



**IJAYUSH**  
*International Journal of AYUSH*  
AYURVEDA, YOGA, UNANI, SIDDHA AND HOMEOPATHY  
<http://internationaljournal.org.in/journal/index.php/ijayush/>

International Journal  
Panacea  
Research library  
ISSN: 2349 7025

Original Research Article

Volume 10 Issue 6

Nov-Dec 2021

**A CLINICAL STUDY TO EVALUATE THE EFFECTIVENESS OF *SARIBA MOOLA GRTHA* INFILTRATION WITH *GANDHARVAHASTHADI KASHAYA* INTERNALLY IN FISSURE IN ANO**

**<sup>1</sup>Fathima T.\*, <sup>2</sup>Prema P.E., <sup>3</sup>Smitha Mohan P.V.**

<sup>1</sup>Assistant professor, Department of Shalyatantra, ALN RAO Memorial Ayurveda Medical College, Koppa, Karnataka.

<sup>2</sup>Former Professor, Department of Shalyatantra, P.N.N.M. Ayurveda Medical College, Cheruthuruthy

<sup>3</sup>Professor, Department of Shalyatantra, P.N.N.M. Ayurveda Medical College, Cheruthuruthy.

Corresponding author's Email ID: fathima1189@gmail.com

**ABSTRACT**

Fissure-in-ano is very commonly encountered in current day to day practice. It comprises of 6-15% of anorectal disorders and the incidence is high in the age group 20 – 40 years. This disease is characterized by excruciating pain during and after defecation, bleeding per anum with burning sensation. Constipation is the major known cause of the disease which leads to friction and ulcer formation in the long axis of anal canal.

Fissure-in-ano is a medico- surgical condition. Medical management is said to be conservative and surgical intervention is the ultimate choice in the chronic ulcers. Medical treatment for acute fissure is oral analgesics, stool softeners, soothing ointment and self-dilatation on medical advice etc. Surgical management includes Fissure-in-ano is a medico-

20

surgical condition. Medical management is said to be conservative and surgical intervention is the ultimate choice in the chronic ulcers. Medical treatment for acute fissure is oral analgesics, stool softeners, soothing ointment and self-dilatation on medical advice etc. Surgical management includes

Lord's dilatation, sphincterotomy, fissurectomy, anal advancement flap. To overcome the complications of these expensive treatments and to evolve economical, safe and alternative treatment modality through Ayurveda, this study was carried out. Hence the study was an effort to find the effectiveness infiltration of Sariba Moola Grtha mentioned in Vangasena Samhitha, Vrana Chikitsa Adhikara in fissure in ano along with 96ml Gandharvahasthadi Kashaya internally.

**Key words** – Fissure in ano; *Sariba Moola Grtha*; *Gandharvahasthadi Kashaya*

## INTRODUCTION

Fissure-in-ano is a common ano rectal disorder, characterized by sharp and intense pain during and following defecation. It results from a longitudinal tear in the distal part of the anal canal, frequently precipitated by the passage of a constipated stool. The disorder is more common in males and has a peak incidence in the second decade in females and the third decade in males, although it may also occur in infancy and in old age. In 75 to 94 per cent of cases the fissure is situated at the posterior anal margin. Anterior fissures are more commonly encountered in women and may follow parturition or gynecological procedures [1].

The ideal drug for this disease should have Vrana Shodhana Ropana properties and Vata Pithaharatva. Sariba Moola Grtha mentioned in Vangasena Samhitha as Sarva Vrana Vishodana [2].

Sariba (*Hemidesmus indicus*) is of Madura Tiktha Rasa, Guru Snigtha Guna, Sita Veerya and Madura Vipaka and also Vata Pithahara and Daha Prasamana may help to subside clinical features like pain, bleeding and burning sensation [3].

Grtha is Vāta Pitha Samaka, Madura, Sita and Ropana [4]. Due to its soothing effect, it forms a thin layer over the wound and allows early epithelization and protects from invasion of any microbes [5-6]. Grtha possessing the property Samskarasya Anuvarthana is best suited as the vehicle for administration of the drug sariba in the study.

Apana Vaigunya is the cause for all Gudaja Vikaras. As Ayurveda promotes Nidana Parivarjana, Anulomana line of treatment is ideal for Apana Vaigunya [7]. So Gandharvahasthadi Kashaya[8] which have Agni Deepana, Vata Samana and Mala Shodana properties when given with proper Anupanas (Guda and Saindhava) will be ideal for the condition. So the present study is aimed towards finding an easily accessible economic treatment for fissure in ano.

Fissure in ano is very common and distressing problem encountered in day to day practice. It comprises of 6 – 15 % of ano-rectal disorders and is characterized by excruciating pain during and after defecation, bleeding per anum due to spasm of anal sphincter. The method of treating this pathology should preferably be the one that results in optimal clinical outcome, less painful and patient friendly. Hence the present study was an effort to find an effective remedy for ulcer healing using Sariba Moola Grtha.

In this study, fissure in ano was taken as a Vrana or Guda Vidarana, 5ml Sariba Moola Grtha infiltration given externally for Vrana Vishodana and Ropana was studied along with Gandharvahasthadi Kashaya 96 ml internally twice daily used for Mala Shodana and Agni Deepana.

This present research work entitled “A clinical study to evaluate the effectiveness of Sariba Moola Grtha infiltration with Gandharvahasthadi Kashaya internally in Fissure in ano” was carried out in P.N.N.M. Ayurveda Medical College and Hospital, Shoranur.

#### Aim of the study

To find an effective, safe, economic and alternative treatment protocol in the management of fissure-in-ano.

#### Objectives of the study

- To evaluate the effectiveness of Sariba Moola Grtha infiltration with Gandharvahasthadi Kashaya internally in fissure in ano.
- To understand the disease entity fissure-in-ano in detail.

### Methodology

The study was a single group study of pre and post-test design without control group. The study was undergone for 7 days continuously in 32 subjects in the age group 20 to 40 years satisfying the inclusion criteria, from the O.P.D and I.P.D of Shalyatantra department, P.N.N.M. Ayurveda Medical College & Hospital, Cheruthuruthy, Shoranur. The intervention was carried out in a well-equipped O.T after obtaining informed consent and positioning the subject left laterally. 5ml Sariba Moola Grtha was taken in 5ml sterile disposable syringe connected with red rubber catheter (No.4) and introduced to the anal canal at least 2 cm inside from the anal verge before completely voiding the medicine. The intervention was continued for 7 days regularly along with 96ml Gandharvarvahasthadi Kashaya twice daily was given internally. The parameters pain, burning sensation, bleeding and constipation were assessed on 0<sup>th</sup> and 7<sup>th</sup> day of intervention. Data were collected after grading the parameters and analysed statistically using paired T test.

### Study design

A single group interventional study of pre and post test design.

### Study setting

O.P.D. and I.P.D. of P.N.N.M. Ayurveda Medical College, Cheruthuruthy

### Study Period

18 months

### Study population

Patients diagnosed as fissure in ano by clinical symptoms and confirmed by physical examination in the age group 20 – 40 years irrespective of sex registered in O.P.D. and I.P.D. of P.N.N.M. Ayurveda Medical College, Cheruthuruthy.

Sample Size- 32

Sampling technique

Consecutive cases satisfying the inclusion criteria will be recruited until attaining the Sample size.

Inclusion criteria

- Subjects irrespective of gender.
- Between the ages group of 20 – 40 years.
- All subjects fulfilling assessment criteria and diagnosed as fissure-in-ano.

Exclusion criteria

- Fissure in ano associated with colon conditions like malignancy, ulcerative colitis.
- Patients with systemic disorders like diabetes, tuberculosis.

Diagnostic criteria

The patients were diagnosed on the basis of history, signs and symptoms and confirmed through physical examination of fissure in ano.

Withdrawal Criteria

- Unwillingness of participants to continue.
- Adverse effect of procedure.
- Un- controlled co-morbid condition.

Study Tool

- Clinical case Proforma
- Visual Analogue Scale

Study procedure

Preparation of the medicines

- Sariba Moola Kalka – 500g
- Grtha – 2L

- Water – 8L

Preparation Grtha as per Snehapāka Vidhi (1:4:16).

- The drug Sariba Moola was made into small pieces, washed and grinded well to made fine paste.
- The Kalka is mixed with Grtha and Jala respectively and the mixture is heated in low flame until Madhyamapaka
- The medicated Grtha is sieved through a cloth • Kept in air tight container after cooling.

Pakam – Madhyamapaka

Intervention

Patient was made to lie down in left lateral position (Sim's position). Sariba Moola Grthawas infiltrated using 5 ml syringe which is connected to sterile rubber catheter (No-4). Catheter was inserted in to anal canal, at least 2 cm from the anal verge before completely voiding the medicine. Patient was advised to lie down in supine position for 15 minutes. After that a sterile cotton pad was used as a temporary packing outside the anal verge.

Duration – Once daily for 7 days.

- Internal medicine – Gandarvahasthadi Kashaya 96 ml twice daily before food with Saidhava and Guda (4 gm each) as Anupana for 7 days.

Treatment period -7 days.

Materials required

- Sterile gloves
- Sterile cotton pads
- 5 ml disposable syringe
- Sterile rubber catheter (No-4).
- Sariba Moola Grtha



Follow up

On 14<sup>th</sup> day from the first day of intervention.

Assessment criteria

Assessment was done based on the following parameters before and after the treatment. The parameters were graded and results was evaluated and statistically analyzed.

Outcome variable

Subjective parameters

- Constipation
- Bleeding
- Burning Sensation
- Pain

Preparation of Sariba Moola Grtha

## Observations

The general observations are as below in brief

- ❖ The maximum patients belonged to 35-40 years of age group (44%), females (65.6%), hindu religion (72%), married (87.5%), house wives (31%), non-

vegetarians (87%), spicy food preference (90.6%), irregular food intake (90.6%), economically middle class (84.4%), non-addicted (84.4%), constipated (96.9%), with stress (88%), with disturbed sleep (75%) and moderate nature of work (72%).

- ❖ The parameters assessed were pain, burning sensation, bleeding and constipation. It was observed that among 32 patients, severe pain (59%), grade 1 bleeding per rectum (40%), grade 1 burning sensation (53%) and constipation (91%).



*Sariba Moola (500g)*



*Kalka mixed with Grtha and Jala*



*Madhyama Paka*



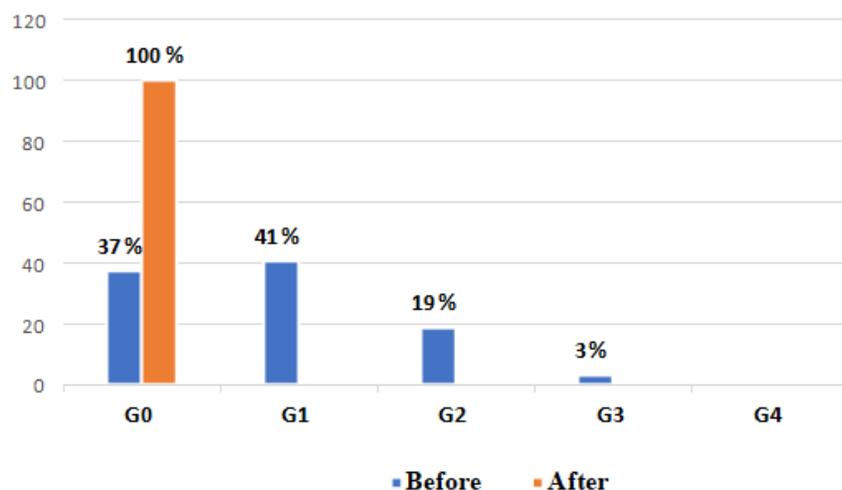
*Sieved through cloth*

*Sariba Moola Grtha*



## Results

- ❖ The study was highly significant on assessment parameters like pain, bleeding, constipation and burning sensation.
- ❖ The results were statistically significant on pain ( $p < 0.0001$ ), the patients got remarkable relief from pain during the treatment. The treatment was very effective on pain and the t value with probability  $P = 0.001$ , is less than 0.05.
- ❖ During treatment, the burning sensation got decreased day by day. The treatment was highly significant with  $P = 0.000001$  by a mean difference 1.063, had initial mean of 1.22 before treatment and was decreased to 0.12.
- ❖ In this study, it was observed that all 32 patients had got complete relief in bleeding within 7 days. The initial mean of bleeding was 0.88 before treatment which was reduced to 0.00 after the treatment showing extremely significant result statistically ( $P = 0.00001$ ). The patients had got 100% relief from Bleeding.
- ❖ The constipation was relieved within 7 days in all 32 patients. The treatment was highly effective and the report shows that highly significant impact with a mean difference 0.97 before treatment reduced to 0.03 after treatment with t value of probability  $P = 0.00006$ .
- ❖ Overall, the treatment was highly significant in all 32 patients.



Among 32 patients, 41% of participants had bleeding with defecation, 19% of subjects with mild bleeding (0-5 drops), and 3% with moderately severe bleeding while after the treatment it was improved as no bleeding in all of the participants, i.e. All 32 participants (100%) had no bleeding after the treatment.

### 3. Effect on constipation before and after treatment

#### Participants by percentage change in constipation

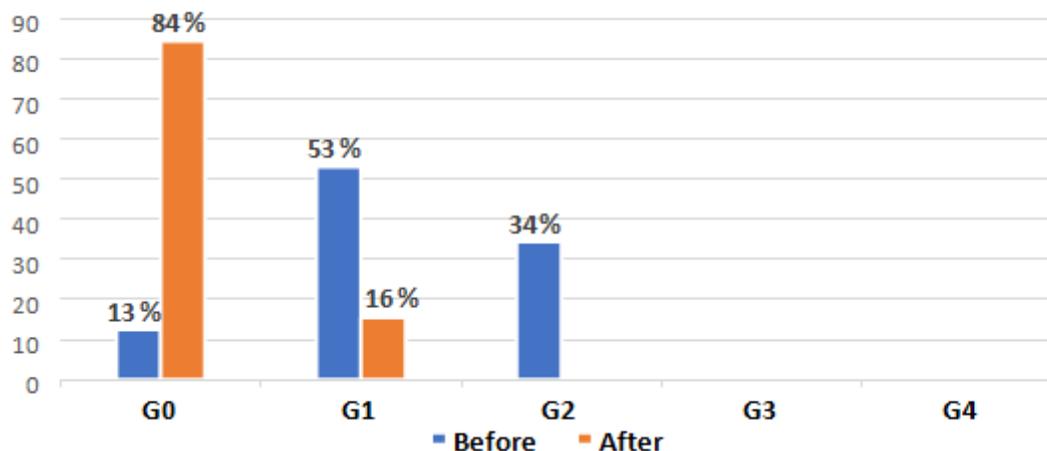
The above graph shows that 91% of subjects (31 patients) had constipation (hard stools daily) before treatment and was decreased to 3% after treatment. Only 6% of subjects had normal bowel before treatment and was increased to 97% after treatment. 3% of participants had severe constipation (once in 2 days) before treatment was reduced to 0% after treatment.

### 4. Effect on burning sensation before and after treatment

#### Participants by percentage change in burning sensation

In this study Among the 32 participants, 53% of the subjects had burning sensation only during defecation before treatment and after treatment it was reduced to 16%. Also only 13 % of subjects were asymptomatic before treatment

and 84% (27 patients) got asymptomatic in burning sensation after the treatment.



The statistical analysis was conducted using SPSS software with the aid of paired T test. The results obtained were extremely significant on all assessment parameters with P value < 0.05. Thus the alternative hypothesis was accepted and null hypothesis was rejected.

### Overall response of the treatment T-Test

#### One-Sample Statistics for change in pain, bleeding, constipation and burning sensation

	N	Mean	Std. Deviation	Std. Error Mean
Change in Pain	32	-4.2500	1.19137	.21061
Change in Bleeding	32	-.8750	.83280	.14722
Change in Constipation	32	-.9375	.35355	.06250
Change in Burning sensation	32	-1.0625	.56440	.09977

## Discussion

In this study, the drug *Sariba Moola Grtha* has selected from *Vrana Chikitsa* context mentioned in *Vangasena Samhitha* as the disease is a true ulcer in the anal canal. The excruciating pain due an ulcer has to be considered primarily because it is the major symptom of the disease. Wound healing with normal bowel movement is the ultimate aim of the treatment. The treatment which promotes early epithelialisation and granulation tissue formation can give better results.

It is mentioned that *Sariba Moola Grtha* is having *Shodana* and *Ropana* properties will promotes healing of the ulcer. Once the *Vrana* became *Shodhita*, will results in *Ropana* thus controls the pain and cures the disease.

The drug *Sariba* have *Tikta Madura Rasa* which is *Vata Samaka*, *Snigdha Guna* and *Madura Vipaka* can alleviate *Vata Kopa*.

*Grtha* also have *Vata Pitha Samana* and *Vrana Ropana* properties which can initiate wound healing by early epithialization and prevents microbes. By *Samskarasya Anuvarthana* property, *Grtha* can support and strengthen the *Vata Samana* property of *Sariba*. Thus it controls *Vedana* in fissure in ano.

In *Gandarvahasthadi Kashaya*, the major ingredient is *Gandarvahastha* which is very good *Vata Samana Dravya* and the synergic action of *Usna* and *Sita Veerya* drugs in this *Yoga* can perform *Agni Vardana* and *Mala Anulomana*, which prevents further trauma in the *Vrana*.

The drug *Sariba Moola Grtha* is *Vrana Shodana* and *Ropana* which have significant effect on ulcer healing. The *Sariba* is having *Tikta Madura Rasa*, *Guru Snigdha Guna* and *Madura Vipaka* acts on *Vrana* and the response of treatment was strengthened by similar *Rasadi* properties and *Samskarasya Anuvarthana* quality of *Grtha*.

The procedure infiltration is meant for applying the medicine in the ulcer without harming the patient and hindering the healing process as it is a very painful disease.

All patients responded with significant results in reduction of pain, burning sensation, constipation and bleeding.

## Conclusion

- Fissure in ano is a crack or longitudinal ulcer in the long axis of anoderm with excruciating pain during and few hours after defecation.
- The disease has the chief complaints of severe pain, bleeding and burning sensation associated with habitual constipation. So these symptoms are taken as assessment criteria for this study.
- As the disease Fissure in ano is a true ulcer in the anoderm, the formulation *Sariba Moola Grtha* mentioned in *Vrana Chikitsa Adhikarana* of *Vangasena Samhitha* taken in account. It is mentioned as *Sarva Vrana Vishodana* and promotes faster healing and cure of ulcer.
- Constipation along with digestive impairments is the major cause of the disease. So that for *Agni Vardhana* and *Mala Shodana*, the drug *Gandharvahasthadi Kashaya* internally was selected.
- In this study, among 32 patients, the 7 days treatment has got considerable effect on pain, bleeding, burning sensation and constipation to almost all of the patients. The combined effect of 5ml *Sariba Moola Grtha* infiltration per anum along with 96 ml *Gandharvahasthadi Kashaya* internally twice daily showed highly significant impact and stable results in the end of 14<sup>th</sup> day on follow up.

## References

1. [www.med-lib.ru/english/oxford/fiss\\_in\\_ano.php](http://www.med-lib.ru/english/oxford/fiss_in_ano.php)
2. Vangasena Samhitha of vangasena (Nirmalsaxena, trans, English) 1st ed. Varanasi: Choukamba Sanskrit Series Office; 2004;2: p.135-36.4 / 22.

3. Materia Medica of Ayurveda based on Madanapal's Nighantu by Vaidya Bhagawan Dash, New Delhi, Health Harmany Paharganj: 11005, p.32,76
4. Ashtangahrdhaya of vaghbada (Hari Sadasiva Sastri Paradakara, trans, English) 1st ed. Varanasi: Choukamba Sanskrit aansthan; 2012: p.538
5. Patil P, Sharma A, Dadarwal S et al. development of solid lipid Nanoparticles of Lamivudine. Inj J Drug Deliv Technol. 2009; 1:136-8
6. Patel .RP, Patel H, Baria A. (Part 11) Formulation and Evaluation. Int J Drug Deliv Technol. 2009; 1:42-5
7. Caraka. Caraka Samhita (Sharma P.V., trans, English) 1st ed. Varanasi: Chaukhamba orientalia; 2005. 2