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# An Ayurveda approach in treating pilonidal abscess - a case report

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## Abstract

Pilonidal disease is hair-filled abscess commonly seen in young age. Surgical management remains the best choice of treatment and the condition often reoccurs due to the failure in identifying and draining all the sinuses or residual hair. The current study subject reported to the department with pain and swelling in the lower back region for the past three months. The Ayurvedic management followed in current case was to drain all the sinuses and residual hair followed by *Vranopachar* (wound healing). Ayurvedic treatment of abscess drainage followed by wound cleaning with *Triphala Kashaya* and application of *Jatyadi Ghruta* with internal medication *Gandhaka Rasayana*, *Amruthadi Guggulu*, and *Triphala Guggulu* can be very useful in treating pilonidal abscess.

**Key words:** Ayurveda, *Jatyadi Ghrutha*, pilonidal abscess, *Triphala Kashaya*

## Introduction

Pilonidal disease is an anorectal ailment affecting young men and women. Surgical line of treatment is described for its management, but there is high chance of reoccurrence leading to considerable morbidity (Bendewald & Cima, 2017). Hair entering into the skin at the natal cleft region leading to a foreign body reaction, causing a hair-filled abscess cavity is known as Pilonidal disease. Twenty-six people in a population of 100,000 people are found to have this problem by a research study which also suggests an association of obesity (37%), occupation with less physical activity (44%), and any injury or irritation locally (34%) with

Pilonidal disease (Sondenaa, Nesvik, Anderson, Natas, Soreide, 1995). Sacrococcygeal pilonidal sinus is commonly found in young age group especially between 15-30 years, with a 3:1 male-to-female ratio. Usually it is seen in puberty, as sex hormones are known to affect the pilosebaceous gland and alter the healthy body hair growth. The incidence of pilonidal disease is not commonly seen in people older than 40 years.

## Case report

A nineteen-year old man noticed a small swelling in the lower back, which was insidious in the onset and non-progressive and non-tender. The patient complained of severe pain and swelling and after three months approached for treatment. On physical examination, a discharging sinus was observed above the intergluteal cleft with induration of the surrounding skin. He was admitted as in-patient and routine investigations were done. All the reports of investigations were found to be within the normal limits. He underwent incision and drainage procedure under general anaesthesia.

After six months, there was reoccurrence of abscess and the patient approached Division of Ayurveda for treatment. On examination, there was swelling and pain in the same region. Due to the excruciating pain,

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patient was unable to sit in a position for long time. Initially he was administered with *Gandhaka Rasayana* Tablet 1TID, *Amruta Guggulu* 2 TID, *Triphala Guggulu* 1TID internally and *Valiya Marmani Gulika* for external application. This treatment was followed for three days, the abscess opened up, and the pus was drained. Two openings were made, the deep pus pockets were identified and busted, and complete drainage was done. There was lot of pus collection and tuft hairs in the abscess. In the opened abscess, slough was removed and washed with *Triphala Kashaya*. *Jatyadi Ghruta Vrana Basti* (Administration of medicated *Ghee* in the pus pockets) followed by administration of *Jatyadi Ghruta Varti* (Elongated cotton gauze dipped in medicated *Ghee*). The wound was cleaned every day with *Triphala Kashaya* followed by administration of *Jatyadi Ghruta Varti* and dressing for a period of one week.

In the subsequent week, the same process was done on alternate days and in the third week the process was followed once in three days. The internal drugs remained the same for entire three weeks. At the end of the third week, the wound healed completely with scar. The patient was then followed up until six months without any further reoccurrence of similar complaints.

## Discussion

The term *Vidhradi* is denoted for abscess in Ayurveda. Application of *Lepa* (external application of herbal paste) is the first step in management of abscess for *Paka* (maturing). Further, when the abscess opens up, pus is drained, and the wound is opened further and washing is done with herbal decoction with drugs having *Kshaya Rasa* (astringent taste). In the current case, *Triphala Kashaya* was used for washing the affected area. *Triphala* contains around 20% tannins which makes it bitter in taste (Saravanan, Srikumar, Manikandan, JeyaParthasarathy, SheelaDevi, 2007). Major content of *Triphala* is gallic acid and it contains flavonoids, saponins, sitosterol (Kaur, Michael, Arora, Harkonen, Kumar, 2005). The decoction not only helps in cleaning the wound, but also enhances wound healing by contraction and proliferation of tissues. Application of herbal ointments like *Jatyadi Ghruta* that contain about 14 ingredients is used as wound healing agent in Ayurveda. Major ingredients used in the preparation of *Jatyadi Ghruta* are proven drugs having antibacterial, antifungal that are known to

reduce inflammation and help in wound contraction and healing. Previous study on effect of topical insulin, *Jatyadi Taila* and *Jatyadi Ghruta* on wound healing activity on excision wound injury in alloxan induced diabetic rats proved that it can reduce the epithelization period and increase wound contracture with the experimental drugs (Mate, Dhande, Pandit, Patel, & Hardikar, 2014). Internal medications were prescribed for reducing pain, inflammation, and enhance the healing process.

## Conclusion

Ayurvedic treatment of abscess drainage followed by *Triphala Kashaya* wash with application of *Jatyadi Ghruta* can be successfully managed in pilonidal sinus. Further, such cases can be studied in large population to assess the effectiveness of Ayurvedic treatment.

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