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PUBLISHED PAPER'S TITLE : AYURVEDIC APPROACH FOR TREATMENT OF FISTULA IN ANO

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Research Paper

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Ayurvedic Approach for Treatment of Fistula in ano

DR Sanjay Singh Chauhan

Declaration

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The Declaration of the authors for publication of Research Paper in Asian Journal of Modern and Ayurvedic Medical Science (ISSN 2279-0772) : DR Sanjay Singh Chauhan the author of the research paper entitled Ayurvedic Approach for Treatment of Fistula in ano declare that take the responsibility of the content and material of my paper as I myself have written it and also have read the manuscript of my paper carefully. Also, I hereby give my consent to publish my paper in ajmams, This research paper is my original work and no part of it or it's similar version is published or has been sent for publication anywhere else. I authorize the Editorial Board of the Journal to modify and edit the manuscript. I also give my consent to the publisher of ajmams to my the copyright of my research paper.

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Abstract- The main objective of management of fistula is to cure the disease along with preserving the anal sphincter, preventing recurrence, and allowing an early return to normal activity of the patient. Though many surgical procedures are available for the treatment of fisula in ano but no one is achieving these aims. *Ksharsutra* therapy is an old, simple and safe minimum invasive surgical technique for treatment of fistula in ano described in ancient classics of *Ayurveda* and is being practiced as a primary method of treatment in all types of fistula in ano including complex and recurrent fistula at Banaras Hindu University since 1965 with great success rate (95.5%) (Deshpande, P. J. and Sharma, K. R1973).

Key words- Bhagandara ,Fistula in ano , Kshar Sutra and IFTAK-BHU Technique.

INTRODUCTION-The disease fistula in ano and haemorrhoids form the greatest percentage of diseases pertaining to the ano-Rectal region, of them fistula in ano is a disagreeable condition for the patient and often creates problems which become the source of his restlessness. The disease is not only limited to a particular race but has a uniform distribution throughout the world.

Fistula in ano is an age old problem and the operations for this disease were designed from time to time to suit the needs of the day. Many surgical procedures available for the treatment of fistula in ano but the results of these



procedures are not very satisfactory especially for the treatment of complex and recurrent fistula in ano. Even so much advancement in surgery there is still a big challenge to surgeons for the management of fistula in ano. As many surgical procedure frequently leads to complication like recurrence, incontinence, delayed healing which creates psychological troublesome along with discomfort.

Ksharsutra

Although *ksharsutra* therapy was kept as an adjuvant to the surgical procedure in the management of *bhagandara*, it owes the credit of standing as a complete treatment of *bhagandara* without any assistance of operative procedure. Now a day it becomes treatment of choice both in *ayurvedic* and allopathic surgeons.

Achrya Charak has mentioned use of kshar sutra along with patan karma in the management of bhagandara⁵⁵.

Sushruta advocates use of kshara sutra in those patients or cases where shastra karma may creates some difficulty e.g. in sukumar and bhiru persons, bhagandara situated on marmas etc⁵⁶. Vagbhat shares same views as Acharya Sushruta.

Kshara Sutra Therapy

The eminent Indian surgeon Sushruta , who lived some times between Image 1

1000 to 800 BC , narrated in his teachings the use of *Kshara* for cure of fistula in ano . *Ksharsutra* therapy is an age old, simple and safe minimum invasive para-surgical technique for treatment of fistula in ano described in ancient classics of Ayurveda is being practiced as a primary method of treatment in all types of fistula in ano including complex and recurrent fistula at Banaras Hindu University since 1965 with great success rate. *Ksharsutra* is a unique medicated seton helps in both cutting as well as drainage of fistulous tract. The cutting and healing of fistulous tract takes simultaneously place therefore the possibility of damage to anal sphincter is less and chances of incontinence are practically nil. It is a cost effective, day care procedure and hospitalization is not required in majority of the patients. During the course of treatment patient remain ambulatory and can perform routine daily activities normally.

It involves application of a specially prepared medicated thread processed with certain medicinal plant a caustics. The thread is passed in to tract, tied outside the anal aperture and left in situ for seven days after which it is changed and retied. The patient is sent home after every sitting and is advised to continue his routine work as usual. In due course of time, the thread falls out spontaneously and the fistulous tract is simultaneously healed. The resultant scar formation is very minimal and the method is safe and free from any complication.













IFTAK (interception of fistulous tract with application of Ksharsutra)

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This novel technique IFTAK-BHU (Interception of fistulous tract with application of *Ksharsutra*) for the treatment of fistula in ano is a modified technique of *Ksharsutra* therapy. This

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technique is being practiced for treating all type of fistula including complex and Banaras recurrent fistula in Hindu University, Varanasi since 2007. In this technique interception of proximal part of fistulous tract is done at intersphincteric plane along with application of Ksharsutra from site of interception to the infected crypt in anal canal. This technique is aimed to eradicate the infected anal crypt without damage to anal sphincters by (Medicated seton). using Ksharsutra continuous drainage of any associated abscess cavity in intersphincteric plane,

preventing recurrence, make surgical approach to managing the fistula in ano easy by converting the complex nature of fistula into a simple one, reduce the duration of time to complete cure of fistula, allowing an early return to normal activity for the patient. It is being

Image 2

observed that complete cure of complex fistula in ano with a highest success rate and almost negligible recurrence rate.

This technique of treatment is based on the Park's concept of crypto glandular origin of fistula in ano. The basis of the procedure is to eradicate the infected anal crypts at the pectinate line using a Ksharsutra (medicated Seton) without laying open of the tract distal to the site of interception. The important steps involve in this technique include, identification of the infected anal crypt, interception of fistulous tract at intersphincteric plane and application of ksharsutra from the site of interception into the in to the infected anal crypt. The fistulous tract is intercepted at the intersphinteric plane and separated from its distal portion







Summery-

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Ksharasutra treatment did not require long hospitalization where as the average hospital stay following surgery

varied from 3 to 16 days.*Ksharasutra* appears to be the best option for the management of high anal fistula and recurrent fistula where there were no post treatment major incontinence and least



recurrence rate (5 percent). Further there was no significant injury to anal sphincter was observed.

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