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Single Case Study on *Nadi Vrana* (Pilonidal Sinus) with *Yashtimadhu Ghrita Varti* along with *Triphala Guggulu*.

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ABSTRACT:

Nadi Vrana, also known as Pilonidal sinus is a frequent illness in tropical regions. *Nadi Vrana* is linked to the occurrence of several cavities or recesses in an ulcer that has a path that extends into the deeper tissues. *Nadi Vrana* is synonymous with *Gati.Gati* is the term used to describe conditions where there is an extensive infiltration of pus, due to unsanitary conditions. Despite the enormous advancements made in the field of modern surgery, it is still a difficult and problematic condition. According to the clinical approach taken by contemporary surgeons, *Nadi Vrana* has been treated incorrectly, ineffectively, with post-operative problems and complaints of recurrences in the majority of cases. In this case study, the patient of *Nadi vrana* is treated with *yashtimadhu ghrita varti* along with *triphala guggulu*. After four weeks of observation, the symptoms of *Nadi vrana* (Pilonidal sinus) has been reduced markedly.

Keywords- Nadi vrana, Yashtimadhu ghrita varti, Pilonidal Sinus, Triphala guggulu.

INTRODUCTION

Nadi Vrana and Sinus comes a non-healing ulcer so to understand the nature and clinical presentation of *Nadi Vrana*, the knowledge of an ulcer is needed *Ayurvedic* classics state. *Nadi Vrana* is comprised and treated as a Sinus, by Monior and Monior Williams Sinus is a Latin word which means 'a hollow' or 'cavity' or 'recess' or cavity with a bone or any supporting channel or tract¹. A sinus is described as a blind channel that descends into the tissue from the surface and is lined by either granulation tissue or epithelial tissue. It continues as a result of an infection, non-dependent drainage, and deep foreign bodies (sequestrum, suturing material, etc.)². The tract is protected against collapsing since it is lined with epithelium and has thick fibrosis. If left untreated, a *Nadi Vrana* can develop into a fistula by penetrating the tissue deeper and deeper. Patients are advised to take bed rest and ointment for local application. Due to the fear of anaesthesia and its complication, side effects of modern medicines patient get scared. So, to avoid these, the pain and post anaesthetic complication and side effects, *ayurveda* suggests effective



Nabanita et.al, "Single Case Study on Nadi Vrana (Pilonidal Sinus) With Yashtimadhu Ghrita Varti Along with Triphala Guggulu.": 2023; 6 (6):74-77

treatment to get cured from Nadi Vrana.

MATERIALS AND METHOD

The attributes of drugs, dosage and *anupan*, mode of administration of drugs are given in below (Table 1)

Method Of Study

1.CENTRE OF THE STUDY- DSRRAU, PGIA, JODHPUR, KARWAR. 2.STUDY DESIGN- Single clinical study

Plan Of Treatment- It is an OPD and IPD based treatment. In this case patient was treated with *yashtimadhu ghrita varti* and *triphala guggulu* followed by *pathya-apathya* and *anupan*.

Pathya- Dalia, Papaya, Cucumber, Salad, Green leafy vegetables.

Apathya-Curd, Oily food, Meat, Fish, Gram Flour, Wheat product, Cold drinks, Snacks.

Source Of Collection of Medicine

All the medicines were collected from the GMP certified pharmacy of DSRRAU, PGIA, JODHPUR, KARWAR.

CASE REPORT

A 40 years old male, hindu patient, driver by occupation came to OPD with the complain of Pus discharge from sacro-coccygeal junction along with mild pain for 1 month.

History Of Present Illness

The Patient is suffering from pain in natal cleft along with the pus discharge from the sacrococcygeal region since the last 1month.He took modern medicines but do not get relief. He is willing to take *ayurvedic* medicines. (Table 2)

Clinical Examination-

Ashtavidha Pariksha-Nadi-72 Beats/Min Mutra- Normal Mala-Malabaddhata Jihwa- Malavrita Shabda-Spashta Sparsha-Anushna-seeta Drik-Normal Akriti-Sama General Examination Height-174 cm Weight-86kg B.P.-128/82 mm of Hg Pulse Rate-72Beats/Min Respiratory Rate- 17/Min Temperature- Afebrile

On Examination- An opening seen with pus coming out from the sacro-coccygeal point.

OBSERVATIONS AND RESULTS

In this study the patient was observed for 28 days, with assessments of objective criteria conducted by asking and clinical observation of the patients on every week. After the assessment, the result is shown in the below given chart-

DISCUSSION

Nadi Vrana is recognized as a tubular Vrana and is identical to Dusta Vrana in all respects. Because it is similarly a blind tube tract that runs from the surface down into the tissues, a simple search of the modern lexicon will allow us to directly associate this disease with sinus. According to the classics, innate foreign substances also induce sinus. One of the main causes of non-healing nature of Nadi Vrana (shalyaja) is the presence of hair. The occurrence of sinus in anal region is also well understood to be proceeded by local abscesses as per the modern and Ayurvedic concepts. These abscesses also may be followers of infected anal crypts. Anal glands are infected by more than 85% of the sinuses in the anorectal area. It is well known fact that these sinuses are given rise to problem to the patients. As in the case of the pilonidal sinuses of the anal canal, as indicated by contemporary writers, the obstructive pathology acting as a background force in the formation of sinuses is extensively documented. Hence, it can be understood that a decent amount of correlation exists between the modern and ancient in understanding of Nadi Vrana with relevance to its Nidana and Samprapti. The Management comprised of administration of Triphala guggulu and Yashtimadhu ghrita Varti into Nadi Vrana (sinus). Varti is mainly indicated in Vrana with minute external opening and in Antaha Shalyaja Vrana. Sushruta and Vagbhata both have explained regarding Varti properties action and also explained about its adverse effects. If not prepared properly or if it is not properly placed³. Varti should not be very snigdha (Unctuous), not too ruksha neither it should be very thick nor thin and it should not cause any problem to the patient. If it is very unctuous it causes excess exudation; if it is dry it causes Nabanita et.al, "Single Case Study on Nadi Vrana (Pilonidal Sinus) With Yashtimadhu Ghrita Varti Along with Triphala Guggulu.": 2023; 6 (6):74-77

abrasion, bleeding and pain, if thick or thin or not inserted properly causes friction to the edges of the sinus. If correctly prepared and placed it drains the pus and removes the unhealthy tissues and purifies the tract. These vartis prepared with shodhana and ropana dravvas does debridement of the slough or unhealthy tissue, alleviates all the vitiated *doshas* and facilitates for the healing process. Every seventh day probing sessions are conducted for removing any obstructive pathology in the sinus tract by which adequate drainage could be done and the tract become more suitable for healing in proper way. Triphala guggulu comprises of amlaki, vibhitak, hareetaki, Pippali, guggulu and Yashtimadhu ghrita varti made up of yashtimadhu and gavya ghrita. Triphala possess the quality of vrana shodhana, rasayana, ropan, Tridosha shamaka with the property of immuno-modulator, antipyretic, analgesic, ulcerogenic activity⁴. Guggulu having the property of anti-inflammatory and analgesic. Whereas, Yashtimadhu acts as ropak, varnya. It acts as anti-oxidants also.It regulates the gastro-intestinal motility⁵. All the formulations have the properties to penetrate deeper into the tissues and acts against the tendency of body towards formation of fibrous tissues there by resulting in nonhealing nature of Nadi Vrana besides, after healing scar tissue formation is less.

CONCLUSION

In modern science, *Nadi vra*na is quite similar to pilonidal sinus. Treatments such as *vrana ropan*,*shodhana* as well as the use of *triphala guggulu* 500mg daily twice after food with luke warm water, local application of *yashtimadhu ghrita varti* once a week could provide a satisfactory and curative as well as preventive effect on *Nadi vrana*. During the research, no major negative side effects were discovered.

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Table 1 Showing Materials

SR. NO.	DRUGS	DOSAGE	ANUPAN	MODE OF ADMINISTRATION
1.	Triphala guggulu	500mg	Ushna ambu	BDPC
2.	Yashtimadhu ghrita varti	Once a week		Local Application

Table 2 Showing Symptoms

SYMPTOMS	1 ST DAY			3 RD WEEK FOLLOW UP	4 TH WEEK FOLLOW UP
Pus Discharge	+++	+++	++	+	-
Pain	+++	++	+	-	-