ABSTRACT

Bhagandara (Fistula-in-ano) is one among the Astamahagada (eight grave disorders) mentioned in Sushruta samhita. Bhagandara is a troublesome disease which occurs in ano-rectal region and second commonest ano-rectal diseases after haemorrhoids and difficult to manage. Kshara sutra is one of the chief modality in the treatment in Ayurvedic science and had been explained in Nadivrana. In this context, Guggulu based Apamarga kshara sutra was carried out in the management of Bhagandara. It consists of guggulu, haridra and apamarga kshara. In the present study, the patient diagnosed with Perianal fistula which was secondary to Bartholin abscess was advised to surgery. Since the patient had undergone surgery twice for the same, the patient was not willing to undergo surgery and opted for the kshara sutra. The patient received in the OPD of SKAMCH & RC and has been treated with the kshara sutra prepared in the Lab of SKAMCH & RC by following the standard protocol of preparation. The patient is treated on OPD basis with weekly change of thread. The patient recovered well with complete excision of the tract within span of 9 weeks.

KEYWORDS: Perianal fistula, Bhagandara, Kshara sutra.

INTRODUCTION

The word Bhagandara literally means darana (splitting/tearing) around Guda (anus), Yoni (vagina) and Basti (urinary bladder). At first it appears as a Pidaka (boil) around guda and when it bursts out, then it is known as Bhagandara. 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. Most of the surgical procedures indicated for perianal fistula have got drawbacks like increased discomfort, cost and high rate of recurrence. So kshara sutra can be an alternative treatment in perianal fistula.

MATERIALS AND METHOD

Preparation of Kshara sutra

For the preparation of thread, surgical linen thread Barbour number 20 was manually coated eleven times with guggulu, followed by seven coatings of the guggulu and the alkaline powder of Apamarga (Achyranthes aspera) alternatively and dried. In the final phase, three coatings of guggulu and choorna of haridra (Curcuma longa) was given alternatively. The thread thus prepared was sterilized by ultra violet radiation and placed in glass tube. The pH of the thread was ensured to be about 9.75, while the length was about 11-14 cm.

Figure 1:-Transrectal scan:- Low anterior left perianal branching fistula.
Patient details

Chief complaint:- Discharge in the perianal region since 3 and 1/2 months.

Associated complaint:- Itching and soiling of clothes.

Previous surgical/Medical history:- History of Left sided Bartholin abscess and underwent Incision and drainage twice in year 2015 and 2016.

No Medical history of DM, HTN, BA, KOCH’S and drug allergy.

On examination

Per rectal:- External opening noticed at 1 o’ clock position left perianal region. Respiratory system:- NVBS heard.

Cardiovascular system:- S1 & S2 heard. Gastrointestinal system:- P/A - soft, non-tender, BS ++.

Lab investigation:- Hb - 11.3gm%, Tc - 8870 cells/cubic mm, Bleeding time - 2min 15sec, Clotting time - 4min 30 sec, Random blood sugar - 112mg/dl, HBsAG - Non reactive, HIV 1 & 2 - Non reactive, ESR - 50mm/Hour, ECG - Normal, CXR PA view - Normal, Transrectal scan - Low anterior left perianal branching fistula, evidence of complex fistulous tract along the posterior aspect of anal canal. Its internal opening at the 6 o’ clock position at the level of the anal valve.

Finding noted on day 1 of examination:-
Number of openings – 1.

Clockwise position of opening – 1 o’ clock Type of fistula – Low level anal fistula.

Length of the tract – 4 centimetre. Discharge – pus discharge.

Induration–circumferential 1cm around the external opening. Fibrous tissue around the external opening – present.

Tenderness - ++.

Application of Kshara sutra
The kshara sutra prepared with Apamarga (Achrynthes aspera)and guggulu based as per standard protocol[6] was used and the drug used was for treatment explained under one among the kshara dravya in classics.[6]

Before application of Kshara sutra, patients were advised to maintain proper local part preparation and general hygiene, to take mild laxatives for regularization of bowel. Under spinal anaesthesia, patient was placed in lithotomy position and after aseptic preparation of the part, probing was done. Probe was passed into the external opening of fistula; gradually extended to the internal opening and before taking it out, a Kshara sutra was threaded into the eye of probe, present at tail end and then probe was taken out through anal orifice. The Kshara sutra, passed through the fistulous track and tied outside the anal orifice and left in situ. One week later, the old Kshara sutra was replaced by new one by railroad method i.e. the new medicated Kshara sutra was tied to the end of the previous Kshara sutra, this sutra is cut and pulled out thorough fistulous opening and new one placed in position. The cutting rate of fistulous tract was recorded by measuring the length of Kshara sutra on subsequent changing. After replacement of the Kshara sutra, the patient was advised to continue her normal routine work. The Kshara sutra was changed weekly.
Table 1: There was considerably changes found on various parameter which was as follows

<table>
<thead>
<tr>
<th>Sr. No</th>
<th>Date of thread change</th>
<th>Length of tract</th>
<th>Discharge</th>
<th>Pain</th>
<th>Tenderness</th>
<th>Itching</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>22-11-2016</td>
<td>4 cm</td>
<td>+++</td>
<td>+++</td>
<td>+++</td>
<td>++</td>
</tr>
<tr>
<td>2.</td>
<td>29-11-2016</td>
<td>3.5 cm</td>
<td>+++</td>
<td>+++</td>
<td>+++</td>
<td>++</td>
</tr>
<tr>
<td>3.</td>
<td>07-12-2016</td>
<td>3 cm</td>
<td>+++</td>
<td>++</td>
<td>++</td>
<td>+</td>
</tr>
<tr>
<td>4.</td>
<td>14-12-2016</td>
<td>2.5 cm</td>
<td>++</td>
<td>++</td>
<td>++</td>
<td>+</td>
</tr>
<tr>
<td>5.</td>
<td>21-12-2016</td>
<td>2 cm</td>
<td>++</td>
<td>++</td>
<td>++</td>
<td>+</td>
</tr>
<tr>
<td>6.</td>
<td>29-12-2016</td>
<td>1.5 cm</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>7.</td>
<td>05-01-2017</td>
<td>1 cm</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>8.</td>
<td>12-01-2017</td>
<td>0.5 cm</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>9.</td>
<td>19-01-2017</td>
<td>0 cm</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

The complete excision of tract was achieved in span of 9 weeks.

DISCUSSION ON THE EFFECT OF TREATMENT
Mode of Action of Kshara sutra in Fistula in Ano: By application of kshara sutra it does cutting off the tract and there is continuous drainage of pus which helps in healing. The medicaments which are used to prepare the thread will slough out the fibrous tissue of the track (Debridement by the Ksharanana process) and stimulates the healthy granulation tissue for healing.

CONCLUSION
The present reports highlights the benefits of Guggulu based apamarga kshara sutra with a marked reduction of symptoms to pain, irritation, inflammation, burning sensation. Complete cutting & healing of fistulous tract occurred by 9 weeks without any complications. There was also simultaneous healing of the tract. The procedure throughout its course was safe without causing any significant discomfort to the patient.

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