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'Cloth ash' as an infra-orbital foreign body

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Case Report

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Abstract: Wound care has been given importance from the times of ancient India and still being practiced in some parts of the country. One such practice is to apply ash on wounds, with a belief that a wound would heal better. A case highlighting such a practice is presented.
Keywords: Wound, Wound Healing, India, Healing

INTRODUCTION

There are ample historic practices in rural Indian backyards for managing many medical ailments. One such practice is to apply ash on wounds, with a belief that a wound would heal better. Ancient Indian literature namely Shusruta Samhita documents coverage of a wound with ashes of a burnt cloth before it is bandaged [1]. In recent scientific literature there are few rare reports of using dung-cake ash, wood and charcoal ash to study its effect on wound healing [2, 3]. In spite these documented reports and historic literature, exact effect of such a treatment on skin wounds is not known.

CASE REPORT

A 40 year old female patient came to the out-patient department with a chief complaint of pain in the left infra-orbital region. Patient gave a history of a dog bite in that region 8 months back, pain in the left infra-orbital region was present for past 6 months. Patient was treated for the dog bite and the wound care was performed at the primary health care centre in the patient's village.

Fig-1: PA view skull radiograph

Fig-2: Debris of ash with local fibrosis

On examination a tender point was present 1 cm lateral to the medial canthus of the left eye and 0.5 cm below the palpable infraorbital margin. Provisionally, a diagnosis of a bony specule secondary to dog bite/ foreign body was given and patient was advised a screening radiograph (PA-Skull). PA-Skull did not show any anomaly (Fig-1). A surgical exploration of the left infraorbital region was planned to trim/excise the sharp bony margin/specule. On exploration, the tender spot showed blackish debris with local fibrosis in the region (Fig-2). On further questioning the patient, it was found that patient's relative had applied ash, obtained from burning a cloth on the wound after the dog bite to stop bleeding.

DISCUSSION

The wound was debribed, the local fibrosis with ash particles was removed and the wound was closed with 4-0 prolene sutures. Patient was advised antibiotic (amoxicillin) and an analgesic (Ibuprofen) for five days in the post-operative period. The wound healing was satisfactory with no residual tenderness in the left infraorbital region at second week follow-up visit.

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