

## THE EFFECT OF *HARIDRA SPHATIK RAL* OINTMENT IN THE MANAGEMENT OF *PARIKARTIKA* (FISSURE-IN-ANO): A CASE REPORT

Dr. Ajay Shelke<sup>\*1</sup>, Dr. Vitthal Kasle<sup>2</sup>, Dr. D. W. Lilke<sup>3</sup> and Dr. Aditya R. Shevate<sup>4</sup>

<sup>1</sup>Pg Scholar In Shalya Tantra Dept., Government Ayurved College and Hospital Osmanabad.

<sup>2</sup>Assistant Professor, Shalya Tantra Dept., Government Ayurved College and Hospital Osmanabad.

<sup>3</sup>Associate Professor and Hod of Shalya Tantra Dept., Government Ayurved College and Hospital Osmanabad.

<sup>4</sup>PG Scholar In Shalya Tantra Dept., Government Ayurved College and Hospital Osmanabad.

Article Received on  
24 September 2024,

Revised on 13 October 2024,  
Accepted on 03 Nov. 2024

DOI: 10.20959/wjpr202421-34475



**\*Corresponding Author**

**Dr. Ajay Shelke**

Pg Scholar In Shalya Tantra  
Dept., Government Ayurved  
College and Hospital  
Osmanabad.

### ABSTRACT

A 34-year-old male patient came to the OPD complaining of hard stool, burning pain in the ano (during and after defecation), and per rectal bleeding during defecation from the previous month. A longitudinal tear at the anal canal midline posterior was seen during the clinical examination. This trauma was brought to anal canal by passages of hard stool a month ago. Parikartika, or Acute fissure in ano, the term is used to describe this condition. Local application of *Haridra Sphatik Ral* ointment was used in this case. *Haridra* being anti inflammatory, *Sphatik* having astringent action and *Ral* comprises healing properties hence it is used for this case. Ointment form is chosen because of its easy application on the fissure. A noticeable symptomatic relief after 15 days of treatment was seen.

**KEYWORDS:** *Parikartika*, *Haridra Sphatik Ral* Ointment.

### INTRODUCTION

In *Ayurveda* condition associated with "Kartanvat Vedana" in the anal region is suggested by the word *Parikartika*.<sup>[1]</sup> Brihatryi describes *Parikartika* as a consequence of certain

Panchakarm procedures, such as Vaman and Virechan Vyapad<sup>[2]</sup>, Bastikarma Vyapad<sup>[3]</sup>, and Vaatvyadhi Atisara Vyapad.<sup>[4]</sup>

In modern science, it is described as a separate disease which is actually a linear tear in the anal canal that may stretch from the mucocutaneous junction to the dentate line having clinical symptoms of burning pain in ano and per rectal bleeding like streak of blood on stool mainly. It is caused most commonly by frequent Constipation and Diarrhoea.

Also sedentary habits, spicy foods and low fibre diet factors which causes and predisposes acute fissure (Parikartika). Anal canal being the site of many bacterias due to stool and hence a source for infection which can worsen a simple fissure. Fissure is treated by antibiotics, analgesics, laxatives, and local applications. If not relieved by this treatment, it can even lead to Fissure Bed Abscess and Fistula in ano which needs surgical treatment.

*Parikartika is a longitudinal linear cut ulcer in ano so can be considered as Sadya Vrana.* For *Sadya Vrana* treatment in Ayurveda *Ropan Karma* is chosen which is one of the sixty *Upkrama* of *Vrana* described by *Acharya Sushruta*. *Haridra* being anti inflammatory and anti bacterial, *Sphatik* having astringent action hence act as *Raktastambhak* and speeds up wound contraction and *Ral* comprises healing properties i.e *Ropan* effect, the drugs are used to prepare ointment for Fissure. The study is carried out to see the effect of Haridra Sphatk Ral Ointment and to find out successful alternative options of location application for Fissure in ano and significant results in symptoms.

### **Etiology and Pathophysiology**

Ruksha, Tikshna Ahar taken by Saam and Mrudu Koshti person it causes Agni Dushti i.e. vitiation of Pitta takes place there is formation of Ama in Amashaya, this Aam Dosha along with vitiated Apan Vayu causes Grathit mala i.e. Malavasthambha in which mala became Shushka and hard. This produces trauma to Guda Pradesh during defecation and causes cutting pain in anus region ultimately results into *Parikartika* formation.

### **CASE STUDY**

A 34 year Male Patient came in OPD with the symptoms of

- *Gudadaha* (Burning at Anal region)
- *Saraktmalpravrutti* (Bleeding during defecation)
- *Malavstambh* (Constipation)

### History of present Illness

Patient was apparently well & Asymptomatic before 1 month ago. Later he developed hard stool. Due to which symptoms get developed and Gradually increases of *Guda Daha* (Burning at Anal region), *Guda Pradeshhi Vedana* (Pain at anal region), *Saraktmalpravrutti* (Bleeding during defecation).

<b>Past History</b> HTN – No history in past DM - Non Diabetic CVE - No History Stroke in Past IHD - No History of IHD TB - No History of TB BA - No History of Bronchial Asthma	<b>Personal History</b> Marital status - Married Tobacco - No History Alcohol - NAD Family History Father - HTN Mother – NAD
<b>O/E (On Examination)</b> GC - Fair Pulse - 78/min Bp - 120/90 mm/Hg Spo2 - 96% RR - 20/ min Pallor - Absent Icterus - Absent	<b>Asthvidh Pariksha</b> <i>Nadi</i> - Pitta kaphaj <i>Mala</i> - 1 times/day <i>Mutra</i> - 5-6 times/day <i>Jiva</i> -Niram <i>Shabd</i> - Prakrut <i>Sparsh</i> -Samshitoshna <i>Druka</i> - Prakrut <i>Aakruti</i> - Madhyam
<b>S/E (Systemic Examination)</b> RS - AEBE Clear CVS - S1S2 NORMAL CNS - Conscious Oriented GIT - Liver, Spleen, kidney Not Palpable	

### Local examination of *Gudavrana*

#### INSPECTION

Acute fissure seen at 6 O'clock position without fresh bleeding

Without sentinel tag

#### N/E/O

- Ext haemorrhoid
- Ext fistulous track opening

#### DIGITAL RECTAL EXAMINATION

- Spasm present
- Tenderness present
- Proctoscopy not done due to spasm

## MATERIAL AND METHODS

Presenting Complaints of Patient Treatment advice along with Pathyapathya and Sitz bath.

1. Daily local application of Haridra Sphatik Ral ointment – BD For 15 days.
2. Sitz bath with warm water.

### Methods for Measurements

Subjective criteria

Gradation for Symptom

1. Burning Pain

SR.NO	SIGN	GRADE
1.	NO PAIN	0
2.	Pain at the time of defecation and subside within 30 min	1
3.	Pain at the time of the defecation and persist for 30 min to 1 hour	2
4.	Continuous unbearable pain which persist more than 1 hour	3

2. PR BLEEDING

SR.NO	BLEEDING PER RECTUM	GRADE
1.	NIL	0
2.	1 to 5 drops	1
3.	5 to 10 drops	2
4.	> 10 drops	3

3. ULCER IN ANO

SR.NO	ULCER IN ANO	GRADE
1.	NO ULCER	0
2.	Clean and healthy ulcer	1
3.	Presence of ulcer with indurated margins without sentinel tag	2
4.	Presence of ulcer with indurated margins and slough without sentinel tag	3

## RESULT

Sr.no	Symptom	Before treatment	7 <sup>TH</sup> DAY	15 <sup>TH</sup> DAY
1.	Gudapradeshi Daha (Burning at Anal region)	3	1	0
2.	Saraktmalpravrutti (Bleeding during defecation)	2	1	0
3.	Ulcer in ano	2	1	0

## DISCUSSION

*Parikartika* has vitiated *Apan Vayu*. Whenever Patient eat Hot, Spicy, Salty food aggravate the Pitta Dosha. Dry, Stale Food, Less Fiber Diet, Less Drinking of Water this hetu aggravate the Vata Dosha Increase the *Rukshata* (dryness) of stool. Pressure on anal canal due to Hard Stool Causes ulcer at Anal Opening and Symptoms Arises Mild to Severe burning pain with bleeding during defecation. *Haridra Sphatik Ral* Ointment can be used in burning pain of fresh wound/ulcer. As it's contents have *Vranaropak* and *Raktastambhak* properties. Due to these properties, it is useful in management of *Sadya Vran* hence acute fissure in ano (*Parikartika*).

## CONCLUSION

From this Study It is clear that *Parikartika* Cases Can be managed with Ayurveda treatment in Initial Stage. We should try these *Shaman* treatments along with a sitz bath to quickly relieve Burning Pain. Change in lifestyle and healthy diet is very important in the management of *Parikartika* (Anal Fissure). This is a Single Case Study large Scale Case Study needed with this Ayurveda treatment.

## REFERENCES

1. *Sushrut*, Acharya Priyavat Sharma, *Shushruta Samhita*, Uttarrardha, chikistastan 34/16, *Chaukhamba Prakashan*, 2017; 439.
2. *Shushrut*, Acharya Priyavat Sharma, *SUSHRUT SAMHITA*, 2nd part, Chikitsasthan 34/21, *Chaukhamba Prakashan*, 441 or Charak, Acharya Priyavat Sharma, *Charak Samhita*, 2nd part *Marathibhashantar*, *Charak Siddhisthan* 6/61-67 *Chaukhamba prakashan*, 910.
3. Charak, Acharya Priyavat Sharma, *Charak Samhita*, 2nd part *marathibhashantar*, *Charak Siddhisthan* 6/54-57, *Chaukhamba prakashan*, 910.
4. Charak, Acharya Priyavat Sharma, *Charak samhita*, 2nd part *marathibhashantar*, *Chikisathan* 19/5, *Chaukhamba prakashan*, 458.
5. *Rajanighantu* of Pandit Narhari Edited by Dr Indradeo Tripathi, *Chukhamba krishndas Academy*, Varanashi, *Piplyadi varga*, 199.
6. Shri Bhavmisra, Bhavprakash Nighantu Shri Bramhasankar Misra and Shri Rupalalaji vaisy *Chaukhambha Sanskrit Bhawan Varanashi* First part Edition Reprint, 2015; 620.
7. *Rajanighantu* of Pandit Narhari Edited by Dr Indradeo Tripathi, *Chukhamba krishndas Academy*, Varanashi, *Prabhadradi varga* Page no 80.