Management of Parikartika (Acute Fissure in Ano) with Matra Basti- A Case Report

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ABSTRACT

Ayurveda describes fissure as Parikartika. This phrase refers to kartanvat vedena (a cutting type of pain) and burning nature. Additionally bleeding is some other essential signal of the disease. Parikartika is considered one of the most painful diseases. Now a days the incidence rate of this disease became more due to the irregular food habits and bowel habits as well as unproper modern life style changes. Due to this its recent occurrence in all types of age groups irrespective of gender.

Fissure in ano is very common yet troublesome condition. Due to life style, intake of low fibre diet, junk food, bakery food causes constipation and Recurrence nature of this disease makes the treatment challenging.

The symptoms can be correlated to Parikarthika according to Ayurveda, Many treatment modalities have been mentioned and practiced in management of Parikartika such as Deepana, Pachana, Vaatanulomana, Avagaaha, Basti Karma and local application of Madhura, Sheetha, Snigdha Dravyas, Taila Poorana, Lepa and Pichu-Dharana. In that Taila poorana (basti) works on the basis of cellular absorption and is easier method for adoption in parikartika disease. In this study described the effective management of acute fissure in ano which was managed matra basti. through mahanarayan taila and yastimadhu taila in equal quantity.

KEYWORDS: Parikartika, fissure in ano, Mahanarayan taila and Yasthimadhu taila, oral medication

1. INTRODUCTION

In Ayurvedicsamhita this Parikartika is described in different place. In charak Samhita it describe as complication of Virechana Vyapad (therapeutic purgation), In Susruta Samhita it describe as Bastivhyapad, Kashyapa samhita mention it's as Garbhini Vyapad (Disease occurs in Pregnancy) Fissure-in-ano has become most common and painful condition in ano-rectal disease. It is commonly seen in young age peoples and pregnant women. It is a very painful because of injury to somatic nerve supply to the anal region.

In modern science treatments includes Analgesics, Antibiotics, Laxatives and ointment and anal dilatation, sphincterotomy, fissurectomy. Surgeries of Fissurein-ano are expensive and require long stay in hospital. All these procedures having its own limitation and complications. In Ayurveda there are *How to cite this paper:* Dr. Laxman Marutirao Wandekar "Management of Parikartika (Acute Fissure in Ano) with

Matra Basti- A Case Report" Published in International Journal of Trend in Scientific Research and Development (ijtsrd), ISSN: 2456-6470, Volume-7 |



Issue-2, April 2023, pp.801-804, URL: www.ijtsrd.com/papers/ijtsrd55126.pdf

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so many preparations and best surgery procedure also. The condition fissure-in-ano, commonly encountered in ano-rectal practice has similar location, pathology and clinical features of parikartika like anal pain, burning sensation at anal region, constipation, stools streaked with blood etc.

Management approach selection in Parikarthika should to be selected on the basis of medicines and treatments which one helps for the healing of ulcer as well as to reduce the cutting and burning type of pain.

The management protocols for fissure-in-ano in Ayurvedic science are Snehavasthi (Oil enema therapy), Avagaha Swedana (medicated lukewarm water sitz bath) and Lepanam (medicated ointments). Parikartika can be considered as Sadya Vrana due to the presence of painful longitudinal ulcer. Hence drug preparations that have Vranaropana properties are more effective in the management of Parikartika. Mahanarayan taila and yastimadhu taila is the one which is has properties like Saruja Shamana (Pain relieving), Vranasodhana (Wound cleansing) and Vranaropana (Wound healing) properties. Due to this properties is the good medical option in the management of Parikarthika.

2. CASE REPORT

In this case study A 30 year old female patient having normal labour before 10 days back, and she came to our hospital with chief compliant of –

- A. cutting type of pain at anal fissure
- B. swelling at anal region.
- C. burning sensation at anal region,
- D. Malavashtmbha (Constipation)
- E. Saraktamalapravrutti (Stools streaked with blood)
- F. constipation.

Patient had above complaints since last 10 days. H/o –normal labour No H/o any major surgery.

3. PERSONAL HISTORY

Her Rajovruttanta was regular, menarche attained at 15 years of age and her married life of 3 years and she is known case of Hypothyrodiam and diabetes mellitus.

Investigation done

Hb -11 gm%

Blood group -A positive •

- BT -2 minutes 35 seconds -
- CT -4 minutes 30 seconds -
- RBS -92 mg/dl •
- HIV -Negative •
- HBsAG -Negative •

VDRL -Non reactive •Urine routine and microscopic examination report-normal

4. HISTORY OF PRESENT ILLNESS

Before 10days back the patient was normal but gradually developing symptoms like cutting type of pain and burning type of pain during the defecation and after the defecation, associated with bleeding per rectum and history of chronic constipation .patient came to our hospital for further management.

On Per rectal examination was done to analyze the proper diagnosis. On inspection, a cut longitudinal ulcer with indurated margin was identified at 12 clock position in the anterir upper part of anal verge. Hypertonicity of anal sphincter was analyzed with digital rectal examination using a little finger. there is no any external pile mass, nothing fistula opening. A. Nadi (pulse) = 90/min.

- B. Mala (stool) = Malavashmbha, Sarakta.
- C. Mutra (urine) = Prakrut.
- D. Jihwa (tounge) = Saam.
- E. Agni = Kshudhamandya.
- F. Shabda (speech) = prakrut (Normal).
- G. Sparsha (skin) = prakrut.
- H. Druka (eyes) = prakrut

5. MATERIALS AND METHOS Material used

- A. Basti taila (Mahanarayan Taila, Yastimadhu taila in equal quqntity 60ML)
- B. Sterile cotton pad
- C. Red rubber cather no.8
- D. Basti Syringe
- E. Lignocaine jelly.

6. Chikitsa (Method of Treatment procedure)

A single case study was conducted in the Shree Satya Ayurvedic medical college and Hospital- lodhipur rajput Moradabad uttar Pradesh.

Adivced to patient lie on left lateral position, all aseptic precaution done perianal part cleaned with betadine liquid, insert the red rubber catheter no.8 to anal canal and push the quqntity of matra 60ml of matra basti of Mahanarayan taila and Yastimadhutaila, after that locally applied jaytayadi ghrita on external part of anus and dresseing done bevelop with sterile cotton pad ,patient adviced to take rest for 15 mins, the duration of treatment is 8 days.

Selected patient were noted before, during and after the proposed treatment.

Total duration of treatment was 8 days.

7. Drug review of actions of mahanarayan taila and yastimadhu taila actions

1. Mahanarayan taila uses and benefits

Mahanarayana oil is a potent analgesic that spells a word of magic for pain. blessed with the characteristics of, anti-inflammatory, Increases blood Circulation Cures Pain excellent anti-inflammatory properties.

2. Yashtimadhu taila(mulethi) benefits & medicinal uses

Mulethi contains a Glabridin compound, which reduces colonic inflammation. It can speed up healing process in inflamed mucosa and prevent ulceration of mucosa of the intestines.

Mulethi contains Glycyrrhizin, which is sweet in taste and reduces inflammation of gastrointestinal tract. The main beneficial effects of Mulethi (Yashtimadhu) are on digestive system and It helps in relieving gastric symptoms such as heartburn, burning International Journal of Trend in Scientific Research and Development @ www.ijtsrd.com eISSN: 2456-6470

sensation in the abdomen, peptic and duodenal ulcer, abdominal colic, GERD and chronic gastritis. Ulcerative colitis **Other oral medication given** Triphala guggulu 2 tds Arogya vardhini vati 2 tds Trivrut avaleha 1 tsf at bed time

Tuble 4. Showing Kegression of Symptoms during redunent									
Sr.no.	symptoms	1st day	2 nd day	3 rd day	4 th day	5 th day	6 th day	7 th day	8 th day
1	Cutting pain/burning pain	++++	++++	+++	+	0	0	0	0
2	Sphincter spasm	++++	++++	+++	+	0	0	0	0
3	constipation	++++	++++	+++	+	0	0	0	0
4	Stool streaks with blood	++++	++++	+++	+	0	0	0	0

Table 4: Showing Regression of symptoms during treatment

8. DISCUSSION

Fissure in ano is one of the painful anorectal diseases which presents as an acute superficial break in the continuity of the anal canal. Parikarthika can be considered as Sadya Vrana due to the presence of painful longitudinal ulcer

Treatment protocols for fissure in ano should be based on the medicines which aid the healing of ulcers as well as to reduce the cutting and burning type of pain. Each medicine used in the patient has different properties as mentioned previously. The main advantage of this treatment is the complete reduction of complaints like pain, burning sensation, oozing of blood during and after defaecation within 5 days after the treatment. Complete healing of ulcer in fissure in ano within 8 days is one of the another advantage noted.

Mahanarayan taila and yastimadhu taila is the one which is having properties like Saruja Shamana (Pain relieving), Vranasodhana (Wound cleansing), and Vranaropana (Wound healing) properties.

Yastimadhu taila helps to keep Vrana moist and thus promotes the healing process through its abovementioned properties. Jatyadi Ghritha helps to increase granulation tissue formation thus promoting ulcer healing.

Due to these properties of Mahanarayan taila and yastimadhu taila matra basti 60ml makes it a good treatment option in the management of Parikarthika. Pachana,vrana shodhana, vrana ropana, and Rakta Shodhana property of improves the vascular circulation in the anorectal region and reduces spasms and congestion. Due to these properties, helps in the healing of anal fissures.

Triphala guggulu also heals and pain killer as well as laxative work, the tissue along with increasing the digestion of the patient at the same time acting as a mild laxative. Constipation is one of the reasons for the occurrence of fissure in ano. Trivrut avaleha (sukha virechaka)helps in easy bowel movements and thus relieves constipation.. Lukewarm water Sitz bath with triphaladi churna helps to clean the fissure wound area, improve the blood flow of the regions, and thus helps to relax the anal sphincter.

9. CONCLUSION:

A case having features of Parikartika (fissure in ano) was selected from OPD, Hospital shree Satya Ayurvedic Medical college and hospital lodhipur rajput Moradabad Uttarpradesh for case study and Mahanarayan taila and Yastimadhu taila both were equal quqntity mixed and give matra basti 60ml to patient and patient adviced to take basti for 8 days adviced.

Assessment was done based on features like pain, burning sensation and sphincter tone. Significant improvement was observed after treatment. , the treatment principle of acute fissure in ano should be based on the aim to healing of ulcer, reduction of pain and burning sensation and also to correct the constipation. Both internal and external treatments formulated in this case are to satisfy the above mentioned treatment principles. hence we concluded that.

Pathya

DIET RECOMMENDATIONS (AAHAR). Increased liquid intake. Fibres food in diet.

Recommended food plan consists of cow milk, butter, buttermilk, wheat, ghee, rice, inexperienced vegetable, and normal food plan. Avoid chilies, fried meals and meals that can reason constipation.

LIFESTYLE CHANGES (VIHAR) Sitz baths (immersing decrease frame in heat water) are beneficial, Avoid consistent sitting and immoderate straining for the duration of defecating.

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