



Opinion note

Bhagandar (fistula-in-ano) in Sushruta Samhita and Vagbhat

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ABSTRACT

Fistula-in-ano is an abnormal tract with an external opening in the perianal area that is communicating with the rectum in the high anal fistula or anal canal in the low anal fistula by an internal opening. Sushruta, the great ancient surgeon, described a disease Bhagandar in *Nidan sthan*. There are different types of Bhagandar mentioned in *Sushruta nidan sthan* which still come to notice during practice. Some rare Bhagandar types like *Bahirmukh* and *Antarmukh* also came to the notice of surgeons. The treatment for Bhagandar is a big challenge due to its site. Acharya Sushruta also mentioned different types of incision for surgery of Bhagandar which are still practiced in modern science.

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INTRODUCTION

Acharaya Sushruta mentioned the Bhagandar in *Sushruta nidan sthan*. He mentioned the following five types of Bhagandar.

1. *Vataj Bhagandar*
2. *Pittaj Bhagandar*
3. *Kaphaj Bhagandar*
4. *Tridoshj Bhagandar*
5. *Aagantuj Bhagandar*

Acharya Sushruta also mentioned Bhagandar as a *nadi vrana*. In this disease, there is pain in *Bhag*, *Guda* and *Basti Pradesh* and also shows referred pain in the iliac region, itching over the perianal region, oedema and burning sensation (Shastri, 2014). These symptoms occur more during driving and after defecation. According to modern science, a fistula is a tract lined by unhealthy granulation connecting to a hollow viscous or anal canal to the skin.

BHAGANDAR IN SUSHRUT SAMHITA

Acharya Sushruta described different types of Bhagandar (fistula) in the following ways.

Vataj Bhagandar (Shatponak)

In *Vataj* type, there are multiple external openings which communicate with each other to open internally into

the anal canal as single or multiple openings but mostly as a single opening which can be found in tuberculosis and malignancy of the colon. There is white colour external opening with pain.

Pittaj Bhagandar (Ustragriv)

If there is pus formation in the tract due to *pitta dosha*, leads to raised *pitika* with symptoms like a burning sensation by fire or *kshar*.

Kaphaj Bhagandar (Parisravi)

In this type, a white-coloured *pidika* formation occurs with symptoms like itching, and the consistency of *vrana* formed after rupturing of this kind of *pidaka* is hard.

Tridoshaj Bhagandar (Shambukavart)

Due to *trividh doshdusti* formation of Bhagandar like conch with symptoms like burning, itching and pain.

Aagantuj Bhagandar (Unmargi)

This type of Bhagandar is usually caused due to worms' infestation.

BHAGANDAR IN VAGBHAT

Acharya Vagbhat also mentioned some other types of Bhagandar due to two dosha.

1. *Vat-pittaj Parikshepi*
2. *Vat-kaphaj Ruju*
3. *Kaph-pittaj Arsho*

Depending on the opening of the fistula, *Avachin* and *Parachin* are also called *Antarmukh* (blind internal) and *Bahirmukh* (blind external) respectively. Depending on the shape of the external opening, these are called *Suchimukh* and *Avangmukh* whereas depending on the direction of the fistula tract in the anal canal, these are *Kharjurpatrak*, *Chandrardh* and *Chandrachakra* (Garde, 2002).

TREATMENT OF BHAGANDAR IN MODERN SCIENCE AND AYURVEDA

Acharya Sushruta mentioned *Astavidh karma* in Sushruta Samhita is the basic of Shalyatantra and still, all kinds of surgeries performed are nothing but came from *Astavidh shastra karma*. For Bhagandar, two karma are performed i.e., *Ashen* and *Chedan*.

In modern science, Bhagandar is classified into two main types, i.e., low-level and high-level fistula. For low-level fistula, fistulotomy or fistulectomy is performed while for high-level fistula-in-ano, two-step surgery is performed. Fistulotomy is performed for part of the fistula tract below the anorectal ring (below the internal sphincter) and put seton for the higher part of the fistula tract where second surgery is performed after the formation of fibrosis.

In Ayurved, medicated *Ksharasutra* is used for both kinds of fistula, where cutting and healing action occur simultaneously without fear of incontinence and less chance of recurrence. If the opening of Bhagandar is on one side then *Ardhalanglak* incision is taken while if the

opening is on either side then *Sarvatobhadrak* incision is taken. Moreover, if the tract of the fistula is in a snake-like pattern then a *Gotirthak* type incision is taken. In modern science also incision is taken as per the direction of tract like curved or cruciate.

If there is no external opening, an incision is taken on the external skin with the help of a knife and the internal opening of the fistula can find out with the help of a fistula probe (*Eshani*).

CONFLICTS OF INTEREST

The author(s) declare(s) no conflicts of interest.

DECLARATION

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