

AN AYURVEDIC APPROACH TO MUCOSAL RECTAL PROLAPSE

I.E. GUD BHRANSHA - A CASE STUDY

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ABSTRACT

Ayurveda always instructs about how to live a healthy life by the adaption of selective Lifestyle, food, conduct & avoidance of aetiological factors. Ayurveda gives the first priority to health conservation of healthy person rather than the management of the diseases. Main principle of ayurveda is prevention of etiological factor” i.e: Nidan parivarjanam (1st line of treatment). Thus ayurveda shows unique approach towards healthy life via lifestyle and diet. Ano-Rectal diseases are Lifestyle disorders. One of them is more common in elderly patient i.e. is rectal prolapse. Rectal prolapse is a protrusion of mucous membrane of the Rectum from outside the anal verge with membrane or without membrane. It Can be a partial or complete. This condition is common in children and elderly patients. There are two

types of treatment of rectal prolapse are conservative and surgical. The type of treatment of rectal prolapse depends on severity of disease. A clinical study was conducted on patient of partial mucosal rectal prolapse/*gudbhransh* with a elderly patient disease to evaluate contraction effect of *kasish* (green vitriol) tail which traditionally practical in rural areas of Rajasthan India on the basis of survey. The aim and objective of this study was to evaluate the contraction effect of *kasish* tail over prolapsed rectal mucosa. Which was successfully treated by conservative *ayurvedic* management i.e. *Kasish* tail by anal route for correct prolapse locally. The case result confirms that Rectal prolapse can be managed effectively by *Ayurvedic* approach.

KEYWORDS: *Ayurveda, Kasish Tail, rectal prolapse, gudbransh.*

(1) Introduction and importance of the Mucosal rectal prolapse i.e. *Gud Bhransha*

- In Indian society children are low birth weight, weak, malnourished and are complained with intestinal worms, persons who have constant constipation or diarrhoea. Females with Torn perineum, weakness, Anemia and elderly people with low immunity & age factor relaxes the pelvic muscles & anal sphincters thus increasing the chances of prolapse. Due to all above parameters surgery is contraindicated in prolapse.
- *Gud Bhransha*/Rectal prolapse is most common in children, elderly patients, females with Torn perineum. It is afflicting mankind from ancient period & equally spreaded all over the world.
- In surgical done success rate of surgical procedures in Rectal prolapse very low as reoccurrence or relapse rates are high and it does not correct the defect.

***Gud Bhransha*/Ractal Prolapse is protrusion of the mucous membrane or the entire rectum outside the anal verge.^[1]**

परिभाषा :- गुदभ्रंश – क्षुद्ररोगाणां निदानं

प्रवाहणातिसाराभ्यां निर्गच्छति गुदं बहिः। रुक्षदुर्वलदेहस्य तं गुदभ्रंशमादिशेत्।^[2]

(2) AIMS AND OBJECTIVES

To evaluate the efficacy of *kasishadi oil* in the management of mucosal rectal prolapse.

(3) MATERIAL AND METHODOLOGY

• Design of the study

A clinical study was design on conceptual literature review, as *Kasishadi oil* is used in Bleeding & prolapsed mass of haemorrhoids, is as beneficial as in mucosal partial Rectal prolapse. *Kasishadi oil* is available very easily & broadly in every place.

• Material used

In the present study following drugs were utilized.

***Kasishadi oil*:** It was prepared with Mineral drugs *kasisha, Manashila, Hartaal* along with *saindhava lavana* and *Gomutra* and herbal drugs-*langali, Kushta, shunti, pippali, Ashwamara, Vidanga, Chitraka, Druma, Danthi, Koshathaki Beeja, Hemahva, Snuhi*, Processed in *Tila Taila* as per the standard *Taila* preparation methods.^[3]

.....कासीसद्रव उत्तमः। “गुदभ्रंश विसर्पादि विविधामयनाशनः” ।।⁴

Method of preparation

Kasishadi taila Basti was prepared.

Kasishadi Basti (≈10ml)

It was made lukewarm by keeping it into hot water.

- **Time of Administration**

Kasishadi Basti administered in the morning hours empty stomach followed by T Bandage (*Gofhana Bandh*).

- **Duration**

Daily for near by one month.

गुदभ्रंश चिकित्सा

गुदभ्रंशे गुदं स्विन्नं स्नेहाभ्यक्तं प्रवेशयेत्। कारयेत् गोफणाबन्धं मध्यच्छिद्रेण चर्मणा ।।⁵

- **Case history**

- **Source**

Male patient, age 78 yr , REGISTRATION NO. 54250/1954 fulfilling the sign & symptoms of diagnostic criteria of Gud Bhransha (Mucosal Partial Rectal prolapse) having was selected from OPD & IPD section university college of Ayurved, Jodhpur.

- **Chief Complains**

Bleeding per rectum drop by drop for few minutes since 1 weeks

Something coming out from anus since 4 weeks

Sticky discharge from anus since 8 weeks

Pain, Itching & Burning sensation after defecation since 6 month.

Constipation since 1 year

- **On Examination**

Patient was found partial mucosal rectal prolapse with moderate size of prolapsed mass.

- **Investigations**

Routine hematological test like CBC (Hb%, Total count (TC) Differential count (DC), Platelets), Erythrocyte sedimentation rate (ESR), Random blood sugar(RBS), coagulation

Time (CT) Bleeding Time (BT), HIV, HBSAg were carried out to assess the condition of the disease. All were come in normal limits.

- **Diet & restriction**

Patient was advised to avoid over eating, repeated food, heavy food intake, spicy and oily food, hence proper light food was given. Patient was asked to avoid constant straining during defecation and suppression of urges i.e. stool.

- **Assessment Criteria**

The following parameters were assessed before and after the treatment.

- **Subjective Parameters**

pain, Itching & Burning Sensation, Mucous discharge, constipation, Bleeding.

- **Objective Parameters**

Degree of partial rectal prolapse, Size of prolapsed mass.

- **OBSERVATION AND RESULT**

		Before Treatment	After treatment
1	Symptoms	moderate Pain	Mild Pain
2		moderate Itching & Burning sensation	Mild Itching & Burning sensation.
3		Mod. Mucous discharge	No mucous discharge
4		Mild bleeding in few drops	No Bleeding
5		moderate Constipation	Mild constipation
1	Signs	Moderate prolapsed	No proplapse
2		Mod. Size of prolapsed mass	Reduced prolapsed mass

DISCUSSION (PROBABLE MODE OF ACTION)

Gud Bransha is 'Vata vikara' with *Mamsa Dhatu* Dusihiti and for this *Basti* oil is best treatment.

- **Kasishadi Taila** possess *ushna, teekshna* quality which acts as *vata anuloman & vata kafa hara* thus manifesting in the decrease of constipation by reducing straining during defecation as well as the local inflammation by reducing itching & pain.
- *Kasisha* having *varanaropana* action, *manashila & saindhava* was also beneficial in reducing burning sensation & bleeding similarly *Kasisha kashaya* Rasa induces *sandhana*

karma will have effective healing & *rakta sandana* property thus reducing the bleeding and mucous discharge.

- *Kasishadi* taila having *kasish*, *manashila* and *gomutra* with *kafavata hara* property & majority of durgs having *ushna teekshna veerya*, *rakta vikara shamana*, *vranaropana* qualities acts against the KV *dosha* & are absorbed through rectal mucosa & thus observed to be beneficial in reducing mucosal discharge, prolapse as well as size of prolapsed mass.

CONCLUSION

Gud Bransha a commonest ano-rectal disorder commonly seen in children & elderly people. The clinical signs & symptoms of the *Gud Bransha* can be compared to partial mucosal Rectal prolapse of modern science. In all case of subjective & objective parameters of *Gud Bransha Kasishadi Basti* was found more beneficial rather than other methods. Although more wide & elaborate multi centric study with large sample size is required for authentication.

REFERENCES

1. Manipal manual of surgery, CBS publishers & Distributors, New Delhi 2004, chapter 29- Rectum & Anal Canal, P. 454.
2. Sushruta samhita, Dr. A.D. Shastri, Chowkhamba sanskrit sansthan varanasi, ed. 13, 2002, SU. Ni. 13/63, P-289.
3. Gada Nighrah, Arshorogadhikar
4. Ras Tarangini 21/241.
5. Sushruta samhita, Dr. A.D. Shastri, Chowkhamba sanskrit sansthan varanasi, ed. 13, 2002, Su. Chi. 20/61-63.
6. Ras Ratan Samuchaya 3/63.
7. Ch. Sut. 27/249.