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CASE REPORT



A CASE OF ACCIDENTALLY CRUSHED HAND: EFFECTIVENESS OF YOGA PRANA VIDYA (YPV) HEALING AS COMPLEMENTARY THERAPY IN SPEEDY RECOVERY

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ABSTRACT

Background: A 19-year-old male college student riding a bike met with a road accident and fell on the road when his right hand was run over by a truck and got crushed. Multiple surgeries were performed on his injured hand and Holistic YPV healing sessions were conducted as a complementary therapy for over 2 months to enable faster recovery physically, mentally, and emotionally.

Method: This study used a case study method going through the patient's medical records, YPV healer's records, and patient feedback.

Results: The intervention of YPV healing in the process of recovering from the severe accident injury was extremely helpful, with boosted mental health, physical improvement, and faster recovery. The energy received and the results of the healing as experienced by the patient were remarkable.

Conclusions: The results from this study suggest that YPV healing protocols as complementary therapy are beneficial for the treatment of crush injuries of the hand, resulting in faster recovery with better functional outcomes. Further research in similar cases is recommended.

KEYWORDS: Mutilating, Hand injuries, Mangled hand, Yoga Prana Vidya System ®, YPV®.

INTRODUCTION

The hand is an essential component of the human body in terms of function, structure, and psychology. It is the second most important organ in the human body, after the brain. Hands are essential for the maintenance of body image and identity, as well as for communication. Hand injuries typically occur in the distal area of the upper extremity, close to the crease of the wrist. These injuries are not usually life-threatening but can lead to serious disabilities with long-term consequences, as they are more likely to occur in the working-age population. The epidemiology of hand injuries varies from community to community, depending on the employment and industrial activity in the area [1].

Approximately 5-10% of patients in emergency departments of hospitals are reported with hand injuries. These injuries can occur from a variety of sources, such as domestic, vehicular, road, office, workshop, or even play or amusement. A study in India found that hand injuries are more common in adult males working in industries as compared to those hurt in Road Traffic Accidents (RTA) [2].

Severe hand injuries are a challenge to manage due to the complex nature of the injury and the various damaged structures. The management involves careful and focussed attention to the repair and reconstruction of individual parts of the hand including the bones, vessels, nerves, tendons, and skin cover. Dependable results can be achieved only by early aggressive management of damaged structures followed by regular physiotherapy for

restoration of the form and function of the mutilated hand [3]. The need for secondary procedures following a mutilating injury is high.

Postoperative care for this condition is as important as intraoperative care. Arm loading is very important to restore optimal joint mobility, reduce swelling, and prevent contractures. Elevating the arm is important to reduce swelling and helps reduce pain. In addition, maintaining optimal hydration requires adequate urine production. Regular follow-up of graft and valve healing is necessary to achieve consistent results. Early and preventive physical therapy is important to quickly restore hand function and range of motion. It helps reduce swelling and stiffness in the hand after injury [3].

This paper presents a patient's case of a mangled hand in a road accident, surgically operated on for restoration in which case the post-operative management was successfully handled using Yoga Prana Vidya healing protocols as a complementary therapy for pain management and fast recovery holistically in physical, mental, and emotional domains.

Name 1 Mr Jishau ID Not 1120121200 Date: 05.12.2020 Diagnosisc inn over noise cresh injury of right hand - degloving injury with composite timus time ever pairs, volument of themsh and dorson of hand. Availate of FDS of little finger, radial and sinar diagital nerves of thumb. Presenting Picture

FIGURE 1- Diagnosis report of crushed hand on 5.12.20

Medical diagnosis report stated (Fig 1) - Runover major crush injury of the right hand. Degloving injury with composite tissue loss over palm, Volar aspect of thumb, and dorsum of the hand. Avulsion of FDS of little finger, radial and ulnar digital nerves of thumb. Life-threatening injury, needing immediate medical attention.

CASE REPORT

The patient was a 19-year-old college student at the time of the road accident, an active sports person, who fell from his bike and his right hand got run over by a truck causing severe injuries to the right hand on 05 December 2020.

The healer who handled this case was an Associate Certified YPV Healer and YPV Level 1 Trainer.

Pre-YPV Condition

It was a major crush injury with degloving over the palmar and the dorsal surface of his hand (See Figure 1). There was severe loss of skin and soft tissues over the radial side of the palm, 1st web space, and dorsum of the hand. There was avulsion of radial and ulnar digital nerves of the thumb. There were abrasions over the proximal forearm and a blackish discoloration distal forearm patch. The x-ray taken at admission is in Figure 2.



FIGURE 2- X-ray image on 5.12.20

Surgical Treatment

In wound debridement, the nonviable tissues were excised. The degloved palmar and dorsal skin were removed. The radial and ulnar digital nerves of the thumb were at shaft of PPX level. 1.25mm axial K-wires were used to stabilize the comminuted base of 2nd and 3rd

metacarpal fractures and the 1st CMC joint stabilization. The raw area over the dorsum of the hand, 1st web space, volar aspect of the thumb, and palm required abdominal flap cover, so the flaps were marked over the right groin

and hypogastric region. The double flap procedure was done on 9-12-2020 and the hand was attached to the stomach.

Fig 3 shows the picture taken after debridement on 5 December 2020.

Fig 4 shows the picture post-secondary surgery on 19 December 2020.



FIGURE 3- Post-Debridement Picture

YPV Healing Support

The YPV healer was contacted by the patient's family members for continuous YPV energy healing support. Starting from 7 December 2020, Healing sessions were conducted by the healer every 6 hours. In addition, as advised, the patient joined the morning sadhana, afternoon sadhana, and live 10 a.m. group healing sessions daily. There was a substantial improvement in his both physical and mental stabilities as he received healings for the physical and psychological aspects, overcoming the crisis he had gone through.

After the flap was set, the medical team suggested surgeries for nerve, tendon, and bone replacement for further movement of fingers and the hand. But, with the miraculous healing support, these suggested surgeries suggested above were skipped, as the fingers and nerves started responding. Other needed surgeries were done. The intense physiotherapy sessions he went through were very painful, but again the healing supported him to bear the pain and move along with the physiotherapy procedures.



FIGURE 4- Post-Secondary Surgery

The following YPV Protocols were applied as complementary therapy.

- 1. YPV Psychotherapy
- 2. Regeneration & strengthening technique
- 3. Miraculous healing technique

Healing sessions were conducted daily every 6 hours, and healing continued till 06 February 2021.

During March 2021, the patient was taught the YPV level 1, 2 and 3 Healing courses so that he would be able to do self-healing.

RESULTS

Persistent and Continuous healing sessions helped the patient to get good sleep and it reduced pain to a great extent. He physically felt the pouring in of energy on him. It brought him confidence and hope for complete recovery. This therapeutic healing changed his attitude completely, and the patient found a positive transformation from within himself.

The doctors, physiotherapists, nurses, physician assistants, and co-patients observed that his injuries

healed faster than other similar patients in the hospital. His movements are normal and he can do all his work with his hands normally.

Follow up

Figure 5 Picture taken on 02 Feb 2021 after healing

Figures 6, and 7 show the condition at a follow-up of the patient after 2 years



FIGURE 5- Picture Taken On 02 February 2021



FIGURE 6- Picture Taken in June 2023

After experiencing the beneficial effects of the YPV healing sessions, he attended the YPV level 1, 2, and 3 healer training classes. He was regularly attending the miraculous YPV's Divine Group Healing session daily and doing Forgiveness Sadhana which helped him further in the recovery process.



FIGURE 7- Picture Taken in June 2023

Feedback from The Patient

"I was referred to the YPV healer and started receiving healing. I was suffering from pain and if I closed my eyes, I had different visuals of repeated accidents which elevated my fears. But from day 2 of healing, I started having a settled feeling of relief from pain and fears.

Being an active sportsperson, I was even more disheartened being in such as state.

Then again on 9.12.2020, I had surgery. Throughout this process, I was receiving healing sessions continuously and it reduced pain to a great extent and helped me get good sleep. I felt the energy pouring on me physically, with feelings of confidence and hope. I had the chanting device in his room which caused the spread of calmness enabling a smooth transition to a normal state of being after such a severe injury.

On 30.12.2020 I had surgery for delay of division of the hypogastic and groin flap. On 04.01.2021 I had another secondary surgery for division and inset of abdominal flap. I received healing during these complicated and painful surgeries. As a result, I experienced a miraculous recovery and a stable state of mind. The doctors in the hospital, physiotherapists, nurses, physician assistants, and fellow patients, all said I got healed faster than other similar patients. All my movements are normal, able to do all the work. I attended level 1, 2 and 3 healing classes personally coached by my healer. I was introduced to the miraculous divine group healing session, forgiveness prayer which helped me a lot."

DISCUSSION

In a study conducted by Desai et al. [2], on a sample of 200 patients presenting with hand injuries, in the OPD and CASUALTY of their hospital over a period of two years from January 2015 to December 2016, found that males (88%) are affected more as compared to females (12%). The age group affected was 25-35 years (36%) followed by 15-25 years (28%). The most common contributing factor was machine injury (52.5%) followed by road traffic accidents (25%) and assault (13.5%) respectively.

The management of crush injuries of the hand requires an early and accurate assessment of the injuries and a planned systematic approach that is tailored to each patient. Broadly, the primary emergency surgery should be aimed at removing all non-salvageable tissues and achieving skeletal stability and revascularization. Secondary surgery is performed to enhance the function of the hand [4].

Anderson et al. emphasize recognizing that these cases require multiple stages of operative reconstruction with direct and ongoing involvement of hand therapy and pending degree of injury, rehabilitation often lasting months to years [5]. The patient was a 38-year-old man who sustained a severe, work-related left-hand crushing injury. A multi-staged approach to salvage was employed in conjunction with aggressive hand therapy involvement for a successful, functional outcome. When followed up 5 years postinjury, the patient was found to be able to perform daily activities and returned to and maintained his full-time work position [5].

Neto et al. describe a case of hyperbaric oxygen therapy (HBOt) as an adjunct to treatment of a crush injury to the hand of a 34-year-old male who was involved in a motor vehicle accident. HBOt was used as an adjunct to surgical treatment resulting in early healing and rehabilitation, accelerating functional recovery [6]. They concluded that the experience and knowledge of the beneficial effects of hyperbaric oxygen therapy (HBOt) in the rescue of hypoxic tissue can contribute substantially not only to saving the limb but also to earlier healing. [6].

YPV healing therapies in our case were used as adjuncts to accelerate the healing process of the injured hand. The Rhythmic Breathing exercises together with complete breath and cleansing breath of the YPV system influence the lungs like that caused by HBOt, which enhances oxygen supply to tissues accelerating healing.

Published literature on YPV healing of over 95 research articles shows that the Integrated and holistic system of YPV has been very effective as a complementary and alternative medicine in the treatment of a range of illnesses, diseases, and conditions of men, women, and children. Evidence shows that the patients experienced improvements physically, emotionally, and mentally achieving composite health and wellness.

YPV system uses healing protocols that have been effective in successful pain management. Literature shows the use of YPV protocols in successful pain management, for example, in cases of cancer treatment with very painful side effects [7], [8] [9] [10]. Experience shows that more than 40% of cases reported in YPV healing camps were related to acute and chronic pain [11] [17] [12] [18] and the participants were successfully healed for pain reduction. It is observed that various types of skin problems were successfully healed as reported in previous studies such as [13], [14], and [15], using YPV healing protocols. Several studies revealed that specific YPV psychotherapy protocols combined with RYB and forgiveness sadhana helped patients to be relieved of anxiety, worry, and depression [16] [17] [18].

CONCLUSIONS

Management of a damaged hand is complex and requires a multidisciplinary team approach, expertise, and immediate intervention. The main determinants of the possible quality of function are the severity of nerve damage and the need for emergency surgery. Early and aggressive combined surgical treatment and rehabilitation have shown consistently good results in the treatment of deformed hands. The results from this study suggest that adjunctive YPV healing protocols are beneficial for the treatment of crush injuries of the hand, resulting in better functional outcomes and helping to avoid unnecessary amputations. Further research with similar cases is recommended.

Conflicts of Interest

None.

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Nil

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