

A CLINICAL STUDY TO EVALUATE THE ROLE OF “SARIVADI GUDA VARTI” FOR PAIN MANAGEMENT IN POST OPERATIVE CASES OF FISSURECTOMY

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INTRODUCTION

- In Ayurvedic texts, various terms such as, Ruk, Ruja, Vedana and Shoola are commonly used for pain, however, ‘Shoola’ is more appropriate term amongst all which means - a condition with state of discomfort to body and mind. Thereby, stating the definition of Shool as experience similar to driving a nail into the body of the person.^[1]
- In pain and burning sensation management post operatively, Surgeons do prefer using OPOIDS and NSAIDS drugs, but both of these have their own side effects like gastric pain, mucosal erosion/ulceration etc. Application of soothing ointments and gels digitally have doubtful efficacy.^[2]
- To resolve all these problems and to overcome it there is a need to evolve an effective treatment by Ayurvedic approach in pain and burning sensation management post operatively.
- In literature of Ayurveda all Samhitakaras explained causes of pain, characters and its managements under respective orders and

treatment. But in Sushruta samhita it is explained as important troublesome symptom of all types of Vranas and there is detailed description about its management. Shoola is the main feature in Vrana. The plan of treatment of Shoola is old in Shastiupakrama by Sushruta.

This case study explores the effectiveness of “Sarivadi gudavarti in post of fissurectomy cases.

AIM AND OBJECTIVES

A clinical study to evaluate the role of “Sarivadi Gudavarti” for pain management in post operative cases of Fissurectomy.

MATERIALS AND METHODS

- After authentication of all drugs Kwatha was prepared as per Bhashajya Ratnawali and then Ghruta Siddhi was done from Kwatha and after adding bee wax moulding was done and Sarivadi Suppository was prepared of each 1 gm.^[3-4]

Ingredients of drug.

| Sr. no | Dravya | Latin Name | Used Part | Proportion |
|--------|----------------|-------------------------------------|------------------------|------------|
| 1 | Sariva | Hemidesmus Indicus R.Br. | Root (<i>Mula</i>) | One Part |
| 2 | Madahuka | Glycyrrhiza Glabra Linn. | Root (<i>Mula</i>) | One Part |
| 3 | Chandana | Santalum Album Linn. | Kandsara (Heart Wood) | One Part |
| 4 | Raktchandana | Pterocarpus Santalinus Linn.F. | Kandsara (Heart Wood) | One Part |
| 5 | Padmaka | Prunus Cerasoides D. Don. | Kanda | One Part |
| 6 | KashamariPhala | Gmelina Arborea Linn. | Phala | One Part |
| 7 | MadhukaPushpa | Madhuca Indica Koen. | Puspa | One Part |
| 8 | Ushira | Vetiveria Zizanioides (Linn.) Nash. | Clusters Of Wiry Roots | One Part |

METHODOLOGY

Source of data

- YMT Ayurved Medical college and Hospital. Samhita's and modern books of surgery, Pharmacy attached to college for the preparations of the drugs, international and national medical journal and surgical journals and magazine's, OPD, IPD, Labs, X-Ray, other provisions of the hospitals were availed to do this intended work.

Consent- An understanding was given to the patients about the trial and a written consent was taken from the patients.

Material/Drug- For this clinical study important materials which were used in the study was SARIVADI Gudavarti.

Site of administration and dosage of Gudavarti- 1 Varti (1gm each) Per Rectum immediate post operative followed by 12 hourly followed by 24 hourly on 1 day followed by dose on 2nd, 3rd, 4th, 5th, 6th, 7th day.

Storage of Gudavarti- Air tight (Aluminum foil) in cool and dry place.

Sample Size

- 05 Patients.

Duration: 7 days

Follow up – 0th day, 3rd day, Day 7th

METHODS**Inclusion Criteria**

- Age group (18-60) yrs
- Both gender
- All patients diagnosed and operated with Fissure in ano.

Exclusion Criteria

- Immuno-compromised patients.
- Secondary Infected wound
- Uncontrolled Diabetes mellitus

TREATMENT PROTOCOL

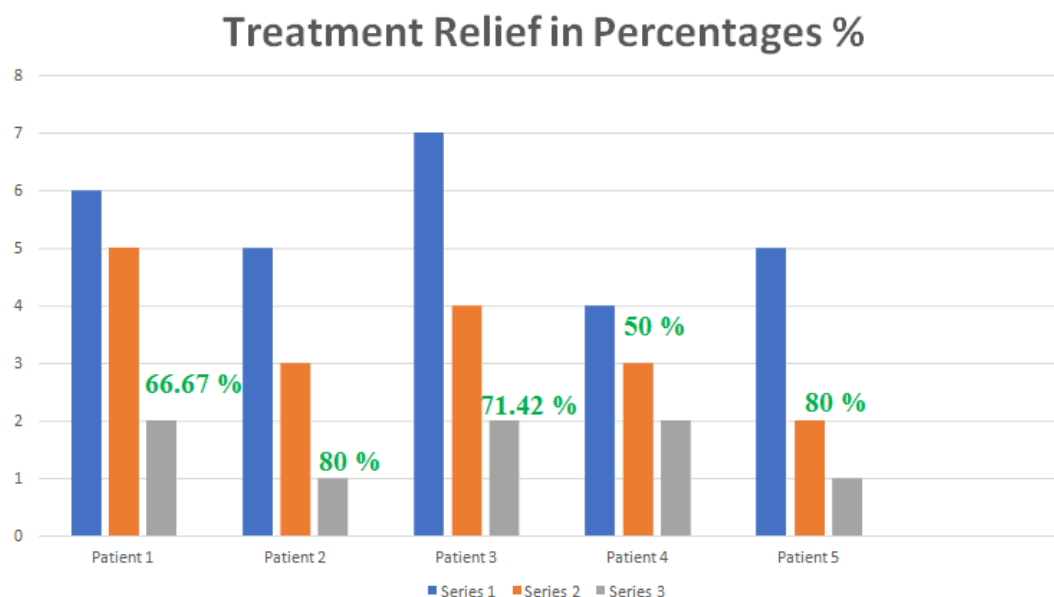
- Patient will be followed up for 7 days postoperatively.
- *Sarivadi* Gudavarti which will be administered in once a day dose for 7 days.
- 3 days antibiotics.
- Sitz bath twice day.
- *Ghandhrava haritaki choorna* 4 gm with luke warm water at night.
- Oral (Tab Enzoflam) and IV (Inj Dynapar) analgesics-----SOS.

ASSESSMENT CRITERIA

The patient response will be assessed on the basis of following parameters.

| Symptoms | Grade 0 | Grade 1 | Grade 2 | Grade 3 |
|------------|------------|---------------|------------------------------|------------------------------------|
| Pain (VRS) | No Pain | Bearable Pain | Pain relieved with sitz bath | More severe pain, needs Analgesics |
| Pain (NRS) | On scale 0 | On scale 1-3 | On scale 4-6 | On scale 7-10 |

| Sr. No. | ASSESSMENT SCORE | | | Difference (BT – AT) | Relief in percentage % |
|---------|-----------------------------------|-----------------------------|-----------------------------------|----------------------|------------------------|
| | Post op Day 0 th (B.T) | Post op Day 3 rd | Post op Day 7 th (A.T) | | |
| 1 | 6 | 5 | 2 | 4 | 66.67% |
| 2 | 5 | 3 | 1 | 4 | 80% |
| 3 | 7 | 4 | 2 | 5 | 71.42% |
| 4 | 4 | 3 | 2 | 2 | 50% |
| 5 | 5 | 2 | 1 | 4 | 80% |



OBSERVATION AND RESULTS

1. Patient 1 started with a score of 6 (indicating the severity of pain) on the 0th day. By the 7th day, their score reduced to 2, showing a substantial improvement. The difference in scores is 4, which translates to a 66.67% relief in symptoms.
2. Patient 2 had an initial score of 5. This score decreased to 1 by the 7th day. The difference here is 4, with the treatment providing a 80% relief in symptoms.
3. Patient 3 began with a score of 7, which decreased to 2 by the 7th day, a difference of 5. This patient experienced a 71.42% relief in symptoms, which signifies a considerable response to the treatment.
4. Patient 4 had a starting score of 4. By the 7th day, the score reduced to 2. This resulted in a 50% relief, suggesting a less significant response to the treatment.
5. Patient 5 had an initial score of 5, which improved to 1 by the end of the treatment period. The difference of 4 points also leads to a 80% relief in symptoms, marking significant improvement. Overall, patients 1, 2, 3, and 5 show substantial improvement, as indicated by the high percentage of relief.

Patient 4 shows some improvement but to a lesser extent than the others.

DISCUSSION

05 patients were registered for the study. All the patients were subjected through pre-clinical laboratory investigation and undergone through Fissurectomy. All patients appeared for the assessment of the results. all patients were subjected to administered to 1 Sarivadi Gudavarti in immediately post operative and followed by daily administration and patients were observed for decrease in pain and final assessment was done. It was seen that after insertion of suppository immediate post operatively and once the anesthesia effect is gone the duration onset of the pain was increased of about 2-3 hours once the anesthesia effect is gone and once pain was started then again the 1 suppository was inserted which disintegrated completely within an hour and clinically it was observed that the pain started to reduce in 30minutes to 1hour. It is seen that per rectal action of drug was faster than oral route with no adverse reaction or discomfort.

By screening the ingredients of SARIVADI Gudavarti it can be seen that it gives relief in pain post operatively in Fissurectomy caeses after administration per rectaly. It melts and disintegrates within 30 minutes to 1 hour and absorbs through external heamorrhoidal veins and by passes liver and goes into the porto systemic circulation and acts faster than oral route.

CONCLUSION

In Shastra Karma we include Fissurectomy for Fissure in Ano which causes severe pain post operatively. Pain has been utmost importance even in Ayurveda offering varied treatments to cure the same. And this study shows significant effect in pain management in post operative cases of Fissurectomy. Sarivadi Gudavarti prepared by using of Vednasthapak and Dahashamak Dravya is found very effective in the context of pain (Shool). During the observation we can see that after using Sarivadi Gudavarti pain was reducing and it was very convenient method to reduce pain in post operative NBM period. During our clinical study none of patient had developed any adverse drug reaction, no side effect was seen.

REFERENCES

1. Susruta, Gulmapratishedh. In: Prof. K. R. Srikantha Murthy, Susruta Samhita uttarardha, 2nd ed. Varanasi: Chaukhamba Orientalia, 2005; 271, 42: 81.
2. Das S. A Concise Textbook of Surgery. Chap. -54 The rectum and anal canal. 5th ed. Calcutta: Dr. S. Das Publishers, 2009; 1085.

3. Angadi Ravindra. A text book of Bhaishya Kalpanvigyana. 2nd ed. Varanasi. Chaukhamba publication, 2011; 217.
4. Angadi Ravindra. A text book of Bhaishya Kalpana vigyana. 2nd ed. Varanasi. Chaukhamba publication, 2011; 218.