MANAGEMENT OF VAGINAL FISTULA BY KSHAR SUTRA - A CASE STUDY
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INTRODUCTION
Fistula in ano is described as Bhagandara in the classics of Ayurveda, is an ancient surgical problem. It was commonly described even in the Vedic period. The description of Bhagandara, with the full text of its managements, can be gathered from the Susruta Samhitha. Fistula in ano is a tubular ulcer formed around the Perianal region. It may also be found anywhere in the perineal region. Its ramifications can extend to the lower back, sub scrotal region, vagina etc. This ulcer frequently discharges pus and occasionally heals spontaneously. Majority of the cases managed by western surgical techniques, recurrence is very common 10 to 20%. This calls for innovative techniques to be incorporated from Ayurveda to tackle this disease. Although fistula in ano is not a life threatening emergency, it is of serious concern with regard to pain, persistent purulent discharge etc. So Acharya Sushruta has advocated an innovative technique i.e. ‘Kshar Sutra’ for the management of fistula. Vaginal Fistula is very rare in incidence. According to Sushruta it can be included in Bhagandara so it has been decided to manage it with Kshar Sutra.

CASE REPORT
A 42 years female, came with complaints of recurrent discharging boil at ride side of Perianal region along with pain and discomfort. She gave a surgical history of incision and drainage for gluteal abscess done before six month. The same complaint re-occurred. On local examination the patient had discharging boil at 9 o’clock position on right side of Perianal region. Before planning the treatment other aetiologies like tuberculosis, diabetes mel-litus, HIV were ruled out.

For the conformation of diagnosis Fistulogram was performed suggestive of low anal fistula with internal opening posterior in the anal canal. So under spinal anaesthesia probing was done. But it came to know that the track was directed upward posterior in vagina and it had no other opening in anal canal or any ramification, suggestive of a rare case of Vaginal Fistula. Length of the tract was 7cm.

After conformation of Vaginal fistula the track was cleaned with betadine and Hydrogen peroxide. Then Kshar Sutra was tied covering the entire underlying track for cutting and healing under all aseptic precaution. The patient was discharged on the next day of procedure. Patient was advice for Sitz bath with lukewarm water. The Kshar Sutra was changed weekly. To promote healing and to reduce pain and inflammation oral antibiotics, anti-inflammatory medicine were also prescribed.

The total period of Kshar Sutra treatment was two months. The track cut trough and simultaneously healed. It was observed that healing was slight slow as compare to cutting. The patient was ob-
served for a period of 1 year to check for recurrence.

The standard Kshar Sutra was used for treatment which was smeared with Lat- 

tex of Shnuhi (Ephorbia Nerrippholia), Kshar of Apamarga (Achyranthus ascera),

which has quality of cutting and Haridra (Curcuma Longa) which is used as an anti-

septic. The ph value of Kshar Sutra was 9.2.

**DISCUSSION AND CONCLUSION**

Vaginal Fistula is a rare condition. Though the treatment of Fistula in ano by Kshar sutra stands most ideal technique it has also good potential in the management Vaginal Fistula. It could prove to be the best mode of management in this rare case with minimum irritation. It minimizes rates of complication and recurrence. It is an acceptable treatment to the patient in terms of cost effective.

**REFERENCES**


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Source of support: Nil
Conflict of interest: None Declared