

Review article : Introduction of Kshar sutra in treatment of Ano rectal diseases

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ABSTRACT

Ano rectal disease such as fistula-in-ano (bhagandara), fissure-in ano (parikartika), hemorrohoid (arsha) & pilonidal sinus are frequently encounterd in surgical practices & associated with chronicity, recurrence & impaired quality of life.

Ksharsutra is an established para surgical procedure describe in classical ayurvedic text, has emerged as an effective & minimally invasive modality for management of various ano rectal disorders, particularly in fistula in ano.

The review article aim to evaluate therapeutic efficacy, mechanism of action, clinical evidence.

KEYWORD: ksharsutra , bhagandara, parivartika, arsha

INTRODUCTION

Ano-rectal disease constitute significant proportion of cases encountered in general & colorectal surgical practices. these condition are often chronic associated with pain, discharge, recurrence & impairment of quality of life .

In our ayurveda, anorectal diseses describe various disease that correlate with modern concept. It is considered to be difficult to cure among various therapeutic modalities described, Ksha sutra therapy occupied unique position as an effective Para surgical intervention.

Ksharsutra :

शस्त्रानुशस्त्रेभ्यः क्षारः प्रधानतमः, छेद्यभेद्यलेख्यकरणात् त्रिदोषघ्नत्वाद्विशेषक्रियावचाराच्च ॥

It is a medicated surgical thread prepared by repeated impregnation with alkaline herbal drugs. Such as apamarg kshar, snuhi ksheera & haridra.

The therapy is designed to achieved controlled chemical cauterization, simultaneous cutting, drainage & healing of pathological tract.

Over the past few decade, ksharsutra therapy minimally as gained increasing recognition beyond traditional practice due to its minimally invasive nature, sphincter saving effect & low recurrence rate.

Several clinical studies & institutional trial have documented its safety, efficacy & cost effectiveness when compared with conventional surgical procedure.

On view of growing emphasis on evidence-based & intregative approaches a comprehensive review of ksharsutra therapy in ano rectal disease is both relevant & necessary.

The present review aim to compile & critically analyse the available classical reference & contemporary .

Scientific literature on role of ksharsutra in the management of ano rectal disease, highlighting its therapeutic mechanism, clinical outcome & scope for integration into modern surgical practices.

MATERIAL & METHOD-

Ksharsutra preparation as per Sushrut Samhita A/C to specific period (oct-nov) following specific protocol. 1st make prey in front of them & after 2nd day excised & cut in small pieces; boil until its completely convert into ash.

Took ash & water in 1:4 ratio & then add gomutra or water then, strain with cotton cloth (21 times).

After attaining a specific form with its complete 8 properties used as pratisarniya or paniya kshar.

Ideal thread for preparation of kshar sutra posses a significant strength to hold 21 coating of apamarg, haridra, etc.

सुद्या दुग्धे वस्त्रपूत हरिद्राचूर्ण संयुते ।

निषिक्तेन लु लूलेन स्वत्येत खलु यत्नतः ॥ प्रलिप्त युद्धं मूत्र छायायाम अय शोषयेता विलीप्य सप्तधाही एवं शोषयेत

सुत्रं एतत् समाख्यात क्षारसुत्र तु नामतः ॥

(२. तं २४ तरंग)

" भावितं रजनी पूर्णः सुही क्षीरे पुनः पुनः । 17 बंधनात सुहृदं सूत्रं भिन्नागो अर्शी मदरम् ॥ (च.व ५/४८)

MATERIAL - Surgical linen thread no.20

Kshar (medicated)

Hanger, cabin,
guggul the binding agent.

Haridra churna

TECHNIQUE –

Surgical linen thread no.20 will be woven across the hanger's length & width.

Over the stand, hanger will be installed.

11 coat of guggul (from GMP approved pharmacy) & kshar (made in accordance with API requirement) will be provided on the thread.

Thread Will received 7 coating of apamarga or any other medicated kshar .

3 coating of haridra alone then smearing done.

The hanger will be put in ksharsutra cabinate to dry after smearing.

Each 10 inch thread will be cut & sealed in sterile container once all coating have been applied.

DISCUSSION –

The therapeutic efficacy of ksharsutra is attributed to the combined action of its components- Apamarg kshar, snuhi ksheera, haridra.

Apamarg kshar exert chemical cauterization leading to gradual excision of unhealthy tissue, while snuhi latex facilitated sustained drug contact & haridra provide antimicrobial & anti inflammatory effects. This combination results in controlled cutting, drainage, debridement, and simultaneous healing of the tract, minimizing the risk of abscess formation & recurrence.

However, limitation such as post-procedural pain, burning sensation, prolonged treatment duration and need for repeated thread changes have been reported. The issues highlight the need for standardization in ksharsutra preparation, procedural technique & post operative care.

CONCLUSION –

Ksharsutra therapy stand as an effective, safe & time tested ayurvedic para surgical modality for the management of chronic ano rectal disorders, particularly fistula in ano.

Further multicentric, randomized controlled trials with standardized protocols are essential to strengthen the scientific validation of ksharsutra therapy & facilitate its wider acceptance in integrative surgical practice. Incorporating evidence based research with traditional ayurvedic wisdom can established ksharsutra as a globally recognized therapeutic option in ano rectal surgery.

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