Fistula In Ano: An Ayurvedic and Modern Perspective on Diagnosis and Treatment

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Abstract

Fistula in ano, a chronic inflammatory condition characterized by an abnormal communication between the anal canal and the perianal skin, presents significant challenges in clinical management. In Ayurveda, this condition is correlated with Bhagandara, a debilitating anorectal disorder caused by the vitiation of doshas, predominantly Vata and Kapha. This article explores fistula in ano from both Ayurvedic and modern perspectives, including etiological factors, pathogenesis, clinical features, and treatment modalities. Avurvedic therapies, especially Kshar Sutra, have demonstrated remarkable success in treating this condition. Modern medical approaches, involving surgical interventions such as fistulotomy and seton placement, are also discussed. The integration of Ayurvedic therapies with modern surgical techniques may provide an effective and comprehensive treatment for fistula in ano. The need for further research and clinical trials to assess the effectiveness of these approaches is emphasized.

Keywords: Fistula in ano, Bhagandara, Kshar Sutra, Ayurveda, fistulotomy, seton placement, chronic anorectal condition

Introduction:

Fistula in ano, a complex and painful condition, occurs when an infected anal gland leads to the formation of an abscess that eventually bursts and forms an abnormal tract between the anal canal and the perianal skin. This tract fails to heal on its own, often requiring medical or surgical intervention. In Ayurveda, the condition is termed Bhagandara, which translates to "tearing apart the anus," reflecting the distressing nature of the disease. 1 This article aims to provide a comprehensive review of fistula in ano from both Ayurvedic and modern

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medical perspectives, comparing diagnostic and approaches offer holistic treatment to understanding of the condition.

Ayurvedic Perspective

In Ayurveda, Bhagandara is classified under the Ashtamahagada (eight major diseases) due to its chronicity and potential complications. It is primarily caused by the vitiation of Vata and Kapha doshas, which lead to inflammation and abscess formation around the anal region.² Ayurvedic texts describe five types of Bhagandara, each with specific symptoms based on the doshic involvement.3

vidyapharma.com (111)

Etiological Factors (Nidana)

- Apathya Ahara and Vihara (unwholesome diet and lifestyle) such as excessive intake of spicy, oily, and heavy foods, lack of physical activity, and poor hygiene
- Chronic constipation and irregular bowel movements
- Suppression of natural urges
- Trauma or injury to the anal region.⁴

Pathogenesis

The vitiated doshas accumulate in the anal region, causing infection and formation of an abscess. When this abscess bursts, it leads to a non-healing tract, forming a Bhagandara (fistula). The disease progresses through different stages, starting from an initial abscess (Pidaka) to the development of a mature fistula tract.5

Clinical Features (Lakshana)

- Pain and discomfort around the anus, especially during bowel movements
- Discharge of pus or blood from the external opening
- Pruritus (itching) around the anal region
- Recurrent abscess formation.⁶

Ayurvedic Treatment

Ayurveda offers a well-established treatment protocol for fistula in ano, which focuses on purifying and healing the tract. The main line of treatment includes:

- 1. Kshar Sutra Therapy: The most effective Ayurvedic treatment for fistula in ano, involving the use of a medicated thread (Kshar Sutra) that is passed through the fistulous tract. This thread gradually cuts through the tract while promoting healing and preventing recurrence. The Acharya Sushruta pioneered this technique, which has been widely accepted due to its minimal invasiveness and high success rate.⁷
- 2. Shodhana (Detoxification): Therapies like Virechana (purgation) and Basti (medicated

- enemas) are recommended to balance the doshas and support healing.
- 3. Herbal Formulations: Herbs such as Haritaki (Terminalia chebula), Triphala, and Guggulu are used to manage infection, reduce inflammation, and promote healing of the fistula tract.8
- 4. Dietary and Lifestyle Modifications: Patients are advised to follow a light, easily digestible diet that avoids constipation, as well as regular physical activity and good perianal hygiene.⁹

Modern Perspective

From a modern medical viewpoint, fistula in ano is typically caused by an infected anal gland leading to the formation of an abscess that breaks through to the skin surface. This abnormal connection results in a fistula tract that requires medical or surgical intervention for complete healing.

Etiological Factors

- Chronic anal infections, especially abscesses
- Inflammatory bowel diseases such as Crohn's disease
- Trauma or injury to the anal region
- Post-surgical complications¹⁰

Clinical Features

The clinical presentation of fistula in ano includes:

- Persistent pain and swelling around the anus
- Purulent or bloody discharge from the fistulous opening
- Fever in cases of acute infection
- Recurrent anal abscesses. 11

Modern Treatment Approaches:

The primary goal of modern treatment is to eliminate the fistula while preserving anal sphincter function. Surgical options include:

1. Fistulotomy: The standard treatment for superficial fistulas, involving the surgical opening of the fistula tract, allowing it to heal

vidyapharma.com (112) from the inside out. This procedure is highly effective but may pose a risk of incontinence if not performed carefully. 12

- 2. Seton Placement: A seton (silk or rubber thread) is placed through the fistula to allow controlled cutting of the fistula tract over time. This method is preferred for complex or deep fistulas to prevent sphincter damage. 13
- 3. LIFT (Ligation of Intersphincteric Fistula Tract): A more recent technique that involves the closure of the internal opening of the fistula to promote healing without disturbing the sphincter muscles. 14

Integrative Approach

Combining Ayurvedic and modern treatment modalities may offer a more comprehensive approach to managing fistula in ano. The Kshar Sutra therapy from Ayurveda can be used alongside modern surgical interventions like seton placement or fistulotomy to provide better outcomes with minimal recurrence. This integrative approach may help reduce healing time and prevent complications such as sphincter damage or incontinence.¹⁵

Fistula in ano presents distinct challenges in both diagnosis and treatment due to its recurrent nature and potential for complications. From an Ayurvedic perspective, fistula is identified as Bhagandara, arising from imbalances in Vata and Kapha doshas. emphasizes Ayurveda holistic management, focusing on balancing the doshas through detoxification therapies like Virechana and the use of herbal medicines. The cornerstone of Ayurvedic treatment is Kshar Sutra therapy, a minimally invasive procedure that promotes healing by gradually cutting through the fistulous tract, minimizing recurrence and protecting sphincter function.

Conversely, modern medicine addresses fistula in ano surgically, offering techniques like fistulotomy, seton placement, and the LIFT (Ligation of Intersphincteric Fistula Tract) procedure. These

methods aim for immediate tract closure but carry risks, such as incontinence and post-operative infections, especially in more complex cases.

An integrative approach combining Kshar Sutra with modern surgical options, particularly in complex cases, could optimize outcomes by reducing recurrence rates and promoting faster recovery. Ayurveda's focus on overall health and natural healing, paired with the precision of modern surgical interventions, offers a promising pathway for comprehensive, patient-centered management of fistula in ano.

Conclusion

Fistula in ano is a challenging anorectal condition with significant morbidity due to its chronic and recurrent nature. Both Ayurvedic and modern medical systems offer effective, yet distinct, approaches to its diagnosis and treatment. Ayurveda identifies the disease as Bhagandara, caused by an imbalance of doshas, and emphasizes holistic management through therapies like Kshar Sutra, which has proven to be effective in gradually excising the fistulous tract with minimal risk of incontinence. Modern medicine, on the other hand, addresses fistula through surgical interventions such as fistulotomy, seton placement, and the LIFT technique, which focus on immediate resolution but come with potential complications, including sphincter damage and recurrence.

An integrative approach, blending Ayurveda's minimally invasive techniques with modern surgical methods, presents an opportunity for enhanced treatment outcomes. Combining Kshar Sutra therapy with modern procedures could reduce recurrence rates and promote better post-operative healing. Future research into the combined efficacy of these approaches is essential to establish comprehensive treatment protocols. Ultimately, a patient-centric, individualized treatment plan that leverages the strengths of both systems could lead

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vidyapharma.com (114)