# International Journal of Ayurvedic and Herbal Medicine 6:5(2016) 2359 –2365

Journal homepage: http://www.interscience.org.uk



# A Comparative Study Of Effect Of Yashtimadhu Ghrita And Tikdadi Ghrita Locally In The Management Of Post Operative Fistulectomy Wound.

Waghmare Dinesh<sup>1</sup>, Dharne Vidya<sup>2</sup>, Kashikar Shrikant<sup>3</sup>, Yadav Sanjeev<sup>4</sup>

M.S.(Scholar)<sup>1</sup>, Assistant Professor<sup>2</sup>, Professor and Head of Dept<sup>3</sup>, Professor and Dean<sup>4</sup>. Department of Shalya Tantra, Dr G.D Pol's YMT Ayurvedic College And PG Institute, Kharghar, Navi Mumbai, Maharashtra, India.

Email id: dr.dineshstar5@gmail.com

#### **Abstract**

Wounds related to Fistula in ano are difficult problem that surgeons have struggled with since the time of Hippocrates. Practically management of Fistulectomy wound is challenging and demands special attention. Wound healing is a natural process but factors like slough, infection and foreign body affect the normal process of healing. The developing resistance of microorganisms to antibiotics proportionally demands the need of new antibiotics. A simple wound turns highly septic while showing negligible effect to strongest antibiotics at times. Time tested safe compounds explained in Ayurvedic texts are the highlights of Ayurvedic medicine when it comes to wound healing. Due to moist anal region, continuous post-operative discharge from wound and daily bowel habit the wound get recurrently soiled and infected. Ultimately results into delayed and impaired wound healing. Thus post Fistulectomy wound management is very necessary for uncomplicated Post fistulectomy wound healing. After referring the Ayurvedic texts we observed that Yashtimadhu Ghrita and Tiktaadi Ghrita has Vrana Ropana, Dahashamana, Vata Pitta shaman, Vedanashamana properties which can help the Fistula(Vrana) to heal rapidly. Tiktadi Ghrita has property of Krumighna, Puya nashak, Kandunashak. Yashtimadhu is considered as best drug for Vrana Ropan (wound) and it has analgesic property also. In both products base is Ghrita which itself has Samskara Anuvarti, analgesic and healing properties.

The present study was conducted to evaluate and compare local effect of *Yashtimadhu Ghrita* and *Tiktaadi Ghrita* in management of post-operative fistulectomy. The symptoms which were assessed during study are Pain, Bleeding, Itching and Size of Ulcer.

The Results revealed that Statistically *Yashtimadhu Ghrita* and *Tiktaadi Ghrita* both are effective in conservative management of *Fistula in ano* but *Yashtimadhu ghrita* per rectal local application is more effective remedy for management of pain, bleeding, itching and for healing of ulcer when compared to *Tiktaadi Ghrita*.

#### Introduction

Vrana means a condition which leads to discolouration of skin. Vranayati eti Vrana, vranayati vaivarnya karoti

The wounds and their managements are fundamental in elective surgery. It is through wound that assess is obtained to deal with underlying pathology. Wounds related to Fistula in ano are a difficult problem that surgeons have struggled with since times of Hippocrates. Practically

management of Fistulectomy wound is challenging and demands special attention. So further efforts are taken for post op Fistulectomy wound management using Herbal preparations.

# **AIMS OF STUDY**

**AIM:** To study the effect of *Yashtimadhu Ghrita* and *Tiktaadi Ghrita* locally in management of Post-operative Fistulectomy wound.

# **OBJECTIVES:**

To evaluate the efficacy of *Yashtimadhu Ghrita* in patients of Post-operative Fistulectomy wound. To evaluate the efficacy of *Tiktaadi Ghrita* in patients of Post-operative Fistulectomy wound. Comparative study to see the therapeutic effect between *Yashtimadhu Ghrita* and *Tiktaadi Ghrita*.

**Hypothesis**: After completing my present study it is concluded that *Yashtimadhu Ghrita* and *Tiktaadi Ghrita* both are effective in conservative management of Post-operative Fistulectomy wound but *Yashtimadhu Ghrita* per rectal local application is more effective and significant remedy for management of pain, bleeding, itching and for healing of ulcer when compared to *Tiktaadi Ghrita*.

**Type of Study:** Open comparative clinical study.

**Source of data:** 60 patients of acute Fistula in ano were selected randomly according to selection criteria from ShalyaTantra outpatient department of DR G D POL YMT College of Ayurveda, Kharghar, Navi Mumbai.

# **MATERIAL & METHODS:**

**Materials:** - 60 patients suffering from *Fistula in ano* in an age group of 18-60 yrs were selected randomly and were subjected to clinical trial. The selected patients were categorised in 2 groups of 30 in each.

Raw materials like *Yashtimadhu bharad* (*Glycyrrhiza glabra Linn*.)[5] And *Goghrita*[6] (Clarified Butter) was collected from local market. It's Identification & Authentication

Was done from Dept of Botony, University of Pune, and Pune.

Standardization was done from University of Pune, Pune. HPTLC of Yashtimadhu ghrita and

Tiktaadi Ghrita was done at Anchrom Laboratories, Mulund (east), and Mumbai.

Ethical Clearance for the study was taken from Institutional Ethical Committee YMT AYU. PG/Shalya/132030008/2013-14

Drug Profile:

**Group A**: *Yastimadhu Ghrita* Administration:- Per Rectal local application (once a day after defecation)

Duration – 10 days

Group B: Tiktaadi Ghrita

Administration:- Per Rectal local application (once a day after defecation)

DIn both group adjuvant to *Yashtimadhu ghrita* and *Tiktaadi Ghrita*, orally *Gandharva Haritaki churna* 3gm at night with luke warm water will be given for *vatanuloman* (laxative) purpose for 1month.

#### **METHODOLOGY**

Method of preparation:-

Yashtimadhu ghrita –

Yashtimadhu Ghrita was prepared by snehapak vidhi according to sushrut Samhita chikitsa sthan chp 31 Snehopayogik chikitsa adhyay.[7]

Proportions used were {1:4:16}

part = Yashtimadhu Bharad; 4 part = Goghrita; 16 parts = Water

Yashtimadhu kwatha is prepared with the moola of yashtimadhu. 1 part of Yashtimadhu Bharad and 16 parts of water taken in a vessel and boiled together till it reduced to Chaturamsha i.e. ½ of the quantity.

This is subjected to filtration. To this then 4 parts of *Goghrita* was added to the *Yashtimadhu kwath* & cooked over *mandagni* till only *ghrita* part remains. Afterwards *Yashtimadhu ghrita* was collected and measured. Then *Yashtimadhu ghrita* 10gm was filled into aluminium tubes with nozzle from the back side of the tube (open side) after filling the *ghrita* into tubes crimping was done in crimping machine and tube was sealed and labelled as *Yashtimadhu Ghrita*.

Tiktaadi Ghrita -

Tiktaadi Ghrita was prepared according to Abhinav Bhaishajya Kalpana Vidnyan Chp. Vividh Kalpana. Pg no. 302

[8] Method of preparation:

Goghrita (Clarified Butter) was taken in shallow vessel, water added in vessel containing ghrita & kneading action was performed.

After performing kneading action for 2-3 mins the mixture was allowed to settle down & then above water was drained. This procedure was repeated for 100 times. After repeating the procedure for 100 times *Tiktaadi Ghrita* was obtained. Afterwards *Tiktaadi Ghrita* was collected and measured. Then *Tiktaadi ghrita* 10gm was filled into aluminium tubes with nozzle from the back side of the tube (open side) after filling the *ghrita* into tubes crimping was done in crimping machine and tube was sealed and labelled as *Tiktaadi Ghrita*.

Changes in the Pain, Bleeding, Itching and size of ulcer was observed on 0th day, 1<sup>st</sup> day, 3rd day, 5th day and 10th day.

#### ASSESSMENT CRITERIA

#### Inclusion criteria:-

Clinically diagnosed cases of Fistula in ano were taken for the study.

Patients irrespective of sex, religion, occupation & economic status.

Patients of both the sexes in between the age group of 18 to 60 years.

Exclusion criteria:-

Patients having *Fistula in ano* (Fistula-in ano)secondary to Ulcerative colitis, Shyphilis, Crohn's disease, Tuberculosis and malignancy of rectum and anal canal.

Patients with infectious diseases like HIV& HbsAg.

Patient with Diabetes, Hypertension and skin disease.

Patients with chronic sentinel pile and associated with conditions like Hemorrhoids and Fistula-in- ano.

Gradation Score -

The improvement in the patients was assessed mainly on the basis of relief in the cardinal sign & symptoms of the disease.

To assess the effect of therapy, all the signs and symptoms were given scoring depending upon their severity as below.

Table 1: Showing the gradations of parameters for assessment. Parameters Gradations

# 1. Goodagata Shoola (Pain) Grade

No Pain 0

Mild Pain 1

Moderate Pain 2

Severe Pain 3

Worst Pain 4

VAS Scale used for pain gradations- 0=0, 1-3 =1, 4-6=2, 7-9=3, 10=4

Assessment criteria-Relief-

Cured - 100 % relief (100% Improvement)

Markedly Improved - 51 - 75 % relief (Marked Improvement)

Improved - 26 – 50% relief (Moderate Improvement)

No Change - Below 25% relief (No Improvement)

# **DIAGNOSTIC CRITERIA**

Signs & Symptoms:

- 1. Boil present in peri anal region.
- 2 Discharge present from site of boil.
- 3 Painful defecation.
- 4. Itching in anal region

# LABORATICAL INVESTIGATION

CBC with ESR

**Blood Sugar** 

Urine test- Routine and microscopic

# **OBSERVATION & RESULT-**

Both study groups are statistically significant, as the 'p' value <0.001. But *Yashtimadhu ghrita* has more efficacy than *Tiktaadi Ghrita* for all cardinal symptoms.

For obtaining observations and results following tests were used- Wilcoxon signed rank test, Mann-Whitney U test,

Paired t test and Independent t-test.

# Table 2- Showing P values of both groups for all parameters

**Parameters Gradations** 

# Gudagata Rakta Srava (Bleeding) Grade

No Srava 0 Mild (<5 drops) 1 Moderate (5 – 10 drops) 2 Severe (>10 drops) 3

Kandu (Itching) Grade No Kandu 0 Mild (less than 5 min) 1 Moderate (for 5 – 10mins) 2 Severe (more than 10 mins) 3

Size of Ulcer (Fistula) Grade No Ulcer 0 0.1cm-0.5cm 1 0.6cm-1cm 2 1.1cm-2cm 3

Parameters 'p' value

Yashtimadhu Ghrita Tiktaadi Ghrita Goodagata shoola (Pain) 0.001 0.002

Goodagata Raktastrav (Bleeding) 0.001 0.003

**Kandu** (Itching) 0.001 0.002

Size of Ulcer (Fistula) 0.001 0.004

Observation table shows that, both study groups are statistically significant, as the 'p' value <0.001. But *Yashtimadhu ghrita* 

has more efficacies for the symptom Gudagata Shoola, Goodagata Raktastrav, Kandu, and Size of Ulcer.

# Table 3: Showing Overall Result of Yashtimadhu ghrita and Tiktaadi Ghrita local (per rectal) application on 60 Patients.

**Result** Yashtimadhu ghrita Tiktaadi Ghrit. No. of Patients Percent No. of Patients Percent Cured 17 56.7% 13 43.3%

**Markedly Improved** 8 26.7% 8 26.7%

**Improved** 3 10.0% 4 13.3%

**No Change** 2 6.7% 5 16.7%

**Total** 30 100% 30 100%

# **RESULTS** -

In this present work on *Fistula in ano* 60 patients were selected according to the criteria and divided into two groups i.e. Group

A Yashtimadhu Ghrita per rectal local application and Group B Tiktaadi Ghritaper rectal local application.

This study was based on clinical features like *Goodagata Shoola, Goodagata Raktastrav, Kandu* and Size of Ulcer. Demographic analysis on Independent variables like Age, Gender, Marital status, Economic status, Education, Religion, Occupation, Diet, Nature of sleep, Addiction, Exercise, Prakruti and Weight were assessed but not considered in drawing conclusion.

Following results were observed –

*Gudagata shoola*: In Group A *Yashtimadhu ghrita*-Out of 30 patients- 22 patients (73.3%) were Cured, 6 patients(20%) were Markedly Improved and 2 patients (6.7%) got No Improvement.

**In Group** *B Tiktaadi Ghrita* - Out of 30 patients- 18 patients (60%) were cured, 8patients (26.7%) were Markedly Improved and 4 patients (13.3%) got No Improvement.

Gudagata raktashrava: In Group A- Yashtimadhu ghrita- Out of 30 patients-24 patients (80%) were cured, 4 patients (13.3%) were Markedly Improved and 2 patients (6.7) got No Improvement.

In **Group B** *Tiktaadi Ghrita* – Group B out of 30 patients- 20 patients (66.7%) were cured, 9 (30%) patients were Markedly Improved and 1 patient (3.3%) was improved.

**Kandu:** In **Group A**-Yashtimadhu ghrita-Out of 30 patients - 21 patients (70%) were cured, 7 patients (23.3%) were Markedly Improved and 2 patients (6.7%) got No Improvement.

**In Group B**- *Tiktaadighrita*- out of 30 patients-13 patients (43.3%) were cured, 13 patients (43.3%) were Markedly Improved and 4 patients (13.3) were improved.

**Size of ulcer: In Group A-** *Yashtimadhu ghrita* **-** After treatment P Value is 0.001-86% patients were cured, 6.7% were Markedly Improved and 6.7% patients had No Improvement. **In Group B** – Tiktaadi Ghrita - After treatment P Value is 0.004.76% patients were cured, 13.3% were Markedly Improved and 10% patients had No Improvement.

Over all Effects of Therapies-Relief –

In **Group A-** *Yashtimadhu ghrita* - 56.7% patientswere Cured, 26.7% patients were Markedly Improved, 10% patients were Improved, 6.7% patients had No Change.

In **Group B-** *Tiktaadi Ghrita* -43.3% patients were Cured, 26.7% patients were Markedly Improved, 13.3% patientswere Improved, 16.7% patients had No Change.

# **DISCUSSION**

In Fistula-in-ano there is preponderance of mainly two *Doshas* viz. *Vata* and *Pitta*.

Due to this *Doshic* predominance the two major symptoms of Pidika, pain and Discharge are present.

For the relief of these symptoms a drug which is *Vata shamak* and *Pitta Shamaka* is always suitable. In the treatment of all types of wounds and inflammations *Yashtimadhu* is considered the drug of choice.

The factors responsible for causation of *Fistula in ano* as found in various texts are *Vamana-Virechana-Vyapat*, *Bastikarma Vyapat*, *Atisara*, *Grahani*, *Arsha*, *Udavarta* etc.

*Sushruta* while describing the symptoms of the disease speaks of the features such as cutting or burning pain in perianal region extending upto pelvic and groin.

The present study was carried out to establish potent *Ayurvedic* treatment for Fistula in ano.

# **PROBABLE MODE OF ACTION:**

Yashtimadhu contains Glycyrrhizine and asparagine as active ingredients. Glycyrrhizine is a saponin widely used as an anti-inflammatory agent.

Asparagine is a type of amino acid and act as analgesic (natural painkiller) and anti - inflammatory. Pain is reduced due to *vedanashamak* effect of *Yashtimadhu ghrita* local application without using any antibiotic or painkiller. It doesn't only controls the pain but alsoact as *vatahara*, *pitta Shamak*, *ropaka*, *dahahamak*, *stambhak* in *Vrana*. *Ghrita* also reduces the *Rukshata* of *Vayu* and maintain the normal tone of muscles.

Smoothening effect is achieved due to *Ghrita*.

Goghrita, which itself is having samskaraanuvarti, analgesic and healing properties. Samskaraanuvarti property is potentiated

by goghrita which create good medium for absorption, transport and delivers of the ayuvedic

formulation to the proper area of the body.

Goghrita also contains vit. A, D, E and K.Vit A and K are antioxidant and are helpful in preventing oxidation injury to thebody. Vit. K keeps epithelial tissue of the body intent which is very useful of wound healing. Liolenic acid helps in granulation.

#### **CONCLUSION**

In this present work on *Fistula in ano* 60 patients were selected according to the criteria and divided into two groups i.e. Group

A Yashtimadhu Ghrita per rectal local application and Group B Tiktaadi Ghrita per rectal local application. The site of

Fistula in ano is Guda, which is similar to the site of Fistula-in-ano.

The age wise distributions of 60 patients showed that maximum number of patients i.e.

63.3% belonged to age

group of 18-28 years, followed by 30% patients to 29 - 39 years and 3.3% patients to 40 - 50 years. Lastly 3.3% patients belonged to age Group of 51 - 60 years.

According to Gender - Among 30 patients, in Group A 46.7 % were male, 53.3 % were female. In Group B 70 % were male, 30 % were female.

According to Occupation - Among 30 patients, in Group A 20% patients were Housewife, 6.7% patients were in business,

70% patients were Employee;3.3% were Driver. In Group B 26.7% patients were Housewife, 6.7% patients were Mechanic and 3.3% patients were Plumber, 6.7% patients were in Business, 56.7% patients were Employee.

While observing the Nature of diet, in Group A - it was found that mixed diet patients were majority in number i.e.90% and 10% were of vegetarian diet. In Group B 70% patients were of mixed diet and 30% patients were of vegetarian diet.

While  $\sigma serving$  Addiction - In Group A - 13.3% patients were addicted to Smoking, 10% patients were addicted

to Tea, 76.7% patients were not addicted to anything and In Group B - 3.3% patients were addicted to Coffee, 16.7% patients were addicted to Smoking,13.3% patients were addicted to Tea,66.7% patients were not addicted to anything.

According to Prakruti - In Group A 66.7% patients were of Vata-Pitta, 23.3% patients were of Pitta-Kapha, 10% patients were of Vata-Kapha and In Group B 63.3% patients were of

Vata-Pitta, 26.7% patients were of Pitta-Kapha, 10% patients were of Vata-Kapha.

According to Position – In Group A-26.7% patients were having Anterior Position of Fistula, 73.3% patients were having Posterior Position of Fistula and In Group B- 26.7% patients were having Anterior Position of Fistula, 73.3% Patients were having Posterior Position of Fistula.

While observing Result – In Group A-56.7% patients were cured, 26.7% patients were Markedly Improved, 10% patients were improved, 6.7% patients had No Change and In Group B- 43.3% patients were cured, 26.7% patientswere Markedly Improved, 13.3% patients were improved, 16.7% patientshad No Change

From statistical analysis it is concluded that both groups are effective in conservative management of *Fistula in ano* when compared before and after treatment. This is observed that the most evident symptoms present i.e. pain and bleeding, burning sensation, itching can be relieved much earlier and Fistula can heal much rapidly by the application of *Yashtimadhu Ghrita* rather than *Tiktaadi Ghrita*.

# **FUTURE SCOPE AND LIMITATIONS:**

Further study can be done on Acute as well as Chronic Fistula in ano irrespective of size of ulcer.

Multicentre trials can be carried out with large sample size.

In future it can be used as an alternative option to Modern topical ointments.

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