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A REVIEW ON CAUSES, SYMPTOMS AND MANAGEMENT OF BHAGANDARA W.S.R. TO FISTULA IN ANO

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ABSTRACT

Bhagandara (Fistula-in-ano) is a track that opens deeply in the anal canal or rectum as well as superficially on the skin around the anus. This track usually develops from a Bhagandara Pidika that bursts spontaneously or due to inadequate incision. Anal fistulas can develop with or without symptoms. In the perineal region, there may be pain, discomfort, pus discharge and intermittent swelling. This track typically does not heal due to the presence of unhealthy granulation and faecal contamination, etc. This is a surgical condition and Ayurveda suggested many surgical interventions for curing this pathological conditions. Fistula in ano is a chronic inflammatory response caused by an abnormal communication between the anal canal or rectum and the perianal skin. The most common cause is almost always an anorectal abscess and infection of the anal gland. Interception of fistulous track and application of Ksharsutra, ligation of intersphincteric fistula tract and laser treatment, etc. are some treatments which suggested along with medications and dietary modification.

KEYWORDS: Ayurveda, Bhagandara, Fistula-in-ano, Ashtamaharoga.

INTRODUCTION

Bhagandara is one of the eight difficult to treat Ashtamaharoga; this disease is described in detail in Ayurvedic texts along with its causes, types, symptoms, treatments and management. Bhag and Darana are the two words that make up the word Bagandara; it frequently affects the ano-rectal region, which includes the genitalia. The formation of a Pidika acts as a catalyst for the development of Bhagandara, which is distinguished by an opening around Guda Pradesh along with painful discharge. Ayurveda described several therapeutic options for treating Bhagandara, including Ksharsutra, Pathya Ahara-Vihara and herbal medicines, etc. [1-4]

According to *Aachaarya Sushruta*, all types of *Bhagandara* are difficult to treat, it also known in modern surgery for its callus nature to cure and its high recurrence rate. In many cases, recurrence occurs after treatment with modern surgical methods such as fistulectomy or fistulotomy. Anatomically an anal fistula is a chronic abnormal communication between the anal canal's epithelialized surface and the perianal skin. An anal fistula is a narrow tunnel with an internal opening in the anal canal and an external opening near the anus in the skin. [3-6]

A recurrent abscess that ruptured spontaneously or was surgically drained is usually present. Such abscesses are usually caused by an infection of the anal gland. Tuberculosis, lymphogranuloma inguinale and inflammatory bowel disease such as Crohn's or ulcerative colitis can all cause anal fistulas. *Kshara Sootra* is one of the methods of *Kshara karma* and one of the main modalities described in Ayurvedic texts for the treatment of *Bhagandara*.

Bhagandara is the illness that causes *Guda*, *Bhaga* and *Basti Pradesa* to turn into *Vidaarita*. *Bhagandara* is also known as Fistula-in-Ano, which is an inflammatory track formed by an internal opening in the anal canal or rectum and an exterior opening in the peri-anal skin. [4-6]

Etiology

Etiology can be divided into two categories: *Aharaja* and *Viharaja* factors. *Kashaya-Rasa Sevana, Asthi Yukta Ahara Sevana, Mithyaahara* and *Ruksha Sevana*, etc. are *Aharaja* factors. Excessive sexual activity, forcing to urinate, horseback riding and sitting awkwardly, etc. are comes under the heading of *Viharaja* factors. Other illnesses, such as tuberculosis, actinomycosis, cancer and ulcerative colitis, etc. can also cause fistula pathogenesis. [6-8]

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Types

Fistula can be classified into various categories some of them depicted in **Figure 1**. According to the *Sharangadhara Samhita*, *Sarangdhara* named eight varieties of *Bhagandara* that are similar to *Vagbhata*. *Bhava Mishra* identified five types of *Bhagandara*; these various types of fistula possess different symptoms as mentioned below:

- Shatponaka Fistula involve vitiation of Vata Dosha, continuous discharge, it has the appearance of a sieve with numerous fistulas.
- Ustragreva Fistula possesses Ushna and Durgandhita smelled, it appeared to be a camel's neck.
- Parisravi Fistula is less painful with Kapha predominance, continuous and viscous discharge, along with whitish appearance.
- Shambukavarta Fistula originated from all three Doshas and possesses symptoms of vitiation of all Doshas.
- Unmargi/Agantuj Fistula involves Kotha of Mamsa and Rakta Krimi infestation, trauma to rectum or pus in anal canal.

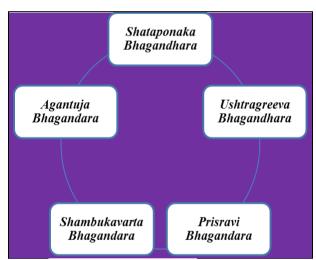


Figure 1: Various types of Bhagandara.

General Symptoms

The most characteristic signs and symptoms of *Bhagandara* are discharging *Vrana* within the two-finger peripheral of the peri-anal region with a history of *Bhagandara Pidika*, which bursts several times and recurs again with pain in anal region.

Samprapti

When an individual uses the specific etiological variables repeatedly, their *Dosha* and *Dushya* become vitiated and worsened at their typical locations as a typical physiological reaction to numerous endogenic and exogenic stimuli. It is known as *Prakopawastha*, after tainting the *Rakta* and *Mamsa* the vitiated toxins lodges in the *Guda* region, the *Dosha* migrates through the body. During the *Vyakta* stage, *Pidika* suppurates and continuously excretes various types of discharge, which is accompanied by pain. The prolong pathology causes

discharge and produces *Darana* of *Vasti* and *Guda*. *Vata* is the dominant *Dosha* in this case, and it is joined by *Pitta* and *Kapha*. [9-11]

Management of Fistula by Ayurveda Drugs

- Narayan rasa, Saptanga guggulu, Saptavinshako guggulu and Navakarshika guggulu, etc. are medicines which offer systemic and local effects.
- ❖ *Kshara Dravya*-based *Vartee* is used, because of the liquefying feature of *Kshara* the drainage is made easier by the removal of slough.
- ❖ Haritaki, Tila, Haridra and Triphala Kashaya is used to relieve pain and inflammation.

Surgical and Parasurgical management

- > Chedana, Patana and Vranachikitsa, etc.
- ➤ Jaloukavachrana is a popular Raktamokshana method that can help to alleviates effects of Rakta vitiation
- Agnikarma acts as a hemostatic measure to prevent recurrence
- Ksharakarma is performed locally by applying paste made from Sutra; it helps in wound healing by removing waste and debris. Kshara has always been used as an adjunct to surgical treatment in Bhagandara

Supportive measures

- Avoidance of Guru, Asatmya and Virudha Ahara, etc.
- Avoidance of continuous riding
- > Avoidance of suppression of natural urges
- Adjuvant measures include Avgahan, Swedan, Parishek, Vranashodhan and Vranaropan, etc.
- Dipana, Pachana and Shothahara medicines can be used as an adjuvant for Bhagandara
- > Fistulotomy can be performed in a very low anal fistula

CONCLUSION

Bhagandara is a Guda-pradesha condition that is difficult to treat, all forms of Bhagandara, with the exception of Shambukavarta and Unmargi, Krichchhsadhya. Aharaja and Viharaja factors mainly involves in disease pathogenesis. Asthi Yukta Ahara Sevana, Mithyaahara, Ruksha Sevana and Kashaya-Rasa Sevana, etc. are Aharaja factors. Excessive sexual activity, horseback riding, sitting awkwardly, forcing to urinate and avoidance of natural urges, etc. are Viharaja factors responsible for Bhagandara. Other illnesses, such as tuberculosis, cancer and ulcerative colitis, etc. can also cause fistula. The most characteristic signs and symptoms of Bhagandara are continuous and viscous discharge from anal region, pain and difficulty in defecation, etc. Ayurveda offers a variety of therapeutic options for Bhagandara, including preventive and therapeutic measures, surgical and parasurgical techniques, etc.

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