

Comprehensive Review on Parikartika: Insights and Significance

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Abstract

Constipation affects up to 80% of the global population and is often linked to lifestyle factors such as poor diet and sedentary habits. Among anorectal disorders, Anal Fissure (AF) is a significant concern due to the severe pain it causes. This article reviews *Parikartika*, an Ayurvedic condition related to anal fissure, to compile information and assess its relevance in modern clinical practice. It identifies primary (dietary and lifestyle), secondary (disease-related), and iatrogenic (treatment-related) causes of *Parikartika*, highlighting the need for a multidisciplinary approach to address these factors. This study underscores the importance of understanding *Parikartika* for effective management and improving patient quality of life.

Keywords: *Parikrtika*, Anal Fissure

Introduction

Our human body is a supreme part of evolution. It has evolved and adapted to a constantly changing harsh environment to fit for survival. Our body is designed to work, but in modern times, mental labor is more than physical labor which affects an individual's health. Consumption of fast food, lack of dietary fibers, irregular diet timings, and sedentary lifestyle super added with mental stress lead to disturbance in the digestive system which in turn leads to constipation. It is more prevalent in society with an estimated rate up to 80%, worldwide.¹

In all anorectal disorders, Constipation is the primary cause.^{1,2} Fissure in Ano (AF) is the most common disease reported in Anorectal Clinics. Anal fissure (AF) is the longitudinal linear cut in the anoderm, generally located at the posterior midline. The incidence of AF is 1 in 350 adults whereas the prevalence rate of Acute Fissure is 18% in Anorectal Disorders.³ Even though, it is a superficial and small ulcer but a distressing lesion. Severe cutting/ tearing type of pain, local burning sensation, and bleeding per rectum are the common clinical features of Fissure in Ano. In a study, conducted on impact of AF in Patient's Quality of life, showed that patients suffer significantly in vitality, bodily pain, social functioning and mental health.⁴

Ayurveda, known as the "science of life," promotes eternal health and longevity. Various communicable, non-communicable, endocrine, and lifestyle diseases have been cited in *brihatrayis* and *laghutrayis* (major and minor triple doctrine of *Ayurveda*). *Parikartika* is one such entity that is mentioned in different contexts which can be co-related to anal fissure. The description available on *Parikartika* in *Ayurveda* is very short and considered as a symptom rather than a disease. Hence, here an attempt is made to compile about *Parikartika* and understand its relevance in today's scenario.

Aims and Objective:

1. To compile the information about *Parikartika*
2. To understand its relevance in present day clinical practice.

Parikartika Vyutpatti (Etymology): The term "*Parikartika*" is derived from the root word "*Parikrit*" which means "to cut around." The term *Pari* when used as suffix, means "all over" or "whole", or every entity" or "every aspect". *Kartika* is derived from "*Krita*" verb which means to cut. It is a noun form. Thus, the word *Parikartika* as a whole means "to cut circumferentially" or "to cut all around".⁵

Nirukti

Pari = *Sarvato Bhaavaha*.

Kartika = *sharp shooting pain (especially in rectum)*.

Parikrit = *Krintati* = *to cut off cut round clip*.

Kartana = *to cut off*.

Vyakhya

Parikartika denotes cutting or cutting pain all around. According to Monier Williams, the word *Parikartika* is derived from root "*Parikri*" which denotes to surround to uphold, to cut around, clip, cut off or cutting up to. (*pari*= *all around*, *Kartanam*= *cutting*). *Parikartika* is a symptom where there will be a *Kartanavat Vedana* (cutting pain) in *Guda* (anus),

Medhra (scrotum), *Bastishira* (pelvic region), *Anilasanga* (obstruction to flatus) along with *tanu* (thin), *ruksha* (dry), *picchila* (unctuous) *srava* (discharge)⁶. *Acharya Kashyapa* says that the one (condition) having cutting and tearing pain.⁷ There is cutting and tearing pain everywhere as told by *Acharya Dalhana*⁶. *Acharya Jejjata* has anticipated about the condition and opined in a very pin pointed way, according to him the specific *vatika* pain is present all around in a specific area of Guda, is *Parikartika*.

NIDANA

Nidana refers to the factors that precipitate or predispose an individual to a disease. In the case of *Parikartika*, ancient Ayurvedic texts do not provide a comprehensive overview. However, various *Acharyas* have identified several contributing factors, classified under three headings:

- 1. Aharaja and Viharaja Nidana (Primary Cause):** This includes dietary choices and lifestyle habits such as consuming *Tikta* (bitter), *Ushna* (hot), *Kashaya* (astringent) foods and factors like *Vegadharana* (suppression of natural urges) play a role. *Acharya Sushruta* notes that individuals with a weak digestive system like in *Vata Prakruti*, who engage in consuming excessively dry or sharp foods are particularly susceptible *Parikartika*.
 - 2. Vyadhi Nimittaja (Secondary Cause):** *Parikartika* is caused secondary to some diseases, primarily involving disturbances in *Vata* and *Pitta* doshas like *Udavarta*, *Vataja Arshas*, *Vatika Atisara*, *Pureeshavruta Vata*, *Vatika Grahani*⁸, *Garbhini Avasta*⁷.
 - 3. Vaidya Nimittaja (Iatrogenic Cause):** This refers to factors related to medical treatments that may lead to *Parikartika*, often due to inappropriate therapeutic practices like *Virechana Vyapat*⁹ (Complication of therapeutic Purgation), *Basti Netra Vyapat* (treatment done with deformed Enema Nozzle), *Basti Vyapat* (Complication of therapeutic enema)¹⁰
- Overall, the interplay of dietary habits, lifestyle choices, and improperly managed medical ailments and few iatrogenic causes significantly influences the onset of *Parikartika*. Addressing these factors is essential for effective management of the condition.

SAMPRAPTI (Pathogenesis)

The *Samprapti* of *Parikartika* is similar to that of *Arsha*, both affecting the *Pureeshavaha Srotas*. *Doshas* initially undergo *Chaya* in response to stimuli, but ongoing exposure to certain factors leads to vitiation, resulting in *Agni-Vaishamyā*, *Avipaka*, and *Malasanchaya*, impacting *Apana Vayu*. This progression causes *Dosha Dushya Sammoorchana* at the *Guda Valis* (anal valves), leading to disease manifestation. *Parikartika* predominantly involves *Vataprakopa* with *Pitta*, causing the *Twak* in the area to become *Ruksha* and crack. The anatomical features of this region exacerbate its dryness. When *Ruksha mala* passes through the unlubricated *Guda*, it results in pain and difficulty in stool or flatus expulsion. *Vaata* is the dominant dosha affected, especially when compounded by *Agnimandhya*. The pathways to *Parikartika* can include untreated conditions like *Atisāra* and *Grahani* or wounds from *Āgantuja Nidāna* (external factors) that lead to *dosha* localization within the *Vrana* (wound). (Table 1 &2)

TABLE No. 1. Showing *Parikartana* as *laxana* in different diseases

Sl.No.	Word Parikartana is found in	References
1	<i>Arshas Poorvaroopa</i>	SS. Ni. 2/8; AS. Ni.7/3 AH. Ni.7/ 15-19;
2	<i>Virechana Vyapat</i>	SS. Chi.34/16
3	<i>Pureesha Vegavarodhajanya Roga</i>	SS. Ut. 55/8
4	<i>Udavarta</i>	AS. Ni.7/23; AH. Ni.7/43- 51

TABLE No. 2. Showing *Parikartika* as *laxana* in different diseases

<i>Vaidyanimitta Basti Vyapat</i>	SS. Chi. 36/36; CS. Si. 7/54-57; AS. Ka. 5/27; BS. Chi. 8/116
<i>Kaphaja Arshas</i>	CS. Chi. 14/17
<i>Vataja Atisara</i>	CS. Chi. 19/5; AS. Ni. 8/5; AII. Ni. 8/5-7
<i>Varchasavruta Apaana</i>	CS Chi. 28/70; AH. Ni. 16/40
<i>Vyanavruta Apaana</i>	CS. Chi. 28/211
<i>Atisara Upadrava</i>	CS. Si. 8/22; AS. Ka. 6/47
<i>Vataja Grahani</i>	AS. Ni. 8/21; AH. Ni. 8/22-2 BS. Chi. 11/9-11; BP. mk. 4/7

Bheda of Parikartika

The classification, pathogenesis, and symptoms of *Parikartika* are primarily outlined in the Kashyapa Samhita, which describes the involvement of all three Doshas in the context of *Garbhini Chikitsa*.⁷

Parikartika is categorized into three types based on the nature of the pain:

1. **Vatija Parikartika** - Shooting, cutting, or pricking pain.
2. **Pittaja Parikartika** - Burning pain.
3. **Shaleshmaja Parikartika** - Dull ache indicating a Kapha predominance.

Although the Kashyapa Samhita is incomplete, the mention of *Parikartika* in relation to pregnancy is noteworthy, as anal fissures are common among pregnant women, particularly during antenatal and post-partum periods.

Chikitsa of Parikartika:

In *Kashyapa Samhita* the treatment has been given to predominance of *Dosha*.⁷

1. **Vataja Parikartika** : *Yusha* prepared with *Brahiti*, *Bilwa* and *Ananta* for eating, these all have the *Vaata-Shamaka* Property.
2. **Pittaja Parikartika** : *Madhuka*, *Hamsapadi*, *Vitunnaka* mixed with *Madhu* and rice water should be given for drinking. These drugs are useful for Pitta Shamana and have also property to correct abdominal trouble with laxative.
3. **Kaphaja Parikartika** : In this he has used the drugs which have the property of *Kapha - Shamaka* and *Vaata shamaka* also as *Kantakari*, *Ashwattha*, *Gokshuru* in equal quantity and mixed with Salt for eating and drinking.

In general, *Acharya Kashyapa* also mentions about the administration of *Yashtimadhu Choorna* and *madhu* (Honey) for licking in Pregnant woman with *Parikartika*.¹¹

Various studies show a significant results by local application of *Jatyadi ghrita*, *Jatyadi taila*, *Yashtimadhu taila*, *Prabhakara ghrita*, *Kasisadi Taila*, *Nimbadi taila*, *Vranaropana taila*, *Doorvadi ghrita*, *Ghrita Manda*, *Yashtimadhu Ghrita*, *Vedanantaka Malahara*, different types of *Pichu* and internal administration of *Abhyarishta*, *Kutajarista*, *Triphala Churna* conventional therapies in managing the symptoms viz. pain, bleeding per rectum besides healing of ulcer.

Pathya for Parikartika

1. Nadi sweda and Lukewarm water sitz bath advised to relieve severe pain
2. Langhana, pachana, rooksha, ushna and laghu ahara

3. Parisheka with cold water, milk and drug with kashaya rasa and sheetala guna.
4. Madhura rasa and vata anulomaka ahara vihara
5. Light leafy blend vegetables and avoidance of constipation and strain during defecation.
6. Old Raktashali and shasti rice, yava and Kulattha

Apathya for Parikartika

1. Vegadharana, maithuna, riding, sitting in Utkata Asana.
2. Vyayama, krodha, guru ahara sevana.
3. Ati tikshna, atilavana, ati rooksha diet

Discussion:

The increasing prevalence of constipation and related anorectal disorders, particularly Anal Fissure (AF), presents a significant public health challenge. This article emphasizes the relevance of *Parikartika*, an Ayurvedic concept associated with anal fissures, and calls for an integrated approach to its management.

Lifestyle choices, such as poor dietary habits and inactivity, are critical contributors to constipation and anal fissures. The modern trend of consuming processed foods and low fiber diets has created a substantial health issue, affecting roughly 80% of the global population. Thus, addressing these factors through multifaceted strategies is essential.

Parikartika's definition, reflecting cutting pain and surrounding discomfort, provides insight into the subjective experiences of patients. This aligns with modern understandings of chronic pain, where personal experiences significantly influence quality of life. Integrating *Parikartika* into contemporary medical practice can enhance treatment approaches.

The classification of causative factors into primary, secondary, and iatrogenic categories highlights the multifactorial nature of *Parikartika*. Identifying lifestyle habits as primary contributors, alongside exploring secondary causes related to other health conditions, underscores the need for thorough clinical evaluations to ensure effective treatment.

The broader implications of *Parikartika* also warrant further study on its connections with other anorectal disorders. These conditions impact emotional and overall well-being, resonating with Ayurveda's holistic view of health. The *Yashtimadhu taila basti* (enema with oil prepared from *Glycyrrhiza glabra*) emphasized by *Acharya Sushruta* helps in the healing of the wound by creating mucosal barrier and acts as a lubricant to facilitate the passage of stool, the warmth of the oil helps in relaxing the sphincter.⁹

Utilizing insights from ancient texts reveals the enduring relevance of traditional medicine. Merging this knowledge with modern research can empower practitioners to provide comprehensive care that emphasizes lifestyle changes alongside conventional treatments.

In summary, the article positions *Parikartika* within modern practice for managing anal fissures. With rising cases of constipation, combining traditional and contemporary strategies is crucial. Future research should investigate the mechanisms behind *Parikartika* to enhance patient outcomes and quality of life for those suffering from anal fissures.

Conclusion

Parikartika is a complex condition that requires a comprehensive understanding of its etiology, pathogenesis, and symptoms. Ayurvedic treatment, including medication and local application, can be effective in managing the symptoms of *Parikartika*.

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