

A CASE STUDY OF PERIANAL ABSCESS IN HYPERGLYCEMIC PATIENT

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ABSTRACT

An abscess is a collection of pus in a cavity formed by disintegrating tissue and surrounded by inflamed tissue. *Sheegravidahitvat* definition of *Vidradhi* means virulence of disease. *Acharya Sushruta* mentions that if *vidradhi* attains *pakvaavastha*, the first line of treatment is to drain the pus through *bhedana* and later, it should be treated as *Vrana*. In the present context, a 45 years old male suffering from right sided gluteal abscess was admitted and treated with surgical incision and drainage and one week therapeutic regimen of antibiotics and analgesics with anti-hyperglycemic were given to counteract the infection. Treating an abscess in a diabetic patient needs a complete follow-up plan to avoid any opportunistic infection.

Keywords: Perianal abscess, *vidradhi*, *Jatyadighrita*.

INTRODUCTION

In *Ayurvedic* classics, abscess is understood as *vidradhi* which is classified into 2 as *Bahya* and *Abhyantara*. The present study deals with the *Bahyavidradhi* of gluteal abscess. *Sushruta* mentioned that *Nimnadarshanam Angulya Avapidite Pratyunnaman Bastavivodaka-Sancharanam¹* means when *vidradhi* gets ripen it shows fluctuation test positive and pitting oedema. *Acharya Sushruta* mentions that if *vidradhi* attains *pakvaavastha*, the first line of treatment is to drain the pus through *bhedana* and later, it should be treated as *Vrana*.

CASE REPORT

A 45 years old male presented with the chief complaints of pain and swelling at the right side of gluteal region for two weeks with pus discharge and low grade fever. Patient was investigated and was known to be a diabetic. Random blood sugar was 419 mg/dl.

On clinical examination revealed a tender swelling on right gluteal region measuring 7 into 8 cm. Laboratory investigations showed a normal blood picture except a slight increase in WBC and CHEST X RAY also clear.

TREATMENT GIVEN:-

Surgical operation was considered for pus drainage from gluteal swelling. Sliding scale insulin regimens was started as per GRBS chart and patient was further initiated on anti-hyperglycemic, antibiotics, analgesic and dressing with *jatyadighrita*². The patient recovered well with complete healing of the wound within span of 6 weeks.

DISCUSSION

Probable Mechanism of action of *Jatyadighrita* and its practical use:-

The *shodana* and *ropana* contents in *Jatyadighrita* drugs found very efficacious as described in ancient classics. The action of *tiktara* is *raktaprasadaka* (blood purifier), *ushnaveerya* is *shothahara*, *ushna* and *teekshna* are *krimighna* in nature, action on *tridoshas* as calms as *Pitta*. *Shodana* drugs on topical application reduce pain, discharge and oedema of the surrounding tissue. Initially drugs acts as a debriding agent, removing slough and necrotic material from wound and subsequently promotes smooth and uncomplicated healing.

They reduce wound infection due to their bactericidal action on drug. The dressing soaked with *shodhana* drugs provides moist environment which enhances epithelialisation, prevent scales formation, beneficial in infected wounds with drug resistant bacteria. The content *Katuka* improves re-epithelialisation, neovascularisation and migration of endothelial cells, dermal my fibroblasts and fibroblasts into the wound bed³. The *jatipatola* and *sikta* have *Vrana ropana* action⁴.

CONCLUSION

Patient presenting with perianal abscess with uncontrolled diabetic and patient presented with pus discharge in perianal region with necrotic tissue. After *bhedanakarma* pus is drained and necrotic tissue was excised, and later treated with *jatyadighrita* along with diabetic control. Pus discharge reduced with healthy granulation tissue and cavity completely healed. *Jatyadighrita* have *shodhana* and *ropana* properties and anti bactericidal action which helps in vascularisation and healing of the cavity.

FIGURES:-



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