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BHAGANDARA, A MAHAGADA- AN AYURVEDIC REVIEW

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ABSTRACT

A general impression is that Sushruta Samhita is the only an ancient Indian Ayurvedic text book of surgery. It still retains landmark position in the field of surgical text. A very less conceptual work has been performed on the selected topics of Sushruta Samhita. Therefore a review conceptual study has been carried out on Bhagandara described by Acharya Sushruta. Bhagandara is considered one among the 'Astamahagada' by Acharya Sushruta because it is very difficult to treat by nature. Prevalence of Bhagandara is common in general population. Though Bhagandara is not life threatening it produces inconveniences in routine life. It causes uneasiness and pain that creates problem in day to day activities. As the wound is situated in anal region, which is more prone to infection and persistent pus discharge irritates the person. Bhagandara is a challenge in many instances when it comes to satisfactory treatment. Several treatment modalities has been advocated and practiced with different outcomes. No any available treatment can be considered as a gold standard modality. There are various pros and cons with every treatment method, so there is always need for satisfactory treatment which can provide low recurrence and minimal morbidity.

KEYWORDS: Sushruta Samhita, Bhagandara, Astamahagada.

INTRODUCTION

Ayurveda considered as fifth Veda along with the Rigveda, Samveda, Yajurveda and Atharvaveda. The Vedas are known as first record of the most ancient knowledge and civilization. Among these four Vedas maximum description of Ayurveda is found in Atharvaveda. Later on Ayurveda developed as a separate system of medical science and upgraded as Upveda of Atharvaveda. Ayurveda initially have main two stream i.e. medicine and surgery. Agnivesh Tantra is the prime literature of medicine and Sushruta samhita is the mainpillar of Ayurvedic surgery. In Sushruta Samhita various surgical procedure are described in very simple and scientific manner. Sushruta was principally a surgeon and accepted as the Father of surgery in the world.

Ayurveda deals with physical, mental as well as spiritual well-being of an individual, thus covering all fields of human life. Our great ancestors, through their experience, logic, keen observation and power of wisdom explored the cause of various diseases and methods to cure them. Among the various diseases Ayurveda has grouped eight of them that severely affect health, are often associated with troublesome

complications and challenge to the medical science. In the present era there is change or irregularity in diet and diet timings. In addition to change in diet and life style, person is always under great mental stress. All these causes disturb in digestive system which results into many diseases; among them ano-rectal disorder constitutes an important group especially Bhagandara.

Bhagandara is a disease that exists among human beings since the period of Vedas and Puranas. Samhitas do have abundant evidences regarding the existence and treatment of this disease. Bhagandara has been included in Ashtamahagada in Sushruta Samhita. Ashtamahagada considered difficult to treat in this reference of Sushruta Samhita. This fact indeed stands true in present time also. Acharya Sushruta has given a detailed description of Bhagandara, which includes Nidana, Samprapti, Bheda, Lakshana, Upadrava and Chikitsa.

The development of Bhagandara is proceeded with formation of a Pidika that is known as Bhagandara Pidika in Guda Pradesha. If proper treatment of Bhagandara Pidika is not employed, this will result in development of Bhagandara. It is characterized by single

or multiple opening around Guda Pradesha with various types of discharge associated with pain.

According to Ayurvedic literature, there are a number of methods of treatment i.e. Bhaisaja, Kshara, Shastra Karma etc. These can be used alone or in combinations as per different clinical situations. Among them Bhaisaja Karma (medicinal treatment) is the first line of treatment. Acharya Sushruta has advocated general as well as specialized approach for management of Bhagandara. Generalized treatment principle involves Chhedana Karma of Bhagandara Marga followed by application of Kshara or Agni, as applicable. Current surgical parlance has made enormous progress, thanks to this timely intervention by biomedical engineering both in diagnosis and management. But, certain diseases seem to mock the progress achieved, calling for innovative techniques for their management. One such disease is Bhagandara with either recurrences or apt to additional troubles after conventional surgery. Many techniques have been tried, each by no means better than the other.

AIM AND OBJECTIVES

To evaluate, elaborate and discuss the various concepts of Bhagandara explained in Sushruta Samhita.
 To explore the applied aspects of treatment of Bhagandara as explained by Acharya Sushruta.

MATERIAL AND MATHODS

Bhagandara

Bhagandara is a disease which causes tear or discontinuity in the region of Bhaga, Guda and Vasti. [2]

According to Acharya Sushruta, Bhagandara is a condition which is developed from bursting of painful and suppurated Pidika. Acharya Sushruta clearly differentiated the Bhagandara Pidika with other Pidika stating that Pidika which appear near anus associated with swelling and mild pain and subside quickly should not be included in Bhagandara Pidika. If the Pidika is within two fingers area of Guda (anus), deep-rooted, with pain and fever, it should be considered as Bhagandara Pidika. [3]

Aetiological factors of Bhagandara:-

Aharaja factors:- Mithya-Ahara (Apathya) Sevana^[4]
Asthi Yukta Ahara Sevana^[5]

Agantuja factors:- Kshatajanya Krimi^[6] **Viharaja factors:-** Mithya Vihara Sevana^[7]

Classification of Bhagandara^[8]

Acharya Sushruta has classified the Bhagandara on the basis of Doshik involvement and clinical consideration of its pathogenesis. According to Acharya Sushruta, there are five types of Bhagandara.

- 1. Shatponaka originating from Vata Dosha.
- **2. Ushtragreeva** originating from Pitta Dosha.
- 3. Parishravi originating from Kapha Dosha.

- **4. Shambukavarta** originating from Tridosha.
- 5. Unmargi caused by Agantuja factors

Purvarupa of Bhagandara

During normal condition^[9]: Pain in Kati

Kandu, Daha, Shopha in anus

During defecation and riding^[10]: Pain in Kati

Daha in anus Kandu around anus Shoph of anus

Rupa of Bhagandara

The most typical signs and symptoms of Bhagandara are a discharging Vrana within two-finger periphery of perianal region with a history of Bhagandara Pidika, which bursts on and off.

Symptoms of Different Types of Bhagandara Pidika

Vatika Pidika^[11]

These are of Aruna Varna with different kinds of pain like Toda (pricking pain) etc.

■ Paittika Pidika^[12]

These are red coloured, thin and elevated projections like the neck of a camel. These Pidika have Chosha types of Vedana.

Kaphaja Pidika^[13]

These are of Shukla (white) colour, hard with predominant itching sensation.

■ Sannipataja Pidika^[14]

These are of the size of Padangustha Pramana and display combined features of Tridosha with Toda, Daha, Kandu etc.

Samprapti of Bhagandara

The development of Bhagandara can be described as follows according to Shatkriya Kala. [15] Two types of Samprapti is given here:-

Nidan - Mithya Aahar Vihar and Aagantuja

Pradhan Dosha - Vata

Anubandhit Dosha - Pitta, Kapha
 Dushya - Mamsa, Rakta
 Adhisthan - Guda Pradesh

The Dosha undergoes Chaya as a normal physiological response to various endogenic and exogenic stimuli, when the person continues to use the specific etiological factors, they undergo vitiation of Dosha and Dushya and get aggravated at their normal sites. It is known as Prakopawastha this progress to subsequent stage and the Dosha migrate through the body. It is known as Prasarawastha. Ultimately it gets lodged in Guda after vitiating Rakta and Mamsa. Here it is known as Sthanasanshray. At this stage patients will have different Purvarupa like pain in waist (Katikapala Vedana),

itching, burning sensation and swelling at the anus along with formation of Pidika.

In the Vyakta stage Pidika suppurates and continuously passes different types of discharge through it with association of various kinds of pain. If neglected, it causes Darana of Vasti, Guda and Bhaga and discharge Vata, Mutra, Pureesha and Retash through it, which is termed as Bhedavastha. Here, Vata is the predominant Dosha accompanied by Pitta and Kapha.

The second type of Samprapti is due to Agantuja reasons where the wound occurs first and then the Doshas get accumulated producing further symptoms. When the wound is produced simultaneously there is vitiation of Dosha associated with pain and discharge.

Prognosis.[16,17]

All types of Bhagandara are Krichchhrasadhya (curable with difficulty) except Shambukavarta (Tridoshaja) and Unmargi (Agantuja), which are Asadhya (incurable).

Management of Bhagandara

There are different lines of treatment in different stages (Awastha) of Bhagandara. It depends on two parameters viz.-

- 1. Bhagandara Pidika Chikitsa (i.e. in Apakvawastha)
- 2. Bhagandara Chikitsa (i.e. in Pakvawastha)

Bhagandara Pidika Chikitsa^[18]

The eleven measures which is described in Dvivraniya Adhyaya, are used for management of Apakva Bhagandara Pidika. The eleven measures are Aptarpana, Alepa, Parisheka, Abhyanga, Swedana, Vimlapana, Upnaha, Pachana, Vishravana, Snehana, Vamana and Virechana.

Bhagandara Chikitsa

- A. Samanya Chikitsa
- B. Vishesha Chikitsa

Samanya Chikitsa^[19]

Acharya Sushruta has described a general treatment for all types of Bhagandara. We can define total procedure in such way:-

- The affected part of the patient should be oleated by Sneha Dravya and then Avagaha Swedana should be done
- Then patient should be taken in proper position as described in Arshachikitsa Adhyaya and examine the Bhagandara whether it is Arvacheena or Paracheena Bhagandara.
- In case of Paracheena, Eshani Yantra should be introduced in track through external opening, the tissue is raised and then whole track should be excised from the base.
- In case of Arvacheena, the Eshani Yantra should be introduced into the Guda to locate the internal opening and then the patient should be asked to strain (Pravahana). While straining, Eshani Yantra

- should be introduced into the internal opening under direct vision. After establishing the diagnosis, fistulous track should be excised followed by Kshara Karma or Agnikarma.
- Various medications are used for the purpose of Vedana Shamana, Shodhana and Ropana as described by Acharya Sushruta.

Vishesha Chikitsa

Acharya Sushruta has described specific treatment for all types of Bhagandara.

1. Shataponaka^[20]

The peculiar feature of this type of Bhagandara is multiple opening on the external surface of skin. In a case of Shatponaka Bhagandara, the surgeons connect one Nadi (Fistulous tract) with another by incising the tissue in between. After the healing; the remaining Nadi should be treated. The external fistulae interconnected with one another should be excised separately. The surgeon who excises unconnected tracks in a single incision makes the wide wound, tearing anus, through which feces and urine comes out. The vitiated Vata causes severe distension and pain in the anal region. In that case confusion developed-even in the mind of an experienced surgeon, hence extensive wound should not produce in Shatponaka Bhagandara.

Acharya Sushruta described the four types of incisions for the surgical procedure in Shatponaka Bhagandara, which can be applied according to the situation of the tract, relation with anal sphincter etc.

Type of incision	Shape	Resemblance
Langalaka	Incision having two arms Extending on either side	T-Shaped
Ardhalangalaka	Incision having one arm	L-Shaped
Sarvatobhadraka	Surrounding the anal canal	Circular
Gotirthaka	Incision resembling the shape of cow- Khura	Semicircular

2. Ushtra Greeva^[21]

After probing the Ushtragreeva Bhagandara tract, it should be excised and then Kshara applied to it. No specific types of incision are described for it. Agni Karma is not indicated for removing the putrid tissue in this condition.

3. Parishravi^[22]

In Parishravi Bhagandara first of all the scraping of discharging tract should be done later on the tract should be cauterized with Agni or Kshara. The anal region should be irrigated with lukewarm Anu Taila. Poultices and hot pastes mixed with cow's urine and Kshara should be applied.

Acharya Sushruta described the five types of incisions for the surgical procedure in Shatponaka Bhagandara:

Type of incision	Shape	
Kharjura Patraka	Shape of palm leaf	
Chandrardha	Semi lunar	
Chandra Chakra	Circular like full moon	
Suchimukhi	Pin pointed	
Avangamukhi	Same incision in opposite direction	

4. Unmargi^[23]

In Agantuja type of Bhagandara, First the tract should be scraped carefully after that the wound is cauterized by Jamboushtha (red hot instrument) Shalaka. The procedure for destroying the organism and for removal of foreign bodies should also be carried out.

5. Shmbukavarta^[24]

It is described as Asadhya because it is due to the vitiation of all the three Doshas. There is no description of surgical procedures in Ayurvedic text for the management of Tridosha Bhagandara.

CONCLUSION

In the present work there is detailed study on Bhagandara has been done. Acharya Sushruta described almost all the basic principle related to Bhagandara, he showed very close and practical approach towards the patient of Bhagandara. There is need of time to do more retrograde study on different procedure of Bhagandara in clinical area of Ayurveda.

Based on the detailed review of Sushruta Samhita, it can be concluded as:

- Acharya Sushruta has described the disease of Bhagandara in great detail.
- Bhagandara is a disease of Guda-Pradesha which is difficult to treat. So it can be considered as Mahagada.
- All types of Bhagandara are Krichchhsadhya (curable with difficulty) except Shambukavarta (Tridoshaja) and Unmargi (Agantuja), which are Asadhya (incurable).
- Ayurveda offers a multi-dimensional treatment modalities in the treatment of Bhagandara.
- Acharya Sushruta has described preventive and curative (Para-surgical and Surgical) measures of the disease in detail.

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