

A CLINICAL STUDY OF YASHTIMADHU GHRITHA PICHU IN THE MANAGEMENT OF PARIKARTIKA WITH SPECIAL REFERENCE TO FISSURE-IN-ANO

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ABSTRACT

The research work was aimed to evaluate the efficacy of *Yashtimadu Ghrita picchu* and *Yashtimadu-Ghrita picchu* with *Abhayarista* and *Gandaka rasayana* in the management of *Parikartika* (Fissure – In -Ano). It is comparative clinical study. The age limitation was 20 – 60 years. 40 patients were taken for the study, 20 patients in each group A & B. Both the groups were advised strict fiber rich diet, exercise and plenty of fluid intakes. The study period was 7 days and follow up for 2 months Observations were recorded in the concerned proforma on every month Observations were statistically analyzed with paired t- test. Group A showed statistically highly significant result as in both the Group B also have same effect, but there is no significant result of constipation This study concludes that in *Parikartika* (Fissure – in - ano), *Yashtimadu Ghrita* appears to be effective in reducing signs & symptoms in both Groups And is cost effective, easy to prepare and without any adverse effect.

Keywords: *Yashtimadu Ghrita picchu, Abhayarista, Gandhaka rasayana, Parikartika*

INTRODUCTION

In this present era, due to changing life style such as sedentary life style, increased stress, improper dietary and sleep habits various life style disorders are increasing continuously. This leads to *Agnimandya* which is the root cause of all the diseases out of which *parikartika* is the commonest one.

The remarkable feature of fissure in ano is that it has a constant position which is nearly always in the mid line of the posterior wall of the anal canal, occasionally it occurs in the middle of the anterior anal wall, and exceptionally it is found elsewhere on the circumference of the anus. It is mostly single but rarely two

or more fissures co-exist. The anal fissure is elongated, with its long axis parallel to the long axis of the anal canal. The proximal border- the upper internal and begin a short distance to the dentate line. The distal border- the lower end lies just proximal to the anal verge. Acute anal fissure is a deep tear, which extends into the anal canal through the anal margin skin. The edges are oedematous. Chronic fissure in ano is characterized by indurate and inflamed margins with a scar tissue at its base involving of the internal sphincter muscle. The shape of the ulcer is cone shaped, and it is frequently accompanied by a loose tag of skin, usually

oedematous, such a tag is known as ‘Sentinel pile’. Sentinel means, an umbrella or a guard. (1)

The wide description of *parikartika* including its treatment is available in the classics (2, 3). This disease occurs in *gudapradesh* (anal region), the seat of *sadyapranahar marma* which requires delicate treatment. Disease having *kartanvat vedana* (cutting pain) over anal region is called as *parikartika*, the signs and symptoms of which resembles as fissure in ano in modern text.

In modern science for treatment several surgical management techniques have been adopted like anal dilatation, posterior or lateral sphincterotomy, fissurectomy, excision of anal ulcer, anal advancement flap etc. But these surgical procedures have some demerits like anal incontinence, delay in wound healing, infection etc(4,5).

Yashtimadhu Grita was chosen for the following reasons-

1. *Guna-Laghu, sheet, snigdha, madhur, ropana, dashamak, vata, pittashamak, jeewanurakshak.*

2. Easy availability.

3. Cost effective.

4. Devoid of complications. *Vata shaman* action of *Yashtimadhu Ghritha* resulting in smooth muscle relaxant property leading to decreased pain during defecation and *pittashaman* property of it helps in reducing *gudadaha* (burning sensation).

This ultimately results in symptomatic as well as clinical relief in complaints of *parikartika*.

Considering above points this study has been selected.

AIM: To evaluate the effect of *Yashtimadu grith pichu* in the management of *parikartika*

MATERIALS AND METHODS:

SOURCE OF DATA

a) LITERARY SOURCE:

The source of *parikartika* is collected from the various classical texts of *Ayurveda* & Modern Science, updated with journals and internet.

b) CLINICAL SOURCE:

Patients suffering from *parikartika* as per *Ayurvedic* classics, will be selected from the

OPD and IPD of RGES *Ayurvedic mahavidyalaya* Hubli

c) Drugs: The trial drug “*yashtimadhu*” is collected from the local area and certified by the *Dravya Guna* department.

Preparation of Yashtimadhu ghritha

Yashtimadhu ghritha preparation as per *Bhaishajya Kalpana Ayurvedic* text¹²

METHOD OF COLLECTION OF DATA:

The patients who are presenting with the features of *Parikartika* which can be correlated with Fissure-in-ano in modern science, symptoms like excruciating pain in anal region during and after defecation, constipation, bleeding per anum i.e. stools streaked with blood, burning sensation in anal region, presence of longitudinal tear in the anal region and sphincter spasm shall be selected for study.

A. INCLUSION CRITERIA:

- Patients having classical features of Fissure-in-ano namely excruciating pain in anal region during and after defecation, bleeding per anum, constipation, burning sensation, presence of sphincter spasm and with a longitudinal ulcer in the anal region will be selected.
- Acute solitary fissures will be included.
- Patients suffering from *parikartika* as per *Ayurvedic* classics will be selected.

B. EXCLUSION CRITERIA:

- Patients suffering from any other ano rectal diseases.
- Patients suffering from systemic disorders like HTN, DM etc
- Patient suffering from infectious disease like HIV, tuberculosis etc

DIAGNOSTIC CRITERIA

Signs & Symptoms

- Pain in anal region
- Constipation
- Bleeding per anum i.e. stools streaked with blood
- Burning sensation in anal region.

STUDY DESIGN:

A Comparative clinical study with pre test and post test design.

SAMPLE SIZE:

20 cases of each group (group A and group B) either sex and age group of 20 to 60 years suffering from Table No 1

Parikartika are randomly selected and submitted for clinical trial.

Group-A (Control Group)	Patient treated with <i>Yashtimadhu ghritha pichu Aabhayarishtha</i> (3 tsf, t i d daily) + <i>Gandhaka Rasayana</i> (1 tab. t i d daily) and advised sitz bath twice daily.
Group-B (Trial Group)	Patient treated with <i>Yashtimadhu ghritha pichu</i> +

DURATION OF TREATMENT: Seven days

FOLLOW UP: - Up to 2 months.

SOURCE OF FORMULATION:

Yashtimadhu ghritha will be prepared in the Rasa Shastra & Bhaishajya Kalpana Dept. of R G E S Ayurvedic Medical College, Hospital PG Studies & Research centre, Ron, according to the classical references.

ASSESSMENT OF RESULTS

- Depending upon subjective & objective parameters, assessment of response will be made based on Gradation Index mentioned below.
- Statistical analysis will be made using unpaired ‘t’ test.

PARAMETERS OF STUDY:-

The improvement provided by therapy will be assessed on the basis of classical signs and symptoms. All the signs and symptoms will be assigned with a score depending upon their severity to assess the effect of the drugs objectively.

CRITERIA FOR ASSESMENT:

Assessment will be done based on the following parameter:-

GRADING FOR THE ASSESSMENT CRITERIA:-

FOR SUBJECTIVE PARAMETERS:

Pain:

- Table No 2 Sphincter spasm

Symptoms	Normal	Spasmodic
Grading	0	1

- No pain - 0
- Mild -1
- Moderate -2
- Severe -3

Constipation:

- No constipation - 0
- Mild -1
- Moderate -2
- Severe -3

Bleeding:

- No -0
- Mild -1
- Moderate -2
- Severe -3

Burning sensation:

- No -0
- Mild -1
- Moderate -2
- Severe -3

b. Objective parameters:

- Ulcer healing
- Sphincter spasm.
- Proctitis
- **Ulcer healing**

Size of the ulcer is measured in mm and filled in the digits.

• **Table No 3 Proctitis:**

Proctitis	Absent	Present
Grading	0	1

RESULT

Effects of Yashtimadu Ghritha Picchu and oral medication Assessment of sign & symptoms before treatment and after treatment Group A

Table 4: 1. Effect of yashtimadu Ghritha and oral medication Treatment for 7 Days:

Signs & Symptoms	Mean BT	Mean AT	% of Change	SD (±)	SE (±)	t*	P
Shoola	3.00	1.75	41.66	0.44	0.09	17.61	<0.001
Rakta Srava	2.00	1.15	42.5	1.13	0.25	4.52	<0.001
Vibanda	3.00	1.85	38.0	0.48	0.10	16.9	<0.001
Gudadaha	2.00	1.00	50	0.56	0.12	15.9	<0.001
Size of ulcer	2.00	0.80	60	0.52	0.11	6.83	<0.001
Sphincter spasm	1.0	0.9	10	0.30	0.06	13.0	<0.001
Proctitis	1.0	0.9	10	0.30	0.06	13.0	<0.001

Table 5: Assessment of Sign & Symptoms Before Treatment And After Fu Group A:

Signs & Symptoms	Mean BT	Mean AF	% of Change	SD (±)	SE (±)	t*	P
Shoola	3.00	1.67	44.33	0.49	0.13	10.58	<0.001
Rakta Srava	2.00	1.40	30	0.51	0.13	4.58	<0.001
Vibanda	3.00	1.50	50	0.52	0.13	4.58	<0.001
Gudatapa	2.00	1.40	30	0.51	0.13	4.58	<0.001
Size of ulcer	2.00	1.13	43.5	0.35	0.09	6.53	<0.01
Sphincter spasm	1.00	0.75	25	0.26	0.07	9.33	<0.001
Proctitis	1.00	0.75	25	0.26	0.07	10.0	<0.001

EFFECTS OF YASHTIMADU GRITHA GROUP B

A group of 20 patients suffering from Parikataka was treated with local application of Pichu dipped in Ya-

shtimadu gritha (Group B) two times a day for 7 days. Its effect on the various signs and symptoms were as follow:

1. Effect of Yashtimadu gritha Treatment for 7 Days:

TABLE- 06: Assessment of sign & symptoms before treatment and after treatment

Signs & Symptoms	Mean BT	Mean AT	% of Change	SD (±)	SE (±)	t*	P
Shoola	3.00	1.8	40.0	0.49	0.09	19.6	<0.001
Rakta Srava	2.00	1.40	30	0.88	0.19	7.09	<0.001
Vibanda	3.00	0.1	96.6	0.30	0.06	1.4	>0.05
Gudatapa	2.0	1.00	50	0.36	0.08	22.5	<0.001
Size of ulcer	2.00	0.9	55	0.55	0.124	7.28	<0.001
Sphincter spasm	1.0	0.95	5.	0.22	0.05	19.0	<0.001
Proctitis	1.0	0.95	5.	0.22	0.05	19.0	<0.001

ASSESSMENT OF SIGN & SYMPTOMS BEFORE TREATMENT AND FALLOW UP:

TABLE 7: Assessment of sign & symptoms before treatment and after treatment

Signs & Symptoms	Mean BT	Mean AF	% of Change	SD (±)	SE (±)	t*	P
<i>Shoola</i>	3.00	1.67	44.33	0.49	0.13	10.58	<0.001
<i>Rakta Srava</i>	2.00	1.40	30	0.51	0.13	4.58	<0.001
<i>Vibanda</i>	3.00	0.1	96	0.308	0.069	1.4	>0.05
<i>Gudatapa</i>	2.00	1.40	30	0.51	0.13	4.58	<0.001
<i>Size of ulcer</i>	2.00	1.13	43.5	0.35	0.09	6.53	<0.01
<i>Sphincter spasm</i>	1.00	0.75	25	0.26	0.07	9.33	<0.001
<i>Proctitis</i>	1.00	0.75	25	0.26	0.07	10.0	<0.001

Overall Effect:

Evaluation of pain between two groups: Group A showed a Complete relief in pain during therapy at the end of 7th day 80 % patients got relieved, and at the end of 2 months 90 % patients got relieved which was statistically highly significant at the level of p <0.001 Group B showed relief in pain during therapy at the end of 7th day 80% patient got relieved, which was statistically significant and at the end of 2 months 85 % patients got relieved which was statistically significant at the level of p <0.001

Evaluation of bleeding between two groups:

Group A showed a Complete relief in bleeding during therapy at the end of 7th day 95 % patients got relieved, and at the end of 2 months 95 % patients got relieved which was statistically highly significant at the level of p <0.001

Group B showed relief in bleeding during therapy at the end of 7th day patient got 90% relieved, which was statistically significant and at the end of 2 months 95 % patients got relieved which was statistically not significant at the level of p <0.001

Evaluation of constipation between two groups:

Group A showed a Complete relief in Constipation during therapy at the end of 7th day 85 % patients got relieved, and at the end of 2 months 100% patients got relieved which was statistically highly significant at the level of p <0.001

Group B showed Not relief in Constipation during therapy at the end of 7th day 100% patient got no relieved, which was statistically not significant and at the end of 2 months 100% patients got relieved which was statistically not significant at the level of p >0.001

Evaluation of Gudadaha (Burning sensation) between two groups:

Group A showed a Complete relief in Burning sensation during therapy at the end of 7th day 95% patients got relieved, and at the end of 2 months day 95 % patients got relieved which was statistically highly significant at the level of p <0.001

Group B showed relief in Burning sensation during therapy at the end of 7th day 95% patient got relieved, which was statistically significant and at the end of 2 months 95% patients got relieved which was statistically significant at the level of p <0.001

Evaluation of Size of the ulcer between two groups:

Group A showed a Complete relief in Size of Ulcer during therapy at the end of 7th day 70% patients got relieved, and at the end of 2 months 90 % patients got relieved which was statistically highly significant at the level of p <0.001

Group B showed relief in Size of Ulcer during therapy at the end of 7th day 70% patient got relieved, which was statistically significant and at the end of 2 months 85 % patients got relieved which was statistically significant at the level of p <0.001

Evaluation of Spincter spasm between two groups:

Group A showed a Complete relief in Spincter spasm during therapy at the end of 7th day 100% patients got relieved, and at the end of 2 months 100% patients got relieved which was statistically highly significant at the level of p <0.001

Group B showed relief in Spicter spasm during therapy at the end of 7th day patient 100% got relieved, which was statistically significant and at the end of 2 months 100% patients got relieved which was statistically not significant at the level of p <0.001

Evaluation of proctitis between two groups: Group A showed a Complete relief in Proctitis during therapy at the end of 7th day 100% patients got relieved, and at the end of 2 months day 100% patients got relieved which was statistically highly significant at the level of $p < 0.001$

Group B showed relief in Proctitis during therapy at the end of 7 day patient 100% got relieved, which was statistically significant and at the end of 2 months 100% patients got relieved which was statistically not significant at the level of $p < 0.01$

DISCUSSION

Fissure-in-ano is the ailment that does not have any direct correlation in the *Ayurvedic* text. '*Parikartika*' is a condition occurring due to improper administration of *Virechana* and *Basti* can be compared with fissure-in-ano, since both the conditions occur in *Guda* and have similar clinical manifestations. Thus fissure-in-ano can be compared with *Parikartika* as follows:

- *Parikartika* is characterized by *Kartanavat* and *Chedanavat Shoola* in *Guda*, *Basti* and *Nabhi*. Similarly fissure in ano is also characterized by sharp cutting pain in anal region.
- In *Parikartika Guda-Kshata* is result of *Virechana Atiyoga Vyapad Kshanana* implies injured tissue.

In the same way fissure in ano is evident by the longitudinal tear in the anal canal.

Since the location, nature of pathology and the predominant clinical feature are same, it can be said that the condition *Parikartika* is the clinical condition known in current surgical practice as fissure in ano. In this study *Yashtimadu Ghritha* was selected to evaluate its role in the management of *Parikartika* because it has *Vrana Ropana*, *Shothahara*, *Varṇa Prasadana* and *Shulahara* properties along with *Tri-doṣahara*, *Rakta Stambhaka* in actions. *Yeashtimadu Ghritha* and *Gandaka Rasayana*, *Abayarista* was taken as control drug because the base of *Yeashtimadu Ghritha* and *Gandaka Rasayana*, *Abayarista* which is also having *Vrana Ropana*, *Vatanulomana*, *Virechana*, *Vibandana* properties. For this purpose 40 patients of *Parikartika* were divided into two groups consisting of 20 patients each. In group A, the patients were managed with application of *Yashtimadu - Ghritha Picchu* per rectally, *gandaka rasayana*, *Abayarista* twice a day orally for 21 days. Patients were managed with application of *Yashtimadu Ghritha Picchu* per rectally twice a day for 21 days. In group B the main aim of management of fissure in ano is to relieve the agonizing pain, to relieve the sphincter spasm, to heal the ulcer and to reduce burning sensation and to stop bleeding, proctitis Significant clinical observations recorded in this study were as follows:

Table 08 CRITERIA FOR OVERALL EFFECT OF THERAPHY

Result	Percentage of parameters	Patients in group A	Patients in group B
Complete Remission	100% relief in the subjective and objective parameter.	00	00
Markly Improvement	More than 75% in the subjective and objective parameter.	18	17
Moderate Improvement	50 to 74% relief in the subjective and objective parameter.	02	03
Mild Improvement	25 to 49% relief in the subjective and objective parameter.	00	00
Unchanged	Result below 25% was considered as unchanged.	00	00

CONCLUSION

The clinical study was carried out to evaluate the efficacy of in between two group in which one group selected as control group here advised *Yashtimadu gritha picchu* along with *bhayarista*, *gandaka rasayana* and second group advised only *Yashtimadu gritha picchu* in the management of *Guda Parikartika*, On

the basis of *Ayurvedic texts*, views of ancient scholars, facts and observations done in the present clinical research work some points can be concluded like –

- The site of *Parikartika* is *Guda*, which is similar to the site of fissure-in-ano.

- *Vata* and *Pitta Doṣha* have dominancy in the development of the disease *Parikartika*, but *Vata* is predominant.
- Sedentary life style and hard work and stressful life like businessmen, in the modern era, is having a key role in occurrence of the disease *Parikartika* (fissure-in-ano).
- Fissure-in-ano was present commonly at 6 o'clock position and most of the time it is a single fissure only. However the fissure at 12 o'clock or at other site may also be found either alone or in combination.
- Excessive consumption of *Lavaṇa*, *Katu*, *Tikta*, *Rukṣha*, *Uṣhṇa*, *lagu Ahara* and irregular diet and diet timings are the main precipitating factors of this condition.
- For the management of fissure in ano *pichu* of *Yashtimadhu Ghritha* along with and oral medication and only *Yashtimadhu Ghritha pichu* were adapted.
- The most evident symptom present i.e. pain and spasm of anal sphincter can be relieved much earlier in both the groups shows similar result so that only *pichu* can help to control the pain and sphincter spasm.
- In the cases of *Rakta Srava*, (bleeding) in fissure-in-ano even though both the group shows good control also control group shows slightly better than the trail drug.
- In the cases of ulcer size in fissure-in-ano in the both the groups showed effective results in healing and good control after 7 days.
- In the cases of sphincter spasm, during therapy at the end of 7 day patients got Complete relieved in both group where it provides same relief.
- In the follow up study, it was observed that the results achieved in both the groups are effective and stable and was showed constant relief on pain, burning sensation, bleeding, and ulcer, spasm of sphincter, constipation and proctitis but in group B upon constipation where there is no result was observed.
- Expect the constipation in the present study it can be concluded that both the group was same effect and observed after treatment. as well as after

treatment and after follow up in group B *Pichu* never shows the result upon the constipation and constipation is the main cause to trigger back once again to the fissure-in-ano (*Parikartika*).

- *Yashtimadhu Ghritha* was found more effective in relieving the feature of disease *Parikartika* (fissure-in-ano).
- *Yashtimadhu Ghritha* is easily applicable, cost effective and can be widely used in general practice.

SUGGESTION

As chronic conditions may need long term therapy for achieving better results and to avoid reoccurrence so, in future same topic should be taken for further research to overcome some lacunas if found, for better results more number of samples.

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