

Advent Through the Traditional Medicine Regime for *Kshata Guda*, that is, *Parikartika*: A Case Series

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ABSTRACT

One of the most common symptoms in anorectal diseases which encounters in routine clinical practice is *Kshata guda*, that is, *Parikartika*, mentions in *Ayurved Samhitas*. *Parikartanam* means excessive cutting pain around the anus. Pain is the most important clinical symptoms in this disease. Anal fissure is one of the eloquent causes of pain with per rectum bleeding, sphincter spasm in the anal region at times. Fissure is a crack or a split in the lower end of anal canal. Bailey and Love (1968) have described fissure-in-ano as an elongated ulcer in long axis of anal canal. It is mostly due to constipation. Exact etiology is obscure, one theory is that the fissure-in-ano is caused by overstretching of the epithelial lining of the anal canal by the pressure of a hard fecal mass during defecation against the posterior wall of anorectal junction which is relatively poor supported by musculature on this aspect of the rectum and anal canal. In this case series, the cases are observe symptomatically for the drug healing properties and the objective of the hypothetical parameters shows fruitful results with the application of *Yashtimadhu tail* (medicated oil) in the management of *Parikartika* (Fissure-in-ano), leading to non-surgical management of *Parikartika* (Fissure-in-ano) in very cost-effective way.

Keywords: *Parikartika*, Bleeding per rectum, Fissure-in-ano, Pain, Wound, *Yashtimadhu taila*
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INTRODUCTION

Entire medical field whether modern or ancient owes immensely to Acharya Sushruta.

Parikartika (fissure-in-ano) is described as a *Vastivyapad* (complication of enemas) in *Sushruta samhita*, *Charak* and *Kashyap Samhita* illustrate in deferent places.^[1] *Acharya Charaka* and *Vagbhata* have mentioned *Parikartika* (fissure-in-ano) as a symptoms in *vataj atisar*^[2] (acute diarrhea), excessive use of *Yapana vasti*^[2] may lead to *Parikartika* (fissure-in-ano). *Acharya Kasyap* has said that this is a disease of gravid women. *Caraka and Sushruta* both have described two types of dosas in *Parikartika* (fissure-in-ano) *Vata* and *Pitta*, and according to *Kasyap* three *dosa*, *Vata*, and *Pitta*, *Kaphaj*.^[6] In acute condition, the prevalent *dosa* is *Vata* and *Dushya* are *Twak* (skin), *Rakta* (blood), and *Mansa* (Muscle) in perianal region.^[4] When *Vata* localizes in *Twak* (skin), at perianal region get vitiated because of its *Ruksha* (Dry) property, it shows tendency to split at lower end of anal canal, these vitiated *Vata* when localizes in *raktadhatu* (Blood), there is the formation of *Vrana* (longitudinal ulcer) at the anus. When it reached in *Mansadhatu* (Muscle), pain (*Gudshul*), sphincter spasm, *Sopha* (swelling), per rectum bleeding (*Gudgat raktsrava*) found in *Parikartika* (Fissure-in-ano).^[5]

In most of the anorectal diseases come across in Shalya OPD anal fissure represent one of the most common symptom. Patient mostly young group and pregnant women, IT professionals suffering from *Parikartika* (Fissure-in-ano). Patient complains of severe cutting type pain lasting minutes to hours after defecation. Bleeding is commonly seen in the form of a streak of bright red blood may be frequently noticed on the side of the stool in both acute and chronic fissure-in-ano.^[7] Metroculture in metrocities leads to shift in the habit of taking food and its timing as well as in the lifestyle that has become sedentary. Both of these causes produce a disturbance in the digestive system that leads to many diseases. In long sitting instances, sentinel tag, and hemorrhoids, pruritus ani can be associated with fissure-in-ano.

Discharge may be lead to soiling of the underclothes.

In such cases, Ayurvedic preparation can prove there efficacy in the management of *Parikartika* (Fissure-in-ano).^[12] Hence, this

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case series highlights the promotable result of *Yashtimadhu taila*^[1] (medicated oil).

CASE DETAILS

1. A 30-year-old female patient post-delivery-2 months before visited in OPD with severe constipation, burning sensation after and during defecation, throbbing pain at anal region, and per rectum bleeding 4–6 drops from 2 weeks
 The patient had a history of normal delivery 1 month back. On inspection in lithotomy position seen a fissure bed of around 2 cm length at 12 o' clock position, on per rectum examination severe spasm, pain in rectum bleeding are present, no H/o any major illness, and surgery.
2. A 42-year-old male patient suffering from severe constipation from long time, burning sensation after and during defecation, and per rectum bleeding on and off from 10 days. The patient had a history of night shift duty long time, improper diet, low water intake, no known case of any major illness, and surgery.
3. A 36-year-old male patient suffering from severe pain and burning sensation during and after defecation, per rectum bleeding 2–4 drops from 12 days, and constipation. The

patient had a history of long standing, security guard job, and history of constipation

4. A 21-year-old female patient having severe pain during and after defecation, per rectum bleeding, and history of IBS
5. A 48-year-old male patient having severe pain in perianal region, burning sensation after defecation, per rectum bleeding from 2 weeks, and chronic constipation.

For treatment, these patients visited to Shalya tantra OPD^[3] in DR. D. Y. Patil College of Ayurveda and Research Centre, Pimpri, Pune, Maharashtra.

Treatment Plan

Local application of *Yashtimadhu taila (Pichu)* twice a day after sitz bath for 4 weeks.

Follow-up – 0, 7th, 14th, and 21th day.

Yashtimadhu Taila^[8] Ingredient

1. *Yashtimadhu (Glycyrrhiza glabra* Linn.)
2. *Til taila* (sesame oil).

Properties of *Yashtimadhu (G. glabra* Linn.)^[17]

Ayurvedic therapeutic relevance

It has *Snigdha guna* (oily), *Madhur ras* (sweet), *Madhur vipak* (post-digestion), *Sheet virya* (cold), and has property of *vata-pitta shamak*, *vedna shamak* (analgesic), *vrana shoth hara* (Reduce swelling), and *daha shamak* (decrease burning).^[9]

Modern View

Yashtimadhu

- Latin name: *G. glabra* Linn.
- Subfamily: Papilionaceae
- Family: Leguminosae
- Gana: Varnya (complexion enhancer) *Kandughna* (anti-itching)
- *Shonitsthapan* (hemostatic property)
- Synonyms: Mulethi, Liquorice,
- Chemical: Glycyrrhizins, Sucrose, alkaloid, flavonoid, saponins,^[16] asparagine, malic
- Composition: Resin, coumarin, and cinnamic acid.
- Pharmacology action: Anti-inflammatory, antiarthritic, and antipyretic.

Til Tail (Sesame Oil)

Therapeutic relevance according to Ayurveda

It has *snigdha guna* (oily), *madhur tikta rasa* (sweet - bitter), *madhur vipaka*, *ushna virya*, and has property *vata-pitta shamak*, and *vedana sthapan* (analgesic), *vrana shodhan* (cleaning), and *vrana ropan* (healing).

Modern View^[13]

- Latin name: *Sesamum indicum*
- Family: Pedaliaceae
- Part use: Seeds

- Chemical: Fat 43–56%
- Composition: Protein 16.6–26.4
- Calcium 1.05–1.45%
- Phosphorus 0.47–0.62
- Sesamin, sesamol, and tannin
- Pharmacology: Analgesic, blood purifier, soother, and wound healing.

Probable Mode of Action of *Yashtimadhu Taila*^[10]

The glycyrrhizin present in *Yashtimadhu* reduces the development of inflammation and tissue injury with the underlying mechanism of LC and rLE (licorice and roasted licorice extracts), which suggested that supplementation with LE and rLE might help in preventing and treating both acute and chronic inflammatory conditions.^[18] Furthermore, glycyrrhizin exerted potent anti-inflammatory effects indicates that prevention of the activation of NF-kappa B and STAT-3 by glycyrrhizin reduces the development of acute inflammation.^[19]

Yashtimadhu (G. glabra Linn.) being considered as mainstay of Ayurvedic as well as other traditional medicine, its mechanism of action of its major constituents such as glycyrrhizin (glycyrrhizic acid and glycyrrhizinic acid), isoliquiritigenin, licorice flavonoid oil (LFO), and hydrophobic flavonoids gives *Varna ropak* (wound

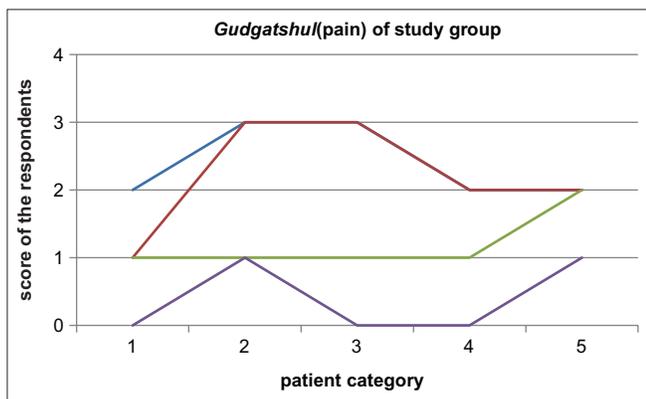


Figure 1: Before treatment

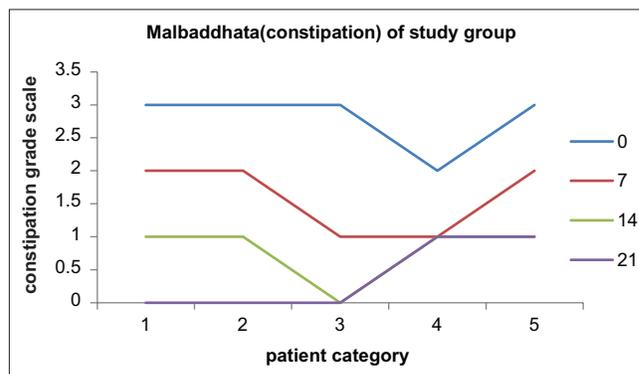


Figure 2: After 4 weeks treatment

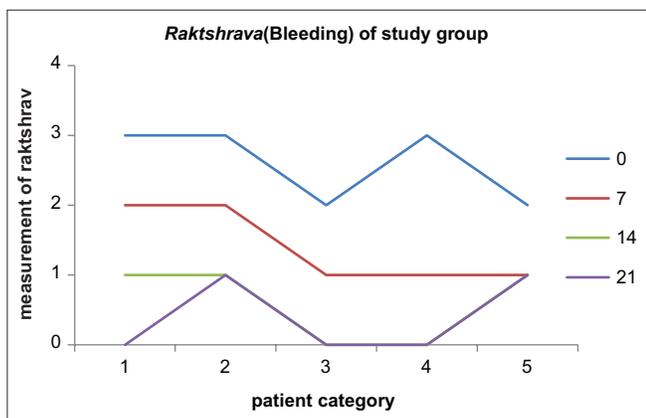
Master chart																
S. No.	Age (in years)	Gender	Occupation	Gudgatshul (pain)			Gudgat Raktshrava (P/R bleeding)			Malbaddhata (constipation)			Sphincter spasm			
				0	7	14	21	0	7	14	21	0	7	14	21	
1	30	F	Housewife	2	1	1	0	3	2	1	0	0	3	2	1	0
2	42	M	IT job	3	3	1	1	3	2	1	1	0	3	2	1	0
3	36	M	Guard	3	3	1	0	2	1	0	0	0	3	2	1	1
4	21	F	Student	2	2	1	0	3	1	0	0	1	3	3	2	1
5	48	M	Job	2	2	2	1	2	1	1	1	3	2	1	0	0



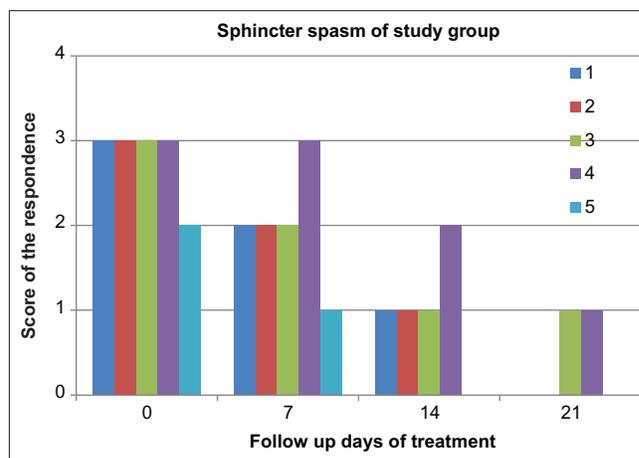
Graph 1: Pain factor in study group



Graph 3: Constipation in study group



Graph 2: Bleeding per rectum in study group



Graph 4: Sphincter spasm in study group

healing) *Shoolher* (analgesic) effect at the site of *Parikartika* (Fissure-in-Ano).

Therapeutic Focus and Assessment

In the study of 1 week interval, assessment of *Yashtimadhu tail pichu* was effective in *Gudkshat* (wound healing). *Gudgatshool* (pain) (Graph 1) *Gudgat Raktashrava* (P/R bleeding) (Graph 2), *Malbaddhta* (Constipation) (Graph 3), and sphincter spasm (Graph 4) were not more effective (Figure 1). In study of 2nd week interval, *Gudkshat* (wound healing) was mild healed, and *Gudgatshool* (pain) *Gudgat Raktashrava* (P/R bleeding), *Malbaddhta* (Constipation), and sphincter spasm were improved. In the study of 3rd week, *Gudkshat* (wound healing) moderate healed and *Raktashrava* (P/R bleeding) was less *Malbaddhta* (Constipation) which was decrease, sphincter spasm was less. In the study of last week, *Gudkshat* (wound healing) was healed, and *Gudgatshool* (pain), *Gudgat Raktashrava* (P/R bleeding), *Malbaddhta* (Constipation), and sphincter spasm were maximum

improved.^[11] In this study, subjective criteria were *Gudkshat* (wound healing and *Gudgatshool* (pain). Objective criteria were *Gudgat raktshrave* (P/R bleeding) and sphincter spasm. Overall in this study, *Yashtimadhu taila Pichu* is effective in *Parikartika* (acute fissure-in-ano) within 4 weeks (Figure 2).

- Pain – VAS scale
- Bleeding per rectum – Truncated rectal score rectal bleeding
- Sphincter spasm – Present or normal.

About 60% of patients got relief on 4th follow-up that is on 21 day of initiation of treatment. The median score of all patients was to on the 1st day of the treatment.

More than 60% of the patients were having reduced *Raktshrava* (bleeding) on the 4th follow-up that is 21 day of treatment, hence that treatment is effective and patient is responding to treatment. *Raktshrava* is the most deteriorating and having negative effect on health of patients. It has to be controlled and immediate effect is reflected from the patient’s psychological and mental status.

The major portion of the patients is benefited from the

treatment which has the graph of the Malbaddhata (Constipation) depicts. This symptom is very complicated and leads to other diseases, hence, it has to be brought under control with the passing days of the treatment as it is cumulative effect of lifestyle and the prolonged *Apathya Ahara* (fibreless constituents of the diet).

Sphincter spasm of the study group in the above graph prominently presents the profusely effective in the treatment throughout the age group of the study population. This parameter and its rectification is itself and indication of the successfulness of the treatment; hence, we can conclude that the treatment schedule is effective and helpful in reducing sufferings of the study population.

DISCUSSION

The patient was from age groups between 20 and 50 years. In this age, the person is more affected due to they have altered *Ahara* (diet) and *Vihar* (habitat) vitiates *dosa* leads *Agni dushti* (indigestion) and resulting *Malbaddh* (hard stool), it is the main cause of *Parikartika* (Fissure-in-ano). *Pichu* of *Yashtimadhu tail* absorption of act as *Vranaropan* (wound healing^[15]). *Tila taila* (sesam oil) having *Guru guna* (heaviness) it acts on *Rukshata* (dryness) of *Vata*, it *Kashaya* (astringent) property help in healing of *Vrana* (wound healing). *Tila taila* having tannin compound it is antibacterial.^[14] In *Aushadh Chikitsa* (conservative treatment) of *Parikartika* using *Pichu* (local application) of *Yastimadhu taila*, the patient had relief pain at perianal region. Sphincter spasm (Guda) is reduced and per rectum bleeding is stopped and healing of *Parikartika* (fissure-in-ano) within 4 weeks.

RESULTS

In the present study, interval of every 7 days assessment was done to find out the efficacy of local application of *Yashtimadhu tail* by relief in *Gudkshat* (wound healing), *Gudgatshul* (Pain), and sphincter spasm. In this study, subjective parameters were wound healing and pain. Objective parameters were *Gudgatgat raktshrava* (per rectal bleeding) and sphincter spasm. In this study, wound at anal region was healed completely after treatment within 4 weeks.

CONCLUSION

This case study concluded that acute fissure healed followed by *Yashtimadhu taila* is of the well-effective option for the management of *Parikartika* (acute fissure-in-ano) healed with the management of *Yashtimadhu tail* with its *vranaropan* (wound healing) and *vat shamak* properties. It shows promising effect in *Gudgat raktshrava* (per rectum bleeding) and relaxed sphincter spasms after its treatment.

Yashtimadhu taila pichu (swab with oil) is easy to administered which can be applied at home easily without any assistance.

It is cost effective, easy to manage at home for longer duration without any adverse effect.

As the evidence of any adverse effect is not noticed, it can be safely use in elderly patients, in pediatric age group patients, and also during antenatal and postnatal female pts.

There is a wider range of scope for further detail study on large number of patients with various categories.

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