



## Ayurvedic Management of Rectal Prolapse in Children-A Case Report

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### Abstract

Rectal prolapse is the exteriorization of the rectal mucosa from the anus. In *Ayurveda*, it is described as a complication of chronic diarrhea. In chronic condition of *Atisara*, the rectum comes out through the anus due to straining. Partial rectal prolapsed is common in infants and children. The management given in modern medicine is digital repositioning, submucosal injections and surgery. Management indicated in *Ayurveda Samhita* is related with *Deepana Pachana Aushadhi*. In these two cases of the rectal prolapse, *Balachaturbhadra Churna* given to the patient and both got complete relief from prolapsed and diarrhea.

### Keywords

*Partial rectal prolapsed, Atisara, Deepana, Pachana Chikitsa.*



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## INTRODUCTION

Rectal prolapse is circumferential descent of rectum through anal canal. It is common in infant and children. Partial rectal prolapse is defined as mucosa and submucosa of the rectum descends, not more than 3.75 cm. There is no descend of muscular layer and it is commonest type of rectal prolapse. It is due to decreased sacral curvature and decreased anal canal tone. Diarrhea, cough, malnutrition are additional factors in children<sup>1</sup>. The management advised in modern medicine is digital repositioning, sub mucosal injection and surgery<sup>2</sup>.

According to *Ayurveda*, rectal prolapse is described in *Kshudraroga Nidana Adhyaya* due to complication of *Atisara*<sup>3</sup>. Also described one of the symptoms of *Vatika Atisara* by *Acharya Sushruta*<sup>4</sup>. Due to straining in diarrhea the rectum comes out from the anus in dehydrated and emaciated person. In management of *Atisara*<sup>5</sup>, *Pachana Dravyas* are indicated in *Samhita*. *Sanjivani Vati* is indicated in *Ajeerna* and *Visuchika*<sup>6</sup>. *Balachaturbhadra Churna* is indicated in *Jwara*, *Atisara*, *Shwasa*, *Kasa* and *Chardi* in children<sup>7</sup>.

### Case Study-1

A four year old male child came in OPD of the Kaumarbhritya Department, P. D. Patel

Ayurveda Hospital, Nadiad on date 17/09/15 with the complaint of something coming out from the anus during defecation since 6 – 7 months. Associated complaints were chronic diarrhea, occasional bleeding per anus, stools passed after taken meal and impaired appetite since 6 -7 months.

On examination, it was found that a pinkish mass came out from the anus during straining. It was non-tender and went back after manual interference. The patient was 11.18 kgs in weight (expected weight 14 kg) and had pallor on face. On systemic examination the abdomen was soft but slightly distended. The case was diagnosed as Partial Rectal Prolapse.

### Treatment details

The child was admitted in IPD of Kaumarbhritya Department, P.D.Patel Ayurveda Hospital on date 17/09/15. *Sanjivani Vati* 1 tablet/ 2 times was given for one day. The next day he had no complains of bleeding per anus but had complaint of pain during defecation. The next day 18/09/15, *Balachaturbhadra Churna* – 500 mg was started 3 times with honey before meal. The treatment was continued till the patient was discharged on date 21/09/15. He was advised light diet with *Mung* and Rice during IPD admission.



At the time of discharge, patient passed stools once in a day without any complaints of bleeding per anus, no pain during defecation, no prolapse during defecation. Weight was 11.460kg.

After 10 days of follow-up no previous complaints were found.

### Case Study-2

A ten year old male child came in OPD of the Kaumarbhritya Department, P.D.Patel Ayurveda Hospital, Nadiad on date 30/09/15 with complaints of chronic diarrhea. Also suffering from mild fever and common cold since 15 days. The child passed stools after taking meals and complained of something coming out from the anus during defecation since last four years.

On examination, same pinkish mass coming out from the anus during straining and go back manually. He was 18 kg in weight (expected weight 26 kg).

The condition was diagnosed as Partial Rectal Prolapse.

Treatment details are as below:

The child was admitted in IPD of Kaumarbhritya Department, P.D.Patel Ayurveda Hospital on date 30/09/15. The treatment was started with *Balachaturbhadra Churna* –500 mg, three times with *Madhu*. On date 03/10/15,

additional *Musta Churna* – 2 gm added with *Balachaturbhadra Churna* and *Udumber Kwath* 20 ml two times was started. On 07/10/15, *Changeri Ghrita* 2 ml was advised once in a morning. The treatment was continued till the patient discharged on date 10/10/15. During IPD admission patient had advised light diet with *Mung* and Rice.

At the time of discharge, Patient passed stool once in a day. No complaints of common cold and fever and no exteriorization of rectal mucosa during defecation.

### DISCUSSION

In Ayurveda, Rectal prolapse is described as complication of *Atisara*. Intake of heavy food articles, excessive *Sheeta Guna Dravyas* are responsible for *Agnimandhya* and increases body fluid mixes with faeces, covert into *Atisara*. In recurrent stage of *Atisara*, due to excessive straining rectum loses its tone and comes out through anus.

*Balachaturbhadra Churna* contains all *Deepana* and *Pachana Dravyas* that breaks *Samprapti* of *Atisara*. *Udumber Kwath* gives strength to the rectum and it goes back to the anus.



## CONCLUSION

It is concluded that management of *Atisara* completely relieves the condition of Partial rectal prolapse. *Balachaturbhadra Churna* contains *Deepana* and *Pachana Dravya* and is indicated in the management of *Atisara* in childhood period.



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