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# A Clinical Study of *Arka Kshara Patana* in the Management of *Jirna-Gudprikartika* (Chronic Fissure In Ano)

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## **ABSTRACT:**

Fissure means a tear or crack. In other words, fissure-in-ano is simply just a tear in the anal canal. Mainly occurs because of constipation or loose motion (frequently passing stool) or as a complication of Virechan & Basti karma. One and most important sign of fissure-in-ano is pain and bleeding during and after defecation. Severity and complication increase along with time, recurrence, and routine habits. Daily lifestyles include dietary habits, working field, personal hygiene, sleep & bowel habits, stress, etc. which directly affects the digestion of an individual. And we all know that our digestion is the direct key to our health. Early-stage or acute fissure can be cured by local application of medicines or by subsiding digestive issues (constipation or loose motions). But chronic fissure or fissure due to spasticity of sphincters is still a point of worry and research. In our study, we included 60 patients having signs and symptoms of Parikartika from OPD, and Arka kshar was used for local application. The patient was clinically assessed based on pain, per rectal bleeding, itching etc. Significant results were observed in spasticity and symptoms of patients.

Keywords: Parikartika, Arka kshara, Fissure-in-ano, Sphincter spasticity.

# INTRODUCTION

In current time, everyone is living in or going through busy and hectic life schedule. Everyone is busy that they don't have enough time to take care of themselves or their health. In our daily life we all are facing many challenges regarding our health as hard and long working hours, hurry burry, sleep disturbance, alcohol & drugs, food and bowel habits, stress etc. In general, all these seem to be common and minor problems, but later they result in major health issues as they directly disturb one digestion. And in our *Ayurveda* digestion fire is related to *Agni*. And *Mandaagni* is said to be the main reason or cause for all diseases. Digestive problems directly lead to constipation which

further results in IBS, hemorrhoids, fissure, fistula etc. Among these fissures is the most common disease and which is ignored very easily by all, leading to fistula as a complication.

In Ayurveda, fissure may be corelated with Guda Parikartika. Guda means anus & Parikartika means cutting pain (kartanvata pida)

Hence, *Guda Parikartika* means cutting pain in anus. This cutting and burning nature of pain are due to a longitudinal tear in the posterior wall of the anal canal (most common site) caused mostly by constipation or loose motion.

Due to this pain, the patient scares of getting fresh, to escape the pain he/she controls the anus and can't relax



their anus properly to defecate which gradually results in muscle spasm and constipation. This muscle spasm reduces oxygen supply to the related muscle causing ischemia which leads to fall in pH and releases pain-producing substances such as bradykinin, ATP, H<sup>+</sup>. And this cycle furthers continues.

## AIM AND OBJECTIVE

To study the clinical efficacy of *Arka Kshara Patana* in the management of *Jirna Guda Prikartika*.

## MATERIAL AND METHOD

60 patients with classical signs and symptoms were randomly selected and registered from OPD &IPD of University College of Ayurveda Hospital, Jodhpur with the informed consent of each patient. All general and routine examinations and investigations were done.

# Selection Of Patients Inclusion Criteria

- •Patient who will give written consent.
- •Patient should be in the 16 to 60 age group.
- •Patients with classical signs & symptoms of chronic fissure-in-ano will be included in the trial.

## **Exclusion Criteria**

- •Patient who is not eligible for *Kshar Karma* according to *Susruta Samhita*.
- •Patient suffering from HIV and Hepatitis B.
- •Patient related to any malignancy.
- •Patient suffering from Diabetes mellitus and Tuberculosis.

#### Withdrawal Criteria

All the patients who may be found hypersensitive with the selected management will be discarded from the study even after registration. At the same time, the patient showing any allergic reaction with *Arka Kshar* application or non-cooperative patient (either not following the instruction and *Pathya / Apathya*) will be withdrawal during treatment.

## **Dietic Advice**

Laghu, supachye, fibre-rich meal, papaya, daliya, suji, buttermilk. green salad, keep hydrated.

**To Avoid**: - bajara, spicy. meda, curd, & oily food items.

# **Assessment Criteria**

# 1. Gudapeeda / Burning pain:

0 = No Gudadaha

- 1 = Patients complains of *Daha* while local application of medicine only and is relieved soon after
- 2 = Patients complains of *Daha* only during interrogation
- 3 = Patient complains of *Daha* during and after defecation for some hours and relieved only with some medicine.

4 = Patient complains of *Daha* that is sour all through the day hampering his normal routine work.

## 2. Gudadaha / cutting pain:

0 = No pain

- 1 = patients feel pain only while local application of medicine of examination
- 2 = Patients complain only when interrogated and pain is relieved after defecation immediately on its own.
- 3 = patient complains of executing pain during and after defectaion for a few hours, but the pain is relieved without medicine and does not hamper normal routine.
- 4 = Patient struggles due to pain all day long and his normal routine is hampered and he had drastic medicine for the same.

## 3. Raktasrava / Bleeding:

0 =No bleeding

- 1 = Bleeding along with defecation streak wise only over the scybala/noticed on fissure rarely
- 2 = Dropwise bleeding during and after defecation 0-10 drops occasionally.
- 3 = Dropwise bleeding during and after defecation 10-20 drops stopped.
- 4 = Profuse bleeding dropwise or streamwise amounting to more than 20 drops in each defectation.

#### 4.Tenderness:

- 0 = No tenderness
- 1 = Pain on deep palpation
- 2 = Pain tenderness on light pressure.
- 3 = Pain on touch
- 4 = Patient does not allow palpation due to pain even on touching of underclothes and difficulty in sitting.

#### 5.Inflammation / Shotha:

0 = No inflammation

- 1 = very little inflammation only on the redness found edges and base of the ulcer revealed on examination.
- 2 = Redness and raise in temperature in surrounding 1-5mm of tissue.
- 3 = Redness raised temperature all around the *Anus* but no loss of function.
- 4 = same redness, swelling, and induration of the whole circumference of anal aperture and loss of function.

#### 6.Ulcer Size:

0 = No cut

- 1 = Tag size less than 5 mm.
- 2 = Tag size 5 mm to 10 mm
- 3 = Tag size 10mm to15mm.
- 4 = Tag size 15 mm 20 mm.

## 7.Discharge:

0 = No discharge

1 = Patient complains only of interrogation occasional

discharge.

2=Discharge evident on examination and patient complains of often feeling of

wetness.

3 = Patient complains of a daily feeling of wetness but no pruritus ani or sailing of

under cloth.

4= patient complains of soiling of underclothes and forms pruritus ani on examination.

## 8.Tag:

- 0 = No tag
- 1 = Tag size less than 5 mm
- 2 = Tag size 5 mm to 10 mm
- 3 = Tag size 10 mm to 15 mm
- 4 = Tag size 15 mm to 20 mm

#### 9. Restricted Movement:

- 0 =No restricted movement
- 1 = Patient complains of only mild restricted movement.
- 2 = Patient complains only of moderate restricted movement.
- 3 = Patient complains only of severely restricted movement.
- 4 = Patient complains of highly restricted movement, patient on bed rest.

# 10. Sphincteric Spasm:

0 = No Spasm

1= Spasm revealed on examination

2 = Severe spasm and lightly puckered anal aperture and patients complain of not

able to pass flakes.

## **RESULT & OBSERVATION**

60 patients were selected for the clinical study. (Table 1)

## **RESULT: -**

- 1. 63.5% relief was observed from pain.
- 2. 74.4% relief in burning.
- 3. 74.4% relief in discharge.
- 4. 80% relief was observed in tenderness.
- 5. 73.3% relief was observed in size.
- 6. 77.5% relief in restricted movements.
- 7. 61. 3% reduction in tag size was observed.
- 8. 66.3% relief was observed in sphincteric spasm.

## **Statical Analysis: -**

The result was statically analyzed by Wilcoxon Rank Test (p<0.05).

### **Assessment Criteria For Result**

The result of the treatment was evaluated under four categories:

**Completely relieved**: 75% to 100% relief in signs and symptoms.

**Markedly relieved:** 50% to 75% relief in signs and symptoms.

**Improved:** 25% to 50% relief in signs and symptoms. **Unchanged**: less than 25% relief in signs and symptoms.

## **DISCUSSION**

Parikartika is a longitudinal tear in the anal canal, mainly caused by improper bowel habits, lifestyle, food habits. It is likened to be fissure-in-ano as both occur in *Guda* (Anus) and have comparable clinical symptoms. In *Ayurvedic* texts, there is no clear description of *Parikartika*. It is described in reference as a complication of *Virechan* & *Basti karma*, separately it is described in detail only in *Kashyapa Samhita*.

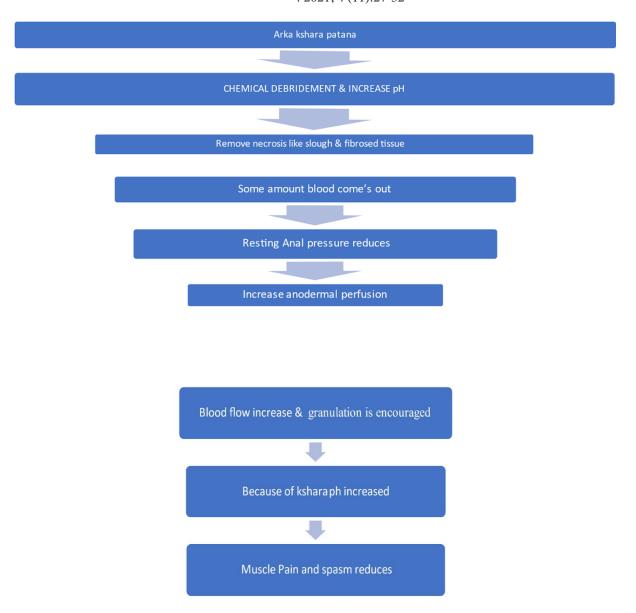
In Ayurvedic contexts, Kshar karma, Kshar sutra, Pichchha basti, local applicants and, many internal medicines are described for the treatment of Parikartika and healing of wound. To fasten healing and to avoid complications Arka kshara patana was selected.

As we know there is muscle contraction because of constipation which further leads to muscle spasm. This spasm causes muscle ischemia leading to fall in pH and the release of pain-causing chemicals as bradykinin etc.

Arka kshara was selected as Kshara is a natural cauterizer, Deepana & Pachana, Shushka in nature. It acts as Vrana shodhaka & ropaka. It eliminates undesirable tissue from the body (slough off fibrosis) and enhances healing. Deepana & Pachana properties of Kshara increase the local Dhatvagni which enhances the regeneration process. Shushka guna of Kshara dried the collected mucoid discharge in a fissure bed and thus promotes granulation. Due to local inflammatory reactions, prostaglandins and histamine protect and contribute to the development of granulation tissue. Increases pH and thus reduces pain and muscle spasm.

This *Arka Kshara* is acidic in nature. Due to this acidic nature, slough off debris & enhance granulation and fasten the healing. And increases pH which reduces muscle spasm and relieves pain. *Arka* has antifungal, and insecticidal action, plant's blooms have hepato-protective, anti-inflammatory, antipyretic, analgesic, antibacterial, and larvicidal properties. The plant's latex is said to have analgesic and wound healing properties, as well as anti-inflammatory and antibacterial properties, while the roots are said to have anti-fertility and anti-ulcer properties.

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## **CONCLUSION**

Arka kshara because of its cauterizing, healing, *Deepana*, *Pachana*, *Shushka* properties is highly effective in the management of fissure in ano. By sloughing off fibrosed tissue, enhances granulation resulting in fast healing. By increasing local immunity, it prevents recurrent symptoms.

Further study is needed to determine the methodology, consistency of *Kshara* and, procedure for application of *Kshara*. The same research should be further continued or studied on more patients to get accurate and more results.

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**Table 1 Assessment Criteria** 

S. No.	VARIABLES	MEAN		MEAN DIFF.	RELIEF %
		В. Т.	A. T.		
1.	Pain	2.517	0.9167	1.60	63.57
2.	Burning	2.867	0.7333	2.133	74.41
3.	Discharge	1.917	0.6	1.317	68.69
4.	Tenderness	2.927	0.5833	2.333	80
5.	Size	2.500	0.6667	1.833	73.33
6.	Restricted Movement	2.900	0.6500	2.250	77.58
7.	Tag Size	2.500	0.9667	1.533	61.33
8.	Sphincteric Spasm	1.533	0.5167	1.017	66.30