



### Case Report

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## Excision of *Medoja Granthi* (Lipoma) at ring finger of hand a rare location - A case study

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### ABSTRACT

Lipoma is one kind of benign tumour as per modern surgery that resembles with the *Granthi* in general and *Medoja Granthi* in particular as per Ayurveda. The management of *Medoja Granthi* is the incision and total excision as mentioned by Charaka and Sushruta in the Ayurveda classic. In this case report a 67 years old female patient visited OPD of Shalya tantra with complaints of cystic swelling in ring finger of left hand. On the basis of clinical findings and X-ray report diagnosis was made as lipoma a rare location and excision was done under local anesthesia (2% lignocaine hydrochloride). After excision there was 3x1.5 cm encapsulated lipoma was noted. Hence this case highlighted that lipomas can occurs at rare place like fingers and need to be excision.

**Keywords:** Ganglion, Implantation dermoid cyst, Lipoma, *Medoja Granthi*.

### INTRODUCTION

Sushruta mentioned that due to vitiation of *Vata Dosha*, *Mamsa* and *Rakta Dhatu* gets vitiated which further vitiate *Meda* and *Kapha* leading to round and elevated growth in the body tissue is termed as *Granthi*. Six types of *Granthi* viz *Vataja*, *Pittaja*, *Kaphaja*, *Raktaj*, *Mamsaja*, and *Medoja* have been described in classic.<sup>[1]</sup> Acharya Charaka in *Shotha Chikitsa* mentioned that the *Ganthi* should be removed along with capsule which indicated the capsulated sac of *Granthi*.<sup>[2]</sup> The treatment of *Granthi* is also vividly mentioned by Sushruta where *Granthi* should be treated as *Shopha* in initial stage and later on some local application of medicament in *Vataja* type of *Granthi*. In *Pittaja* predominant *Ganthi* leech application and in *Kapha* predominant excision of *Granthi* (Su.chi18/12) while in *Medoja Granthi* that should be incised along with total excision (Su.chi18/18-19).<sup>[3]</sup> In addition *Granthi* is included in *Chadya* and *Bhadya* diseases indicated by Sushruta so the *Granthi* is a surgical disease and need to be excision.<sup>[4]</sup> Hence in view of Sushruta a great surgeon *Medoja Granthi* is *Meda* (Fat) predominant and the choice of treatment is total excision. Lipoma is one kind of benign tumour as per modern surgery that resembles with the *Ganthi* in general and *Medoja Granthi* in particular as per Ayurveda.

Lipomas are multilobular benign tumours of fat usually arising in the superficial subcutaneous tissues and mostly seen in neck, shoulder and back. Lipomas present as soft, fluctuant, painless, subcutaneous lumps measuring from 2 to 20 cm in diameter.<sup>[5]</sup> Lipomas are of mainly three types viz. encapsulated, diffuse and multiple. Most common variety is encapsulated lipoma in which overactive fat cell are arranged in lobules separated by fibrous septa and enclosed in a delicate capsule. The consistency of lipoma is soft but does not fluctuate.<sup>[6]</sup> Most lipomas are excised for cosmetic reasons. Usually an incision in the skin over the lump allows the lipoma to be enucleated. The cystic swelling can be differentiating with ganglion and implantation dermoid cyst. Ganglion is tense and cystic swelling containing gelatinous material which is mostly originates from capsule of joint and tendon sheath. Ganglion is mostly seen on dorsum of wrist, dorsum of foot and palm of hand.<sup>[7]</sup> Implantation dermoid cyst is traumatic cyst but not congenital and the origin is most likely to that of dermoid cyst. There is always sequel of trauma and commonly seen in the finger of hand from needle prick or a prick with a thorn.<sup>[8]</sup>

### CASE REPORT

A 67 years old female patient visited OPD of Shalya tantra with complaints of cystic swelling in ring finger of left hand. She described that the swelling was painless and found since last five years. Day by day it was increased in size and there was mild pain in finger so patient consulted to OPD Shalya Tantra of IPGT&RA Hospital Jamnagar. On local examination the cystic swelling at proximal part of ring finger of left hand with tense and fixed to the base (Figure-1). No fluctuation in swelling and on clinical findings it seems to be implantation dermoid cyst that is usually the cystic swelling at fingers. An implantation dermoid is a cystic

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lesion that develops following a puncture injury in which epithelial cells are implanted into the subcutaneous tissue. They are often found on the fingers. Excision is the treatment for these cysts.<sup>[9]</sup> But patient could not give any history of any injury and needle prick at the site of swelling. To know the extent and involvement of the bone X-ray left hand dorso-ventral view was taken. The X-ray findings were suggestive of no involvement of the bone and only soft tissue swelling was

observed. After confirmation of diagnosis as lipoma a rare location with clinical and radiologically it was planned to excision. For that routine blood investigations at baseline were carried out and found within normal limit [TLC-8900/cu mm, (DLC: N-60, L-32, E- 4, M-4), Hb%-12.1 gm%, ESR Westergreen-60 mm per hour, Platelet-257000/cu mm, FBS- 91 mg/dl, PPBS- 108 mg/dl, Serum Creatinine-0.8 mg/dl].



Figure 1: Lipoma at Ring finger



Figure 2: After excision of lipoma



Figure 3: Excised Lipoma (3x1.5cm)



Figure 4: Post operative 7<sup>th</sup> day

Prior excision, informed written consent was taken, xylocaine sensitivity test was done and inj. Tetanus toxoid 0.5 cc intramuscular was given. After infiltration of 2% lignocaine hydrochloride anesthesia vertical incision was taken and excision of lipoma was done under all aseptic precautions (Figure 2). Three skin stitches were taken with ethilon 3-0 (Non absorbable suture) to obliterate the created dead space and bandaged. The length of lipoma was approx 3cm and width 1.5cm (Figure 3). Tab Cefadroxyl 500mg two times for 5 days and Tab. diclofenac sodium two times for 3 days was prescribed. Tab. Triphala Guggulu 1g three times a day was prescribed for 7 days. Stitches were removed after seventh post operative day and found proper approximation of margins without complication (Figure 4). Patient did not report any post operative complication and drug reaction during course of treatment.

## CONCLUSION

Hence this case highlighted that the lipomas can occurs at rare place like fingers and need to be excision.

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