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# STUDY OF EFFICACY OF KHADIRADI KWATH IN FISTULA-IN-**ANO**

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#### **ABSTRACT**

Fistula in Ano i.e *Bhagandhar* is highly prevalent disease in today's era. Our modern lifestyle like sedentary lifestyle, heavy intake of fast food, junk food, office work, less exercise, heavy diet which leads to constipation and suppression of urges. Fistula in ano is a track of chronic translation connecting two epithelial lined surfaces. There is opening on exterior surface which is connected to abscess inside. It shows symptoms like Pus discharge, pain, burning sensation and itching. Khadiradi kwath is drug prescribed for Fistula in Ano in Sharangadhar Samhita. So present study is an attempt to view the effect of Khadiradi kwath in Fistula is Ano.

**KEYWORDS:** Fistula in Ano, *Bhagandhar*, *Khadiradi Kwath*.

#### **\*** INTRODUCTION

Ayurveda is the ancient science which deals with maintaining health of the person and treating illness of diseased person.<sup>[1]</sup> Person is said to be healthy only when he is free from any pain. The pain is of two types, namely physical and psychological. Physical pain is considered as Shalya in Ayurveda. Our Ayurveda has been divided into eight branches which is called as Ashtang Ayurveda and Shalya is one of them. [2] Shalyatantra is one of the branch of Ayurveda which deals with modern conservatives and surgical modalities.

The external or internal factors causing *prakopa* of *dosha* or *dushti* of *mala* or any other external substance which causes pain in the body is known as Shalya. This factor may be plant or animal origin. Shalyatantra deals with removal of unwanted substance which is

causing physical pain. This removal is done with the help of Blunt instruments (*yantra*), sharp instruments (*shastra*), *ksharkarma* and *Agnikarma*. It is also related with the wound.

Our modern lifestyle is mainly responsible for forming the lifestyle disorders of Gastrointestinal tract like Haemorrhoids (*Arsha*), Fissure in Ano (*Parikartika*), Fistula in Ano (*Bhagandara*), Abscess (*Vidradhi*), Malignant Growth (*Arbuda*), tumor (*granthi*), any glandular growth in the body (*gulma*) etc.

The word *bhagandara* is comprised of two terms '*bhaga*' and '*darana*', which is derived from root '*bhaga*' and '*dri*' respectively. [3] A study conducted by Sainio P. Described that the prevalence rate of fistula in ano is 8.6 patients in 100000 populations. This prevalence is 12.3 Patients in males and 5.6 patients in females per 100000 patients respectively. [4] According to modern science, it is a track of chronic translation connecting two epithelial lined surfaces. It is effected from an ano rectal abscess which burst spontaneously or opened inadequately. The disease has been named in accordance with that it bursts in the rectum, perineum, bladder and the place adjoining them. The blister appearing in above said region are called as *Pidika* in their un suppurate stage (*apakwawastha*) and they are called *bhagandara* when they are in stage of suppuration. [5]

Fistula in ano is the disease for which many types of surgical, Para surgical and medicinal treatments are described in our classical Ayurvedic texts. This vast description is suggestive of that none of the treatment is satisfactory or complete. *Acharya Sushruta* given details of surgical excision of fistulous tract. But also he gave description of para surgical treatment since he was not quite satisfied in the surgical excision due to its reoccurrence. They given the alternative option like *ksharsutra* for patients which is unfit for surgery. In this, the *ksharsutra* treatment has nil reoccurrence, but it takes long duration to cut the tract and heal wound. *Khadiradi kwath* helps in inhibiting the pathogenesis of the *bhagandara vyadhi* and ot does not take very long duration to heal the tract and also there is nil recurrence with having minimum expenditure.

Khadiradi kwath breaks Samprapti of Bhagandara. <sup>[6]</sup> In Bhagandhara, Tridoshas, rakta, mamsa, Meda dhatu are Vitiated <sup>[7]</sup> as well there is rasa dhatu kshaya. <sup>[8]</sup> Khadiradi kwath is preferred in Rakta, mamsa, Meda, srotas dushti due to their Krumighna properties. <sup>[9]</sup> It decreases Kleda, dushta kapha, snehansha in the body by its tikta kashaya rasa and rukshata property <sup>[10]</sup> Snigdha in Meda dhatu is decreased by rukshan and stambhana property. <sup>[11]</sup>

*Mamsa dhatu dushti* is cured by *ghrita*<sup>[12]</sup> by improving the activity of *Jatharagni* due to its *deepan* and *agnivardhan* property. In this study, *khadiradi kwath* is given to 10 patients of Fistula in ano and effect is assessed by subjective parameters like pain, discharge, burning sensation and itching.

#### \* Aim

To evaluate the effect of *Khadiradi kwath* in Fistula in Ano.

## **\*** Objective

- 1. To evaluate the effect of *Khadiradi kwath* in Fistula in Ano.
- 2. To observe any side effects of *Khadiradi Kwath*.

#### **\*** MATERIAL AND METHODS

#### Selection criteria

#### **Inclusion criteria**

- 1. Patients between age group of 20 to 65 years were selected.
- 2. Patients with low anal fistula, high anal fistula, subcutaneous fistula, submucus fistula and ischiorectal fistula were selected.
- 3. Patients will be selected irrespective of sex, marital status, religion, education and economical status.
- 4. Patients of Fistula in Ano having following symptoms-
- Pain
- Discharge
- Burning sensation
- Itching

## **Exclusion criteria**

- 1. Patients presented with tubercular or any other infectious cases along with fistula in ano
- 2. Patients of fistula in ano suffering from serious systemic illness.

## Preparation of drug

# Khadiradi kwath<sup>[13,14]</sup>

- A. Khadir 10 gm
- B. Amalaki 10 gm
- C. Bibhitak 10 gm

- D. *Haritaki* 10 gm (above all powder drug mixed in one polythene pouch)
- E. *Vidanga churna* 2.5 gm (in separate polythene pouch)
- F. Ghrita 5 gm (advised to patient take itself upon one table spoon)

## Method of preparation

*Khadiradi kwath* is prepared as per mentioned in *Sharangadhar Samhita* as follows<sup>[15]</sup> *Khadir, Amalaki, Bibhitaki* and *Haritaki* each raw drugs were taken clean and dried. Proper authentication and Standardization is done. Each raw drug was made separately with the help of mixer grinder in yavakuta form and stored in polythene pouch to protect from moisture.

Khadiradi kwath is Krumighna, Rukshan, Rasayan, Stambhana, Vranashodhak and Vranaropaka properties. The properties of each drug is as follows:

Dravya	Latin name	Rasa	Veerya	Vipaka	Guna	Karma
Khadir	Acacia catechu	Tikta, kashaya	Sheeta	Katu	Laghu, ruksha	Stambhana, rukshana, shothahara, vedanasthapaka, kaphapitta nashak
Amalaki	Emblica officinalis	Madhur, Amla, Katu, tikta, kashaya	Sheeta	Madhur	Laghu, ruksha	Rasayana, tridoshaghna
Bibhitaki	Terminalia belerica	Kashaya	Ushna	Madhur	Laghu, ruksha	Rasayana, tridoshaghana, anulomana
Haritaki	Terminalia chebula	Madhur, katu, amla, katu, kashaya	Ushna	Katu	Laghu, ruksha	Rasayana, Tridoshaghna
Vidanga	Embeliva ribes	Katu	Ushna	Katu	Laghu, ruksha, tikshna	Krumighna, vranaropaka, Vedanasthapaka
Goghrita	-	Madhur	Sheeta	Madhur	Guru, snigdha	Vatapittakapha vinashaka

## **Investigations**

All routine investigations of blood and urine were done for all the cases. Along with this, few specific investigations were also performed.

A. Blood examinations

CBC with ESR

BSL(R)

- B. Urine examination: routine and Microscopic
- C. Some specific Investigations

IgG for tuberculosis

Montoux test

Biopsy for fistulous tract on suspected case of tubercular fistula.

HIV for AIDS

D. Radiological investigations

X ray chest PA view

#### **Methods**

Total 10 patients were selected and treated.

## **Treatment**

Khadiradi kwath- 20 ml .....0.....20 ml after meal

**Duration** –15 days

Follow up – after 15 days

## Statistical analysis

By Paired 't' test.

## **Assessment criteria**

## 1) Pus discharge

No pus discharge	0
Very negligible pus diachrge	1
Scanty pus discharge	2
Profuse pus discharge	3

## 2) Pain

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

## 3) Burning Sensation

No burning sensation	0
Negligible burning sensation	1
Tolerable and occasional burning sensation	2
Intolerable and continuous burning sensation	3

## 4) Itching

No itching	0
Occasional itching with 5-6 hrs gap	1
Frequent itching with 2-3 hrs gap	2
Continuous itching	3

## **OBSERVATION AND RESULTS**

The response of treatment was observed and recorded on a case paper and data collection by clinical study.

Sr. no.	Assessment criteria		Pus Discharge	Pain	Burning sensation	Itching
1.	Case 1	BT	2	2	2	2
		AT	0	0	1	0
2.	Case 2	BT	2	3	2	2
		AT	1	2	1	0
3.	Case 3	BT	2	1	0	2
		AT	1	0	0	1
4.	Case 4	BT	0	1	2	2
		AT	0	0	1	1
5.	Case 5	BT	1	1	2	0
		AT	0	1	1	0
6.	Case 6	BT	0	2	3	2
		AT	0	0	1	1
7.	Case 7	BT	2	3	2	1
		AT	0	1	1	0
8.	Case 8	BT	2	2	3	3
		AT	1	1	2	1
9.	Case 9	BT	3	2	2	2
		AT	1	1	1	1
10.	Case 10	BT	0	2	0	2
		AT	0	0	0	0

(BT- Before Treatment, AT- After Treatment)

## **RESULTS**

Effect of Khadiradi Kwath on cardinal symptoms of Fistula in Ano is as follows

Cardinal Symptoms	N	Mean BT	Mean AT	S.D.	S.E.	ʻt'	P value	Result
Pus	10	1.4	0.4	0.667	0.211	4.7393	P<0.001	H.S.

Discharge								
Pain	10	1.9	0.6	0.455	0.143	9.09	P<0.001	H.S.
Burning Sensation	10	1.8	0.9	0.322	0.101	8.91	P<0.001	H.S.
Itching	10	1.8	0.5	0.455	0.143	9.09	P<0.001	H.S.

(BT- Before treatment, AT- After treatment, S.D- Standard Deviation, S.E.- Standard Error of mean)

#### DISCUSSION ON KHADIRADI KWATH

After seeing all the contents of Khadiradi Kwath, they have properties like Tiksha and kashaya rasa, sheeta veerya, Katu vipaka and laghu & ruksha guna. So the properties of Khadiradi kwath can be taken as

Rasa- Tikta, kashaya

**Veerya-** Sheeta,

Vipaka- Katu,

Guna- Laghu, Ruksha

By viewing above properties, it is clear that all these drugs are very effective to break the pathogenesis of bhagandara i.e. Fistula in Ano. It separate the vititaed substance from Dhatus and reaches to minute cell level. It does the separation of Vitiated dosha by doshapak action, which facilitates the separation and elimination of Vitiated doshas along with debris from dhatus. It also works as krumighna and kledapachaka. Ghrita removes sloughs and absorb discharge (shodhana) and enhances the process of ropana (healing process).

Khadiradi kwath is highly significant in Fistula in Ano at p value 0.001. The statistical analysis is done by paired 't' test.

#### **CONCLUSION**

Fistula in Ano is commonly occurring disease. It is a track of chronic translation connecting two epithelial lined surface. There is formation of abscess which open to exterior through duct. There may be presence of discharge through that opening. Also Fistula in ano has Pain at the site, burning sensation at anal region and itching around the opening.

Khadiradi kwath has krumighna, medoghna, shoshghna, kledapachaka, raktashodhana, rasayana, shodhana properties. It breaks the pathogenesis of fistula is ano. It separates and eliminates Vitiated doshas from dhatus along with debris. Ghrita in this medicine removes sloughs and absorbs discharge and enhances the process of *shodhana*.

*Khadiradi Kwath* shows highly significant effect on Fistula in Ano. There is considerable decrease in mean value between before Treatment and after Treatment. It is highly significant at p value 0.001.

## **BIBLIOGRAPHY**

- 1. Dr. Kaviraj Atridev Gupta, Ashtang Hrudyam Sutrasthan by Chaukhambha Prakashan, Varanasi, 2016; 1: 5.
- 2. Trikamaji J. Sushrut Samhita of Sutrasthana with Nibandhsangraha commentary of Shri Dalhanacharya, Chaukhambha Sanskrit Prakashan, Varanasi, 1994; 8.
- 3. Sushrut Samhita edited by Ambikadutta Shastri in Ayurveda Tatva Sandipika, Choukhambha Sanskrit Sanstham, Varanasi, 2004.
- 4. Saino P., Fistula in Ano in a defined population- incidence and epidemiological aspects, annales Chirurgiae et Gynaecologiae, 1984; 73(4): 219-24.
- 5. Sushrut Samhita edited by Dr. Priyavat Sharma, Choukhmabha Vishawabharati Varanasi, Chikitsasthanam, 349.
- 6. Acharya Shriradhakrushnaparashar Ayurved Charya, baidyanath Ayurvedbhavan, Nagpur Sharangadhar Samhita Madhyama khanda, 1994; 4: 2, 134 216.
- 7. Dr. Ganesh Krishna Garde, Sarth Vagbhata part 1, Raghuvanshi Prakashan, 1996; 8, 28, 1-3: 438.
- 8. Dr. Anantaram Sharma, Sushrut Samhita Sutrasthana, Sushrut Vimarshini hindi commentary vol 1, Chaukhambha Surbharati Prakashan, Varanasi, 2015; 33, 4-5: 259.
- 9. Dravyaguna vigyan (2<sup>nd</sup> Volume), Chaukhambha Bharati Academy, Varanasi, Priyavat Sharma, 4: 503.
- 10. Dravyaguna vigyan (2<sup>nd</sup> Volume), Chaukhambha Bharati Academy, Varanasi, Priyavat Sharma, 4: 159.
- 11. Dravyaguna vigyan (2<sup>nd</sup> Volume), Chaukhambha Bharati Academy, Varanasi, Priyavat Sharma, 4: 758.
- 12. Ashtang Sangraha Sutrasthan, Dr. Ravidatta Tripathi, Chaukhambha Sanskrit Pratishthan, Delhi, 2001: 102.
- 13. Dravyaguna vigyan (2<sup>nd</sup> Volume), Chaukhambha Bharati Academy, Varanasi, Priyavat Sharma, 4: 753.
- 14. Dravyaguna vigyan (2<sup>nd</sup> Volume), Chaukhambha Bharati Academy, Varanasi, Priyavat Sharma, 4: 931.

15. Acharya Shriradhakrushnaparashar Ayurved Charya, baidyanath Ayurvedbhavan, Nagpur Sharangadhar Samhita Madhyama khanda, 1994; 2, 134: 216.

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