



Management of Fistula-in-Ano with Ksharasutra – A Case Report”

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ABSTRACT

Fistula-in -ano is an inflammatory tract which has an external opening (secondary opening) in the perianal skin and an internal opening (primary opening) in the anal canal or rectum. This tract is lined by unhealthy granulation tissue and fibrous tissue. In Ayurveda, fistula-in-ano is correlated with the *Bhagandara*. Acharyasushruta describe five types of *Bhagandara*. By Acharya, *Bhagandara* is considered under *ashtamahagada*. It is a big challenge for surgical world to treat fistula-in-ano. Ksharsutra therapy is effective in the treatment of fistula without complication. *Apamargakshara sutra* is effective in the management of fistula- in- ano. Here a case of fistula in Ano in a 35year male patient was examined in Shalyoapd and treated with Ksharasutra, as it cut and curette the unhealthy granulation tissue inside the tract.

Keyword :*Bhagandara*, fistula-in-ano, *kshara sutra*.

INTRODUCTION :*Sushruta* has discussed about *shastra karma* along with *Ksharkarma*, *Agnikarma*, *Jalaukavcharana*. *Kshara* is important parasurgical procedure as it can cause excision, incision, scrapping and can mollify all three Doshas.^[1] Use of *ksharasutra* in anorectal disease become more popular due low rate of recurrence and its easy approach. *Sushruta* has described the use of *ksharasuta* in the treatment of the *Nadivarana*. *Chakradatta* has referred the thread coated with *Snuhi* and *Haridra* powder in the treatment of *Arsha* and *Bhagandra*. The standard *ksharasutra* was established by the *Shalyatantra* department of Banaras Hindu University and prepared by 11 coating of *SnuhiKsheera* then 7 coating of *SnuhiKsheera* and *ApamargaKshara* and then again 3 coating of *SnuhiKsheera* and *HaridraChurana*.^[2]

In this case study a case report of Fistula in Ano was treated by *Ksharasutra* which was cured and no further complaint werefound in follow up period.

Ayurvedic view of Bhagandra and Kshrasutra

AcharyaSushruta, describe the *Bhagandra* along with its symptoms, types and its treatment. *Bhagandra* creates *Darana* in the area of pelvis, rectum and urinary bladder thatis why called *Bhagandra*.^[3] Acharyasushruta describe five types of *Bhagandara*.^[4] Fistula is a communicating track between two epithelial surfaces, commonly between a hollowviscus and skin or between two hollow viscera.^[5]

Kshara is best one among *Shastra* and *Anushastra* because it does function like excision, incision and scrapping and mollify all the three *Doshasa*.

CASE REPORT

Patient name – ABC

Age- 35year

Gender – male

Occupation- businessmen

Chief complaint

Pus discharge from opening with mild pain at left side of perianal region since 3month

H/O present illness

Patient was alright before 3 months. Then he complained of opening was present in left side of perianal region with on & off pus discharge and pain since 3 months. He took conservative treatment but did not get relief. Then he came to Shalyatantra OPD for further treatment.

Past history :NAD

Family history: not significant

Personal history

Bowel – clear

Bladder – clear, no burning micturition

Sleep – sound

Appetite- normal

Addiction – no

General examination

CNS – patient was calm & conscious and follow oral command and well oriented to time, place, person

RS- chest B/L symmetrical trachea placed centrally and no added sound heard

GIT- noorganomegaly.

CVS- S₁& S₂ sound heard no added sound heard

UGS- no burning micturition, no any other abnormality found

Pulse- 78/min

BP-124/76mmhg

Local examination

Patient was lie on examination table in lithotomy position and undressed upto knee, color & contour of buttocks was normal and a small opening in left side of perianal region with pus discharge and tenderness was felt around external opening. Probing was done from external opening .About 3cm tract was found during probing.

On digital rectal examination and on proctoscopy no anal pathology was seen. After complete examination the diagnosis was confirmed as Fistula in ano.

KSHARASUTRA APPLICATION**PRE-OPERATIVE PREPARATION**

Informed consent taken

Part preparation

5% xylocaine sensitivity test 0.5ml SC

Inj. TT 0.5ml IM

Enema was given



OPERATIVE PROCEDURE

Patient was shifted in OT and taken in lithotomy position on operation theatre table. Part was painted with betadine and spirit and draping was done. 5% xylocaine was infiltrated to nearby opening and around anal verge. Probing was done to assess the internal opening. *Ksharasutra* ligated to the eye of probe and probe was removed through internal opening and *Ksharasutra* ligated appropriately. Complete haemostasis was maintained and T bandaging was done.



POST -OPERATIVE PROCEDURE

Sitz bath was advised to patient.

Triphalachurana 10mg hs

Jatyadi tail for dressing

Tab ciplox 500mg bd

Cap omeprazole 20mg hm

FOLLOW UP

Patient was discharged after 2 days and asked for changing *ksharasutra* after every 7 days till cutting of the whole tract. Sitz bath and dressing with *jatyadi tail* was advised and allowed the patient for his routine work. After 6 sittings tract was cut and healed spontaneously.

Same procedure was done on 4 more patients of similar chief complaint and similar age group.

Result

After every weekly sitting, approximately 0.5cm tract is cut and healed by *Apamargakshara sutra*.

DISCUSSION

In Ayurveda the treatment of the fistula in ano is *bhesaj*, *Ksharkarma*, *agnikarma* and *Shastra karma*.^[5] In modern medicine fistulotomy, fistulectomy and seton ligation are indicated. These treatments have more post-operative complications and recurrence rate.

The combination of the *Kshara* of *Apamarga*, the *Ksheera* of *Snuhi* and *haridrapowder* is very effective against Anorectal diseases. They cut, curette and heal the fistula. It has properties of effective wound healing and pus drainage, chemical curettage of the tract, antibacterial property, less chance of infection due to its alkaline nature.

CONCLUSION

Ksharasutra helps in debridement and prevent bacterial infection. It is very cost effective, minimum tissue loss, minimal recurrence rate, minimal hospital stay, minimal bleeding. So, we conclude that in case of fistula in Ano *Ksharasutra* ligation is best option.

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