



Case Study

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PARIKARTIKA: CASE STUDY

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ABSTRACT

Nowadays, patients suffering from constipation with ano-rectal diseases are quite high in number. The causes vary from unhealthy diet regimen to hectic lifestyles. It is common in working individuals as well as homemakers. Longitudinal tear in the lower end of anal canal results in fissure-in-ano. It is most the painful condition affecting the anal region. Various factors which contribute to development of fissure are hard feces, surgical procedures, diseases like Crohn's disease, ulcerative colitis, and enthusiastic usage of ointments and abuse of laxatives, sphincter hypertonia, improper diet etc. Constipation results in hard stool passage which is painful and resulting in fissure. In some cases fissure may be associated with small perianal abscess resulting in worsening of pain. Clinical features include pain during and after defecation, burning in nature, lasting for half to one hour because of which defecation is postponed. Stools are hard, pellet like and there is a drop of blood or streak of fresh blood. Acute and chronic are two types of fissure. In Ayurvedic samhitas, Parikartika (fissure in Ano) resembles with fissure-in-ano having cutting and burning pain at Guda (Anus). The factors responsible for Parikartika are found as Basti-Virechana Vyapad (Complication of the Basti and Virechana procedures), Arsha (piles), Atisara, Grahani, etc. The objective of this short case study was to demonstrate the effectiveness of Ayurvedic medicines so as to treat the disease. The patient had a history of parikartika during pregnancy which had been treated earlier, but it had re-occurred. With the help of Ayurvedic medicines parikartika had been cured completely.

Keywords: Guda, Parikartika, Malavashambha, Garbhini vyapad, kartanvat vedana, Basti Netra, Fissure in Ano.

INTRODUCTION

The vyadhi Parikartika has been described in Charaksamhita Siddhithana chapter seven in Niruhastivypada¹. Sushrut samhita has also described the disease². It has also been described in the complications of Garbhini (pregnant lady) in the Kashyapa samhita, Khilasthana³.

Case

Patient-ABC
Gender-Female
Age-29years
Occupation-Housewife
Vegetarian

Table 1: Rugna Parikshana (Patient Examination)

S. No	Parikshana (Examination)	Findings
1	Nadi (pulse)	prakrut, kaphapittanubandhi, 79/min
2	Jivha (tongue)	niram (not coated)
3	Kshudha (hunger)	prakrut (normal)
4	Trushna (thirst)	prakrut (normal)
5	Nidra (sleep)	prakrut (normal)
6	Mutra (urine)	prakrut (normal)
7	Mala (stool)	Once, every alternate day, with pain and itching at anus and stool passage with blood streak sometimes.
8	Udar parikshana (per abdomen examination)	Prakrut (no abnormality found)
9	Sthanik parikshana (local examination)	Redness and itching at the anal region with a few tiny cracks at the anus.
10	Menstrual history	Regular 4-5days cycle/month, 30 days regular monthly cycle. One girl child- two and half years old, operated for L.S.C.S.

Past History

The patient had suffered for the fissure problem during the pregnancy and also after the delivery about 2.5 years back. The problem resolved after the delivery by taking medications.

Symptoms

The patient used to strain during defecation. Due to the constipation, she had the tendency of defecation every alternate day. Painful defecation with itching at the anus and passing the stool with blood streak sometimes were the main symptoms.

Hetu (causes)

Excessive and frequent intake of virudhakas¹ (sprouts-like moth beans, kidney beans, chickpeas etc.) 4-5 times a week. Low intake of liquids (dravahaar). Dislike for ghee and fruits. Frequent outings and consumption of Chinese

food, pavbhaji, junk food and bakery products-2-3 times in 15 days. During fasting, frequent and heavy intake of vari (samo rice), sabudana (sago), curd etc. Divaswap (sleep during afternoon). Jagarana (late night sleeping hours)

Samprapti (Course of the disease)

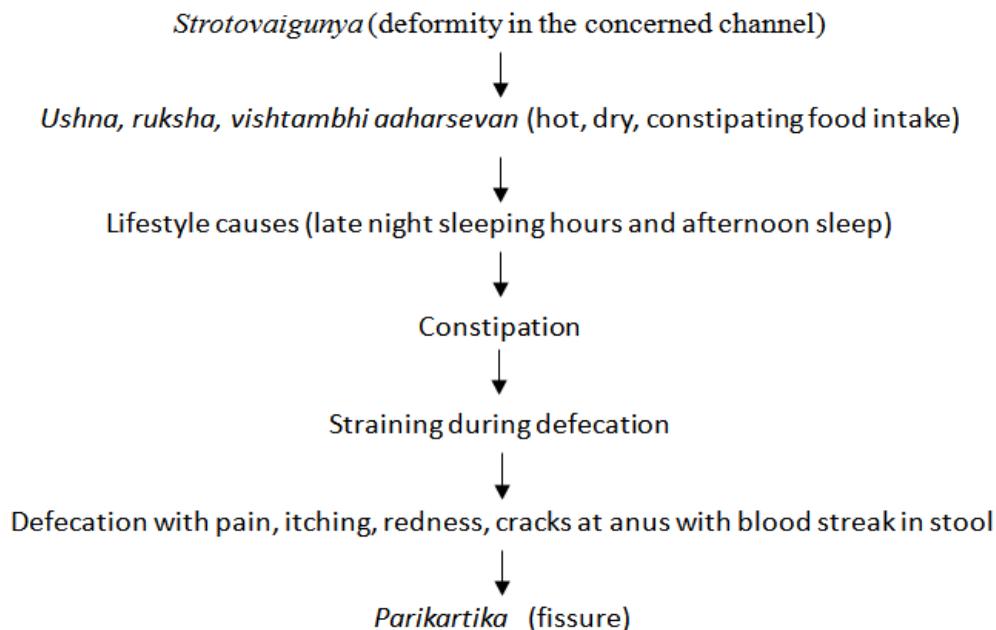


Figure 1: Schematic course of Parikartika (Fissure in Ano)

The above mentioned causes of food led to severe constipation like low intake of liquids, excessive sprout intake, sago, samo rice and curd combination, frequent Chinese food. The other lifestyle causes like late night sleeping hours (jagarana) and sleep at afternoon (diwaswap) increase the vitiation and imbalance of the pitta and kapha doshas, which ultimately lead to malavashtambha (constipation) and then to Parikartika (fissure). These causes with favorable condition of past history of the same problem, in which there was already the weakness of the purishavaha strotas (strotovaigunya).

Review of Literature

In Charak samhita, sprouts have been described as the constipating cause in Sutrasthana¹.

In Charak samhita Siddhithana (chapter7/5), the disease Parikartika has been mentioned, as the niruha basti vyapada¹.

Tikshna basti given in excess quantity to the person having mrudu koshttha and alpa dosha, results in Parikartika. Main symptoms are kartanvat vedana at anus during and after defecation. Patient postpones defecation which results in constipation again. It becomes a vicious cycle. Bleeding through the stool may be present in the form of streak of blood in the stool.

In kashyap samhita khila sthana, it is mentioned as the garbhini upadrava (pregnancy related complication) and

treatment is given according to its Vataj, pittaja and kaphaj types³.

Main cause of Parikartika is ruksha guna, due to vataprakopa and malavarodha (constipation).

The formation (utpatti) of the guda (anal canal) during the intrauterine life is from the essence of the rakta (blood), kapha, pitta and vayu².

According to the modern science, it consists of longitudinal tear (crack) at the anus, i.e. fissure in ano. The patient shows symptoms like pain during and after defecation, constipation, redness, itching at anus, hard stool and stool with streak of fresh blood.

Chikitsa (Treatment) - Nidanaparivarjana (remove the cause):- The patient was asked to stop the food related and lifestyle related causes mentioned earlier.

Aragvadhakapila vati:- At apankal, i.e. before meals 2 times. As aragvadh and kapila are smooth laxatives, they relieve constipation.

Abhayarishta-At apankal ,i.e. before meals. Abhaya (haritaki-*Terminalia chebula*) is laxative and other ingredients in the decoction help to correct constipation.

Eranda tailam (Castor Oil) :- It is vatanashaka and laxative to be used in the making of dough while making roti daily.

Yashtimadhu tailam :-To be applied locally at the anus. As yashtimadhu (*Glycerrhiza glabra*) is madhur, madhur, sheet in properties, it is vatanashak, jeevaneeya,

vranaropaka (healing in nature). Tail (oil) is lubrication and vatanashak. It reduces pain and cracks at the anus.

Black raisin decoction- Patient is asked to make a decoction of 4-5 soaked black raisins and drink the lukewarm decoction with a pinch of salt (saindhava) and ghee in her daily routine before meals. It gives excellent results correcting the constipation, as black raisins does have smooth laxative property. It is also very good rasadhatuposhaka dravya.

Patient advised to increase the intake of liquids like water and buttermilk (good for anal diseases), homemade butter and ghee to reduce the constipation.

RESULTS

In the present study, weekly assessment was done to find out the symptoms like pain during defecation, constipation tendency etc. Patient started getting relief from pain and constipation within 7-8 days. Medicines were asked continued for 1-2 months. Patient was advised to continue with black raisin decoction for a period of 3-4 months.

DISCUSSION

It can be said that young middle-aged patients are more sufferer because they use to eat spicy and junk food and unhealthy life style. In this case past history of Parikartika (Fissure in Ano) during pregnancy was the root cause along with the above mentioned factors. The removal of these causes along with proper Ayurvedic treatment and

consultation regarding diet and life style has given excellent result.

CONCLUSION

Changes in lifestyle and food help a lot along with the medicines in anorectal diseases. Ayurveda has miraculous results in these kinds of diseases.

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