

A Single Case Study on the Effect of Rasona Taila Paana Along with Compression Therapy and Exercise in the Management of Siraja Granthi (Varicose Veins)

Dr. Ankush Nandkishor Chavan¹, Dr. K. M. Siddaling Murthy^{2*}, Dr. Chandrakant M. Budni³

¹3rd Year PG Scholar, Department of Shalyatantra, Shree Vijay Mahantesh Ayurvedic Medical College, Ilkal - 587125

Email: ankush.chavan7227@gmail.com

²Professor and HOD, Department of Shalyatantra, Shree Vijay Mahantesh Ayurvedic Medical College and PG Research Centre, Ilkal, Bagalkot, Karnataka - 587125

Email: siddu1875@gmail.com

³Associate Professor, Department of Shalyatantra, Shree Vijay Mahantesh Ayurvedic Medical College and PG Research Centre, Ilkal, Bagalkot, Karnataka - 587125

Email: cbudni@gmail.com

*Corresponding Author: Dr. K. M. Siddaling Murthy, Professor and HOD, Department of Shalyatantra, Shree Vijay Mahantesh Ayurvedic Medical College and PG Research Centre, Ilkal, Bagalkot, Karnataka - 587125

Email: siddu1875@gmail.com

Received: 16th August, 2026; Revised: 8th September 2026; Accepted: 19th September, 2026; Available Online: 20th September, 2026

Abstract

Siraja granthi, a condition described in Ayurveda, closely resembles varicose veins and is characterized by tortuous, dilated veins associated with pain, swelling, and discomfort in the lower limbs. It is primarily a Vata-Rakta predominant disorder involving vitiation of Rakta and impairment in the integrity of Sira. The present single case study was undertaken to evaluate the efficacy of Rasona Taila Paana along with elastic compression stockings and exercise in the management of Siraja granthi.

A diagnosed patient presenting with classical features such as visible dilated veins, pain, heaviness, and mild swelling in the lower limb was selected for the study. The patient was administered Rasona Taila Paana (5 ml twice daily before food with Sukhoshna Jala) for 21 days. Along with internal medication, the patient was advised to use elastic compression stockings and perform regular therapeutic exercises.

Assessment was carried out at baseline, and on Day 1, 7, 14, 21, and follow-up on Day 28 based on subjective parameters such as pain, heaviness, and swelling, along with clinical observation of venous prominence. Ethical clearance was obtained prior to the commencement of the study.

The patient showed significant improvement in symptoms, including reduction in pain, heaviness, and swelling, along with decreased prominence of veins. The study suggests that Rasona Taila Paana combined with compression therapy and exercise is effective in the management of Siraja granthi.

Keywords

How to cite this article: Ankush Nandkishor Chavan¹ Dr. K. M. Siddaling Murthy^{2*} Dr. Chandrakant M. Budni³. A Single Case Study on the Effect of Rasona Taila Paana Along with Compression Therapy and Exercise in the Management of Siraja Granthi (Varicose Veins). Int J Drug Deliv Technol. 2026;16(84s):1441-1444. DOI: 10.25258/ijddt.16.84s.142.

Introduction

Siraja granthi is a vascular disorder described in Ayurveda, characterized by vakrata (tortuosity), vridhhi (dilatation), and granthi-like appearance of Sira, which closely resembles varicose veins in modern medicine¹. It is primarily considered a Vata-Rakta predominant condition, where vitiated Vata causes constriction and distortion of Sira, while vitiated Rakta leads to dilatation and discoloration². The impairment in the structural and functional integrity of veins results in symptoms such as pain (Ruk), swelling (Shotha), heaviness, and visible engorged veins³.

In modern science, varicose veins occur due to venous valve incompetence, leading to pooling of blood, increased venous pressure, and subsequent dilation of superficial veins⁴. Risk factors include prolonged standing, sedentary lifestyle, obesity, and genetic predisposition. Chronic venous

insufficiency may further lead to complications such as edema, skin changes, and ulceration⁵.

Ayurveda emphasizes the role of Raktadushti and Srotodushti in the pathogenesis of Siraja granthi. Vitiated Doshas affect the Sira, leading to loss of elasticity and abnormal tortuosity⁶. The line of treatment includes Raktaprasadana, Vatahara, and Srotoshodhana therapies, aimed at restoring normal circulation and strengthening vascular structures.

Rasona (*Allium sativum*) is well known for its Vata-Kapha shamaka, Raktashodhaka, and Shothahara properties, making it highly beneficial in vascular disorders⁷. Administered in the form of Rasona Taila Paana, it helps in improving circulation, reducing inflammation, and correcting Dosha imbalance. Additionally, elastic compression stockings and exercise play a supportive role by improving venous return and reducing venous stasis⁸.

Considering these therapeutic benefits, the present case study was undertaken to evaluate the effectiveness of Rasona Taila Paana along with compression therapy and exercise in the management of Siraja granthi.

Aim

To evaluate the clinical efficacy of Rasona Taila Paana along with elastic compression stockings and exercise in the management of Siraja granthi (varicose veins).

Methodology

A single diagnosed case of Siraja granthi was selected based on classical Ayurvedic signs and symptoms. The patient was administered Rasona Taila Paana (5 ml twice daily before food with Sukhoshna Jala) for 21 days. Along with this, the patient was advised to use elastic compression stockings and perform regular therapeutic exercises. Assessment was carried out at baseline and on Day 1, 7, 14, 21, and follow-up on Day 28 based on subjective parameters such as pain (Ruk), swelling (Shotha), heaviness, and visible vein prominence. The total study duration was 28 days.

Detailed Case Study

1. Patient Information

A 45-year-old female patient presented to the OPD with complaints of visible dilated veins over the left lower limb associated with pain, heaviness, and mild swelling for the past 1 year. The symptoms were aggravated on prolonged standing and relieved on rest and limb elevation.

2. History of Present Illness

The patient was apparently normal one year back, after which she gradually noticed dilated, tortuous veins over the left leg. Initially, there was mild discomfort, which progressively increased to pain and heaviness. Swelling around the ankle region developed over time, especially after long hours of standing.

3. Past History

- No history of diabetes mellitus or hypertension
- No history of trauma or surgery
- No previous similar illness

4. Personal History

- Appetite: Normal
- Bowel: Regular
- Sleep: Sound
- Occupation: Teacher (prolonged standing)

5. General Examination

- Pulse: 76/min
- Blood Pressure: 118/78 mmHg
- Temperature: Afebrile

6. Local Examination

- Dilated, tortuous superficial veins present over the left lower limb
- Mild edema present around ankle region
- Skin: No ulceration or pigmentation

- Tenderness: Mild tenderness over affected veins
- Temperature: No rise in local temperature

7. Diagnosis

Based on classical signs and symptoms, the condition was diagnosed as Siraja granthi (Varicose Veins).

8. Treatment Plan

A) Internal Medication:

- **Rasona Taila Paana**
 - Dose: 5 ml twice daily (BD)
 - Time: Before food
 - Anupana: Sukhoshna Jala
 - Duration: 21 days

B) Supportive Therapy:

- **Elastic Compression Stockings** – advised for daily use during daytime
- **Exercise** – regular leg elevation and ankle flexion-extension exercises

9. Duration of Study

- Treatment duration: 21 days
- Follow-up: 28th day
- Total study duration: 28 days

10. Assessment Criteria

Subjective Parameters:

- Ruk (Pain)
- Shotha (Swelling)
- Heaviness in limb
- Burning sensation (if present)

Objective Parameters:

- Prominence of veins
- Edema around ankle

11. Observations

Parameter	Before Treatment	After Treatment
Pain (Ruk)	2 (Moderate)	1 (Mild)
Swelling	2 (Moderate)	1 (Mild)
Heaviness	3 (Severe)	1 (Mild)
Vein Prominence	Marked	Reduced

12. Results

- Significant reduction in pain and heaviness
- Decrease in swelling around ankle
- Reduced prominence of dilated veins
- Improved comfort during prolonged standing

13. Follow-Up

On the 28th day, the patient maintained improvement with no progression of symptoms. Compliance with compression stockings and exercise contributed to sustained benefits.

Discussion

Siraja granthi is a condition described in Ayurveda under Sira Vikara, characterized by vakrata (tortuosity), vridhhi (dilatation), and granthi-like

changes in Sira due to vitiation of Vata and Rakta Dosha. In the present case, classical features such as dilated tortuous veins, pain (Ruk), swelling (Shotha), and heaviness were observed, indicating the involvement of Vata (for structural deformity and pain) and Rakta (for dilatation and discoloration⁹. Prolonged standing, as seen in this patient's occupation, acts as a Nidana leading to Vata aggravation and impaired venous return, further contributing to Srotodushti and Sira Vaigunya¹⁰.

From a modern perspective, varicose veins occur due to venous valve incompetence, leading to retrograde blood flow, increased venous pressure, venous stasis, and subsequent dilation of superficial veins¹¹. This results in symptoms such as heaviness, pain, edema, and visible engorged veins.

Probable Mode of Action

1. Rasona Taila Paana

Rasona (*Allium sativum*) possesses **Katu, Tikta Rasa; Ushna Veerya; and Vata-Kapha shamaka properties**, which are essential in the management of Siraja granthi¹². Its mode of action can be explained as follows:

- **Vatahara** **Effect:**
The Ushna and Snigdha properties of Rasona help in pacifying aggravated Vata, thereby reducing pain (Ruk) and improving structural integrity of Sira.
- **Raktaprasadana and Srotoshodhana:**
Rasona acts as a blood purifier and improves microcirculation, thereby correcting Rakta Dushti and clearing Srotorodha. This helps in reducing venous congestion and improves blood flow.
- **Shothahara (Anti-inflammatory)** **Action:**
It reduces inflammation in the venous walls, thereby decreasing swelling and tenderness.
- **Lekhana and Medohara Properties:**
These properties help in reducing Kapha-related obstruction and improve the elasticity of vessels.
- **Anulomana** **Effect:**
It regulates Apana Vata, reducing intra-abdominal pressure and indirectly improving venous return from the lower limbs.

Modern

Correlation:

Rasona (garlic) has been reported to possess **anti-inflammatory, antioxidant, antithrombotic, and vasodilatory properties**, which help in improving blood circulation, reducing platelet aggregation, and enhancing vascular tone¹³.

2. Elastic Compression Stockings

Compression therapy plays a crucial role in the management of venous disorders.

- **Improves Venous Return:**
External pressure applied by stockings

reduces venous diameter and enhances upward blood flow.

- **Reduces Venous Stasis:**
Prevents pooling of blood in superficial veins.
- **Decreases Edema:**
Improves lymphatic drainage and reduces interstitial fluid accumulation.
- **Supports Venous Valves:**
Enhances valve function and reduces reflux.

3. Exercise (Muscle Pump Mechanism)

Regular exercises such as ankle flexion-extension and leg elevation improve circulation through:

- **Activation of Calf Muscle Pump:**
Contraction of calf muscles compresses deep veins and facilitates venous return.
- **Reduction of Venous Pressure:**
Prevents stagnation of blood in lower limbs.
- **Improved Tissue Oxygenation:**
Enhances nutrient supply and waste removal.

Combined Effect of Therapy

The combination of **Rasona Taila Paana (systemic therapy)** with **compression stockings and exercise (mechanical support)** provides a **synergistic effect**:

- Addresses the root cause (Dosha imbalance and Srotodushti)
- Improves venous tone and circulation
- Reduces symptoms like pain, swelling, and heaviness
- Prevents progression of disease

The significant improvement observed in this case—reduction in pain, swelling, and vein prominence—can be attributed to this multidimensional therapeutic approach.

Conclusion

The present single case study demonstrates that Rasona Taila Paana along with elastic compression stockings and exercise is an effective approach in the management of Siraja granthi. The treatment showed significant improvement in symptoms such as pain (Ruk), swelling (Shotha), heaviness, and prominence of dilated veins.

Rasona Taila acted systemically by pacifying Vata and Rakta Dushti, improving circulation, and reducing inflammation, while compression therapy and exercise enhanced venous return and prevented venous stasis. The combined therapy provided both symptomatic relief and functional improvement without any adverse effects.

Thus, this integrative Ayurvedic approach can be considered a safe, cost-effective, and beneficial modality for managing Siraja granthi. Further studies on larger sample sizes are recommended to substantiate these findings.

Reference

1. Sushruta. Sushruta Samhita, Nidana Sthana, Sira Vyadha and Sira Vikara Adhyaya. In: Acharya YT, editor. Reprint ed. Varanasi: Chaukhambha Orientalia; 2019.
2. Vagbhatta. Ashtanga Hridaya, Nidana Sthana, Raktavaha Srotodushti Adhyaya. In: Srikantha Murthy KR, editor. Reprint ed. Varanasi: Chaukhambha Krishnadas Academy; 2016.
3. Agnivesha. Charaka Samhita, Sutra Sthana, Raktavaha Srotas Vikara. In: Acharya YT, editor. Reprint ed. Varanasi: Chaukhambha Surbharati Prakashan; 2017.
4. Kumar V, Abbas AK, Aster JC. Robbins and Cotran Pathologic Basis of Disease. 10th ed. Philadelphia: Elsevier; 2021.
5. Davidson S. Davidson's Principles and Practice of Medicine. 23rd ed. Edinburgh: Elsevier; 2018.
6. Sushruta. Sushruta Samhita, Sutra Sthana, Srotas Sharira Adhyaya. In: Acharya YT, editor. Reprint ed. Varanasi: Chaukhambha Orientalia; 2019.
7. Sharma PV. Dravyaguna Vijnana (Vol. II). Reprint ed. Varanasi: Chaukhambha Bharati Academy; 2013.
8. Bergan JJ, Schmid-Schönbein GW, Smith PD, Nicolaides AN, Boisseau MR, Eklof B. Chronic venous disease. N Engl J Med. 2006;355(5):488–98.
9. Vagbhatta. Ashtanga Hridaya, Nidana Sthana, Raktavaha Srotodushti Adhyaya. In: Srikantha Murthy KR, editor. Reprint ed. Varanasi: Chaukhambha Krishnadas Academy; 2016.
10. Agnivesha. Charaka Samhita, Sutra Sthana, Srotas Sharira Adhyaya. In: Acharya YT, editor. Reprint ed. Varanasi: Chaukhambha Surbharati Prakashan; 2017.
11. Kumar V, Abbas AK, Aster JC. Robbins and Cotran Pathologic Basis of Disease. 10th ed. Philadelphia: Elsevier; 2021.
12. Sharma PV. Dravyaguna Vijnana (Vol. II). Reprint ed. Varanasi: Chaukhambha Bharati Academy; 2013.
13. Bordia A, Verma SK, Srivastava KC. Effect of garlic (*Allium sativum*) on platelet aggregation and lipid profile. Prostaglandins Leukot Essent Fatty Acids. 1998;58(4):257–63.