

**MANAGEMENT OF PARIKARTIKA WSR TO ACUTE FISSURE -IN-ANO WITH  
YASHADAMRITA MALAHARA – A SINGLE CASE STUDY**Shravya Kanumalli<sup>1</sup>, Narmada M. G<sup>2</sup><sup>1</sup>P.G Scholar, Dept. of Shalya Tantra, Govt. Ayurvedic Medical College & Hospital, Bengaluru, Karnataka, India<sup>2</sup>Professor, Dept of Shalya Tantra, Govt. Ayurvedic medical college & Hospital, Bengaluru, Karnataka, IndiaCorresponding Author: [shravyakanumilli@gmail.com](mailto:shravyakanumilli@gmail.com)<https://doi.org/10.46607/iamj2809022021>

(Published online: February 2021)

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Article Received: 09/01/2021 - Peer Reviewed: 24/01/2021 - Accepted for Publication: 07/02/2021

**ABSTRACT**

*Parikartika* is one of the ano-rectal diseases. Its references are available in *bruhatrayees* not as an independent disease but as an Iatrogenic. The word *Parikartika* means *Parikartanavath Vedana* around *Guda Pradesha*. In modern it can be correlated to fissure-in-ano. Fissure-in-ano has features like severe pain and burning sensation during and after defaecation, constipation, stools streaked with blood is a challenge to treat due to its nature of recurrence. The condition demands innovative techniques for its management. Many techniques are tried in its management, each by no means better than the other. Ayurvedic treatment is beneficial in such cases which includes conservative management like *deepana*, *pachana*, *vatanulomana* and *basti karma* and local application of *madhura-sheetha-snighdha dravyas*, *Taila poorana*, *Lepa* and *Pichu dharana*. A case study of patient having features of *Parikartika* was selected from OPD of SJIIM Bengaluru and *Yashadamrita Malahara pichu* was done for 7 days. Assessment was done on Pain, per rectal bleeding, hardstools, sphincter tone and burning sensation. Significant improvement was observed at the end of treatment.

**Keywords:** *Parikartika*, *Yashadamrita Malahara*, Fissure-in-ano

## INTRODUCTION

The health of an individual depends solely on his diet and lifestyle. Ayurveda is an ancient science of indigenous medicine, which is not only a medical science but an art of living in human beings. In this era of sedentary lifestyle, increased stress, unhealthy diet regimen, prolonged sitting, improper sleep habits etc., which alter whole process of digestion and excretion and inversely the rise in incidence of disease pertaining to anus and rectum. *Vyadhi Parikartika*” is one such condition affecting *guda* and its reference can be traced as far as 1500 BC back in *Sushruta samhitha*. The “then” etiology being iatrogenic as in the context of improper *Basti karma*, *Virechana vyapat* and clinical features exhibited are severe pain, burning sensation, bleeding during the process of defecation, hard stool and invariably features of *Vrana*. These features are Per se in Fissure-in-Ano of Modern surgery. A small longitudinal ulcer in long axis in lower anal canal from verge and not crossing the dentate line, accompanied by severe pain and burning sensation during and after defecation. About 30 – 40% of the population suffers from proctologic pathologies at least once in their lifetime. Anal fissure comprises of 10-15% of Anorectal disorders. Fissure in ano can be because of Primary or secondary causes like passage of hard stool and the pre exerted pressure during its voiding leads to a tear. The lower anal canal is supplied with same somatic nerves which supply the sphincter muscles. So, any irritation to the lower part of anal canal will cause sphincter spasm and then acute pain. During defecation the edges of fissure goes apart and due to lack of blood supply due to contraction which prevents its healing. This leaves a pit hole in the management techniques of Fissure-in-ano, demanding for an applicable therapy. The condition demands innovative techniques for its management.

Many techniques have been tried, each by no means better than the other. There is always a need for the cost effective, ambulatory and patient friendly method of management for *Parikartika*. The topical application of *Yashadamrita Malahara* from *Rasatarangini* which is mentioned as *Sarvavranaropana* is taken up for study with an intention of healing the acute ulcers at anal verge.

### Case Report-

A 32 year old male, married, engineer by Profession who is doing regular night shifts presented with complaints of severe excruciating pain, burning sensation at anal region, hard stool, stools streaked with blood since 3days consulted *Shalya Tantra* OPD of SJIIM Hospital, GAMC Bangalore.

The patient was apprehensive, and the pain was increasing with day to day activity He wanted immediate attention. He was not known case of Diabetes mellitus, Hypertension or had previous ano- rectal surgery. But had habitual constipation. On physical examination pulse rate was 76/min, regular with normal volume. Blood pressure was 120/90mmHg. All the laboratory investigations done were within normal limit.

**Systemic Examination:** Was done and clinically no abnormality has detected

### Local Examination

Per rectal examination revealed Active bleeding at the anal canal. On gentle separation of anal verge, a longitudinal tear extending from the anal verge was seen at 6 o'clock position extending approximately a cm inside the anus in midline. Digital rectal examination was not done as patient had severe pain due to sphincteric spasm. Based on clinical finding and local examination it was diagnosed as case of *Parikartika*.

Patient was reassured with proper treatment plan.

### Materials and Methods:

**Table 1:** Treatment was planned as follows:

<i>Sthanika chikitsa</i>	<i>Samanya chikitsa (Oral medication)</i>
<i>Yashadamrita Malahara pichu</i> for 7days	<i>Triphala guggulu</i> tid for 7 days
<i>Avagaha sweda</i> with <i>Ushna Jala</i>	<i>Triphala choorna</i> with warm water at bedtime for 7 days
<i>Pathya:</i> Rich fiber diet. Increased fluid intake	

**Table 2:** Assessment Criteria

1. <i>Guda daha</i> (burning sensation at anal verge)
2. <i>Guda peeda</i> (cutting pain)
3. <i>rakta srava</i> (bleeding)
4. sphincter tone

**Table 3:** Treatment course in Hospital

Sl.No.	Treatment	Day	Observation			
			Burning sensation at anal region	Pain	Stools streaked with blood	Sphincter tone
1.	<i>Yashadamria malahara pichu</i>	1 <sup>st</sup>	+++	+++	++	Spasm ++
		2 <sup>nd</sup>	++	++	++	Spasm++
		3 <sup>rd</sup>	++	++	+	Spasm+
		4 <sup>th</sup>	+	+	+	Spasm+
		5 <sup>th</sup>	+	+	0	N
		6 <sup>th</sup>	0	0	0	N
		7 <sup>th</sup>	0	0	0	N

**Photographs**



**DISCUSSION**

Clinically the improvement was seen from 2<sup>nd</sup> day itself. Burning sensation, pain around anal verge, Sphincter spasm, constipation and stool with blood streaks was also significantly reduced. Patient got better improvement with *Yashadamrita malahara pichu*. *Yashadamrita malahara* is prepared out of *Yashada Bhasma, Sikta, Tila taila*. *Yashada* is *Kashaya* and *tikta* in rasa and known for its *Vranaropana, Krimigna, Tridoshagna* properties. *Sikta* has antimicrobial and sustained drug delivery properties. *Tila taila* has *Vrana ropana, Krimighna, Lekhana, Tridoshaghna* properties. *Triphala* relieves constipation by its *Bhedana* action. Sitz bath also helps in *Vrana shodhana, Vedanasthapaka* and *Vrana ropaka*.

**CONCLUSION**

The use of *Yashadamrita malahara pichu* has a definite role in the treatment of fissure-in-ano in terms of earlier relief in cardinal and general symptoms and quick healing of ulcer too. In the present study it can be concluded that *Yashadamrita malahara pichu* showed effective in the management of fissure-in-ano (*Parikartika*). But, time demands to work on more patients and detail research.

**Acknowledgement**

The authors thank all faculties in the department of *Shalya Tantra*, Government Ayurvedic medical college, Bengaluru for their guidance and support in conducting the study.

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**Source of Support: Nil**

**Conflict of Interest: None Declared**

How to cite this URL: Shravya Kanumalli & Narmada M. G: Management Of Parikartika Wsr To Acute Fissure -In-Ano With Yashadamrita Malahara – A Single Case Study. International Ayurvedic Medical Journal {online} 2021 {cited February, 2021} Available from: [http://www.iamj.in/posts/images/upload/498\\_501.pdf](http://www.iamj.in/posts/images/upload/498_501.pdf)