Effectiveness of Leech Therapy in *Gambhira Vata-Rakta* (Acute Gout): A Pilot Study

Bloodletting is a mainstay of therapy as per Susruta. Leech therapy has been indicated as means of bloodletting for both types of where pain, burning and redness found as per . Medical science has enormous leaps in terms of diagnosis and treatment yet there is renewed interest in leech therapy among modern as well as traditional medicine practitioners. Most of studies of leech therapy are found for plastic surgery and pain reduction in osteo- arthritis. US, FDA also approves leech therapy as tool of skin graft. Therefore, we conducted a non randomized controlled pilot study in between June 2011 to Sep 2011 to assess the effcacy of leech therapy in as diagnosed as acute Gout. Twelve patients (eight male and four female) with a mean age of 47 (9) years were treated with two - four leeches for seven days with a follow up to four weeks. Another 10 patents those were not willing for leech therapy was treated with tropical Diclofenac sodium gel for 7 days as control. The mean length of blood socking is 32 (5) minute. The mean quantity of blood sucked by Individual leech per suck is 6 (2) ml. In comparison with control, leech application led to rapid relief of pain and swelling immediate after the detachment of leech. Most signifcant clinical improvement was noted after 14 days and slightly reduction of serum uric acid were also noted after three weeks of treatment. 90% Patient described the initial leech therapy as a painless and two patients had mild to moderate itching but no local infection was noted in treated group. Our study was limited to small sample size but it had remarkable treatment effect. Larger randomized control trial should be undertaken to study the safety and effcacy of leech therapy in acute gout.

: L ; B ; A ; A ; G ; P .

Rakamokshyana (B)

A

L G , R A

. S (1000 BC) C (600-200 BC) .

I

(80-40 BC) A

_1 .

L A -S L _2 .

L .

L

P A

_3 . L

1884 J B H ,

B

_4 .

L ,

R 1990' _5,6 . I U S .

_7,8 . S I

O . . , H , M R

U R C _9 . R

_10 .

G 12.6%

. M

G

_11 . C NSAID

_12 . L

Vata-rakta

Charaka chikitsa _13,14 . S

C B G C

_15 . S

_16 .

S

B

C

J 2011 . S 2011 .

Gambhira Vatarakta G

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W 22 OPD I A 2-4 18-60 A C R 1980 _17 . L (*Hirudo medicinalis*) _18 . _19 . E I CBC, 1 &

V (0-7) (VAS) 0= & 10= D0, 7 28 . (0 3-), (0 3-) (0 = ; 4 =) (0 = ; 3 =), (0 = ; 3 =), ( ) 0, 7 28 . D0, D1, D4, D8, D14, D21 D28.

T 22 14 (64%) 16 (73%) A (T 1). A 10 (83.33%) 7 (70%) R P (T 2).

W W . 90% P 32(5) I 6(2) B 2 N

P (VAS) 28 , D (T 3). L (T 4,5). (T 6).

A 28 O _20,21 .

_22,23 . L G O L

No of patients	12	10	22
Percentage of Male	8(66.66%)	6(60%)	14(64%)
Mean age in Years	47(9)	50(10)	
Percentage of Educated person (above matric)	9(75%)	7(70%)	16(73%)
Duration of diseases	8.1(6.2)	7.3(4.5)	7.9(4.9)
Monoarticular joint pain	5	4	09
Polyarticular	7	6	13
Metatarsophalangeal (foot)	3	3	6
Ankle	2	2	4
Knee	1	1	2
Great toe proximal interphalangeal joint	6	4	10
Others	0	0	0

Patient's demographic variables of studied 22 patients.

Pain in Joint	12	10
Swelling of the joints	12	10
Joints of limited mobility	12	12
Redness of Joint	11	10
Elevated uric acid	10	07
Presence of Trophy	03	02

Clinical variables of studied 22 patients.Clinic/9d(7es-/9d(7es-/9d(

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