

A CLINICAL CASE STUDY OF KALANUSARYADI TAILAM AS VRANA ROPAK IN THE MANAGEMENT OF PARIKARTIKA W.S.R. TO ACUTE FISSURE IN ANO.

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ABSTRACT

Ayurveda is an ancient science of indigenous Medicine, which is special in respect that, not only a medical science but an art of living in human beings. As explained ashtanga among which Shalyatantra is one of them. According to Ayurveda, Parikartika shows similarity with acute fissure in ano. Parikartika is characterised by Cutting pain specially in guda Pradesh. A fissure in ano is a common condition observed in both sexes, all age groups. Parikartika Is described in Sushrut samhita, Charak samhita, Ashtanga sangraha, Ashtanga hrudaya, Kashyap Samhita, Dalhan tika, Chakradatta. The ingredients of Kalanusaryadi tailam have ropan and anuloman properties which fulfils our treatment requirements of Parikartika. These ingredients are available and can be easily identifiable.

Keywords: *Parikartika, Acute fissure in ano, Kalanusaryadi tailam, Vrana ropan.*

INTRODUCTION

Ayurveda is the most ancient medical science having worldwide scope in preventive as well as curative medicine. There are so many Vyadhi described in Shalyatantra. Parikartika is one of them.

परिकर्तिका तत्र गुदानाम मेढ्रबस्ति शिरसु सदाह परिकर्त्नेमलसङ्गो । (सु. चि. ३४)

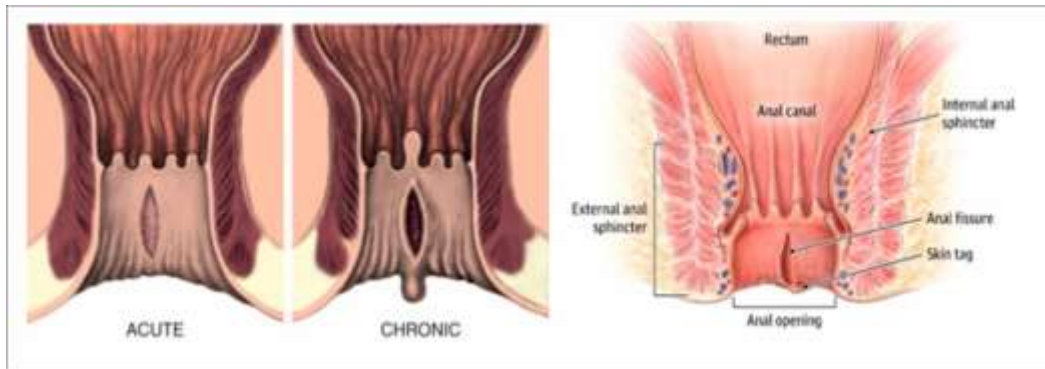
An fissure in ano, known as parikartika in ayurveda. It is a longitudinal tear in the lower end of the anal canal. it is the most painful condition affecting the

anal region. Fissure-in-ano occurs most commonly in the midline posteriorly. In the male, fissures usually occur in the midline posteriorly – 90% and much less commonly anteriorly – 10%. In females, fissures on the midline posteriorly – 60% are slightly commoner

than anteriorly – 40%. Acute fissure in females May occurs after vaginal delivery¹⁸.

In modern science, the disease fissure in Ano is of two types¹⁹

1) Acute and 2) Chronic.



An acute fissure is associated with spasms, burning pain during and after defecation, small cracks in the lower anal canal, and Bright streak bleeding along with the motion. If this doesn't heal it gradually develops into a chronic fissure in ano.

Among all references of samhita, No one has described surgical treatment for, parikartika. So, this can be treated with conservative treatment by using kashay and madhur rasa, Sheet virya dravya, basti, Picchabasti, yashtimadhu siddha sneha basti is mentioned.

The ingredients of this oil have anti- inflammatory, analgesic, complexion enhancer, hemostatic vasoconstrictor, wound healing activities. It reduces the burning sensation.

Acute fissure in ano has a prevalence rate of 17%.

this article describes a single case study of a patient having a single fissure in ano treated by Kalanusaryadi Tailam To evaluate its efficacy on burning and bleeding of Fissure as well as its Vranaropana properties too.

Materials and Methods –

1) Drug formulation-

कालानुसर्वादि तैलम्^[21]

कालानुसार्यागुर्व्वेलाजातीचन्दनपचकैः

शिलादावर्वा अमृतातुल्यैः तैलम् कुर्वति रोपणम्

(सु. सं. चि. २ व्रण)



<u>Dravya</u> ^[22]	<u>Latin Name</u>	<u>Guna</u>	<u>Rasa</u>	<u>Virya</u>	<u>Vipak</u>	<u>Karmukta</u>	<u>Prayojyaga</u>
Kalanusarya (Tagar)	Valeriana wallichii	Laghu, snigdha	Tikta, katu, kashaya)	Katu	Ushna	Ropan, Sitaprashamana.	Root
Agaru	Aquilaria agallocha	Laghu, ruksha, tikshna.	Katu, tikta.	Katu	Ushna	Vedanasthapan, Shothahar, dushta Vranashodhan.	Kanda sara
Ela	Elettaria cardamomum	Laghu, Ruksh	Katu, Madhur.	Madhur	Shit	Anuloman	Seed
Jati	Jasminum officinale	Laghu, snigdha, mrudu.	Tika, kashay	Katu	Ushna	Vranashodhan, vranaropana.	Leaf
Chandan	Santalum album	Laghu, ruksha	Tikta, madhur.	Katu	Shit	Dahaprashamana, Twakdosha.	Kanda sara
Padmak	Prunus cerasoides	Laghu	Kashay, tikta	Katu	Shit	Dahaprashamana, Vedanasthapan, vranaropana.	Stem
Darvi	berberis aristata	Laghu, ruksha.	Tikta, kashay	Katu	Ushna	Vranashodhan, vranaropana, Vedanasthapan.	Stem
Guduchi	Tinospora cordifolia	Guru, mrudu, snigdha	Tikta, katu, kashay.	Madhur	Ushna	Vedanasthapan, anuloman.	stem
Shilajit		Ushna	Tikta, katu, kashay	Katu	Ushna	Shoshana, Chedan, Jantu nashak.	
Sasyak	Blue vitriol	Ushna	Kashay, Madhur.	Katu	Ushna	Shulaghna, vibandhanasha	

Drug Preparation: - As per Sharangdhar Samhita the procedure is as follows

स्नेह निर्माण विधि^[25]

कल्काच्चतुर्गुणीकृत्य घृतं वा तैलमेव वा | चतुर्गुणे द्रवे साध्यं तस्य मात्रा पलोन्मिता
| निक्षिप्य क्वाथयेत्तोयं क्वाथद्रव्याच्चतुर्गुणम् | पादशिष्टं गृहीत्वा च स्नेहं तेनैव
साधयेत् || (शा. सं. मध्यम खंड ९/१)

तैल सिद्धि निर्देश^[26]

तदा फ्रेनोद्रमस्तैले फ्रेनशान्तिश्च सर्पिषी ।
गन्धवर्णसोत्पत्तिः स्नेहः सिद्धोभवेत्तदा ॥

(शा. सं. म. ९/१४)



A case report-

38 years old female patient in an OPD of Shalyatantra department of CSMSS Ayurved College, Aurangabad Having complaints of strict like bleeding

along with stool for seven days burning pain during and after defecation, and Constipation for two months is presented.

History of present illness: the 38-year-old lady was apparently all right two months back suddenly she got above complaints primarily she took some bulk laxatives; soothing ointments then came here for ayurvedic treatment.

Investigations: HB 11.2 gm %, BT 2 min 15 sec, CT 6 min 15 sec.

Personal history - no major illness.

family history - no major illness.

On examination-

GC - moderate, afebrile.

No pallor, No icterus.

Pulse rate - 82/ minute.

BP - 130/ 80 mm hg

Systemic examination

RS -clear.

CVS - S₁, S₂ present

CNS - Conscious, Oriented.

Local examination

Transfer fissure groove at 6:00 o'clock position.

Reddish color ulcer present.

P/R - Anal Spasm +

Sphincter tone - mild

Loaded Rectum.

measurements - 2mm.



On the basis of the above observation and history, we have diagnosed her as a case of acute fissure in ano. So, I have decided to go for the local application of Kalanusaryadi Tailam, And consent for the same was taken after explaining it to the patient. Necessary investigations were done like HB, BT, and CT. The patient was analyzed for 14 days in three follow-ups after every seven days.

Instruments

1. Gauze piece.
2. Kalanusaryadi Tailam.
3. Xylocaine Jelly.
4. Gloves no. 6 and 1/2.

Method of application.

Poorvakarma:

1. A lithotomy position was given to the patient.
2. After putting on gloves by using the index finger they looked in Jelly was applied over the annual region and a PR examination was done.

Pradhan karma

STANADARD OPERATIVE PROCEDURE -

- All the procedures were done in all aseptic precautions.
- The anal site was cleaned with betadine ointment.
- 5 ml Kalanusaryadi Taila was taken in the bowl.
- The sterile gauze is dipped into Kalanusaryadi taila and preparation of varti/ pichu is done. This varti/ pichu is easily inserted into the anus.
- All other precautions and instructions for avoiding infection were given to the patient.
- A proper dietary regimen was advised.

Pashchat karma –

Anal packing is done. The patient is advised to take Gandharva haritaki chuma 5-gram HS along with the local application of Kalanusaryadi Tailam BD. The patient was observed every seventh day and follow up for 14 days.

Results and Discussion

Sr. No.	sign and symptoms	first day	7 th day	14 th day
1.	Burning pain	++	+	-
2.	Streak like bleeding	+++	++	+
3.	Size of ulcer	2MM	2MM	1MM
4.	Sphincter tone (Anal spasm)	++	+	-
5.	Healing of ulcer	-	++	+++
6.	Constipation	Present	present	Absent

Today's lifestyle is very fast as well as it is very mechanical also. In this busy lifestyle, the physical and mental stress of workload is a very common thing. Dietary changes example fast-food, junk foods, cold drinks, etc cause GI diseases.

CONCLUSION

1. Parikartika is a common condition that affects 90% population.
2. Dietary changes mainly contribute to the recovery of a patient with gastrointestinal diseases.
3. Kalanusaryadi Tailam Is having a significant result in Vedana Sthapan, Ropan, Anuloman, and Dahaprashamana effect in an acute fissure in ano.
4. No adverse effects were seen during the treatment.

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