ABSTRACT

The phenomenon of formation of wound as a result of inflammation and abscess, it’s repair and treatment by means of Shadhi upakrama or Saptokrama is the fundamental major contribution of Acharya Sushruta. An ano-rectal abscess originates from an infection arising in the crypto-glandular epithelium lining of the anal canal spreading into adjacent spaces and resulting in fistulas in ~40% of cases. The classic locations of anorectal abscesses, listed in order of decreasing frequency are as follows: perianal (60%), ischiorectal (20%), intersphincteric (5%), supralevator (4%), and submucosal (1%). The treatment of Guda vidradhi (Anal abscess) is early, adequate & dependent drainage. Hence Sushruta has indicated Bhedana Karma along with local application of Karanjadi Ghrita to promote early healing and prevention from other infections due to its anti-inflammatory and anti-bacterial property. This paper will be based on a case study of anal abscess with the above mentioned line of treatment. 

Keywords: Guda Vidradhi, Anal abscess, Bhedana karma, Karanjadi Ghrita

INTRODUCTION

Acharya Sushruta has described Guda vidradhi (Anal abscess) under antarvidradhu. Vidradhi remains as a localized painful condition, with all the features of Vrana shotha (inflammation) with severe pain, tendency of early suppuration. Guda vidradhi is co-related with anal abscess on the basis of symptom. The origin of anal abscess mostly by an infection or blockage at an anal gland and many times, resulting from blood born infection or low immunity resistance. A perianal abscess is an infection in a mucous-secreting gland in the anal canal around anus. An ano-rectal abscess originates from an infection arising in the crypto-glandular epithelium lining of the anal canal (in 80-90%) spreading into adjacent spaces and resulting in fistulas in 40% of cases. The most cardinal feature of Guda vidradhi (Anal abscess) according to Ayurveda as well as modern medical science is severe pain at anal region and patient has unable to pass flatus and stool because he afraid from defecation due to unaffordable severe pain. Ayurveda as well as modern science described same line of treatment in the presence of pus. Acharya Sushruta mentioned that Bhedan Karma should be done at the most prominent part for evacuation of dosha. Acharya Sushruta has given much importance to this multidisciplinary management for the all sorts of surgical wounds. However, Acharya Sushruta has specifically mentioned tikutta ras, shodhaka, ropaka durgs in the management of drained open infected cavity As “karanjadi ghrita”, the Bhedan Karma (incision & drainage) and application of Karanjadi Ghrita in the stage of Guda vidradhi (Anal abscess) may to be a new break through for the resolution of process of abscess formation.

Definition

Acharya Charaka described that due to very early or acute suppuration by vitiated blood in abundance, it is called Vidradhi. Abscess means localized collection of pus (dead and dying neutrophils with proteaceous exudate). When abscess around lower rectum and anal canal are known as anorectal abscess. 

Nidana (Cause)

Description of aharaja nidana about Guda Vidradhi/ Antar Vidradhi(abscess in internal part of body) by Vrihatrayi has enlisted in the table...

<table>
<thead>
<tr>
<th>S.N.</th>
<th>Aharaja Nidan</th>
<th>CH. Sambhita</th>
<th>SU. Sambhita</th>
<th>Aastanga Hridaya</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Sita/parusit avara</td>
<td>+</td>
<td>-</td>
<td>+</td>
</tr>
<tr>
<td>2</td>
<td>Vidhi</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>3</td>
<td>Usta</td>
<td>+</td>
<td>-</td>
<td>+</td>
</tr>
<tr>
<td>4</td>
<td>RukshA</td>
<td>+</td>
<td>-</td>
<td>+</td>
</tr>
<tr>
<td>5</td>
<td>Suska</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>6</td>
<td>Ati bhojan</td>
<td>+</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>
Viharaj Nidan

Table 1b: Viharaj nidana(factor) for Guda vidradhi (Anal abscess)

<table>
<thead>
<tr>
<th>S.N.</th>
<th>Viharaj Nidana</th>
<th>CH. Samhita</th>
<th>SU. Samhita</th>
<th>Aastanga Hridaya</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Vega vidharana</td>
<td>+</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>2</td>
<td>Shrana</td>
<td>+</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>3</td>
<td>Anuchita vyayama</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>4</td>
<td>Anuchit nidra asana</td>
<td>+</td>
<td>-</td>
<td>+</td>
</tr>
<tr>
<td>5</td>
<td>Bhar vahan</td>
<td>+</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>6</td>
<td>Addhya</td>
<td>+</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>7</td>
<td>Ati maithuna</td>
<td>+</td>
<td>+</td>
<td>-</td>
</tr>
</tbody>
</table>

Aagantuja Nidan

Sometimes foreign materials like piece of wood, bamboo or glass etc. enter the body and if they not extracted from body they cause vitiation of blood and suppuration in muscles and produced abscess.

Etiology

- Physical – Trauma, Heat or cold, Radiation
- Chemical – Simple chemical poisons eg. acids
  - Organic poisons eg. paraquat
- Infective – Bacteria, Parasites, Viruses
- Immunological - Antigen-antibody Cell mediated

Samprapti (Pathology)

Table 2: Samprapti ghataka of Guda vidradhi (Anal abscess)

<table>
<thead>
<tr>
<th>Dosha Adhisthan</th>
<th>Ati maithuna</th>
</tr>
</thead>
<tbody>
<tr>
<td>Astha</td>
<td>-</td>
</tr>
<tr>
<td>Jatharagnijanya</td>
<td>+</td>
</tr>
<tr>
<td>Dhatvagnijanya</td>
<td>+</td>
</tr>
<tr>
<td>Sanga</td>
<td>+</td>
</tr>
<tr>
<td>Vimarganam &amp; Atipravritti</td>
<td></td>
</tr>
<tr>
<td>Anashaya (Kapha, Pitta), Pakvashaya (Vata)</td>
<td></td>
</tr>
<tr>
<td>Guda pradesh</td>
<td>+</td>
</tr>
<tr>
<td>Bahya and Abhyantara</td>
<td></td>
</tr>
<tr>
<td>Ashukari</td>
<td>-</td>
</tr>
</tbody>
</table>

Pathophysiology

**Inflammation**

- Permeability
- Reticuloendothelial
- Bacteriology

- Exudation of protein
- Macrophages
- Release of toxins & enzymes

- Fibrin formation
- Release lysosomal enzymes
- Tissue destruction

- Pyogenic membrane
- Liquefaction of tissue

- Pus
Classification – According to Ayurveda\textsuperscript{20,21}
Bahya Vidradhi (external part of body)
Antar Vidradhi (internal part of body)
- (Guda vidradhi (Anal abscess) has included among antar Vidradhi.)

Classification – According to modern view\textsuperscript{22}
1. Peri-anal (60%)
2. Ischiorectal (20%)
3. Submucosal (1%)
4. Intersphincteric (5%)
5. Pelvi-rectal (supralevator) (4%)

Clinical Feature
- Severe throbbing pain\textsuperscript{23}
- Indurations, itching perianal region \textsuperscript{24}
- Frank evidence of abscess like fluctuation need not be seen and is a late sign.
- High grade fever with chills and rigors.
- Common in diabetic person.
- Per rectal examination is painful and boginess can be appreciated on the side of the lesion.
- If not treated it will be create fistula-in-ano.

Investigation
- Hematological examination
- Urine analysis - Routine
- Microscopic

Specific investigation\textsuperscript{25}
- Pus cultures test
- Radiological investigation
- Computed tomography (CT), Magnetic resonance imaging (MRI)
- Trans rectal Ultra sonography (TRUS)

Differential Diagnosis
- Inflammatory bowel disease\textsuperscript{26}
- Infected hemorrhoids
- Fissure-in-ano
- Fistula-in-ano
- Acute proctitis
- Abscess of cowper’s gland or bartholin’s gland\textsuperscript{27}

Management
Principles of treatment of Guda Vidradhi (anal abscess)-
Bhedana karma (Incision & Drainage)

Acharya Sushruta has described oblique and curved incision according to the place\(^5\). Curved incision has two types half moon faced (semi-circular) and full moon faced incision (circular). In the case of ano-rectal region half moon faced (circular) incision should be applied\(^5\). Bhedana karma has always performing to the pattern of hair.

Dressing with Karanjadi Ghrita in the wound of Guda vidradhi (Anal abscess) is an ambulatory type of treatment which gives quick action.

Karanjadi Ghrita

Table 3: Content & their action of Karanjadi Ghrita

<table>
<thead>
<tr>
<th>DRUG</th>
<th>Rasa</th>
<th>Veerya</th>
<th>Vipaka</th>
<th>Dosha Karma</th>
<th>Pradhana KARMA</th>
</tr>
</thead>
<tbody>
<tr>
<td>36 KARARANJA</td>
<td>Tikta, Katu, Kashaya</td>
<td>Usrna</td>
<td>Katu</td>
<td>Kapha-vata shamak</td>
<td>Vranaistothagha, Raktashodhaka, Twakarogahara,</td>
</tr>
<tr>
<td>36 JATI</td>
<td>Tikta, Kashaya</td>
<td>Usna</td>
<td>Katu</td>
<td>Tridosha shamak</td>
<td>Vranashodhaka, Vranaropaka, Vednasthapana</td>
</tr>
<tr>
<td>36 PATOLA</td>
<td>Tikta, Kashaya</td>
<td>Usna</td>
<td>Katu</td>
<td>Tridosha shamak</td>
<td>Vedanasthapana, Vranashodhana-ropana, Sothahara, Krimighna</td>
</tr>
<tr>
<td>36 NIMBA</td>
<td>Tikta, Kashaya</td>
<td>Sheeta</td>
<td>Katu</td>
<td>Kaph-Pitta shamak</td>
<td>Vranaropana, Jantughna, Shothagha, Raktashodhaka</td>
</tr>
<tr>
<td>36 HARIDRA</td>
<td>Tikta, Katu</td>
<td>Usna</td>
<td>Katu</td>
<td>Tridosha shamak</td>
<td>Vranaropana, Vranashodhana, Raktaprasadhan, Shothagha</td>
</tr>
<tr>
<td>36 DARU-HARIDRA</td>
<td>Tikta, Kashaya</td>
<td>Usna</td>
<td>Katu</td>
<td>Kaph-pitta shamak</td>
<td>Vedanasthapana, Vranashodhana-ropana, Raktashodhaka</td>
</tr>
<tr>
<td>46 MADHUCHHISTA</td>
<td>Madhura, Kashaya</td>
<td>Sheeta</td>
<td>Katu</td>
<td>Pitta shamak</td>
<td>Jantughna, Vranaropaka, Sandhaniya</td>
</tr>
<tr>
<td>46 YASHTI-MADH</td>
<td>Madhura</td>
<td>Sheeta</td>
<td>Madhura</td>
<td>Vata-pitta shamak</td>
<td>Dahashamaka, Vedanasthapana, Shothahara, Varnya,</td>
</tr>
<tr>
<td>46 KATUKA</td>
<td>Tikta</td>
<td>Sheeta</td>
<td>Katu</td>
<td>Kaphu-Pitta shamak</td>
<td>Shothahara, Dahaprasamana, Lekhana, Shothahara</td>
</tr>
<tr>
<td>46 PRIYANGU</td>
<td>Tikta, Kashaya, Madhura</td>
<td>Sheeta</td>
<td>Madhura</td>
<td>Trido Shashamak</td>
<td>Dahaprasamana, Vedanasthapana, Raktashodhaka, Stamibha</td>
</tr>
<tr>
<td>46 KUSHA</td>
<td>Madhura, Kashaya</td>
<td>Sheeta</td>
<td>Madhura</td>
<td>Tridosha shamak</td>
<td>Dahaprasamana, Vranashodhana, Raktaprasadana</td>
</tr>
<tr>
<td>46 JALAVETASA</td>
<td>Kashaya, tikta</td>
<td>Sheeta</td>
<td>Katu</td>
<td>Kapha-Pitta shamak</td>
<td>Vedanasthapana, Dahaprasamana, Raktastambhan</td>
</tr>
<tr>
<td>46 CHANDANA</td>
<td>Tikta, madhura</td>
<td>Sheeta</td>
<td>Katu</td>
<td>Kaphu-Pitta shamak</td>
<td>Dahaprasamana, Durgandhahara, Twagdosshahara,</td>
</tr>
<tr>
<td>46 MANJISHTHA</td>
<td>Madhura, tikta, kashaya</td>
<td>Ushna</td>
<td>Katu</td>
<td>Kapha-Pitta shamak</td>
<td>Vranashodhana, Shothahara, Krimighna</td>
</tr>
<tr>
<td>46 USHR</td>
<td>tikta, madhura</td>
<td>Sheeta</td>
<td>Madhura</td>
<td>Vata-pitta shamaka</td>
<td>Dahaprasamana, Raktaprasdana, Raktastambhanka,</td>
</tr>
<tr>
<td>46 KAMALA</td>
<td>Kashayama dhura, tikta</td>
<td>Sheeta</td>
<td>Madhura</td>
<td>Kapha-pitta shamaka</td>
<td>Dahaprasamana, Stamibha, Shonasthapana</td>
</tr>
<tr>
<td>46 SARIVA</td>
<td>Tikta, madhura</td>
<td>Sheeta</td>
<td>Madhura</td>
<td>Tridosha shamaka</td>
<td>Raktaprasadha, Shothahara, Dahaprasama</td>
</tr>
<tr>
<td>46 TRIVRITA</td>
<td>Katu, tikta, kashaya</td>
<td>Ushna</td>
<td>Katu</td>
<td>Pitta-kapha sanshidhaha</td>
<td>Shothahara, Raktashodhaka, Bhedana, Rechana</td>
</tr>
<tr>
<td>46 GO-GHrita</td>
<td>Madhura</td>
<td>Sheeta</td>
<td>Madhura</td>
<td>Tridosha shamaka</td>
<td>Vranaropaka, Vranashodhak, Vranavedana shamaka</td>
</tr>
</tbody>
</table>

COMPLICATION

- Fistula formation\(^5\)
- Bacterimia and sepsis
- Fecal incontinence\(^5\)
- Death – Death due to anal abscess is not commonly seen but sometimes infection will spared to whole body by blood and produce septicemia.
- Recurrence of abscess due to improper care.

DISCUSSION

Acharya Sushruta has suggested Bhedana Karma in all kinds of Vidradhi. In the case of Guda vidradhi (Anal abscess) patient suffering with severe pain and become restless due to the pus collection at anal region. In this condition Bhedana Karma must require for the drainage of pus. And give packing with vranashodhaka (drug which have properties to clean a wound), ropak varti (suppositories formed by healing enhancing properties drugs). Most ingredients of Karanjadi Ghrita vrana.
shodana (cleaning) and ropana (healing) properties. Maximum contents of this drug were having tikta and kashaya in rasa. Tikta and kashaya rasa promote the granulation of tissue and wound healing by his shodhana and ropana properties. Some of drugs have vedana-shapana (analgescic) properties & shothahara (reduce inflammation) qualities, dha shamaka (reduce burning sensation) property. Karanjadi Ghrita has stopped bacterial growth and have toxicity by the jantughna (reduce infection) and vishagha (reduce toxicity) properties of contents.

CONCLUSION

Ayurveda explained Guda vidradhi (Anal abscess) under the classification of antar-Vidradhi, which occurs at Guda pradesh (anal region) and characterized by obstruction of flatus along with all symptoms of Vidradhi (abscess). It’s repair and treatment by means of Shashti upakrama (sixty types of treatment) or Sapto-krama (seven types of treatment) is the fundamental major contribution of Acharya Sushruta. The treatment of Guda vidradhi (Anal abscess) is early, adequate & dependent drainage. Hence, Acharya Sushruta has indicated Bhedana Karma along with local application of Karanjadi Ghrita.

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Cite this article as:

Source of support: Nil, Conflict of interest: None Declared

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