



REVIEWER'S REPORT

Manuscript No.: IJAR-56466

Title: MANAGEMENT OF DUSTHA VRUNA (NONHEALING WOUND) BY SUPER HEAL ZN-AYURVEDA MEDICINE.

Recommendation:

- Accept as it is
- Accept after minor revision.....
- Accept after major revision
- Do not accept (*Reasons below*)

Rating	Excel.	Good	Fair	Poor
Originality		✓		
Techn. Quality			✓	
Clarity		✓		
Significance		✓		

Reviewer Name: Dr. Amina

Reviewer's Comment for Publication.

The manuscript presents a case series evaluating the management of **Dushta Vrana (chronic non-healing wounds)** using an Ayurvedic therapeutic regimen including *Super Heal ZN medicated dressing, Triphala Kwatha irrigation, and internal herbal formulations*. The topic is relevant as chronic non-healing wounds, particularly diabetic ulcers, remain a significant clinical challenge worldwide. Integrative approaches based on traditional medical systems may offer complementary therapeutic options.

The study reports three cases of chronic lower-limb wounds that showed notable improvement over a 40-day treatment period. The authors have used the **Bates-Jensen Wound Assessment Tool (BWAT)** to objectively monitor wound healing, which strengthens the clinical evaluation. The reported reduction in BWAT scores and improvement in granulation tissue formation, epithelialization, and infection control suggest a promising therapeutic outcome. The manuscript also integrates classical Ayurvedic concepts such as **Shodhana and Ropana** in wound management.

However, certain aspects of the manuscript require minor revisions before publication. The language and formatting of the manuscript need improvement, as several sections contain grammatical inconsistencies and formatting issues (for example spacing errors and repeated headings). The introduction section includes both classical Ayurvedic references and modern medical background, but the structure could be improved for better readability. Additionally, the methodology section would benefit from clearer description of patient selection criteria, ethical considerations, and inclusion/exclusion parameters.

The statistical analysis presented for a small case series should also be interpreted cautiously. While descriptive statistics are acceptable, the use of inferential statistics such as a paired t-test and large effect size calculations may not be fully justified for a sample size of three cases. The authors are encouraged to clarify this section and emphasize that the findings are preliminary.

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Furthermore, figures and tables related to case images and healing progression should be properly labeled and formatted. The conclusion should clearly state that the findings are based on a limited case series and that larger controlled clinical studies are required to validate the efficacy of the treatment protocol.

Overall, the manuscript addresses a clinically relevant topic and provides preliminary evidence supporting the potential role of Ayurvedic wound management strategies. With minor revisions related to language, methodology clarity, and statistical interpretation, the manuscript may be suitable for publication.