

'COMPARITIVE CLINICAL STUDY OF JATYADI GHRITA AND YASTIMADHU GHRITA PICHU IN THE MANAGEMENT OF PARIKARTIKA VIS-A-VIS ACUTE FISSURE IN ANO''

**Dr Nilesh Kumar Dubey¹, Dr N H Kulkarni², Dr Sachin N. Patil³,
Dr Mohasin Kadegaon**

¹Final year PG scholar, ²Professor, ³Professor and HOD, ⁴Lecturer, Dept of Shalya tantra, Shri J. G. C. H. S Ayurvedic Medical College, Ghatprabha

Abstract: Fissure- in-ano is the most painful condition among the ano rectal disorders and the suffering is much greater in comparison to the size of the lesion. It has similar location, pathology and predominant features of Parikartika like excruciating pain, constipation, stool streaks with blood etc. The available modern treatment modalities are not satisfactory in healing the ulcer and takes long time to heal. Application of pichu, vatahara shodhaka and ropaka ghrilas and taila has been advocate by various acharya. On the basis of this in present study yashtimadhu ghrit has been selected for trial and efficacy of same will be compared with already stabilize jatyadi ghrit. **Materials and Methods:** This study was a comparative trial and 40 ambulatory patients of either sex, with clinical evidence of Fissure-in-ano were enrolled in the study. All the patients were randomized into 2 groups of 20 each and named Group A and B. Patients in Group A received Jatyadi Ghrita Pichudharana for 7 days while those in Group B received Yastimadhu Ghrita Pichudharana for 7 days. The patients were clinically evaluated and observations were recorded in the concerned proforma and follow up for 90 days to note any recurrence. **Results and Conclusion:** This study concludes that in Fissure-in-ano, Jatyadi Ghrita (97.51%) appears to be more efficacious when used as a Pichudharana than Yastimadhu Ghrita (94.22%) Pichudharana. It is easy to prepare and can be used without any adverse effect.

Key words- Parikartika, Fissure in ano, Jatyadi ghrit, Yashtimadhu ghrit, Pichudharana

INTRODUCTION:

Fissure- in-ano is the most painful condition among the ano rectal disorders and the suffering is much greater in comparison to the size of the lesion. Fissure-in-ano, as the name suggests, is a condition, which is related to the anal region showing the presence of a crack or a tear.

Parikartika is a condition, not described as a separate entity but is obvious that it is related to the ano-rectal region with excruciating pain during and after defecation, sometimes associated with bleeding even. It has been mentioned as a complication of other diseases pertaining to the ano-rectal region or a Vyapath of Virechana or Basti Karma¹. But, the condition is not the same in today's life. Now a day it is being dealt as a separate and independent manifestation. The irregular dietary habits may act as a root cause as they vitiate the Dosha leading to digestive disturbances, which in turn result in altered excretory functions. This may further cause Malabaddhata, which in turn may cause a tear in the anal canal.

Parikartika is a word, which has been, referred to, in earlier three Samhitas i.e., the Brihatrayees, not as a separate entity, but as a complication of other diseases pertaining to the ano-rectal region. Charaka, Vagbhata, Kashyap and even Sharnagadhar in their Samhitas have dealt with this condition but not in detail. All these Acharyas have commonly included the condition to be an outcome of Virechana and Basti Vyapath. Charka opines that when apanavayu get avruta by vyana vayu then there will be complication like Parikartika, Chardi & etc. While Sushruta² has mentioned Guda Parikartika as one of the Poorva Roopa of Arsharoga.

Jatyadi Ghrita³ act as both vrana shodhana and vrana ropana it is also helps in the management of sa-ruja vrana and gambeera vrana. Sushruta has directly mentioned Yastimadhu Ghrita⁴ administration in the form of Piccha Basti as treatment of Parikartika. Yastimadhu Ghrita acts as vrana ropanaa and shothahara.

So, the above said both formulations are taken for the study to see the clinical efficacy between them in the treatment of Parikartika.

AIMS AND OBJECTIVES OF THE STUDY:

1. To study the disease Parikartika from various classical references and the disease fissure-in-ano from modern reference books.
2. To evaluate the efficacy of Jatyadi Ghrita and Yastimadhu Ghrita in Parikartika.
3. To compare the efficacy of Yastimadhu Ghrita with standard Jatyadi Ghrita in the management of Parikartika vis-à-vis, Fissure –in- ano.

METHOD OF COLLECTION OF DATA:

Patients who attended the OPD and IPD having the complains of Parikartika were screened. Among them 40 patients fulfilling the inclusion criteria of present study were taken randomly and divided in to two groups.

Inclusive criteria

- Age between were 6 to 60 years patient of either sex were included.
- Patients having classical features of acute fissure-in-ano like Kartanvat-vedana, Daha, Vibandha, Rakta-srva and kandu were included.

Exclusive criteria

- Patients with any other ano rectal disorder associated with Fissure in ano.
- Patient with any systemic disease were excluded.
- Patients suffering from HIV and HBsAg were excluded from the study.

Diagnostic criteria:

Subjective criteria: Kartanvat Vedana (Cutting type of pain), Guda Daha (Burning sensation), Vibhanda (Constipation), Rakta- Srava (Bleeding P/R) and Kandu (Itching)

Objective criteria: Sphincter spasm and ulcer/fissure size in mm

Study design: 40 screened patients of Parikartika were randomly classified into two groups.

1. Group A - 20 Patients Pichudharana of Jatyadi Ghrita (Standard group).

2. Group B - 20 Patients Pichudharana of Yastimadhu Ghrita (Trail group).

Duration - 7 days

Dosage - 10 ml of the trail drug Pichudharana.

Follow up - The patients of both groups were followed up every fortnight for 3 month after the completion of treatment schedule

Assessment criteria with grading:

1 Kartanvat-vedana (Cutting type of pain)

- Pain will be assessed by wang-Baker Face Pain reading scale.

- Patients will be asked to choose a face which best describes how much pain he/she had.

Wang Baker FACE™ Pain rating Scale.



2 Gudadaha (Burning sensation in anus)

CRITERIA	SCORING
NO complains of daha	0
Patients complain of daha 5 – 10 minutes after defecation.	1
Patients complain of daha during 10 -30 minutes after defecation.	2
Patient complains of daha during and after defecation for some hours and relieved only with some medicine.	3
Patient complains of daha that is sour all through the day hampering his normal routine work.	4

3 Rakta -srva (Bleeding per anum)

CRITERIA	SCORING
No bleeding	0
Bleeding along with defecation streak wise only over the stool.	1
Drop wise bleeding during and after defecation 0-10 drops Occasionally	2
Drop wise bleeding during and after defecation 10-20 drops and stopped	3
Drop wise Profuse bleeding or stream wise amounting more than 20 drops in each defecation	4

4. Guda-kandu (Itchingin anus)

CRITERIA	SCORING
No Itching	0
Patients complain only once or twice in a day.	1
Patients complain Itching more then 3 – 4 times intermittenly.	2

5. Vibandha (Constipation)

CRITERIA	SCORING
No constipation	0
Patient complains of constipation with - hard stool passed 1 – 2 times in days.	1
Patient complains of constipation with - hard stool passed 2 – 3 times in days.	2
Patient complains of constipation with - hard stool > 3 times and irregularity of bowel off and on	3
4 Constant irregularity of bowel frequency and consistency bowel only after drastic purgative.	4

6. Size OF Ulcer / Fissure

CRITERIA	SCORING
No ulcer	0
Ulcer size 1mm to 5mm	1
Ulcer size 5mm to 10mm	2
Ulcer size more then 10mm	3

7. Sphincter spasm

CRITERIA	SCORING
No spasm	0
Mild - Spasm	1
Severe spasm(not passed stool)	2

RESULTS:

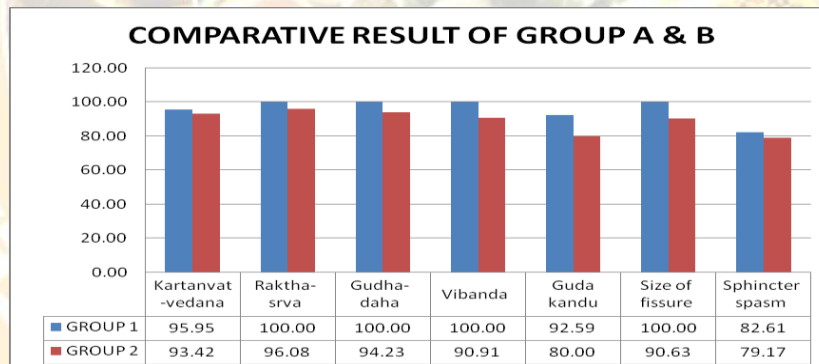
Group A: The percentage of improvement in Group A on Kartanvat-vedana is 95.95%, Rakta- srva is 100%, Gudha - daha is 100%, Vibanda is 100%, Guda Kandu is 92.59%, Size of fissure is 82.61% and Sphincter spasm is 100%.

Group B: The percentage of improvement in Group B on Kartanvat-vedana is 93.42%, Rakta- srva is 96.08%, Gudha- daha is 94.23%,

Vibanda is 90.91%, Guda Kandu is 80%, Size of fissure is 79.17% and Sphincter spasm is 90.63%.

Overall Comparative results of Group A and Group B

Comparative analysis of the overall effect of the treatments in both the groups was done by statistically with paired t' test. The test shows that the treatment is statistically not significant in Group A when compared to Group B. Group A overall result is 97.51 and Group B overall result is 94.22%.



DISCUSSION:

Among the description available in doctrines of Ayurveda clinical features of Parikartika closely resemble to fissure-in-ano, which is characterized by Kartanvatpida, Daha and Vata Sanga in Guda region. Parikartika is explained as a symptom in Basti Vyapat, Vamana Vyapat, Virechana

Vyapat and also mentioned in Garbini Chikitsa. Acharya Dalhana has described the term Parikartika as a condition of Guda in which there is cutting and tearing pain. Anal fissure is a longitudinal crack in the long axis of lower anal canal but in reality it is a true ulcer of the skin of the wall of the anal canal. The site of affinity for an

anal fissure is the midline posterior.

The next most frequent situation is the mid line interiorly.

PROBABLE ACTION OF JATYADI GHRITA:

Karmukata: Kushthaghna, Vrana Shodhana and Vrana Ropana.

Jatyadi Ghrita is well known antiseptic compound of ayurveda. For the purpose of Shodhana and Ropana, and produce sign and symptoms Jatyadi Ghrita is indicated. Jatyadi Ghrita is having properties like Tridosha Hara, lekhana and Ropana. This formula where the blending of active principal and lipids is made when a flied over the Vrana (Ulcer), is spread in the intercellular matrix surrounding the labal and estable parenchyma cells, when the concentration gradient of the medicine in the intercellular matrix increases, it passes the cell membrane through passive diffusion and enters the cell. Inside the cell, drug stimulates the growth factors of viable cells, leading to proliferation by mitosis and then migration when healthy and normal cell starts developing, the symptoms like pain etc will reduce and ulcer starts healing.

PROBABLE ACTION OF

YASTIMADHU GHRITA:

Karmukata: Vrana Shodhana and Vrana Ropana, Shothahara.

Yastimadhu Ghrita has Madhura rasa, Sheeta veerya, madhura vipaka and Vatapittashamaka. Due to sheeta veerya it acts Vedanahara and Dhahashamak, and Madhurarasa act as a Vrana Ropana and Shothahara. Yastimadhu Ghrita analgesic property and cures bleeding per anum, itching, discharge and burning sensation. Modern studies have prove it's healing, anti-Ulcer, Anti-inflammatory and skin regeneration activity of Yastimadhu Ghrita.

CONCLUSION:

1. Both the formulation (Jatyadi Ghrita and Yashtimadhu Ghrita) are effective in treating Parikartika
2. It was found that both the formulation have given significant result in all the parameters of assessment designed for Parikartika.
3. Overall result of Jatyadi Ghrita pichudharana is 97.51% and of Yashtimadhu Ghrita is 94.22%.
4. There is no any side effect found during and after the treatment.

5. Both the materials used were economic can be advised at OPD level. It does not required admission in the hospital and hence it is ambulatory.

6. This study should be done on large samples with lengthy follow up so that definite conclusions can be drawn as the present study is limited to small sample of 40 patients.

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Corresponding author:

Dr Nilesh Kumar Dubey

Final year PG scholar, Dept of Shalya tantra, Shri J. G. C. H. S Ayurvedic Medical College, Ghatprabha

Email: pinku8354@gmail.com

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