

Hemorrhoids, Fissures, Fistula, Perianal Abscess, and Constipation

Patient Handbook



**“ IT’S TIME TO GET PERMANENT RELIEF FROM
HEMORRHOIDS, FISSURE, FISTULA,
PERIANAL ABSCESS, AND CONSTIPATION. ”**

PILES SPECIALIST

Dr. Sandhya Bade

MBBS, DNB - General Surgery FAMS, FIAGES, EFIAGES



My mission is To provide superior Surgical care with the highest level of integrity and service. I believe that it is imperative to provide unparalleled & comprehensive care to my patients.. . The need for " Surgery can be stressful to patient & family members. But I believe that the stress can be lessened with effective & open communication. Through open communication, I can provide patients with as much information as possible regarding their condition and will guide them in making appropriate treatment decisions.

Dr. Sandhya Bade

MBBS, DNB- General Surgery

FMAS, FIAGES, EFIAGES,(Proctologist)

Piles Specialist

Dr. Sandhya Bade is a famous proctologist & laparoscopic surgeon. Dr. Sandhya Bade, known as a piles specialist with over 12 years of experience, has helped more than 10,000 patients to get relief from piles and fissures, and fistulas. Due to this skill, many patients come from different parts of the state to seek treatment from her.

She chose this department intending to provide state-of-the-art treatment for the most neglected segment of anorectal diseases like piles and fissures and fistulas. And today Dr. Sandhya Bade is one of the best piles specialists. She is one of the best proctologists in the Mumbai, Pune, and Ahmednagar area available for piles fissure and fistula patients. whose expertise is in cases related to the anus and related surgery.

As a solution to the problem that women often hesitate to show these diseases to male specialists and suffer pain, She has established **Visarjini**, a special women's department, which makes it very easy for a woman to get a diagnosis & perfect treatment from a female doctor who is a proctologist as well as a Surgeon. All the patients of Dr. Sandhya Bade are happy and satisfied with the treatment provided to them.

Dr. Sandhya Bade has received many awards, and Participated in national and international seminars on proctology.

Dr. Sandhya Bade is a promising name in the field of proctology & laparoscopy.





Hemorrhoids (Piles)

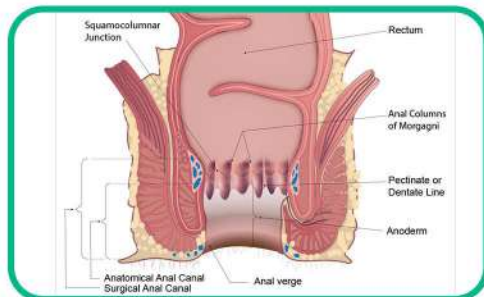


Normally every patient assumes that they have hemorrhoids if they feel any symptoms in the anal region.

There are many diseases near the anus but not every common person has an idea about it. Hemorrhoids, fistulas, constipation, anal fissures, and many other diseases occur near the anus. These days Hemorrhoids are a growing disease and need to be addressed promptly. Almost 10 Million population affected by Piles. If the hemorrhoids are in the first stage, then it can be completely cured with proper diet and medicines. However, if the hemorrhoids are bleeding (second to the fourth stage) surgery is the best option. In the past, hemorrhoids were removed by traditional methods, which resulted in pain, bleeding, and a week's rest after surgery. Now the surgery is done by laser or minimally invasive technique, so the patient recovers immediately after the operation and is less likely to have hemorrhoids again.

What are Hemorrhoids?

Enlargement of the blood vessels/ anal cushion in the anus is called Hemorrhoid or piles. Hemorrhoid problems are on the rise due to poor dietary habits and today's changing lifestyles. It's common anal pathology seen in ages 20 to 50 years old but many patients are embarrassed to seek medical attention. It's also common among pregnant women but temporary. With timely treatment, the disease can be completely cured. So instead of ignoring it, consult an expert about it. Hemorrhoids are a disease associated with the vessel that carries impure blood from the anus. These blood vessels become swollen for some reason and bleed during defecation. Hemorrhoids often take time to understand if the patient has had them. Therefore, the causes and symptoms of hemorrhoids are as follows, if they appear, they should be treated immediately.



Causes of Hemorrhoids

It is difficult to say exactly what causes hemorrhoids. But there are many reasons for this to happen. Hemorrhoids are a disease related to the digestive system.

Wrong Diet and Lifestyle

- Lack of exercise
- Irregular meal times
- Addiction to Panamsala, Gutkha,
- Taking some strong medications
- Eating Spicy, oily foods
- Irregular working hours
- Not going to the toilet on time
- Lack of sleep
- Eating junk food & bakery products
- Eating dry and stale food
- Excessive meat intake
- Lack of fibers in the diet.

a) Due to Pressure

- Constipation
- Diarrheas
- Sitting or standing for a Long period of time
- Obesity
- Heavy lifting
- Pregnancy



b) Other Causes

- Colonic malignancy
- Spinal cord injury
- Rectal Surgery
- IBD
- Portal hypertension
- High socioeconomic status

In some patients, hemorrhoids can be caused by liver disease or colon cancer.

Symptoms of Hemorrhoids

Some people may not even realize that they have hemorrhoids because they do not have symptoms. But when distress occurs, the following symptoms may be felt.

- a) Rectal bleeding**
- Painless
 - Bright red
 - Not mixed stool
 - On paper/ splashing in the toilet pan



b) Perianal swelling

c) Perianal itching & irritation

d) Extreme pain if it prolapsed & strangulated

e) Symptoms of external hemorrhoids

- very painful perianal swelling (Thrombosed piles)
- painless skin tag

Although hemorrhoids are not a serious illness, It do make the patient uncomfortable. Therefore, if there is bleeding through the stool, You should consult a specialist doctor and take a medical examination.

Hemorrhoids & Misunderstandings

- This disease is never cured.
- Everyone has piles
- After the surgery, you lose control of the defecating
- There is unbearable pain and bleeding after the surgery.



Types & Stages of Hemorrhoids

Just as there are blood vessels inside the rectum, there are also small blood vessels on the outside of the rectum.

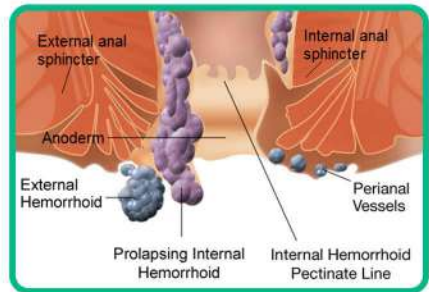
So depending upon the location in relation to the dentate line/ Pectinate Line. There are three types of hemorrhoids

- 1) Internal Hemorrhoids (Inside of the anal canal)
- 2) External Hemorrhoids (Outside of the anal canal)
- 3) Internal and external Hemorrhoids (Inside and outside mixed)

Also, some patients bleed while some patients do not bleed at all.

On this basis Two types of hemorrhoids as follows:

- 1) Non-bleeding Hemorrhoids
- 2) Bleeding Hemorrhoids



Complication of hemorrhoid

- Thrombosis / strangulation
- Ulceration
- Portal pyemia
- Severe hemorrhage
- Anemia

After confirmed hemorrhoids, different stages are seen in patients, as follows

1) First stage

This is the first stage, in which slight swelling occurs in the blood vessels / anal cushion. Sometimes painless bleeding & gets cured with medicine.



2) Second stage

- In this condition hemorrhoids come a little bit out during defecation and after the defecation goes back inside automatically.
- Bleeding occurs in this condition.
- In this case, if medical management fails then the patient may require a laser or other minimal invasive modality.



3) Third Stage:

- In this condition, hemorrhoids come out during defecation and after defecation, hemorrhoids have to be pushed in by hand.
- In this condition, bleeding increases, itching increases, and pain increases.
- This stage requires surgery through a Laser or other minimal invasive modality.



4) Fourth stage:

- In this stage, the hemorrhoids that come out after defecation stays outside, and cannot be pushed inside with the finger.
- In this condition, bleeding, itching, pain, and perianal swelling increase.
- This stage requires surgery.



Diagnosis of Hemorrhoids :

Hemorrhoids are diagnosed in different ways.

- 1) Patient history and clinical signs and symptoms.
- 2) Examination of the patient, In this, the expert doctor examines the rectum from the inside & outside (DRE - Digital Rectal Examination)
- 3) In proctoscopy, the Proctoscope is inserted inside the rectum for examination of the inside part of the rectum. It is done to find out the condition of the piles.
- 4) Colonoscopy - Doctors may advise some patients to have a colonoscopy to find out if they have cancer or other problems with the large intestine.

Treatment for Hemorrhoids

a) Prevention

How to Avoid Hemorrhoids - Lifestyle changes are essential to prevent hemorrhoids, fissures, and fistulas. The main goal of this treatment is to minimize straining at stool.

1) Diet

What to Eat	What to Avoid
<ul style="list-style-type: none">- Eat green leafy vegetables- Eat fruit- High Fiber Diet (Ex: Oats, Pulses)- Drink plenty of water (three to four liters)- Fiber Supplements	<ul style="list-style-type: none">- Avoid chillies and spicy foods- Avoid addiction (Panamsala, Gutkha, Arecanut)- Reduce meat intake- Avoid junk food & dairy products- Avoid excessive amounts of tea & coffee

2) Lifestyle

- Avoid long sitting & standing
- Eat on time
- Have adequate sleep (6-7 Hours)
- Exercise regularly
- Do not force the toilet.
- Stress reduction
- Getting dinner early
- Taking a walk after a meal.



3) Toilet Ergonomics

- Site your knee higher than your hip (can use a footstool)
- Lean forward
- Relax your stomach
- Straighten your spine
- Do not strain
- Go as soon as you feel the urge



What to do in case of Hemorrhoids ?

a) Medical Management - For Early Stage

- If Hard Stool - Stool softness as per doctor advice
- If pain - Painkiller, ointment, or suppository would be prescribed
- If Prolapsed piles - Gently insert it into the anal canal with lignocaine jelly and take a warm sitz bath
- Maintain anal region hygiene. keep it dry & clean

b) Day care procedure/ Non-Operative Procedure

1) Injection Sclerotherapy

This treatment is beneficial in the early stages of hemorrhoids. Such injections are given three times at intervals of six weeks.

Benefits

- It doesn't hurt
- No bleeding
- The patient goes home in half an hour
- Starts work immediately



2) Other Therapy

- 1) Radiofrequency Ablation
- 2) Rubber Band Ligation
- 3) Cryosurgery
- 4) Infrared Coagulation



Surgery for Hemorrhoids

After the advice of a doctor, if all of the above treatments do not provide relief then the doctor recommends surgery.

Generally, One in Ten patients with hemorrhoids needs surgery.

Indication of Surgery

- 1) 3rd & 4th stage hemorrhoids
- 2) 2nd stage hemorrhoids not cured by non-operative treatment
- 3) Interno external hemorrhoids
- 4) hemorrhoid bleeding sufficient to cause anemia

The following advanced surgeries for hemorrhoids are performed at our hospital.

1) Laser Surgery

In this surgery, the Second & Third stage stages of hemorrhoids are removed from the root

Benefits of Surgery -

- No Cuts
- The patient goes home after one day
- No Pain
- No Bleeding
- In 2-3 days the patient can go to work.

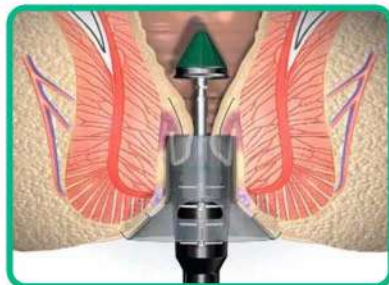


2) Stapler Surgery:

In this surgery, the Third & Fourth stages of hemorrhoids are removed from the root

Benefits of Surgery -

- It doesn't hurt-
- No cuts anywhere
- No bleeding after surgery
- Does not recur
- The patient goes home in one day
- The patient can go to work in 3-4 days



3) Other new modality for hemorrhoids

1) DHAL - Doppler-guided hemorrhoidal artery ligation

4) Old methods of Surgery

1) Open & Closed hemorrhoidectomy

nowadays these techniques are avoided due to severe pain, long recovery period, and other complications.

External Hemorrhoids Treatment

1) **Thrombosed external hemorrhoids**

- It's an emergency because it's a very painful condition
- It has to be excised or then 48 to 72 he
- It presents after 72 her or symptom onset then conservative treatment



2) **Skin Tag**

Advised excision only if hygiene problem exists.

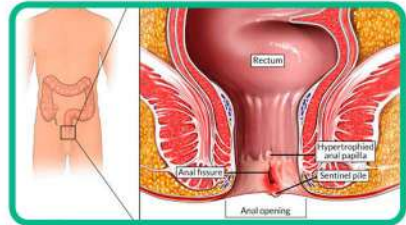




FISSURE



- It is a very common disease
- Fissure in Ano is a major problem in women
- It can happen at any age
- It is a painful liner cut at the anal verge
- Common in male



Causes of Fissure

Common Causes :

- Constipation
- Diarrhea
- Pregnancy
- During childbirth



Other Causes :

- TB
- Chronic Disease
- STD/ AIDS
- Ulcerative colitis
- Anal Cancer
- Anorectal Surgery

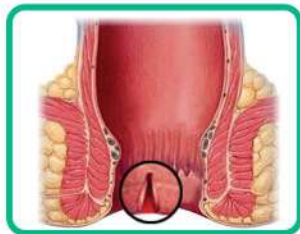
Symptoms of Fissure

- It causes severe pain to the patient during defecation and after defecation.
- The patient is terrified to go to the toilet. This leads to more constipation & aggravation of the pain
- Bleeding occurs during defecation- Bright red (streaks on the stool)
- Perianal Itching
- Discharge from anus
- Perianal swelling (In Chronic fissure)

Types of Fissure

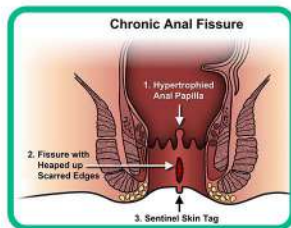
1) Acute Fissure

- This is the disease of fewer than two months
Called the Acute Fissure.



2) Chronic Fissure

- If the disease lasts for more than two months,
it is called a chronic fissure.
- The wound grows deeper and swells on the
outside. That is called a sentinel tag.



Diagnosis for Fissure

- 1) History of patient
- 2) Clinical examination

Treatment for Fissure

A) Prevention

Making changes in diet and Lifestyle.

(As per the Changes mentioned in Diet & Lifestyle in Hemorrhoids - Page No. 5)

B) Medical Management

Medicines and pills can cure this disease

- 1) 80% resolve on its own just want to relive constipation
- 2) Stool softener and laxative for constipation
- 3) Painkillers and ointments are given to reduce the pain.
- 4) Sitz bath is recommended for 15 to 20 minutes in lukewarm water.
- 5) Medical Sphincterotomy - Done by medicine & Injection Like (Botox)

Surgery for Fissure

Very rarely does a patient need surgery if it is not cured by medical treatment

- This is called a Fissurectomy / Sphincterotomy
- This surgery is performed by laser.

Benefits

- There is no bleeding
- No cuts
- No need to stay admitted
- There is no danger of losing control of the toilet.





Fistula

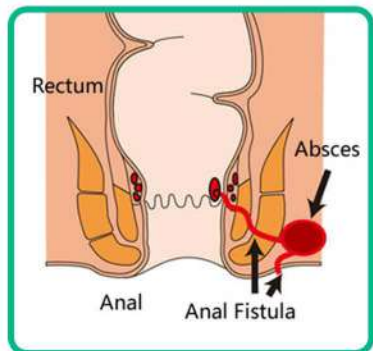


- A fistula is an abnormal pathway between the anus and the skin around it.
- According to the American Society of Colon and Rectal Surgeons, about 50 percent of people who have an anal abscess will eventually develop an anal fistula.
- This disease doesn't happen like today blisters came, ruptures, and it turns into fistulas, if it occurs frequently then fistulas develop later.
- Ignoring this disease, in the beginning, is always annoying to the patient.
- A fistula generally requires surgery.



Causes of Fistula

- 1) An abscess near the anus usually results in a fistula
- 2) Anal cancer
- 3) Other less common conditions can cause fistula
 - Ulcerative colitis & Crohn's disease
 - TB, diabetes
 - Previous injuries to the anus or adjacent area
 - Radiation
 - Diverticulitis
 - STD (Sexually transmitted diseases)



Symptoms of Fistula

- Wounds, pus or sticky water coming out of the wound near the anus
- This problem stops sometimes and reappears
- Pain & swelling around the anus
- Blisters near the anus
- Fever.
- Fatigue
- Perianal Itching
- Bleeding



Types of Fistula

There are four types of Fistula

1

Intersphincteric
Fistula
(Always found)

2

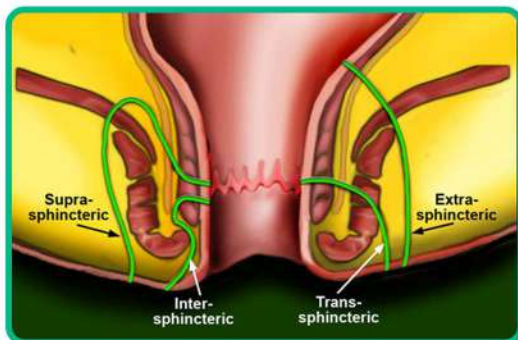
Transsphincteric
Fistula

3

Suprasphincteric
Fistula

4

Extrasphincteric
Fistula



Diagnosis of Fistula

- Symptoms of patients
- Examination of patients by specialists
- MRI
- Fistulogram
- Sometime Colonoscopy



Treatment for Fistula

Surgery is almost always necessary to cure an anal fistula.

Depending on the type of fistula, which surgery is suitable for the fistula is decided

1) Fistulectomy & Fistulotomy-

Fistulas are completely removed by laser or by open technique



2) Ksharsutra (Seton)

In this, nylon or silk thread is tied through the entire passage of the fistula, and its knot is tied on the outside. In 6 to 8 weeks the thread is completely gone. This is followed by alternative surgical repair



3) New Treatment

- Vaaft (Video-assisted anal fistula treatment)
- Lift (Ligation of inter sphincteric fistula tract)
- Filac (Fistula Laser Closure)
- Fistula Plug
- Fibrin glue injection
- ERAF (Endoanal advancement flap for complex fistula)
- Fistula clip closure

Post surgery care

Most fistulas respond well to surgical for easy recovery

A doctor may advise:

- Sitz bath (Soak in warm water)
- Painkillers (Oral / Suppository)
- Stool softener & Laxative
- Fiber-rich diet



Perianal Abscess



- Perianal abscess is the most common anorectal abscess
- It is the suppuration of anal glands
- It is an infected cavity filled with pus found near the anal/ rectum
- These abscess can cause significant discomfort for patient.
- It is more common in male



Causes of Perianal Abscess

- Constipation
- Diarrhea
- DM (Diabetes)
- STD or AIDS
- Inflammatory bowel disease
- TB
- Patient on chemotherapy or long-term use of steroids

Symptoms of Perianal Abscess

- Vary painful perianal swelling
- Patient can not sit
- Fever & Chill
- Rectal Discharge
- Fatigue



Diagnosis of Perianal Abscess

- Clinical History
- Physical examination by an expert
- If not seen physically- The doctor may advise you USG or MRI Perianal region
- In a few cases - Colonoscopy may be advised
- Routine blood & stool test

Types of Anorectal Abscess

1

Perianal
Abscess

2

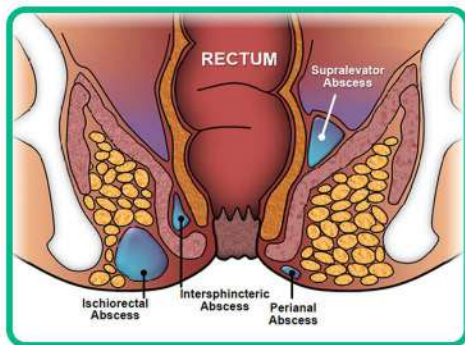
Ischiorectal
Abscess

3

Inter sphincteric
Abscess

4

Supra levator
Abscess.



Complication of Perianal Abscess

If left untreated it can result with

- Anal Fistula
- Sepsis
- Fournier Gangrene

Treatment of Perianal Abscess

- It's an emergency
- It requires drainage under anesthesia

Post Surgery

- Will require antibiotics
- Sitz Bath
- Dressings
- Laxatives / Stool Softener

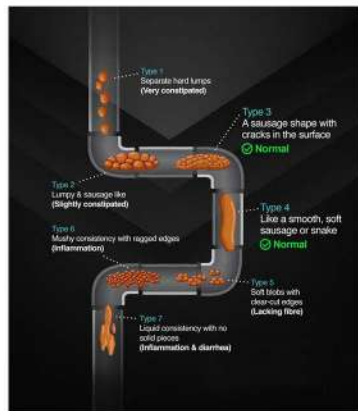
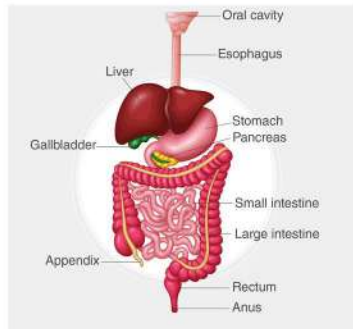
The recovery period for a drained abscess is about 3-4 weeks. According to the American society of colon & Rectal Surgeons, 50% of people who have an anal abscess will eventually develop an anal fistula.



Constipation



- Constipation is the mother of all perianal diseases like Piles, fissures, fistula, and perianal abscesses. It is one of the most common gastrointestinal disorders encountered in clinical practice.
- Constipation is a decrease in the efficiency of the process of natural elimination of accumulated stool in the large intestine.
- It is a chronic condition in which bowel movements occur less often than usual or consist of hard and dry stools that are painful or difficult to pass, or the person experiences a sense of incomplete emptying after a bowel movement.
- Normal bowel movements differentiate from person to person. For some people, passing stool twice a day is completely normal, while for others, 3 times a week is normal. Any change from the normal habit is the best way to understand if you are constipated or not
- 1/5th of the general population suffers from it.
- The disease is found in children and the elderly.
- patients with constipation should seek timely treatment.
- Constipation is not a disease/disorder but a symptom in which defecation is difficult.
- Chronic constipation hampers the quality of life



Symptoms of Constipation

- Indigestion - Bloating, Flatulence
- Defecate less often than usual
- Hard stool
- Pain during defecation
- straining during defecation
- Feeling of incomplete evacuation of bowel
- Use of digital maneuvers

Causes of Constipation

1) Wrong Diet & Lifestyle

- Eating too little fiber
- Not drinking enough liquid
- Lack of exercise / Physical activity
- Travel or other changes in routine
- Excessive consumption of dairy products
- Stress
- Avoiding the urge to toilet



2) Obstruction in the intestine.

- Fissure
- Bowel Stricture
- Rectocele
- Intestinal Cancer
- Obstruction of the intestine
- Anal Cancer

3) Problems with nerves around the rectum & large intestine

- Parkinson's Disease
- Injury to the spine
- Multiple Sclerosis
- Autonomic neuropathy
- Stroke (Paralysis)

4) Diseases of excretory muscles

- Pelvic muscle weakness

5) Other

- Diabetes
- Hypothyroidism
- Pregnancy
- Hyperparathyroidism

6) Drug Included

- Painkillers (Codein)
- Antidepressants
- Antacids & Diuretics
- Iron Supplements

High Risk Patient

- Irregular eating, sleeping & working time

- Excessive intake of oily and spicy food
- Excessive consumption of coffee/tea
- Excessive meat consumption
 - Lack of fiber in the diet
 - Lack of Exercise
 - Old People
- Excessive consumption of milk & bakery products
- Alcohol and tobacco addiction
- Blood pressure medication
- Continues Long Traveling
- Mental Illness
- Stressful Life
- Drink less water



Diagnosis of constipation

1) Physical Examination - Clinical History, Physical Examination

2) Tests (Following)

- MRI (Defecography)
- Colonoscopy
- Anal Manometry
- Gastroscopy
- X-ray of the abdomen
- Blood Test - Thyroid function test, Serum B12, Serum D3, calcium



Complication of Constipation

- Fissures
- Hemorrhoids,
- Fecal impaction
- Rectal prolapse

How to Prevent Constipation

The following measures should be taken to prevent constipation

- Eat more fiber foods.
Ex: Fruits, leafy vegetables, sprouts, oats, legumes, apples/oranges, soybeans, black currants, peas, almonds, and peanuts.
- There should be a gap of 3 hours between meal and sleep.
- Drink plenty of water. (8 to 10 glasses) 3-4 liters
- Avoid excessive consumption of tea & coffee
- Avoid excessive consumption of bakery & dairy products)
- Exercise regularly
(Walking, Running, Yogasan, Pranayam)
- Avoid excessive consumption of meat
- Avoid excessive consumption of spicy & oily food
- Do not avoid the urge to the toilet
- Breakfast and lunch on time
- Avoid addiction (alcohol/tobacco)
- Eat on time
- Sleep on time (Minimum 6-7 Hours)
- Avoid Long travelling
- Follow toilet ergonomics



Treatment of Constipation

- 1) Most importantly, you will be advised about changes in diet and Lifestyle.
(As discussed in Piles treatment Page no: 05)
- 2) You will be given laxative medicines for immediate relief which will clear the bowels
 - **Do not use too much laxative medicine as it also causes constipation.**
 - Precaution - Long-term use of laxatives can lead to loss of colon function & consequently, constipation becomes increasingly worse and unresponsive to laxatives.
- 3) **Consult a doctor immediately if you experience any of the following problems after taking laxative medicine.**
 - Bleeding during defecation
 - Abdominal pain
 - Nausea.
 - Feeling weakSo be sure to consult a doctor before taking any laxative medication.
- 4) Biofeedback therapy. (For pelvic floor muscle weakness)
- 5) Treatment of Secondary causes of constipation.
- 6) Avoid drugs causing constipation by replacing them with alternative drugs suggested by the doctor.
- 7) Physiotherapy

Surgery

- This is the last option and rarely requires surgery for constipation.
- **Stapled Transanal Resection (for outlet obstruction constipation due to rectal prolapse)**





Harish Pimple

★★★★★

बडे हॉस्पिटलचा त्याच्या नावा प्रमाणेच अवतंत चांगला अनुभव आला. डॉक्टर संध्या बडे मेडम यानी एवढ्या सुंदर प्रकारे दुर्बीण च्या सहाय्याने मुख्य्याचाचे ऑपरेशन केले की आता मला काहीच ज्ञान जाणवत नाही. १६ वर्षांचा जस ४ दिवसात गायब झाला. सर्व स्टाफ खूप मन मिळावू आहे. वातावरण खूप सुंदर आहे. इथे पेशंट असल्या सारखे वाटवच नाही. धन्यवाद बडे मेडम आणि बडे हॉस्पिटल.



Antony Rebello

★★★★★

I undergone a Fissure operation recently. The operation was done by an incredible Dr.Sandhya Bade.Very rare to find a good doctor with combines personal touch and care for patient.The staffs are wam and pleasant.I highly recommend becoming Dr.Sandhya Bade's patient.!



M

Mayur Dushane

Hi My Name is Mayur Dushane. I am From Vadgaon I was suffering From Fissure. I Consulted many doctors regarding fissure Problem but I could not get the proper treatment regarding fissure. Someone Suggested me BADE Hospital and also shared his good experience regarding that treatment and effectiveness about Fissure. So I consulted Dr. Sandhya Bade Madam. When she checked me she explained to me regarding my problem in a very proper manner and suggested me not to go for an operation immediately. Since failed to follow the guidelines given by her so when I visited her next time. I had to go for operation when I entered O.T I Was Nervous. Then she explained to me that there will be no pain and made me comfortable in O.T. After the operation, I feel relief from fissure I would like to thank you . Madam.For your treatment and your support. So this is all about my experience at BADE Hospital.



Milan Gholba

Comment

My husband was admitted to Dr.Bade's hospital, Kamshet. He was taking treatment under Dr.Sandhya Bade.We had very good experience at this hospital. All staff is supportive. Hospital is very clean. Dr. Sandhya is very nice. Listens to patient and relative, gives positive energy. We were very happy with the treatment given by her. Both Dr Rahul and Dr Sandhya are very nice at heart. And always give all possible support to patient. We are very thankful to her. Thanks to all staff - nurses, RMOs and admin staff. We wish them all the best for their future ventures.



A

Ankush Awasthi

In-clinic

Excellent doctor.. Very knowledgeable. Caring and curing both at the same time.. Thanks a ton for helping me out and helping me get rid of the pain. I would highly recommend her for situations which requires urgent medical attention. Thanks once again Dr.Sandhya Bade

T

Taniahkka Gaikwad

★★★★★

Dr. Sandhya Bade is a reliable and one of the Best General Surgeon, Best Laparoscopic Surgeon and Best Piles Surgeon





VISARJINI

Proctology Care Only For Women



Dr. Bade's

Accident & Multi-Specialty Hospital

“ Dedicate to Deliver Compassionate Care ”

5,000 + Successful Surgeries | 10,000+ Happy Patients



FAMS - Fellowship in Minimal access surgery

FIAGES - Fellowship in Indian Association of
Gastrointestinal Endo-Surgeons.

EFIAGES - Fellowship in Indian association of
Advanced Gastrointestinal Endoscopy

MEMBER OF

ASI, IAGES, AMASI, ACRSI, PSS

DR. SANDHYA BADE

**MBBS DNB - General Surgery
PILES SPECIALIST**

For Appointment : +91 8383838371 / +91 7769881188

WWW.VISARJINI.COM | WWW.DRSANDHYABADE.COM