EVALUATION OF EFFICACY OF TILA ĀLĒPA AND PARIKARTIKĀHARA VASTI WITH TILA ĀLĒPA ON PARIKARTIKĀ (FISSURE-IN-ANO)



This thesis is submitted for the degree of

Master of Philosophy (Ayurvada) in Shalya 2005/2007

Institute of Indigenous Medicine

University of Colombo

By

A.M. INDRALATHA

DEPARTMENT OF SALYA SALAKYA

INSTITUTE OF INDIGENOUS MEDICINE

UNIVERSITY OF COLOMBO

RAJAGIRIYA

MPhil 2005

2005/4

ලුස්තකාලය මුද්ශිය වෛදන විදන ආශ්තිමය කොළඹ විශ්වවිදනාලය රාජකිරය

6. SUMMARY

This research entitled "Evaluation of Efficacy of *Tila Alepa* and Parikartikahara Vasti with *Tila alepa* on *Parikartika* (Fissure-in-Ano)" was conducted to find out a more successful and cost effective treatment for the disease *parikartika* from Ayurvedic medical system, due to its high prevalence and due to its severity among the all other ano-rectal diseases.

A total number of 90 patients were equally divided into three groups and they were studied with two trial treatments, and which were compared with a standard treatment. All the patients were randomly selected from the clinic of surgery in the Teaching Hospital of Ayurveda in Colombo. The relevant data were collected using specially prepared proforma.

The two drugs under study were; *Tila Alepa* (which is mentioned in *Susruta Samhita, Cikitsa Sthana,* 1st chapter, 65th *sloka*) and (*Parikartikahara Vasti,* which is mentioned in *Caraka Samhita, Siddhi Sthana,* 10th chapter, 34th and 35th *slokas*).

Among the study group, there were nearly ¾ of females and most of them were young in age. The results revealed, showed fissures in mid line anterior position were more common in women.

Furthermore, the results revealed from this study, that most of the aetiological factors prevalent in the study group are similar to those mentioned in *Ayurveda* texts. They are as follows:

Most of the patients had constipation and preferred usna, tikshna, vidahi, ruksha ahara. Most of them had taken less water and indulged unwholesome behavioral patterns like vega dharana (suppression of urges) and

sitting for long periods. Some patients had a history of inappropriate application of vasti karma and child birth.

In addition, clinical features of parikartika mentioned in Ayurveda texts were more prevalent in this study. It was observed that almost all the patients had guda sula (pain), guda daha (burning sensation) and sparsa asahyata (tenderness). 67% patients presented with rakta srava (bleeding per rectum) while 84.44% patients had malabaddha (constipation). Further, most of them complained of a palpable mass in the anal region, pravahana (tenesmus) and udaradhmana (flatulence)

When considering the analysis of results, both treatments were significantly effective in the management of *Parikartika*. When comparing both treatments, treatment two (*Parikartikahara vasti* with *Tila alepa*) is more effective than treatment number one. On the other hand, the most effective treatment is also treatment number 2.

Hence, tila alepa and parikartikahara vasti treatments are having successful and most effective, over the management of parikartika.

Finally, it can be concluded that the combined treatment of Parikartikahara vasti and Tila alepa is the most successful and cost effective treatment for Parikartika (fissure-in-ano).

CONCLUSION

- In this study, it was confirmed that young and middle aged adults are more prone to develop Parikartika (fissure-in-ano)
- Parikartika (fissure-in-ano) in mid line anterior position is more common in women.
- It can be concluded that most of the causative factors and clinical features of Parikartika mentioned in Ayurveda are influencing the disease even today.
- Both treatments studied (*Tila Alepa* and *Parikartikahara Vasti* with *Tila Alepa*)
 are significantly effective in management of *Parikartika* (Fissure-in-ano).
- When comparing both treatments, *Parikartikahara vasti* with Tila Alepa is more effective than *Tila Alepa*.
- Comparison between two trial treatments with standard treatment showed that the most effective treatment is Parikartikahara vasti with Tila Alepa.

Hence, it can be recommended that the *Parikartikahara vasti* and Tila alepa can be used in the treatment of *Parikartika* (fissure-in-ano) patients more successfully and cost effectively.