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# EFFICACY OF DASHANGA LEPA IN MANAGING GUDAVIDRADHI (ISCHIORECTAL ABSCESS): A CASE STUDY

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#### ABSTRACT

**Background:** Aacharya Sushruta classified Gudavidradhi under the category of Abhyantara Vidradhi, which correlates with the modern concept of anorectal abscess. Anorectal abscess, particularly those located around the lower rectum and anal canal, are common acute conditions characterized by severe throbbing pain, fever, and a palpable tender mass. These abscesses are clinically significant as they can lead to the development of fistula-inano. Among the various types of anorectal abscesses, ischiorectal abscess is one of the most prevalent. If left untreated, it has the potential to spread to the contralateral side. Classical texts describe multiple treatment modalities based on the different stages of the condition. **Materials and method:** A case study of 56-year-old male patient was evaluated in the Shalya outpatient department and diagnosed with ischiorectal abscess. The patient was treated with Dashanga Lepa application for three days, utilizing its therapeutic properties. **Observation and Result:** This treatment adopted was notably effective, facilitating suppuration and drainage of the abscess.

KEYWORDS: Gudavidradhi, Abhyantara Vidradhi, Dashanga Lepa.

#### INTRODUCTION

Aacharya Charaka defined vidradhi as "Sheegra vidaahitwat" which itself recommends the destructiveness of the disease. Dosha involved in pathogenesis can be individual dosha or combination of dosha and Dushyas like twak, rakta, mamsa, meda. Agreevated dosha vitiates the dushyas and produces a troublesome, slowly growing, deep seated, painful, round or wide swelling called as vidradhi. It has 6 types as follows; Vataj, pittaj, kaphaj, Raktaj, Sannipataj, Aagantuj. And its individual lakshanas mentioned in the classics.

In modern science, anorectal abscess caused by organism like E coli, staphylococcus aureus, streptococcus, B proteus. Specifically, ischiorectal abscess caused by – Extension of anal gland inflammation laterally through the external sphincter, Infection through blood or lymph, Extension from pelvi-rectal abscess. And characterized by Acute pain, high grade fever with chills, Other constitutional symptoms.<sup>[3]</sup> On examination we can note

tender, brawny, indurated swelling.

Fluctuation developed as a late sign. Treatment of abscess always depend upon stages. In Stage of inflammation- NSAIDs, Antibiotics can given. After abscess formation I & D advised and pus collected sent for C & S. Early use of antibiotics in this stage before drainage of abscess leads to antibioma formation.

Aacharya Sushruta describes the treatment of Vidradhi in the Chikitsa Sthana, specifically addressing the apakwaavastha with a series of procedures known as "Shophavat Kriya" (including aptarpan up to virechana, comprising 11 upakramas). Among these, the Aalepa upakrama is noted for its effects such as shothahara (reducing swelling), vedanahara (pain relief), shodhana (purification), vranautsadana (wound healing), and vranaropan (wound rejuvenation). If Aalepa fails to alleviate the swelling, it may lead to suppuration. [5] Dashanga Lepa, one of the formulations listed in Visarpadadhikar [6], is used in this Aalepa upakrama.

Table 1.1: Ingredients of Dashanga lepa as per Sharangdhara samhita.<sup>[7]</sup>

8	Rasa	Guna		. 1	Karma	Chemical constituents
Shirisha	Kashaya, Tikta, Madhura	Laghu, Ruksha, Tikshana	Ishad ushna	Katu	Tridosha Shamaka, Shothahara, Vedana Sthapan, Varnya, Vishghna,	Twak- tanin and saponin, resin.

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					Virechana.Chakshushya	
Madhuyashti	Madhur	Guru, Snigdha	Sheeta	Madhura	Vatapitta Shamak	Glycyrrmzin, isoliquiritin, liquiritin
Tagar	Tikta, Katu, Kashaya	Laghu, Snighdha	Ushna	Katu	Kaphavata Shamak, Vedanasthapan, Vranropana	Valerianic acid
Raktachandan	Tikta, Madhura	Guru. Ruksha	Sheeta	Katu	Kaphapitta Shamak, Dahashamak, Stambhanm, Shothahara, Twagdoshahara	Santalin, pterocarpin, pterostilbene
Ela	Katu, Madhura	Laghu, Rooksha	Sheeta	Madhura	Tridosha Shamaka, Durgandha Nashak, Dahashamaka	Cineol, terpineol, terpinene, limonene, sabinene.
Jatamansi	Tikta,	Laghu,	Sheeta	Katu	Tridoshahara,	Volatile oil,
	KashayaM adhura	Snighdha			Dahaprashman, Varnya, Vedanasthapan.	jatamansik, jatamanson.
Haridra	Tikta, Katu	Ruksha, Laghu	Ushna	Katu	Kaphavata Shamak, Shothahara, Vedanasthapan, Varnya, Kusthaghan, Vranshodhak, Vranropan, Lekhana.	Volatile oil, curcumin.
Daruharidra	Tikta, Kashaya	Laghu. Ruksha	Ushna	Katu	Shothahara, Vedanasthapan, Vranropan, Chakshushya	Berberine,
Kushta	Tikta, Katu, Madhura	Laghu, Ruksha, Tikshana	Ushna	Katu	Kaphavata Shamak, Durgandha Nashak, Jantughan, Vedana Sthapan, Varnya, Kusthaghan.	Saussurine, tanin, inuline,
Sugandhbala	Tikta	Ruksha, Laghu	Sheeta		Pittakapha Shamaka, Deepana, Pachan, Visarpa	

# MATERIALS AND METHODS CASE REPORT

A 56 year old male patient came to Shalya OPD no 10 of Government Ayurvedic Medical College Bangalore with c/o painful swelling at right perianal region associated with fever and weakness since 3 days.

### **History of Present illness**

Patient was apparently normal three days ago. Then suddenly he observed swelling at right perianal region associated with pain. But patient didn't give more attention towards condition. Later he developed high grade fever with generalized weakness. So Patient approached to our hospital for further management.

Past history

N/K/C/O of T2DM/HTN/IHD/COPD/Thyroid dysfunction.

- -Surgical history- underwent for I & D of perianal abscess.
- -Family history Nothing specific

#### Personal History

· Aahara: Mixed

Vyasana: Intake of coffee twice daily

*Nidra:* Disturbed*Mala:* Prakruta*Mutra:* Regular

#### General examination

• Built : Moderate

Nourishment : ModerateGait & Apperanace : Normal

Temprature: 99.9°F

PR: 95 BPM

• RR: 18/min

• BP: 130/80 mm of Hg

- No evidence of oedema, cyanosis, clubbing, lymphadenopathy. Systemic examination;
- CNS: consious, well oriented to time, place & person Memory intact
- CVS: S1 & S2 heard
- RS: B/L NVBS heard,
- P/A: soft, nontender, no organomegaly Bowel sound heard.
- Musculoskeletal: Gait normal.

All Rom possible

#### Local examination

- On inspection: A swelling measuring approximately 5×3 cm extending from 7 to 11o'clock position in the Right perianal region. Redness +
- On palpation:

Tenderness +

Temprature + (warmth)

Induration +

Fluctuation: Absent.

Diagnosis: Ischicorectal abscess (Right Sided)

#### Treatment protocol:

- Dashang lepa application thrice a day for 45min × 3 days. Once it will become dry it should be washed off.
- T. Triphala guggulu 2-0-2 (A/F).....7 Days
   T. Gandhaka rasayana 1-0-1(A/F).....7 Days

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- 4. Varunadi Kashaya 15ml-0-15ml with equal quantity of water (B/F)...7 Days
- 5. Panchvalkalqwath Avagaha twice daily for 15-20 min. ....15 Days
- After 3 day, swelling suppurated and drained by itself.

-Wound treated with cleaning with betadine solution followed by packing done with jatyadi taila pichu for next 15 days and sterile dressing do7 ne.

-Remaining same medicine advised for 20 days.

## OBSERVATION AND RESULT

Table No. 1.2: Showing result of study

gresuit of study.						
Day	Pain	Induration	Fever	Wound after pus drainage		
1	+++	+++	+++	-		
2	++	++	++	-		
3	++	+	+	-		
4	+	-	-	+		
7	-	-	-	Healthy		
14	-	-	-	Healing		
30	-	-	-	Healed		

After 3 days of treatment, the patient showed significant improvement. Inflammatory swelling get suppurated, burst opened and drained by itself. Afterwards pain and swelling subsided, systemic symptoms like fever, generalised weakness resolved. Late, burst opened abscess cavity completely healed within 1 month of wound care. Follow-up indicated complete healing with no recurrence up to sixmonth post-treatment. Its application facilitated a quicker recovery and reduced the need for extensive surgical intervention.

#### **Before treatment**



O/E; Swelling in right perianal region Induration+ Tenderness + Temprature+ Fluctuation Ab

On 1st day of treatment



On 4th day of treatment



On 7<sup>th</sup> day of treatment



On 15<sup>th</sup> day of treatment



After treatment (on 30<sup>th</sup> day)



#### DISCUSSION

Dashanga Lepa is a traditional A herbal formulation commonly used in the form of a topical paste or poultice for treating conditions like Visarpa, Shotha and Vrana. Drugs mentioned in Dashanga Lepa having Shothahara, vedanasthapaka, Dahashaman, Tridoshahara properties

which helped in management of *Vidradhi*. Maximum ingredients having *Katu Tikta Rasa Pradhana*, which help in *SrotoShodhana*. 5 ingredients have *Sheeta Veerya*, which help in alleviating *Vata Dosha*. Here *Katu*, *Tikta Kashaya Rasa* also helps to purify *Rakta*. *Ruksha Guna* helps in diminishing *Kleda* at the site of disease.

1.3: Table showing ingredients of Dashanga lepa along its chemical constituents and their action.

Drugs	Chemical constituents	Action
1.Haridra (Curcuma longa)	k iirciimin	Anti-inflammatory, antiseptic, and antioxidant properties.
2.Daruharidra (Berberis aristata)	Berberine	Antimicrobial, anti-inflammatory, and woundhealing properties.
3.Manjistha(Rubia cordifolia)	Alkaloids, glycosides	Used for skin health, detoxification, and as a blood purifier.
4.Kushta (Saussurea lappa)	•	Anti-inflammatory, analgesic, and antimicrobial properties
5.Ela (Elettaria cardamomum)	Cineole, limonene	Antimicrobial and anti- inflammatory benefits.
6.Nagarmotha (Cyperus rotundus)	Cyperene	Used for pain relief, inflammation, and as a skin tonic.
7 Shunti (Zingiber officinale)	l ingerol	Known for its anti-inflammatory, analgesic, antioxidant properties.
8. Maricha (Piper nigrum)	Pinerine	Enhances the bioavailability of other compounds and has antimicrobial properties.
9.Pippali(Piper longum)	Piperlongumine	Used for pain relief, inflammation, and to improve respiratory function.
10. Tagara (Valeriana wallichii)	IV alerenic acid	Known for its sedative, analgesic, antiinflammatory effects.

By considering above properties selected *Dashanglepa* in the management of *Vidradhi*.

## CONCLUSION

Lepa Kalpana is a topical formulation applied directly to the skin. It offers several advantages, including ease of use, minimal side effects, and enhanced bioavailability of active ingredients. When combined with internal medications, Lepa preparations can lead to improved therapeutic outcomes. Classical texts provide various Lepa formulations tailored to the Dosha and Dushya conditions associated with specific diseases, highlighting their significant importance in treatment.

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