ROLE OF KSHARA KARMA IN THE MANAGEMENT OF RECTAL PROLAPSE - GUDABHRAMSHA - A CASE STUDY

Dr. NAYAK LEENA¹, Dr. RAVISHANKAR PERVAJE², Dr. CHAKRABORTY SAYANATAN³, Dr. HALLI VANITA⁴.

¹,³&⁴P.G. scholar, dept. of Shalya Tantra, N. K .J. Ayurvedic Medical College and P.G. centre, Bidar, Karnataka.²Consultant Surgeon, Sushruta Ayurveda Hospital Puttur D.K. Karnataka.

ABSTRACT:

PURPOSE:
The prevalence of external rectal prolapse is relatively low, estimated to occur in less than 0.5% of the general population overall. It occurs more frequently in the elderly population and in females, an estimated 3% of women in the United States have some form of pelvic organ prolapse, including rectal prolapse or uterine or vaginal prolapse, rectocele, cystocele, urethrocele, and enterocele. Overall, rectal prolapse affects relatively few people (2.5 cases/1,00,000 people). This condition affects mostly adults and women over 50 yrs of age are six times as likely as men to develop rectal prolapsed. Most women with rectal prolapse are in their 60’s, while the few men who develop prolapse are much younger, average 40 yrs of age or less.

METHOD:
45 years old male patient who came at OPD with complaints of something coming out of anal verge during defaecation or squatting since from 1 year associated with pain at the anal region. And it was diagnosed as rectal prolapse. So kshara karma was done here, this trial showed effective result in managing the rectal prolapse.

RESULTS:
As per the available treatment modalities of Gudabhramsha, the kshara karma is the best one, taking into the considerations it’s convenience, easy adoptability, cost effectiveness and curative results. Under these parasurgical procedures, kshara application is used in treating the rectal prolapse. Kshara, one among the best qualitative kshara, which was applied locally directly on the prolapsed rectum. Kshara was prepared as per the standard methods mentioned in the Ayurvedic classics.

CONCLUSION:
It can be concluded that the rectal prolapse regresses with application of kshara. So can be stated that application of kshara is an effective method for the treatment of rectal prolapse. The important notable point is that there is no side effects seen after the treatment.

KEY WORDS: Gudabhramsha, Kshara Karma, Rectal prolapse.
INTRODUCTION:
Rectal prolapse is a condition in which the rectum is prolapsed or protruded to the anal canal, it is classified according to the degree as complete rectal prolapse (when the all layers of the rectal wall prolapsed), partial or mucosal prolapse (only mucosal layer comes out through the anus)¹. Incomplete prolapse defined as a condition in which the protruding rectal wall is limited inside the anal canal, which is also called occult rectal prolapse or internal rectal intussusception². Rectal prolapse may be asymptomatic or may be presenting with mucus discharge, rectal bleeding, faecal incontinence etc. Rectal prolapse affects relatively few people (2.5 cases / 1,00,000 people). This condition affects mostly adults and women over 50yrs of age are six times as likely as men (1:6 - male: female) to develop rectal prolapse³.

Acharya Sushruta mentioned Gudabhramsha in the context of Kshudra Roga, and as a Sadyopranahara marma and mamsa marma. Gudabhramsha means Gudanissarana which means protrusion of rectum⁴. In CharakaSamhita and Ashtanga Hridaya it is described as the complication of Atisara (diarrhoea) and as the symptom of excessive purgation. Due to long term diarrhoea and frequent straining rectum becomes weak and rectal prolapse occurs⁵. Ayurvedic management can regain the functional integrity of rectum and anal canal and thereby prevent further recurrence of the disease.

PURPOSE:
- To correlate rectal prolapse with gudabhramsha.
- To see the effect of kshara in the management of rectal prolapse.

Can correlate the rectal prolapse with Gudabhramsha. Acharya Sushruta has explained kshara karma in rectal prolapse, in the context of ‘Bhrashtaguda’ in Arsha chikitsa⁶. Kshara karma can be done to shrink the anal canal. The effect of kshara kksarma in Gudabhramsha opines that the burns produced by the kshara gradually leads to the fibrosis and adheres the mucosal layer to the submucosa. Parasurgical measures especially kshara karma application is very feasible and can be performed.
without any complication and the recurrence rate is very less.

**METHODS:**

45 years old male patient who came at Shalya Tantra OPD of Sri Siddharodha Charitable Hospital attached to N.K.Jabshetty Ayurvedic Medical College And P.G.centre with the complaints of something coming out of the anal verge during defecation or squatting since from 1 year associated with pain at the anal region. The patient was diagnosed as a case of complete rectal prolapse. The complaints and concern of the patient included: Feeling of heaviness, mass per rectum, retention of urine and faecal matter when prolapsed mass is not reduced, constipation, varied appetite, disturbed sleep.

Initially, mass per rectum was felt whenever he went out to defecate and would automatically get reduced on lying down or on taking rest. Later, with the progression of time, the mass used to remain outside after defecation and there was no change even on lying down. It had to reduce digitally. Further, the symptoms worsened so much, that the mass (prolapse) could be noticed even when he went out to urinate. This has aggravated his annoyances and has affected his sleep desperately.

**Findings of clinical examination:**
Complete prolapse of the rectum with mucus discharge.

Rectum – reduced digitally
Rectum – effortlessly pops out with the exertion of slightest pressure on abdomen (e.g., while coughing, micturating, in standing position)
Rectal wall appeared to be healthy, without any evidences of ulceration.

**Diagnostic focus and assessment:**
The case was diagnosed as that of complete rectal prolapse i.e., procedentia and was thus corroborated clinically.

Even though *Sushruta* has not explained *Kshara karma* in rectal prolapse, here trail has been given to
see the effect of kshar karma. The patient was anaesthetized with spinal anaesthesia, lubricated slit proctoscope was introduced on the lower most 1” area of anal canal, pratisaraneeya teekshna kshara was applied and waited for about shatamatra kaala, it was turned to pakwa jambu phala. After this lemon juice wash has been given to neutralize kshara, after getting proper kshara dagdha vrana (Jambuphala Varna). Later, rectal pack with shatadhautya ghrita was applied.

RESULTS:
The effect of kshara karma in Gudabhramsha opines that the kshara dagdha vrana heels anal canal becomes fibrosed and adheres the mucosal layer to the submucosa. Parasurgical measures especially kshara karma application is very feasible and can be performed without any complication and the recurrence rate is very less. Kshara karma can be done to shrink the anal canal. Here there is no scope for recurrence. Minimum hospitalization – one day care. No bleeding. Post operative pain will be mild in intensity. No surgical complications like incontinence, stenosis and stricture.

CONCLUSION:
It can be concluded that the rectal prolapse regresses with application of kshara. So can be stated that application of pratisaraniya kshara is an effective method in treating the rectal prolapse. The important notable point is that there is no side effects seen after the treatment.

REFERENCES:
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Corresponding author:
Dr. NAYAK LEENA
P.G. scholar, dept. of Shalya Tantra, N. K. J. Ayurvedic Medical College and P.G. centre, Bidar, Karnataka
Email: leenanayak43@gmail.com

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