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# GUDABHRASMSHA W.S.R TO RECTAL PROLAPSE -A CASE STUDY (AYURVEDIC SHAMAN CHIKITSA)

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#### **ABSTRACT**

Guda means anus/ rectum. Bhramsha refers to dislocation or dilodge, moved away from its main site. In ayurveda Gudabhrasmsha is described to be formed because of vitiated Vata Dosha where rectum comes out during defecation partially or totally. Sometimes it goes back automatically or sometimes patient has to do it manually. There are two types of rectal prolapse: mucosal (Partial) and full thickness (Complete). Gudabhramsha is explained by Acharya Sushruta under Kshudra Rogas. Acharya Vagbhata Charak described it as a complication of Atisara. Apana Vayu is the cause of Gudabhramsha. In ayurveda Acharya Sushruta has elaborated its conservative management, which can help in early resolution of disease or reduce the chances of having surgery for correction. The drug which having Deepana, Pachana, Rechana, Sothahara, Varanaropana properties are found to be effective in Gudabhramsha. Aims and objectives: Key findings reveal the efficacy of Ayurvedic formulations in Gudabhramsha addressing underlying imbalances in the body's Doshas (biological energies). Material and Method: A 6 year-boy girl presented in OPD of Kaumarbhritya, Rishikul Campus UAU Haridwar Uttrakhand, on 14/03/2024 with complaints of – Something coming out from anus during defecation without bleeding since 3 month. Result: It was observed that intervention of ayurvedic formulation shows significant results in Gudabhramsha patient.

**KEYWORDS:** Kshudra Rogas, Deepana, Pachana, Varnoropana, Sothahara.

# INTRODUCTION

Rectal prolapse is when the rectal walls have prolapsed to a degree where they protrude out the anus and are visible outside the body. Rectal prolapse can be primary or result from a pull through procedure. Although it can occur in newborns and in older children, most cases occur in toddlers, especially at the time of toilet training. Patient usually present between the ages of 2 and 5 years. In infants, it is due to undeveloped sacral curve and in children it can be secondary to habitual constipation. There are two types of rectal prolapse.

- 1) Partial rectal prolapse is defined as "When only rectal wall mucosa and submucosa comes out through the anus and length of such prolapsed segment is less than 3.75 cm".
- 2) Complete rectal prolapse or procidentia is defined like "When all the three layers of the rectal wall i.e., rectal mucosa, submucosa and muscular layer comes out through the anus and length of such prolapsed segment is more than 3.75 cm".

The surgical intervention for structural repair is having its own limitations and it does not give satisfactory results. Impaired bowel movement and recurrence is the main disadvantage of fixation and resection operations. In ayurveda, rectal prolapse is described as *Gudbhramsha*. Acharya Sushruta described *Gudbhramsha* as a Kshudra Roga. In Charaka samhita and Ashtang Hridaya it is described as the complication of Atisara (diarrohea) and as a symptom of excessive purgation. The three main contributing factors of *Gudabhramsha* are *Agnidusti* (impaired digestive fire), Vata vitiation, and Mamsadhatu Kshaya.

Due to long term diarrhoea, impaired bowel habit and frequent straining rectum becomes weak and rectal prolapse occurs. Ayurvedic management can regain the functional integrity of rectum and anal canal and thereby prevent further recurrence of the disease.

#### CASE HISTORY

Chief Complaints: A 6 year – old male patient with his father brought to the out patient department of Kaumarbhritya, Rishikul Campus Haridwar with complaint of – Something coming out from anus during defecation without bleeding since 3 month.

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History of Presenting Complaints: According to Patient's father he was asymptomatic before 3 months. He has history of hard stool since 3 year of age, he took allopathic treatment for hard stool and got temporarily relief. Patient observed red colored mass protruding from his anus while passing stool without bleeding since 3 month. Gradually, the prolapsed mass get reduced spontaneously after defecation. Patient did not have any complaint of bleeding per rectum and painful defecation/pain at perianal region. So with these above complaints, Patient came to Rishikul Campus on 14th March 2024 for further betterment.

**Past Medical & Surgical History:** Not any significant history.

#### General Examination

General Condition: Average Build & Nutrition: good

Pallor: Not present.

Cyanosis: Not present Clubbing: Not present. Lymph Node: Not Enlarged Hairs: Dry, thin hairs.

Scalp: Normal.

Nails: Pinkish white in color Skin: Dry.

Tabel no 1.

Anthropometry	Vitals
Weight: 20.75kg (Expected Wt. :20 kg)	Temperature: 97.10 F
Height: 115cm (Expected Ht. :113cm)	Pulse Rate: 78/min
Head Circumference: 52 cm	Respiratory Rate: 22/min
Chest Circumference: 58 cm	SpO2: 98%
Mid upper arm circumference: 17 cm (Rt.), 17cm (lt.)	Blood pressure: 100/70 mm Hg

**Immunization history-** Immunization done up to age. **History of allergy-** Patient do not have any type of allergy.

**Family History -** There was no relevant family history. **Dietary History -** Vegetarian diet

Qualitative- *Rice, dal, chapati*, vegetable, milk, fruits. Quantitative – Breakfast: - 1 *Parantha*, 1 glass milk

Lunch: 1½ bowl Dal, with rice

Dinner: 1½chapati, 1 bowl veg, 1 glass milk at night.

**Appetite**- Average

**Bowel**- Regular (Consistency – hard stool with Frequency 1 time/day).

**Micturition** – Normal (Frequency 5-6 times/day)

Thirst- 2-2 ½ glass/day Physical Activity – Adequate

**Sleep** - Sound sleep (approx. 7-8 hours a day)

**Addiction** - Habit of eating packed food and junk food daily.

**Systemic Examination:** No abnormalities were detected in examinations of respiratory, cardiovascular, gastro-intestinal and urogenital systems.

#### Asthavidha Pariksha

Nadi: Vata Pardhan Kapha Anubhandi Mutra: Samanya Pravrti, Peetabh Varn Mala: Saam, Shuskha. Jivha: Alipta Shabda: Spastha

Sparsha: Samsheetoshana Drikka: Samanya

Aakriti: Samanya

Samprapti Ghatak

**Dosha**: Tridoshaja dominantly Vata **Dushya**: Rakta, Mamsa, Medas, & Twak,

Srotasa: Raktavaha, Mansavaha, & Purishvaha

Srotodushthi: Sanga, Siragranthi Rog Marg: Bhaya & Abhyantara Udbhavasthana: Ama-Pakvasyotbhava

**Vyaktisthan**: Gudavalitraya

Roga marga: Bhahya & Abhyantara

Agni: Jataragnimandiya

**Treatment Protocol:** After a thorough interrogation with the patient and his father regarding the diet, life style and habits of the child and the history of present illness and after a proper evaluation regarding the present condition of the child, the treatment was planned with internal medications and local application.

Treatment Duration: 4 months.

**Period of assessment:** The patient was assessed at each interval of 10 days.

Table no. 2.

OPD Visit	Medication	Duration	Advice
First visit	1.ParvalpanchamritRasa-65mg Bala Churna -500mg Parval Bhasama-65mg Triphala Guggulu-65mg  1*2 with honey & Sauf arka 2. M-Balrasayan-2gm with guda and lukewarm water (OID at night)	10 days	<ul> <li>Increase intake of water(4-5 glass per day)</li> <li>Daily intake of <i>Munaka</i> (2), <i>Anjeer</i>(1), <i>Badam</i>(2), <i>Chuwara</i>(1) with milk</li> <li>Avoid packed and junk food.</li> <li>Avoid oily, spicy food.</li> </ul>
	3.Sitz bath with <i>Jatyadi oil</i> twice a day		
Second visit	1. Parvalpanchamri Rasa-65mg	10 days	

	Aarogyavardhani Vati- 65mg	
	Arshoghana Vati- 65mg	
	Bala churna -500mg	
1	Triphala Guggulu-65mg	
	1*2 with honey and	
	Sauf araka	
	2. Jatayadi oil for local application	
	3.Kalyanak Ghrita -1tsf BID	
	1.ParvalpanchamritaRasa-	
	65mg Aarogyavardhani Vati- 65mg	
Third visit	Arshoghana Vati- 65mg	
	Bala churna -500mg	
	Triphala Guggulu-65mg	10 days
	1*2 with honey&	-
	Sauf araka	
	2.Jatayadi oil for local application	
	3.Kalyanak Ghrita -1tsf BID	
	1.Parvalpanchamrita Rasa-	
	65mg Parval Bhasma-125mg	
Fourth visit	Asvgandha Churna - 65mg	
	Bala churna -1gm	
	Trikatu churna-125mg	10 days
	1*2 with honey and	
	Sauf araka	
	2.Kalyanak Ghirta-1 tsf with milk	
	OID	
	3. <i>M-Balrasayan-</i> 2gm with guda and	
	lukewarm water (OID at night)	
	4. Sitz bath with Narayana oil	
	twice a day	

### **DISCUSSION**

Gudabhramsha can be uncomfortable and embarrassing, impacting daily life of children. Ayurveda views rectal prolapse as a result of aggravated Vata dosha, weakening

the muscles and supporting tissues around the rectum. Herbal remedies along with dietry recommendations & lifestyle modification are found effective in *Gudabhramsha*, and experience improved quality of life.

	Contents-Mukta Bhasma, Shankha Bhasma, Shukti Bhasma, Pravala Bhasma, Arka Ksheer. These drugs are of Madhur, Tikta, Kashaya and Katu Rasa, Madhura Vipaka and Sheeta Virya which
	have Pittashamak property, Arka Ksheer has Deepana, Pachana Karma due to its Katu, Tikta
	Rasa and pacifies the Vata Doshas due to its Ushna Virya which is responsible for different
1.Parval Panchamrita Rasa	ailments like <i>Udara Roga, Agnimandya, Ajirna</i> . Calcium act as a linker in the mucus and in the
	intercellular association of mucosa. It is a rich and natural source of calcium, If calcium is
	removed from the mucus and mucosa, it weakens the defense line of the gastrointestinal tract.
	Therefore, calcium ions released from calcium-based Bhasmas enhance the protective
	mechanism of gastric mucosa.
	It is beneficial in pacifying all three <i>doshas- vatta</i> , <i>pitta</i> and <i>kapha</i> , but is most efficient is
2. Bala churna	balancing Vata dosha. Bala having Tridoshahara, Balya, Rasayana properties. It is known for
2. Baia churna	improving strength and vitality, & promotes the healing of wounds, ulcers, and injuries due to
	its regenerative properties.
	The contents of Arshoghan Vati have Tikta Kashya Rasa and Seeta Virya. These overall effect
3.Arshoghana vati	on Tridosha and improve Agni and subside vitiated pitta kapha. Vati also have Sothahar
	properties- reduces venous swelling and size of the prolapse.
	Contents- Shuddha Parada. Shuddha Gandhak, Loha Bhasma, Abhraka Bhasma, Tamra Bhasma,
	Shilajatu, Guggulu, Chitramool, Neemba, Katuki, Haritaki, Bibhitaki, Amalki. The abundance of
4.Arogyavardhani Vati	triphala in this formulation is very effective in removing the AMA toxins from the body. Vati
	works well in Vata and Kapha Doshas. Constipation is also a root of many diseases in the body. It
	have Kutki and long pepper, which increases appetite and reduces indigestion .It improves
	digestion and corrects metabolic activities in the body. It provides strength to the
	intestines due to Shilajit & stimulates the secretion of bile from the liver and bile
	improves peristaltic movements of intestine, which ultimately helps facilitating the movement

www.wjpmr.com	Vol 11, Issue 2, 2025.	ISO 9001:2015 Certified Journal	231
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	of stool from the intestines to lower end of the large intestine,& softens the stools and reduces	
	hard stool formation.	
5.Triphala Guggulu	Contents- <i>Triphala</i> , <i>Pippali</i> and <i>Guggulu</i> . <i>Triphala</i> brings detoxifying and laxative properties, while <i>Guggulu</i> provides anti-inflammatory properties. addition of <i>Pippali</i> brings potent digestive characteristics, It improves <i>Agni</i> which helps promote healthy metabolism and releases excess Kapha from the system.	
5.Jatyadi Tail	It contain 19 contents among them <i>Jati</i> is a key content of oil. It mainly acts on K <i>apha,Medas dosha</i> . <i>Jati</i> exhibits a cytotoxic effect and chemo protective property. It decreases pain and inflammation in any part of the body. It helps to fight against bacteria and is a rich source of antioxidants.  Oil is used to reduce pain, swelling and inflammation. It also acts as neuro- protective and hepato-protective. It boosts fast healing process & have antimicrobial, antibacterial, wound cleansing activity.	
6.Kalyanaka Ghirta	Ghee is the base ingredient in <i>Kalyanaka Ghritam</i> . It is known for its anti- inflammatory and wound-healing properties. It have <i>Katu Tikata, Kashya Rasa, Sheeta Virya &amp; Vata Pittahara</i>	
7.Narayana Taila	Narayana Taila has Kapha-Vata Shamaka or Tridoshahara properties. It has significant Vatahara properties and helps in all type of Vata Vyadhi. It have Anulomna, Deepana, Pachana, Shothahar properties. It have analgesic, anti- inflammatory, and muscle relaxant properties. Use of this oil in sitz bath allows the oil to be absorbed through the skin, providing a relaxing and soothing experience by reducing inflammation & promoting healthy blood flow.	

#### **Dietry Recommendation**

Pathya Ahar: Godum annam, Sarpi. Paya, Nimba Yusa, Patola Yusa. Greens like – Vastuk, Tanduliykam, Jivanti, Asvabala, Cacuka, Kalaya, Valli. Any food material which improves Agni and capable of normalising the functions of Mala and Mutra.

Vihara: Proper sleep, Yoga- Malasana, Balasana, Pawanmuktasan, Pranayam.

Apathya Ahar: Fishes, oil cakes & chillies, spices the food stuffs made of rice, bilva, fibrous roots of lotus, curd, non vegetation diet etc. Virudha, Vishtambhi Ahara, Anupa Mansa, Dushta Udaka etc.

*Vihara: Vegavarodha* (supperssion of natural urge), *Utkatasana* (sitting in wrong position), *Prishtha Yana* (riding), bathing in the sun.

The present study here, focuses not only on disease management but also on prevention of fruther recurrence of disease. Here, management aims to correct the physiological impairment rather than a structural repair. For a successful intervention to treat the rectal prolapse, regulation of bowel habit should be carefully maintained by changing the food habits & life style. To improve the anal sphincter function, *yoga asana* of pelvic floor will be beneficial.

#### CONCLUSION

Considering pathology of the *Gudabhramsha*, It is caused due to vitiation of *Tridosha* dominantly *Vata* (*Apan vata*) and *Dhatu* like, *Rakta*, *Mamsa*, *Medas*, & *Twaka*. *Gudabhramsha* is prevented by avoid straining, regulate bowel habit, sits bath, treat the basic causative factors- diarrhoea, constipation, treat the pelvic floor deformity, musculature weakness etc. *Ayurveda* suggest

purificatory process which eliminates out the toxin and some herbal local application along with oral medication which helps in strenghthening of pelvic floor and wound healing property.

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