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TO STUDY THE SAFETY AND EFFICACY OF MRUDDARSHRUNGADYA MALHAR IN THE MANAGEMENT OF PARIKARTIKA WSR.TO FISSURE IN ANO

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ABSTRACT

Parikartika (Fissure in ano) is a very common and painful condition mainly due to modern life style and food habits. Its primary cause is constipation fissure in ano commonly encountered in surgical practice.In this recent era of fast food, fast daily routine, altered life styles with mental stress digestive problems are common along with anorectal diseases. Acute fissure-in-ano is having the prevalence rate in indian population due to spicy food, modern conservative treatment for fissure is temporary & surgical treatment for fissure is having high chances of complications like incontinence & recurrence.so there is need of any herbal effective formulation for fissure in ano,so .In this study we have studied 15 patients of parikartika .in this mruddarshrungdya malahar is used for the vran ropan .

Key words – parikartika , anorectal diseases,mruddarshrungadya malhar,fissure in ano.

Introduction

Ayurveda is an ancient science of indigenous medicine, which is not only a medical science but an art of living in human beings. In Bruhatrayee in Bastikarma vyapat¹, Vamana-virechana vyapat⁽²⁾⁽³⁾ and in Garbhini Chikitsa⁴ we get references of Parikartika.

Parikartika word derived from Sanskrit word 'parikrit-pari+kruntati means to cut around⁵. तत्र गुदनाभिमेट्टबस्तिशिरःसु सदाहं परिकर्तनमनिलसङ्गो वायुविष्टम्भो भक्त्तारुचिश्च भवति॥²

The Parikartika described in Sushrut Samhita characterized by Gudgat Kartanvat Shool, daha, anil sanga, vayu vishtambha² is similar to fissure in ano commonly encountered in surgical practice. It is an ulcer in the longitudinal axis of lower anal canal. Spasm & contracture of sphincteric muscle play a major role in fissure and several other anal infections⁶.

It is an ulcer in the longitudinal axis of lower anal canal. Spasm & contracture of sphincteric muscle play a major role in fissure and several other anal infections⁶.

Fissure in ano is a very common and painful condition mainly due to modern life style and food habits. It occurs commonly in the posterior midline of the anal canal which is least protected area. Its primary cause is constipation and other causes are spasm of the internal sphincter and excess skin removal during the haemorrhoidectomy.⁷ Secondary causes

of anal fissure are ulcerative colitis, Crohn's disease, syphilis, tuberculosis.⁷

There are 2 types of fissure in ano – Acute and Chronic. Acute is a tear of the skin of the lower half of the anal canal, there is little inflammatory induration or edema of its edges. Chronic fissure is a deep canoe shaped ulcer with thick edematous margins and a skin tag at the lower end known as sentinel pile. There is characteristic inflammation and induration at the margins along with pus or mucus discharge.⁸

Sushruta's in the Chikitsa of Parikartika tells vata-pitta shamak Chikitsa, Piccha Basti, Sneh processed in Madhur drug¹.

Modern treatment for acute fissure is oral analgesic, stool softener and soothing ointment. Surgical management include Lord's anal dilatation, fissurectomy and sphincterotomy, above mentioned surgical management of fissure is again agonizing due to its recurrence and complications like incontinence so to treat the fissure there is need of some medicinal formulation which should be easier to apply and cost effective⁹, safe and short term, so we made an effort to evaluate the effect of Mruddarshrunyadya Malhar in the management of Parikartika.

Aim & objectives –

- Study the vana Ropan effect of Mruddarshrunyadya Malhar in Parikartika
- Review of literature related to Parikartika as well as fissure-in-ano

- To conduct a clinical study of vranaropan effect of mruddarshrungadya malhar in Parikartika's vranaropan.
- To try to derive a standard & easily accessible, cost effective treatment for the disease parikartika (fissure-in-ano).

Material & methods –

Randomized controlled open clinical trial. Entire study is based on clinical findings.

Place Of Work :- Clinical trial were performed on group of randomly 15 patients from OPD & IPD. in shalyatantra dept. at our institute .

Drug review =

MRUDDARSHRUNGADYA MALHAR⁽¹⁰⁾

मृद्दारश्रृङ्गाद्यमलहर

पलैक सिक्थतैलन्तु पूर्वोक्तविधिसाधितम्

I

Content	Matra
Shuddha Mruddarshrung Churna	1 Tola
Siktha Tail	1 Pal

मृद्दारश्रृङ्गाद्यं चूर्णं शुद्धं तोलकसंमितम् ॥

१७३ ॥

सम्मेल्य काचफलके काचकुप्यां निधापये

त

अयं मृद्दारसश्रृङ्गाद्यो नाम्ना मलहरः स्मृतः

॥१७३॥

This formulation is explained in the context of In Rasa Tarangini 21th Tarang There Is Details Description Of Preparation & Uses Of Mruddarshrungadya Malhar Are Given²⁰ Prepared at our institutes pharmacy .

A) MRUDDARSHRUNGADYA

MALHAR⁽¹⁰⁾-PREPARED BY MIXING FINE POWDER OF MRUDDARSHRUNG 1 TOLA IN 1 PAL OF SIKTHA TAILA.

DRUG OVER VIEW-

Name	MRUDDARSHRING	TIL TAIL⁽¹¹⁾	MADHU CHISHTA⁽¹²⁾/SIKTHAK
English Name	Lithory	Sesamum Oil	Bee Wax
Paryay Names	Bodarshrungak Murdashankh Murdashankhak	-----	Madhuchishta, Sikthak, Madnak Mayan
Upyukt Anga	Powder	Oil	-----
Guna	Sheet	Ushna Virya	Mrudu, Snigdha
Roghnata Lepa	Vranaroon, , Kushthaghna,	Twachya, Keshya, Netra Hitkar, Seka, Abhyanga-	Kushta, Visarpa, Rakta Vikar- Nashak
Doshagh- Nata	Kaphapitta-Shamak.	Vata Kapha Shamak	Vata Shamak

Gandharva Haritaki Churna¹³-

Ingridients	Matra
Bal Haritaki	1 Part
Erend Tail	1 Parrt

Gandharva Haritaki Churna will be prepared at a pharmacy of ayurved college.

A). - MRUDDARSHRUNGADYA MALHAR⁽¹⁰⁾

- 1). Treatment course :- 14days
- 2). Follow up of patients :- 0,7,14days
- 3). Route of administration :- Local application of mruddarshrungadya malhar in anus by patient.

- First I guide to the patient that how to apply mruddarshrungadya malhar and then Patient will do at home for next 14 days and follow up after 7,14 days.
- Times :- Apply Malhar Before Toilet, After Toilet & At Bedtime. Daily For 15days
- Malhar Preparation :- Prepared Malhar Is Given To Patient For Application At Home.

Gandharva Haritki churna – 2gm with sukshosha jala at bedtime were given to the patient .

A). Inclusion criteria :-

1. Study include 15 patients.
2. . Pre-Diagnosed Parikartika Patients With Following Signs And Symptoms⁽²⁾
 - a. Parikartanvat Vedana (Prickling Sensation)
 - b. Gudgat daha (burning sensation at anus)

- c. GudagataRaktasrava (P/R Bleeding)
- d. Mala Vibandha (Constipation) :-

3. Patients Unwilling For Shalya Karma
4. Patients Unwilling For Kshar Karma & Agnikarma
5. Patients Between 18 To 60 Years Of Age
6. Patients Will Be Selected Irrespective Of Their Religion, Sex, Economic Status, Education, Occupation & Social Status

Exclusion criteria :-

1. . Patients Having Prameha(Iddm/Niddm)
2. Multiple Fissure In Ano As A Complication Of Skin Diseases
3. Known Case Of Std, Hiv
4. Known/Suspected Case Of Malignancy/Carcinoma Of Anus Or Rectum.
5. Fissure In Ano Secondary To Fistula In Ano, Piles, Ulcerative Colitis, Syphilis And Other Systemic Diseases.

GRADING FOR THE ASSESSMENT CRITERIA :-**For SUBJECTIVE CRITERIA¹⁴ :-****1). Gudagata Shoola (kartanvat Pain) :-**

Sr.no	Symptoms	Grades
1	No PAIN	0
2	MILD - (pain during bowel movements ,Not interfering normal activities)	1
3	MODERATE- (pain during and after defecationInterfering normal Activities)	2
4	SEVERE -(continuous excessive pain & crying)	3

2)Gudgat Daha (Burning Sensation At Anus)

Sr.no	Symptoms	Grades
1	No Burning Sensation	0
2	MILD-(Burning Sensation During Bowel Moments)	1
3	MODERETE-(Burning Sensation during & after defecation)	2
4	SEVERE-(Continuous Burning Sensation)	3

2). GudagataRaktasrava (P/R Bleeding) :-

Sr.no	Symptoms	Grades
1	No Bleeding	0
2	Mild- Very Slight Streak On Fecal Matter	1

3	Moderate- Streak With Intermittant Drops.	2
4	SEVERE-Drops with streak during & after the defecation with anxiety, weakness & anemia.	3

3). Mala Vibandha (Constipation) :-

Sr.no	Symptoms	Grades
1	Regular bowel with soft stool	0
2	Regular bowel with hard stool	1
3	Irregular bowel with hard stool	2
4	Irregular bowel with very hard stool	3

For Objective Criteria :-

1). Size of Ulcer :-

Fissure-in-ano is a vertical tear in anal canal Analogue scale were used for measurement. Grading will be done on the basis of length of fissure-in-ano.

Grade 1 - Small (<1cm)

Grade 2 - Medium (1cm-1.5cm)

Grade 3 - Big (>1.5cm).

2). Healing of Ulcer :-

Grade 0 - Complete healed ulcer with healthy scar

Grade 1 - Partially healed with healthy granulation tissue

Grade 2 - Cleaned ulcer without slough / discharge

Grade 3 - Ulcer with discharge.

Investigations :-

1. Total Hemogram
2. BSL-(R)
3. HIV
4. HBsAg

Results & observation -

This is clinical study carried out on 15 diagnosed patients of Parikartika, were selected as per inclusion & exclusion criteria. Written consent taken from each patient. For data analysis paired t test is used. As per our results mruddarshrungadya malhar shows significant results in the management of parikartika

Sr no	Complaints	No of patients	Mean		SD	SE	Total relief %	t value	P value
			BT	AT					
1	Gudagata Shoola (kartanvat vedanaPain)	15	2.65	0.43	0.67	8.01	72.2	7.29	<0.001
2	Gudgat daha	15	2.11	0.33	0.56	8.21	71.3	6.59	<0.001
3	GudagataRaktasrava (P/R Bleeding)	15	3.42	0.52	0.76	7.88	75.2	7.73	<0.001
4	Mala Vibandha (Constipation)	15	2.11	0.33	0.56	8.21	71.3	6.59	<0.001
5	Size Of Ulcer	15	2.53	0.44	0.43	7.90	73.2	7.53	<0.001
6	Healing of ulcer	15	2.86	0.81	0.59	7.11	76.11	8.11	<0.001

Discussion –

Mruddarshrungadya malhar having vrana shodhak, vrana ropan & specially gudamay har properties ie..useful in all anorectal diseases.so malhar helps in vrana ropan & reduce other symptoms like pain, burning & bleeding.gandharitakiva helps to reduce constipation ..Our study proves that mruddarshrungadya malhar is effective in the managemet of parikartika .

Conclusion –

- Mruddarshrungadya malhar is effective in the management of parikartika .
- There is no any side effect were seen in this study .

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