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Role of Jalaukavacharana as Emergency Treatment of Herpes Zoster (Agni Visarap) – A Case Report

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ABSTRACT:-
Herpes zoster is an acute viral condition marked by painful skin eruptions and fluid-filled blisters that typically affect a specific region and last for about 10 to 12 days. It results from the reactivation of the Varicella zoster virus (VZV) within the host. Contributing factors include advancing age, weakened immunity, and the use of immunosuppressive medications such as tumor necrosis factor inhibitors. Conventional medical treatment primarily offers temporary relief from pain and has limited effect on reducing the burning sensation. Due to compromised immunity, complications like postherpetic neuralgia may develop. The clinical features of herpes zoster closely resemble those of Agni Visarpa described in Ayurveda, which is characterized by its rapid progression. According to AcharyaCharaka, Raktamokshana (bloodletting), particularly in the form of Jalaukavacharana (leech therapy), is indicated when Pitta dosha is predominant. This case report presents a patient diagnosed with herpes zoster who opted for Ayurvedic management. As an urgent intervention, the patient was advised and agreed to undergoJalaukavacharana, which was performed in two sessions, followed by internal Ayurvedic medicines (shaman chikitsa) to ensure complete recovery.

Keywords: Agni Visarpa, Herpes zoster, Jalaukavacharana, Raktamokshana, Shaman Chikitsa

I. INTRODUCTION :-

Herpes zoster" or “Shingles" disease caused by Varicella-zoster virus which affects the particular dermatome1. The vesicular eruptions are seen along the course of the nerve which may involve 1 or 2 continuous nerve segments. Hence, lesions are arranged in unilateral segmental distribution either along the trunk or along extremity proceeding to neuralgic pain [2] . Vesicles become purulent, crusts which remain for 2 to 3 weeks. Fever may be present along with increased ESR.(3) Risk factors for Herpes zoster include old age, poor immune system, and patients receiving biologic agents (tumour necrosis factor inhibitors). As a result of very low immunity chances of further complications like post herpetic neuralgia are there. Other complications include secondary infection, motor nerve palsy, encephalitis and dissemination in immunocompromised patients1.Since the cause of disease is clear the diagnosis is made on the basis of signs and symptoms present in the patient. Although the administration of best antiviral drugs or steroids or NSAIDS does temporary suppression of pain, not much relief in burning sensation. In old age patient post herpetic neuralgia is common and patient has to take analgesics lifelong. Herpes is an acute condition and the goal of Ayurvedic treatment is to provide immediate relief to the patient in symptoms like burning sensation and pain in the lesions and to prevent further complications like secondary infections and post herpetic neuralgia.

II. CASE PRESENTATION :-

A female subject of 30 years banker coming from Hindu community and presently living in yavatmal, maharashtra, was suffering from Herpes zoster since 3 days. She visited the OPD of L.K Ayurved College Shalyatantra Department, with chief complains of eruptions on chest area, shoulder and scapular region on the right side along with severe burning sensation, pain and mild fever. As an emergency treatment, immediately patient was treated with Jalaukavacharana was done along with that Shaman medicine was given to the patient

Past History
HTN-NIL
DM-NIL
ASTHMA -NIL

On Examination :-
Patient’s Prakruti - Vata-Pittaj,
Wt. 65kg,
Ht. 5ft 3inches.
Temperature- 980F

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Pulse- 80 /min
Respiration Rate-20/min
B.P- 120/90 mm of Hg
Appetite- decreased,
Sleep- Disturbed,
Micturation 5-6time/day and 1-2 time/night,
Bowel Habit 1time/day.
Lesion examination- Pain ++++,
Burning sensation ++++,
Pus++++,
Warmness ++++.

Treatment Protocol
The treatment was carried for 15 days.

Table 1: ShodhanaChikitsa

Karma	Vidhi	Kala	Duration
Rakthmokshan	Jalokavcharan with 2 Jalokas.	Afternoon	1st day and 8th day after came to hospital.

Table 2: ShamanaChikitsa

Shaman Drug	Dose	Kala	Duration
Sanshamni Vati	500 mg	Morning, afternoon and evening.	Everyday
Tab. Antivir	2 tabs	Morning & evening	Everyday
Panchvalkal[4] Kwath for Prakshalanarth	250 ml approx.	Morning & evening	Everyday
Shatdhaut[5] Ghrita for L.A	As per requirement	Frequently	Every day

Pathya-Apathya
During this period, She was advised for LaghuSupachyaAhar (Only on boiled Mudg,

MudgYusha, Rice, Khakhara, Shyamak, etc. Patient was advised to avoid Dadhi, Kshira, Guda and Divaswapn, Pitta VardhakAharaVihara

OBSERVATION

Table 3: Showing improvement in signs and symptoms of the patient

Signs and Symptoms	Before treatment	After 1st sitting of Jaloka	After 2nd sitting of Jaloka	Aftercompletion of entire treatment

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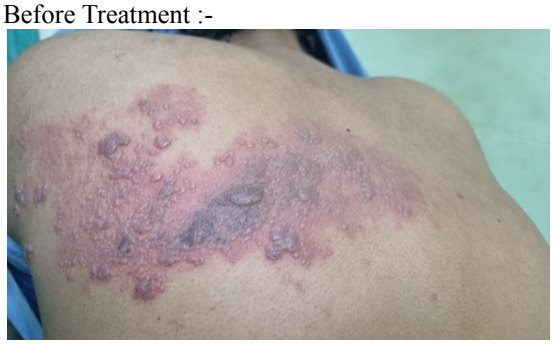
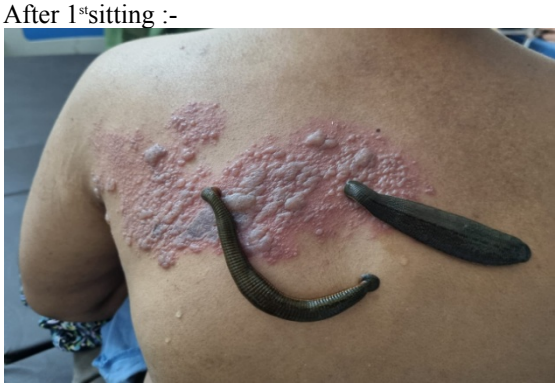
Pain	++++	+	-	-
Burning sensation	++++	+	-	-

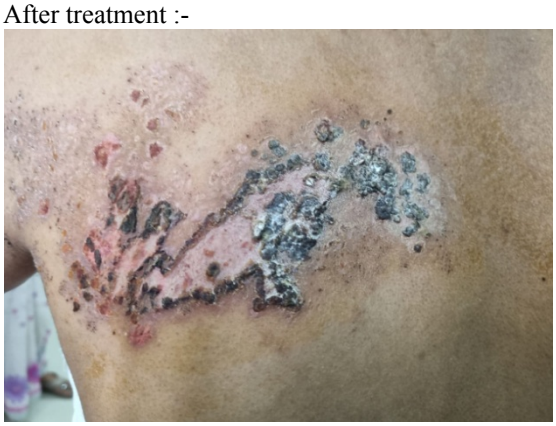
Before Treatment :-



After 1st sitting :-



After treatment :-



III. DISCUSSION

Herpes Zoster is very much similar with Agni Visarp(4) (AcharyaCharak). Severe pain and burning sensation are found in Agni Visarp as well as in Herpes Zoster and the pattern of spreading of disease in the body is similar with Kaksha. AcharyaSushrut has mentioned treatment of Kaksha similar to that of Visarp(5) (Visarpvat). The line of treatment mentioned by AcharyaCharak in Visarp is Raktmokshan and Virechan(6) especially when Pitta dosha is aggravated. All treatments described under Visarpchikitsa are on one side Raktmokshan(7) on one side. AcharyaSushruta has recommended Raktamokshana by Jalauka especially for king, rich people, children, old aged, coward, weak, females and SukumarPrakriti. So treatment was planned considering all these things, especially Raktadushti and Pitta dushti, Rakthmokshan was preferred as first Line of Treatment. If Rakthmokshan is not done in acute condition of Visarp it leads to the formation of Kleda(8) in Twak, Mansa and Snayu. As patient came to our dispensary considering the emergency of disease Raktmokshana (sanshodhan) with Jaloka was done to remove the vitiated blood, immediately after that patient had relief in pain and burning sensation. Jaloka (Leeches) can be applied on the skin easily, it sucks impure blood at superficial level mostly from the veins. According to modern(9) point of view Hirudin and Calin, enzymes present in its saliva work as anticoagulant and helps in sucking of vitiated blood easily. Besides this the salivary glands of leech also produce other active substances which have antihistaminic, anaesthetic and antibiotic effect. Also it has counter irritant effect on the lesions, which create new cellular division, which takes place removing dead cell layer and results in reduction of local swelling and improvement of an endocellular exchange. Because of this effect of leach therapy in Herpes zoster improvement in signs and symptoms like pain, burning sensation, redness and vesicles was seen. Aviapatikarchurana main content is Trivritta(12). As given by AcharyaCharka in Agrya(13) dravayaTrivritta is Sukhvirechak drug and the entire combination of drugs of in AvipattikarChurna causes rechana of remaining pitta dosha that ultimately led to the Shaman of Daha. Tablet Neroplus mainly contains drugs like Shankhpushpi (Convolvulus

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pluricaulisChoisy), Brahmi (bacopamonnieri Linn.), Jatamansi (Nordostachysjatamansi DC.) Mulethi, Ashwagandha (WithaniasomniferaDunal.), Ustukhudus (Lavandulastoechas) and Twak (CinnamomumzeylanicumBlume.) all these drugs have sedative effect and also have Rasayan(14) properties as mentioned by Acharya Charka. It was given for the improvement of sleep. As mentioned by AcharyaBhavamishra local application of Hanspadikalka(15) (AdiantumlunulatumBuurm.) helps in pacifying the burning sensation caused by vitiated Pitta Dosha.

IV. CONCLUSION

In conclusion The middle-aged patient arrived for treatment without taking any antibiotics or painkillers. Jalaukavcharan was administered as an emergency treatment, and all symptoms and indicators showed a noticeable improvement. Within two weeks, Herpes Zoster lesions were reported to be fully cured. The patient did not report any post-herpatic neuralgia during follow-up. Jalauka can therefore be regarded as an emergency treatment for Herpes Zoster, particularly for the reduction of discomfort and burning feeling. In addition, shamanic medicine is prescribed to pacify remaining vitiated doshas.

REFERENCES

[1]. Kamath S, API Textbook of Medicine, vol 1, Edition 11, The Association of Physicians of India;2 019, p-304.
[2]. Khopkar U, Skin Diseases and Sexually Transmitted Infections, CBC Publishers and Distributers Pvt. Ltd, seventh edition ;2019, P- 92
[3]. API Textbook of Medicine by Y P Munjal Volume 1 10th Edition, page 670.
[4]. Agnivesh ,CharakSamhita, Vidyotini Hindi Commentary by P. KashinathPandey and Dr.GorakhnathChaturvediVaransi: Chaukhambha Sanskrit Bhavan; Reprint 2008,volume-2, Chikitsasthan, 21/36, p. 594
[5]. Sushrut, SushrutSamhita, Ayurved TattvaSandipika Hindi commentary, by AmbikaDuttaShastri: Chaukhamba Sanskrit Sansthan Varanasi; Reprint 2009, Chikitsasthan 20 ver 8 p.93.
[6]. Agnivesh ,CharakSamhita, Vidyotini Hindi Commentary by P. KashinathPandey and Dr.GorakhnathChaturvediVaransi:Chaukhambha Sanskrit Bhavan; Reprint 2008,volume-2, Chikitsasthan, 21/45, p. 599
[7]. Sushrut, SushrutSamhita, Ayurved TattvaSandipika Hindi commentary, by AmbikaDuttaShastri: Chaukhamba Sanskrit Sansthan Varanasi; Reprint 2009,Sutrasthana 13 ver 3 p.43
[8]. Agnivesh ,CharakSamhita, Vidyotini Hindi Commentary by P. KashinathPandey and Dr.GorakhnathChaturvediVaransi:Chaukhambha Sanskrit Bhavan; Reprint 2008,volume-2, Chikitsasthan, 21/68-70, p. 602
[9]. Dr, VasantPatil, Principles and Practice of Panchakarma, Chaukhambha Publication, New Delhi, Reprint , 2014, p.581