomegranates and Apples should be there)
Afternoon:	1pm	2 whole grain Roti + Green Vegetable (250gm)
	5pm	Tender Coconut Water / Orange or Pine Apple Juice / Mix Fruit Juice
Evening:	7pm	Milletts Khichdi / Soup

The patient was also asked to drink 2-3 litres of water daily and to avoid food rich in sugar/salt and heavy meals at night.

The patient's pre and post treatment (8th day) pictures show a considerable changes in the clinical appearance of the condition. Also the patient reported of improved breathing and reduction in the medications for asthma. Her Varicose Veins were asymptomatic and only had cosmeticpresence.

The pre and post pain scale is shown in the table below

Pain area	Pain index	
	Pre	Post
In calf muscle (both left and right)	5/10	0/10
Shoulder (both left and right)	4/10	1/10
Thumb joints (both right and left)	5/10	2/10
Lower back pain (on working or exercising)	7/10	3/10

The other scales related to physical handicap recovery, anxiety disorder and disease disability were also recorded; which showed a drastic change post the intervention as shown in the following table.

Questionnaires	Pre score	Post score
Tinnitus - Handicap – Inventory ⁶	68 (grade -4)	50 (grade – 3)
Generalized Anxiety Disorder Questionnaires ⁷	26	16
Dokuz Eylul University Meniere's Disease Disability Scale ⁸	117	71

Discussion:-

The Naturopathy regimen in long standing cases of varicose veins involves a non-pharmacological management of the case with a multitude of therapy protocols. Epsom salt bath is essential to reduce inflammation and the size of the varicose veins. Magnesium present in the salt in regulatingthe action of enzymes, reduces inflammation reaction and enhances the absorption of nutrients. Sulfate ions help inimproving the absorption of nutrients and remove toxins from the body.⁹Infrared radiation is an invisible form of electromagnetic energy, the wavelength of which is longer than that of visible light. Infrared radiation can be categorized into three groups according to wavelength, namely near infrared (NIR, 0.8–1.5 μm), middle infrared (MIR, 1.5–5.6 μm), and far infrared (FIR, 5.6–1000 μm). Infrared radiation probably enables multiple forms of energy to be transferred into subcutaneous tissue (approximately 2–3 cm deep) without stimulation or excessive heating. The infra-red ray therapy was used since it helps to increasing artery blood flow and peripheral blood circulation,improving endothelial function, alleviating fatigue and pain,

reducing blood pressure, and promoting capillary dilatation.¹⁰⁻¹² Hence the same procedure was employed here and it was found to be clinically productive.

Clinical trial shows that cold packs improves blood flow by slowing movement within the microcirculation and thus might potentially provide a therapeutic benefit to prevent leg ulcers.¹³

Post treatment pain, handicap experience, anxiety and disease disability were all reduced in the patient with pressure pack, Epson bath, acupressure and massage apart from a strict diet control and regular Yoga.

Figure shows the pre and post treatment changes in the cosmetic appearance of the varicose veins of both the limbs.



Summary:-

A 72 year old female patient reported with the presenting illness of varicose veins of grade CEAP-C2S. As per the grade the patient had varicose veins with symptoms such as bulging of veins, calf muscle pain and numbness in sole of feet. Treatment protocol for varicose vein of grade CEAP-C2S as per naturopathy was cold leg bath, cold leg pack, massage with grape seed oil mixed with olive oil in the direction of heart, acupressure to feet, calves and legs, and yogic asanas and pranayama were given along with air and sun bath. By the end of 8 days, grade of varicose veins was decreased to CEAP-C1.

References:-

1. Evans, C. J., Fowkes, F. G., Ruckley, C. V. & Lee, A. J. Prevalence of varicose veins and chronic venous insufficiency in men and women in the general population: Edinburgh Vein Study. *J. Epidemiol. Community Heal.* **53**, 149–153 (1999).
2. Liu, P. *et al.* Intravenous Catheter-Guided Laser Ablation: A Novel Alternative for Branch Varicose Veins. *Int. Surg.* **96**, 331–336 (2011).
3. Lin, F., Zhang, S., Sun, Y., Ren, S. & Liu, P. The Management of Varicose Veins. *Int. Surg.* **100**, 185–189 (2015).
4. Biemans, A. A. M. *et al.* Comparing endovenous laser ablation, foam sclerotherapy, and conventional surgery for great saphenous varicose veins. *J. Vasc. Surg.* **58**, 727-734.e1 (2013).
5. Zegarra, T. I. & Tadi, P. *CEAP Classification Of Venous Disorders. StatPearls* (2021).
6. Newman, C. W., Jacobson, G. P. & Spitzer, J. B. Development of the Tinnitus Handicap Inventory. *Arch. Otolaryngol. - Head Neck Surg.* **122**, 143–148 (1996).
7. Spitzer, R. L., Kroenke, K., Williams, J. B. W. & Löwe, B. A Brief Measure for Assessing Generalized Anxiety Disorder. *Arch. Intern. Med.* **166**, 1092 (2006).
8. Mutlu, B. *et al.* The Reliability and Validity of “Dokuz Eylül University Meniere’s Disease Disability Scale”. *J. Int. Adv. Otol.* **14**, 304–311 (2018).
9. Romani, A. M. P. Magnesium in health and disease. *Met. Ions Life Sci.* **13**, 49–79 (2013).

10. ISE, N., KATSUURA, T., KIKUCHI, Y. & MIWA, E. Effect of far-infrared radiation on forearm skin blood flow. *Ann. Physiol. Anthropol.***6**, 31–32 (1987).
11. Kihara, T. *et al.* Repeated sauna treatment improves vascular endothelial and cardiac function in patients with chronic heart failure. *J. Am. Coll. Cardiol.***39**, 754–759 (2002).
12. Su, L.-H., Wu, K.-D., Lee, L.-S., Wang, H. & Liu, C.-F. Effects of Far Infrared Acupoint Stimulation on Autonomic Activity and Quality of Life in Hemodialysis Patients. *Am. J. Chin. Med.***37**, 215–226 (2009).
13. Kelechi, T. J., Mueller, M., Zapka, J. G. & King, D. E. The effect of a cryotherapy gel wrap on the microcirculation of skin affected by chronic venous disorders. *J. Adv. Nurs.***67**, 2337–2349 (2011).