



## An Ayurvedic Perspective On *Parikartika* – A Literary Review

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**Abstract** - *Ayurveda*, the “science of life,” helps in achieving a longer lifespan by preventing the occurrence of diseases as well as curing them to the greatest extent possible. *Parikartika* (Fissure in ano) is an Anorectal disorder whose prevalence in the general population is high enough, and many patients are seen in clinical practice. *Parikartika* is a disease characterized by severe agonizing pain during and after defecation, which lasts for some time and is associated with mild to moderate bleeding. *Parikartika* has a practically comparable symptomatology and causative factors to Fissure-in-ano. Ayurveda can provide a permanent cure for the disease. Medicinal treatment is easier than surgical treatment. In *Ayurveda*, the sequential administration of *Basti* and certain *Shaman Yogas* is quite beneficial. *Ayurvedic* medicines are practical, effectively accessible, and safe for long-term use.

**Key words**- *Ayurveda*, *Parikartika*, *Basti*, *Shaman Yogas*.

**Introduction**- As the name suggests, *Parikartika* is a condition associated with "*Kartanvat Vedana*" in the *Guda* area, such as cutting pain in the anal area. Extremely excruciating pain during and after defecation that lasts for a long time and is associated with modest to moderate bleeding is the most common sign. Anorectal disorders are a group of medical disorders that occur at perianal and the junction of the anal canal and the rectum. Anorectal diseases are a group of diseases that are usually neglected by general surgeons and physicians. It may be due to various factors, such as the involvement of fecal matter, a higher probability of recurrence, and a very complex related anatomy. *Vagbhatta* mentioned that diseases are a consequence of *Mandagni* (low digestive power),<sup>[1]</sup> which is the main cause of *Vibandha* (constipation). Constipation is a complaint with a multi-factorial etiology and various symptoms.<sup>[2]</sup> Constipated people mostly passes hard stool which breaks the smooth wall of anal verge or longitudinal tear in lower end of anal canal this condition is called fissure-in- ano (*Parikartika*).<sup>[3]</sup>

The term "*parikartika*" has been used in *Bruhatrayi*, but not as a distinct illness but rather as a side effect of other illnesses, like as fever, diarrhea, and complications from *Basti* and *Virechan Chikitsa*. When limited to the anal area, the description of this ailment is especially comparable to fissure-in-ano in contemporary science. Some writers have referred to it as "*Guda-vidar*."

In *Laghutrayee*, especially *Kashyapa Samhita* and *Shaarangadhara Samhita*, the description of *Parikartika*. *Kashyapa* has mentioned three types of *Parikartika* of the predominance of *Dosha* and their treatment according to the involvement of *Dosha*.

**Aims and objectives of this study:** To study the various aspects of *Parikartika* as per the ayurvedic literature.

**Materials and methods-** Descriptions of *Parikartika* and Fissure-in-ano have been studied and analyzed from relevant *Ayurvedic* classics, modern textbooks, journals, and research papers.

*Parikartika* is derived from *Pari* = all around; *Kartana* = the act of cutting; and *Kartika* = sharp shooting pain (especially in the rectum). So, *Parikartika* is a sharp shooting pain, especially in the rectum. *Acharaya Dalhana* has described the term *Parikartika* as a condition of *Guda* (anus) in which there is cutting and tearing pain. <sup>[4]</sup>

*Ayurveda* has explained *Parikartika* (fissure-in-ano) as *Vyapada* (complication of *Vaman* (Therapeutic Emesis) and *Virechana* (therapeutic purgation)). Diet also plays an important role in *Parikartika*. According to modern science, the consumption of non-fibrous food leads to the hardening of stools and can cause fissure-in-ano. Other causes may be a spasm of the internal sphincter or too much skin removed during the operation for hemorrhoids. Secondary causes of anal fissure are Ulcerative colitis, Crohn's disease, Syphilis and Tuberculosis.

A proper classification of *Nidaana*, *Rupa*, and *Sampraapti*, etc., of *Parikartikaa* is not found anywhere in one place. But many *Nidaana* that might directly or indirectly produce *Parikartikaa* are described by *Aacharya*, which are found scattered in the text. In *Parikartikaa*, *Vaata* is the dominant *Dosha*. The etiological factors of *Parikartika* can be divided into three types as per *Aacharya Sushruta*.

1. ***Nija Hetu*** (Endogenous factors)-*Vedana* (pain) is the primary symptom of *Parikartika*, indicating that *Vata Dosha* vitiation must be present. All factors responsible for the vitiation of *Vata Dosha* can be considered under the *Nidana* of *Parikartika*.
2. ***Aagantuja Hetu*** (Exogenous factors)- The trauma at *Guda* leading to *Parikartika* can be considered *Aagantuja Hetu*. During the procedure of *Basti* or *Virechana*, iatrogenic complications may develop in the form of *Parikartikaa*. *Aachaarya Sushruta* has described 9 complications which created by *Vaidyaa* during the procedure; *Parikartikaa* is one of these 9 complications. It may happen due to the rough and thick *Basti Netra*.
3. ***Nidaanarthakaaree Roga*** (Complications of other diseases)- it can be due to any fault during the procedures, and some diseases, as mentioned in the *Samhitas*.

***Roopa (Symptoms of Parikartikaa)***- *Charaka* has mentioned the symptom, i.e., severe pain in ano while describing *Parikartikaa* as a complication of *Vamana* and *Virechana*. *Aacharya Sushruta*, in the chapter of *Vamana Virechana Vyaapada*, has mentioned the cardinal symptom of *Parikartikaa* that is sharp cutting and burning pain in *Guda*. Further, he added that there is also sort of cutting pain in penis, umbilical region and neck of urinary bladder. The causative *Doshas* are *Vaata* and *Pitta*, and the pain predominantly displays a *Vaatika* and *Paittika* character by the sensation of cutting and burning in the area, respectively. In *Parikartikaa*,

*Dushta Vrana* in *Guda* is one symptom in the form of longitudinal shaped ulcer in anal region. The description of symptoms of *Parikartikaa* mentioned in *Sushruta Samhita* is correct because clinical symptoms of fissure in latest text of surgery are same as cutting or burning pain in anus, pain in umbilical region and radiating pain in penis, thigh, and back. *Vaagbhatta* has described the same signs and symptoms as described by *Charaka* and *Sushruta*. No other *Aachaarya* has described the clinical features of this disease.

**Samprapti (Pathogenesis in Parikartika)**- *Aachaarya Sushruta* has described very beautifully the pathogenesis of each disease in the form of *Shatkriyaa kaala*. Hence, all diseases have these six stages for their manifestation. These stages are *Sanchaya*, *Prakopa*, *Prasara*, *Sthaanasanshraya*, *Vyakti*, and *Bheda*.

**Sanchaya:** *Nija Hetu* sevan causes *Agnidushti*, which causes *Vata Sanchaya* producing symptoms like *Ajeerna*, *Aruchi*, *Aadhmaan*, etc.

**Prakopa:** Due to continuous *Nidana Sevana*, *Prakopa* of *Vaata Dosha* takes place, and simultaneously, *Pitta* gets involved.

**Prasara:** *Vaata Dosha* by *Chala Guna*, along with *Pitta*, circulates in the body, and that causes *Rukshataa* in *Rasa*, *Rakta*, *Maamsa Dhaatu*, and *Mala* of the body.

**Sthaana Sanshraya:** In this stage, *doshas* get situated in *Purishavaha Srotasa* and causes *Malasanga*, followed by *Kathinamala Pravritti*.

**Vyakti:** In this stage, *Guda Twakavidaarana* takes place after *Atikathina Malapravritti*; hence, in this stage manifestation of *Parikartika* takes place.

**Bheda:** *Parikartikaa* becomes chronic by the late approach of treatment by the patient or failure of treatment in this stage.

**Samprapti Ghataka:**

<b>Dosha</b>	-Vata & Pitta
<b>Dushya</b>	- Twak, Rakta, And Mamsa
<b>Agni</b>	-Jatharagni
<b>Dhatwagni</b>	-Rakta & Mamsa
<b>Shrotas</b>	-Purisha vaha, Rakta & Mamsa vaha srotasha
<b>Shrotodustiprakar</b>	-Sanga
<b>Udbhava Sthana</b>	-Pakwashaya
<b>Sanchar Sthana</b>	-Gudagata Sira
<b>Vyaktasthana</b>	-Gudanalika
<b>Rogamarga</b>	-Bahya
<b>Sadhyasadyata</b>	-Kasta Sadhya
<b>Swabhava</b>	-Chirakaleena

**Bheda-** In *Parikartika*, *Acharya Charaka* and *Sushruta* both discussed the *Vata* and *Pitta* Doshas. While providing a detailed *Chikitsa* of the *Parikartika*, *Acharya Kashyapa* has described the involvement of all three Doshas (*Vata*, *Pitta*, and *Kapha*) in the *Adhyaya of Garbhini Chikitsa*.

S.no.	Bheda	Lakshana
1.	<i>Vataja</i>	Shooting, Cutting, or Pricking pain
2.	<i>Pittaja</i>	Burning sensation, Bleeding
3.	<i>Kaphaja</i>	Dull pain, Mucous discharge

**Sadhyata-Asadhyata:** It is simple to treat *Parikartika*, which affects the anal skin (the outermost layer of the *Twaka*). It can therefore be a part of the *Sadhyata* group. If it impacts the more profound layers, it indicates resistance to the healing process. As a result, it fits into the *Kricchrasadhya* group. If connected to *Kushtha*, *Visha Dushti*, or *Shosha*, *Vrana*'s healing will be postponed.

*Parikartika* is regarded as *Yapya* if it is associated with *Sanniruddha Guda*.

**Chikitsa:** *Acharya Sushruta* and numerous authors after him have briefly discussed *Parikartika* as an illness. They have given a very brief description of *Parikartika*'s treatment. There was no need for surgery because the disease was completely cured with the use of medicinal preparations alone, and *Acharya Kashyapa* mentioned managing it by Doshika predominance. Others have not classified it under this type of classification, but it is a fact that none of them have described surgical management. It is assumed that conservative care is sufficient for the treatment of *Parikartika*.

Drugs are separated into two groups based on how they are administered:

1) *Shodhana* 2) *Shamana*.

*Parikartika* is treated as a complication of *Sansodhana Chikitsa* and certain diseases. *Kashyap* mentioned its management according to *Doshik* involvement of *Parikartika*. None of the *Samhitas* described surgical management, so it indicates that conservative treatment is sufficient for the treatment of *Parikartika*. In chronic *Parikartika* when local and medical treatment is failed, then parasurgical and surgical procedures can be done. The principle of treatment for *Parikartika* is mainly based on the following factors.

1. To check the vitiated *Vata* and *Pitta*.
2. To combat the abdominal disorder because *Vata* and *Pitta* are mostly vitiated, which leads to many complications.

**Diet** - [5]

- *Madhura* and *Brihaniya* diet, advised for thin & lean patients.
- *Langhana- Deepana* and *Ruksha - Ushna - Laghu* diet, advised in *Sama* condition.
- *Devdaru* and *Tila Kalka* with *Ushnodaka*
- In severe *Vata Prakopa Avastha*, *Ghrita* with *Dadima Rasa* should be given.
- *Ashvattha*, *Udumbaar*, *Plaksha*, and *Kadamba Siddha* milk.

Local Treatment: Different types of *Basti Karmas* are described for local management.

**Complications:**<sup>[6]</sup>—

1. *Guda Vidhradhi*. (abscess)
2. *Arsho-Bhagandra*. (Sentinel piles with fistula)
3. *Shuskarsha*. (Sentinel piles, hypertrophied papilla)
4. *Guda Sankocha*. (Anal contracture)

**Discussion-** *Parikartika* is categorized as a consequence of specific illnesses and medical treatments rather than as a distinct disorder. The *Doshas* of *Vata* and *Pitta* are primarily involved in *Parikartika*. In the *Guda* region, vitiated *Doshas* build up as a result of various etiological variables. Constipation is the primary cause of *Parikartika* and is brought on by *Agnimandya* and *Apana Vayu Dusti*. Due to its intense and agonizing pain, *Parikartika* has a major influence on day-to-day functioning and requires immediate attention. Using medicines called *Pachana*, *Deepana*, and *Anulomana* in conjunction with the proper *Pathya-Apathya*, *Ayurveda* provides conservative therapy. Constipation and *Parikartika* are caused by foods like *Mudga*, *Kodrava*, *Chanaka*, and other pulses, as well as *Roksha Aharas* that have water-absorbing properties (*Sangrahi*). In treating *Parikartika*, if the patient has an *Ama*, *Langhan Pahchan Ruksha* is advised, meaning that hot and light food should be prescribed. Conversely, if the patient is weak and has a *Ruksha* constitution, then sweet and *Brinhaniya* foods should be recommended. According to modern science, *Parikartika* can be likened to a fissure in ano. In acute cases of fissure in ano, the primary approach is conservative, which includes oral pain medications, stool softeners, soothing ointments, and analgesics. For chronic fissure in ano, treatment options include anal dilation, Fissurectomy, sphincterotomy, and excision of anal ulcer.

**Conclusion -** *Parikartika* can be correlated with fissure in ano. Due to improper *Aahara-Vihara* and stressful life, people are suffering from constipation, which leads to *Parikartika*. Ayurvedic medicine cures most of the acute cases of *Parikartika* when modern treatment fails to provide a better result. Therefore, the status of *Sama Nirama Kosta*, body constitutions, and secondary reasons for *Parikartika* should be thoroughly investigated before administering extreme purgatives for *Sanshodhana Chikitsa* or during the therapy of *Parikartika*. Patients who are not ready for operations, such as Heart patients, Diabetes patients, AIDS patients, Hypertension patients, and Hepatitis B, can be treated with the help of *Matra Basti* (a type of *Anuvasana Basti*), *Taila Poorana*, *Taila/Ghrita Pichu*, and *Kshara Lepana*.

**References –**

1. Vagbhatta: *Ashtanga Hridaya*, revised by Vidyotini, Hindi commentary by Kaviraja Atrideva Gupta, edited by Vaidya Yadunandan Upadhyaya, Published by Chaukhambha Sanskrit Sansthan, Varanasi, 3<sup>rd</sup> Ed., 2002, Vi.S.201, Sutrasthana 4, p.535.
2. International Journal of Advances in Pharmacy Biology Chemistry, Constipation and Ayurvedic Churna for its treatment by P. S. Borhade, TA Deshmukh, IJAPBS – Volume 2(1), Jan Mar. 2013.
3. Manipal Manual of Surgery 2<sup>nd</sup> edition, chapter 131, p.531.
4. Kashyapa Samhita by Vriddhajivaka, revised by Vatsya with Sanskrit introduction by Nepal Rajguru Pandit Hemraj Sharma, edition reprint 2002 Chaukhamba Sanskrit Sansthan, Pune, Garbhini chikitsa adhyaya, p.95.
5. Agnivesha Charaka Samhita. of Acharya Charak, Dridhabala Krit, edited by Pt. Kashi Nath Shastri and Dr. Gorakh Nath Chaturvedi, Siddhi Sthan.Ch.6 Ver.62-66 edition, Varanasi: Chaukhambha Bharati Academy 2007, 1028.
6. Singh B., Singh S., Sachitra Ksharsutra Karma Vigyana. Sarvapriya Prakashan Delhi 1st 2015, Page No. 309.