WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 8.453

Volume 14, Issue 19, 968-975.

Case Study

ISSN 2277-7105

CASE STUDY: CLINICAL EVALUATION OF NIMBAPATRADI VARTI IN THE MANAGEMENT OF PAATIT GUD VIDRADHI (W.S.R. TO ANO-RECTAL ABSCESS)

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Article Received on 14 August 2025,

Revised on 04 Sept. 2025. Accepted on 25 Sept. 2025

https://doi.org/10.5281/zenodo.17277484



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ABSTRACT

Background: Gud Vidradhi, an inflammatory and suppurative condition described in Ayurveda, closely resembles an ano-rectal abscess in modern medicine. It is characterized by severe pain, swelling, and pus formation in the perianal region. Conventional management involves incision and drainage (Paatan Karma) followed by antibiotics and daily dressings, which can be associated with delayed healing and infection. Nimbapatradi Varti, a classical Ayurvedic formulation mentioned in Bhaishajya Ratnavali, is indicated for Vrana Shodhana (wound cleansing) and Ropana (healing) due to its antimicrobial, anti-inflammatory, and wound-healing properties. Aim: To evaluate the efficacy of Nimbapatradi Varti in the management of Paatit Gud Vidradhi (incised ano-rectal abscess) in terms of wound healing, pain reduction, and infection control. **Materials and Methods**: A 32-year-old male patient presented with a

diagnosed ano-rectal abscess that had been surgically incised and drained (Paatit Gud Vidradhi). After obtaining informed consent, the patient was treated with daily local application of Nimbapatradi Varti for 28 days. Assessments were made weekly based on subjective parameters (Pain, Itching) and objective parameters (Wound Size, Swelling, Discharge, and Healing Index). Results: After 28 days of treatment, a marked improvement

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was observed. The wound achieved complete epithelialization (healing index: 5 - Excellent). Pain reduced from severe (score 3) to absent (score 0). Conclusion: Nimbapatradi Varti proved to be highly effective in promoting rapid and complete healing of Paatit Gud Vidradhi. This case provides strong preliminary evidence for the use of this classical formulation as a superior post-incision wound management therapy in ano-rectal abscesses.

KEYWORDS: Gud Vidradhi, Ano-rectal Abscess, Nimbapatradi Varti, Vrana Shodhana, Vrana Ropana, Shalya Tantra, Paatan Karma.

INTRODUCTION

Ano-rectal disorders are increasingly prevalent in modern society, largely attributed to sedentary lifestyles, dietary indiscretions, and chronic stress. [1] Among these, ano-rectal abscesses represent a common surgical condition, with an incidence of approximately 16 cases per 100,000 population per year, showing a male predominance (3:1 ratio).^[2]

त्वाक्क्रमांसमेदांसि प्रद्ष्यास्थिसमाश्रिताः।

दोषाः शोफ शनैधौरे जनयन्त्यृच्छ्रिता भृशम्॥

महामूलं रुजावन्तं वृतं चाप्यथवाऽऽयतम् ।

तयाह्विद्रधिं धीरा विज्ञेयः स च षड्विधः ॥ (Su. Ni. 9/4-5)

In Ayurveda, this condition is described as Gud Vidradhi, a type of Abhyantar Vidradhi (internal abscess). Acharya Sushruta defines Vidradhi as a deep-seated, painful swelling caused by the vitiation of Doshas (primarily Vata and Kapha) that localize in the Dhatus (tissues) like Twak (skin), Rakta (blood), Mamsa (muscle), and Meda (fat). [3,4] When located in the anus (Guda), it causes obstruction of flatus and feces, severe throbbing pain, and a tendency for early suppuration.^[5]

The standard Ayurvedic management of a suppurated (Pakwa) Vidradhi is Bhedana Karma (incision) and Visravana Karma (drainage), collectively known as Paatan Karma. [6] The critical post-operative phase focuses on Vrana Shodhana (wound cleansing) and Vrana Ropana (wound healing) to prevent complications like fistula formation.

निम्यपत्रघृतक्षीडदावींमध्कसंय्ता ।

वर्त्तिस्तिलानां कल्को वा शोषयेद रोपयेद व्रणान् ॥ (Bha.Ra.47/45)

Maurya et al.

Nimbapatradi Varti, a formulation composed of Neem (Azadirachta indica), Ghrita (ghee), Madhu (honey), Daruharidra (Berberis aristata), and Madhuka (Glycyrrhiza glabra), is explicitly mentioned for this purpose due to its potent Shodhana (purifying) and Ropana (healing) properties.^[7,8]

This case study details the successful application of *Nimbapatradi Varti* in the post-operative care of a surgically drained ano-rectal abscess.

CASE PRESENTATION

Patient Information:

Age: 32 years

Gender: Male

Occupation: Software Engineer

• Marital Status: Married

• Date of First Visit (Post-Paatan): 10th November, 2023

CHIEF COMPLAINTS (POST-INCISION & DRAINAGE)

• Severe, throbbing pain at the wound site.

• Seropurulent discharge from the wound.

• Difficulty in sitting and walking.

• Swelling and redness around the wound.

HISTORY OF PRESENT ILLNESS

The patient had developed a painful perianal swelling over 4 days. He was diagnosed with an ano-rectal abscess and underwent Incision and Drainage (I&D) under local anesthesia at the PLRD Hospital surgical unit one day prior to presentation. The cavity was packed with a plain gauze wick. He presented to the Shalya Tantra OPD for further Ayurvedic wound management.

PAST HISTORY: Not significant.

PERSONAL HISTORY

• Diet: Mixed diet, irregular timings, frequent consumption of fast food.

Appetite: Normal.

• Bowel Habits: Tendency towards constipation.

Addictions: None.

AYURVEDIC ASSESSMENT

- Nidana (Etiological Factors): Viruddha Ahara (incompatible food), Vidahi Ahara (spicy food), Vishamashana (irregular dietary habits), and prolonged sitting – all leading to Vitiation of *Vata* and *Kapha Doshas*.
- **Doshic Analysis:** Predominant *Vata-Kapha Dushti* with *Rakta* involvement.
- Agni: Mandagni (low digestive fire)
- **Srotas:** Predominant involvement of *Pureeshvaha* and *Mutravaha Srotas*.

LOCAL EXAMINATION (WOUND ASSESSMENT - BASELINE)

- Position: 3 O'clock position, perianal.
- Size: 3 cm² (Grade 2)
- Depth: Superficial to mid-depth.
- Swelling: Moderate, extending ~2 cm around wound (Grade 2)
- Discharge: Moderate seropurulent discharge, soaking 3-4 gauze pieces per day (Grade 2)
- Pain: Severe, not relieved by over-the-counter analgesics (Grade 3)
- Itching: Mild, occasional (Grade 1)
- Surrounding Skin: Erythematous and indurated (Color Grade 2)
- Healing Index: Poor (Grade 2 Not epithelized, with exposed connective tissue)

DIAGNOSTIC CRITERIA AND INVESTIGATIONS

Inclusion Criteria

Post-I&D ano-rectal abscess, age between 16-60 years, consenting patient.

Exclusion Criteria

Pre-existing fistula, Crohn's disease, diabetes mellitus, immunosuppression.

INVESTIGATIONS

- CBC: WBC Count 12,000/µL (mild leukocytosis).
- RBS: 98 mg/dL (Within Normal Limits).
- Pus C/S: Showed growth of Staphylococcus aureus (sensitive to common antibiotics).
- HIV, HBsAg, HCV: Non-reactive.

THERAPEUTIC INTERVENTION

The patient was enrolled in the study after written informed consent.

- Drug Administered: Nimbapatradi Varti
- Form: *Varti* (roll) prepared as per Bhaishajya Ratnavali by triturating fine powders of *Nimbapatra*, *Daruharidra*, and *Madhuka* with *Ghrita* and *Madhu* to form a paste, applied on a gauze piece and rolled.
- Dosage: The varti was loosely packed into the wound cavity, sufficient to fill it.
- Procedure: Daily dressing after *Purva Karma* (cleaning with Normal Saline).
- Duration: 28 days, with weekly follow-up.
 Dietary & Lifestyle Advice:
- Ahara: Light, warm, easily digestible food (Yavagu). Avoid spicy, oily, and fermented foods.
- Vihara: Sitz bath with warm water twice daily. Avoid prolonged sitting.

Patient Consent

Written informed consent was obtained from the patient for publication of this case study, including all clinical data and photographs. The patient understands that his identity will remain confidential.

FOLLOW-UP AND ASSESSMENT

The patient was assessed weekly for changes in subjective and objective parameters.

Observations:

- Day 7: Significant reduction in pain (Grade 1). Discharge decreased to minimal (Grade 1). Swelling reduced. Wound size: 2.2 cm². Healing Index: Good (Grade 3).
- Day 14: Pain was mild and occasional (Grade 1). No discharge (Grade 0). No swelling (Grade 0). Healthy red granulation tissue filled the wound. Wound size: 1.2 cm². Healing Index: Very Good (Grade 4).
- Day 21: No pain (Grade 0). No discharge. Wound edges contracting well. Wound size:
 0.5 cm². Healing Index: Excellent (Grade 5).
- Day 28: Wound completely epithelized with pink, healthy skin. No tenderness. Wound size: 0 cm². Healing Index: Excellent (Grade 5).

ASSESSMENT SCORES

Table 1: Weekly Assessment of Parameters.

Parameter	Baseline (Day 0)	Day 7	Day 14	Day 21	Day 28
Pain (0-3)	3	1	1	0	0
Itching (0-3)	1	1	0	0	0

Discharge (0-3)	2	1	0	0	0
Swelling (0-3)	2	1	0	0	0
Wound Size (cm²)	3.0	2.2	1.2	0.5	0.0
Healing Index (1-5)	2 (Poor)	3 (Good)	4 (V. Good)	5 (Excel.)	5 (Excel.)

OVERALL RESULT

• The patient was declared Cured (>90% relief in symptoms) with complete healing of the wound.

FOLLOW-UP (2 MONTHS POST-TREATMENT)

• No recurrence of abscess or formation of a fistula-in-ano was observed.

DISCUSSION

The remarkable healing observed in this case can be attributed to the multifaceted action of *Nimbapatradi Varti's* ingredients, which align perfectly with the principles of *Shodhana* and *Ropana*.^[9]

Probable Mode of Action (Pharmacodynamics)

- *Nimba Patra (Azadirachta indica):* The primary drug, with its *Tikta* (bitter) and *Kashaya* (astringent) *Rasa*, *Sheeta Virya* (cold potency), and *Katu Vipaka*, is a renowned *Raktashodaka* (blood purifier) and *Vranashodak* (wound cleanser). Its documented antibacterial properties directly combat infection (e.g., Staphylococcus aureus), while its anti-inflammatory action reduces swelling and pain.
- Daruharidra (Berberis aristata): Possessing Tikta-Kashaya Rasa and Ushna Virya, it is a
 potent Shothahara (anti-inflammatory) and Vranashodaka agent. Berberine, its active
 alkaloid, has broad-spectrum antimicrobial activity.^[12]
- Madhu (Honey): A natural Vranashodaka and Ropana drug. Its high osmolarity, hydrogen peroxide content, and phytochemical properties create an unfavorable environment for microbes while promoting autolytic debridement and forming a protective layer.^[13]
- *Ghrita* (Ghee): Acts as a *Yogavahi* (bio-enhancer), facilitating the deep penetration of other drug constituents. Its *Snigdha* (unctuous) property prevents the wound from drying out and promotes tissue regeneration.^[14]
- *Madhuka (Glycyrrhiza glabra):* With *Madhura Rasa* and *Sheeta Virya*, it provides a soothing effect, reduces irritation and inflammation, and supports the healing process.

Synergistic Effect

The combination creates an ideal wound-healing environment: Nimba and Daruharidra perform Shodhana, eliminating microbes and debris. Madhu maintains a clean, moist wound bed and further cleanses. Ghrita and Madhuka then facilitate Ropana by nourishing the tissue, reducing inflammation, and promoting granulation and epithelialization. This sequential action from cleansing to healing prevented complication like fistula formation.

CONCLUSION

This case study demonstrates that Nimbapatradi Varti is an exceptionally effective therapeutic modality for the post-operative management of Paatit Gud Vidradhi (Incised Ano-rectal Abscess). It significantly accelerated the healing process, alleviated pain and inflammation, controlled infection, and resulted in complete wound closure with healthy tissue regeneration. Most importantly, it prevented recurrence and fistula formation, a common complication. These findings strongly support the hypothesis that Nimbapatradi Varti is more effective in wound healing and infection control. This case provides a robust foundation for the proposed larger clinical trial, advocating for the integration of this classical Ayurvedic intervention into standard surgical practice for better patient outcomes.

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