“AN AYURVEDIC MEDICINAL APPROACH IN THE MANAGEMENT OF ARSHA W.S.R. TO 1\textsuperscript{ST} AND 2\textsuperscript{ND} DEGREE INTERNAL HAEMORRHOIDS”

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ABSTRACT

Arsha occurs in Gudapradesha, which is a Sadhyopranahara Marma, Arsha is being described by Acharya Sushruta and Vagbhata under the “ASHTA MAHAGADA”. In Arshas (Haemorrhoids) bleeding per anum is the principal symptom to which patient shows his utmost concern and always worried if it continues. Person suffering from Arsha undergo tremendous physical and mental trauma. Arsha is capable of disturbing an individual like an enemy. Acharya Shusruta mentioned four treatment modalities to combat this condition namely Bhesaja, Kshara, Agni and Shastra\textsuperscript{1}. Bhesaja chikitsa is mentioned mainly for Arsha in the earlier stages when involved Doshas, symptoms and complications are not very severe. Keeping in view above mentioned point a clinical study was planned to evaluate the efficacy of Swalp Suran Modak and Samangadi Churna for management of Raktarsha (bleeding piles), which are described in Chakradatta Arsha Chikitsha Chapter. The aim of study was to evaluate the efficacy of Swalp Suran Modak and Samangadi Churna in the management of Arsha (Haemorrhoids). Study was conducted over 30 patients of Raktarsha. Out of them 26 patients were completely recovered from their main symptoms. After assessment, it was concluded that Swalp Suran Modak and Samangadi Churna was effective in patients suffering with early stages of Arshas (1\textsuperscript{st} and 2\textsuperscript{nd} degree internal haemorrhoids).

KEYWORDS: Arshas, Bleeding piles, Swalp Suran Modak, Samangadi Churna, Internal Haemorrhoids.

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INTRODUCTION

Ano rectal disorders are progressively increasing in the society. Out of many of the causes, some important are sedentary lifestyle, irregular and inappropriate diet, prolonged sitting or standing and certain psychological disturbances too. Mostly, the ano rectal disorders are coupled with psychological manifestations. The prime cause of ano rectal disorders is the derangement of Jatharagni, which further leads to constipation. A constipated bowel is the devil's workshop. Constipation increases the back pressure into the haemorrhoidal veins to produce piles. The fast food and cola culture have again worsened the condition. This disorder is utterly embarrassing to the patient.

Arsha is being described by all the classics of Ayurveda. Acharya Sushruta and Vagbhata even placed this disorder in the “ASHTA MAHAGADA”.[2, 3]

According to Ayurveda the disease comes under the heading of Mahagadas[2] as it is: Dirghakalanubandhi, Dushchikitsya and Tridoshik in nature and involves the Marma. Arsha occurs in Gudabhaga, which is a Sadhyopranahara Marma, and it is well known for its chronicity and difficult to treat.

In modern era piles are mostly considered to be cured radically i.e. surgical or parasurgical procedures. Unfortunately all these techniques are still not free from one or other complication which has compelled us to think over new and better type of treatment.

Acharya Sushruta the father of surgery, advocates the ‘BHESAJA CHIKITSA’ as the first step in the management of Arsha out of four methods.[4]

In Raktarsha bleeding per anum is the principal symptom to which patient shows his utmost concern and physician is always worried if it continues. Often the physiological effect of haemorrhoidal bleeding is not as graver as the psychological impact on the patient at the site of few drops of blood in the pan. Acharya Sushruta considered blood as origin of our body.[5]

Thus, keeping in view above discussed facts; the present work entitled An Ayurvedic medicinal approach in the management of Arsha w.s.r. to 1st and 2nd degree Internal Haemorrhoids” was carried out on the 30 patients under the Dept. Of Shalya Tantra, N.I.A, Jaipur.
AIMS AND OBJECTIVES
1. To control the bleeding per anum and simultaneously increase Agni Bala.
2. To establish the Ayurvedic treatise to manage the bleeding piles.
3. To evaluate the efficacy of Swalp Suran Modak and Samangadi Churna in the management of Arsha.
4. To find out a safe and effective remedy for the disease Arsha.
5. To establish a conservative line of treatment for Arsha.

MATERIALS AND METHODS
- **Inclusion Criteria.**
  (a) Patient diagnosed as Arsha (Haemorrhoids) between the ages of 20-70 yrs.
  (b) Patients were selected irrespective of sex, economical status and education.
  (c) 1st and 2nd degree internal haemorrhoids.

- **Exclusion Criteria.**
  (a) Patient suffering from any systemic diseases which requires their management was excluded from study e.g.
    - Hypertension, Diabetes mellitus
    - HIV, Tuberculosis
    - Hemophilic disorder, Carcinoma of rectum
    - Hepatitis-B
  (b) Pregnant Females.
  (c) 3rd and 4th degree Internal Haemorrhoids
  (d) Complicated pile masses.
  (e) Pappiloma, condyloma
  (f) Fistula involvement with piles.
  (g) Crohn’s disease, Ulcerative Colitis

- **Sample Size:** 30 Subjects diagnosed to have Arsha (Bleeding piles) fulfilling the Inclusion criteria.
- **Source:** Subject selected from O.P.D. / I.P.D. at P.G. Department of Shalya Tantra, N.I.A. Jaipur.
- **Ethical Clearance:** The study is approved by institutional ethical committee of N.I.A. Jaipur

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• **Informed Consent**- The study explained clearly to the subjects and their signed, written informed consent was taken before starting the trial.

• **Investigations**: For the purpose of evaluating the general condition of the patient and to exclude other pathologies, Complete Blood count, Blood sugar (random), HIV- I & II, HBsAg. X-ray Chest (PA view) *(if required)*, Routine examination of Urine, Electrocardiography *(if required)* was done.

• In the present study a total no. of patient of 42 was registered for study, out of which 34 patients completed the trial and 34 patients have been treated. All the relevant data regarding the clinical study were statistically studied on the first 30 patients who complete the study, to evaluate the efficacy of the therapies.

• Study was conducted over patients of *Arsha* having symptom of *Raktsrava* (mainly) in a single group.

• After completion of trial symptoms were compared with baseline at beginning.

• The selected patients were administered with *Swalp Suran Modak* 2 gram thrice daily with Luke warm water and *Samangadi Churna* 3 grams twice daily with goat’s milk for a period of 14 days and followed up weekly for 1 month.

• The assessments were done on these parameters: Amount of bleeding per anum, Frequency of bleeding per anum, Appetite, Consistency of faeces, Bowel habit and Degree of piles.

**DRUG**

1. **SWALPA SURAN MODAK**[^6]

**Ingredients**

1. *Marich*  
   *Piper nigrum*  
   1 part
2. *Mahoushadha/Shunthi*  
   *Zingiber officinale*  
   2 part
3. *Chitrak*  
   *Plumbago zeylanica*  
   4 Part
4. *Suran*  
   *Amorphophallus campanulatus* (Roxb.) Blume  
   8 part
5. *Guda* (Jaggery)  
   *Saccharum offinarum*  
   15 part

*Anupana* – Luke warm water
2. **SAMANGADI CHURNA**[7]

**Ingredients**

3. Mochras: *Salmalia malabarica*
4. Tirit/Lodhra: *Symplocos racemosa* Roxb
5. Tila (Black): *Sesamum indicum*

All are same in Quantity.

*Anupana* – Goat’s milk

**OBSERVATIONS AND RESULTS**

- 100% of patients were complaining of *Rakta Srava* (Bleeding per rectum), 30% of patients were complaining of *Arsha Bhransha* (Protrusion of mass) and only 13.33 % of patients were complaining of *Guda Vedana* (Pain in Ano).

- *Mandagni* (Poor Appetite) were observed in maximum number of patients. This shows *Mandagni* is the main cause of *Arsha* as per Acharya Sushruta.

- Out of 30 patients in Over All Therapy, marked improvement was seen in the 18 patients, moderate improvement in 07 patients and mild improvement in 3 patients and No improvement seen in 2 patients (**Table No.I**)

- **Table No. II** depicting the effect of drug reveals that maximum percentage of Relief was observed in the parameter of Frequency of Bleeding Per anus (87.63%) followed by Amount of Bleeding per anus (86.35%), Appetite (78.31%), Bowel Habit (40.66%), and Consistency of faeces (30.55%) relief. Percentage of Relief is statistically highly significant in Frequency of Bleeding per anus, Amount of bleeding per anus and Loss of appetite and it is very significant in case of Bowel habit and Consistency of faeces.

- Out of five symptoms studied, in Bleeding per anum marked improvement was seen in the 26 patients, in all 26 patients bleeding was completely stopped and improvement seen in rest of 4 patients that show these drugs are very effective to control the bleeding per anum. (**Table No. III**)
• In Appetite marked improvement was seen in 21 patients, moderate improvement in 4 cases, mild improvement in 3 cases and no improvement was seen in 2 patients. (Table No. III)

• In Consistency of faeces marked improvement was seen in 12 patients, moderate improvement in 5 cases and mild improvement in 10 cases and no improvement was seen in 3 patients. (Table No. III)

• In Defecation / bowel movement marked improvement was seen in 12 patients, moderate improvement in 5 cases and mild improvement in 10 cases and no improvement was seen in 3 patients. (Table No. III)

• In Degree of piles there was no improvement seen in any patient. (Table No. III)

Table No.I: Total Effect Of Therapy In 30 Patients

<table>
<thead>
<tr>
<th>EFFECT OF THERAPY</th>
<th>NO.OF PATIENTS</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marked Improvement</td>
<td>18</td>
<td>60.00</td>
</tr>
<tr>
<td>Moderate Improvement</td>
<td>07</td>
<td>23.33</td>
</tr>
<tr>
<td>Mild Improvement</td>
<td>03</td>
<td>10.00</td>
</tr>
<tr>
<td>No Improvement</td>
<td>02</td>
<td>06.67</td>
</tr>
</tbody>
</table>

Table No. II: Effect of The Trial Drugs On Various Symptoms

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Symptoms</th>
<th>Mean</th>
<th>Diff.</th>
<th>% of Relief</th>
<th>SD</th>
<th>SE</th>
<th>p</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>BT</td>
<td>AT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>Amount of Bleeding Per anus</td>
<td>2.93</td>
<td>2.53</td>
<td>86.35</td>
<td>1.008</td>
<td>0.1840</td>
<td>&lt;0.0001</td>
<td>HS</td>
</tr>
<tr>
<td>2.</td>
<td>Frequency of Bleeding Per anus</td>
<td>3.50</td>
<td>3.067</td>
<td>87.63</td>
<td>1.172</td>
<td>0.2141</td>
<td>&lt;0.0001</td>
<td>HS</td>
</tr>
<tr>
<td>3.</td>
<td>Appetite</td>
<td>1.66</td>
<td>1.3</td>
<td>78.31</td>
<td>0.8769</td>
<td>0.1601</td>
<td>&lt;0.0001</td>
<td>HS</td>
</tr>
<tr>
<td>4.</td>
<td>Consistency of faeces</td>
<td>1.2</td>
<td>0.366</td>
<td>30.55</td>
<td>0.6149</td>
<td>0.1123</td>
<td>0.0028</td>
<td>VS</td>
</tr>
<tr>
<td>5.</td>
<td>Defecation/bowel movement</td>
<td>0.9</td>
<td>0.366</td>
<td>40.66</td>
<td>0.7184</td>
<td>0.1312</td>
<td>0.0091</td>
<td>VS</td>
</tr>
</tbody>
</table>

VS = Very Significant, HS = Highly Significant

Table No. III Total Effect of Therapy In 30 Patients

<table>
<thead>
<tr>
<th>Effect of therapy</th>
<th>No. of Patients</th>
<th>Bleeding per anum</th>
<th>Appetite</th>
<th>Consistency of faeces</th>
<th>Defecation/bowel movement</th>
<th>Degree of piles</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>No.</td>
<td>%</td>
<td>No.</td>
<td>%</td>
<td>No.</td>
</tr>
<tr>
<td>Marked Improvement</td>
<td>26</td>
<td>86.67</td>
<td>21</td>
<td>70</td>
<td>12</td>
<td>40</td>
</tr>
<tr>
<td>Moderate Improvement</td>
<td>00</td>
<td>00</td>
<td>04</td>
<td>13.33</td>
<td>05</td>
<td>16.67</td>
</tr>
<tr>
<td>Mild Improvement</td>
<td>04</td>
<td>13.33</td>
<td>03</td>
<td>10</td>
<td>10</td>
<td>33.33</td>
</tr>
<tr>
<td>No Improvement</td>
<td>00</td>
<td>00</td>
<td>02</td>
<td>6.67</td>
<td>03</td>
<td>10</td>
</tr>
</tbody>
</table>
DISCUSSION

- Mandagni (poor appetite) were observed in maximum number of patients that shows Mandagni is the main cause of Arsha as per Acharya Sushruta.\(^8\)

- All the patients having habit of Aharaj Nidana of Arsha like Vishamasana, Virrudhasana and Adhyasana habit which leads to Arsha (haemorrhoids) according to Acharya Sushruta.\(^8\)

- It is very clear that Arsha is a disease that arises from Mandagni and Ama formation. Arsha being a Tridoshaj disease, than to the chief vitiated Dosha can be taken as Apan Vayu. In respect with the Bheshaj Chikitsa of Arsha, the “Vatanuloman” effect was desired for each patient, as we have seen that the principle of treatment of Arsha includes three chief clinical effects- (1) Agni Deepan, (2) Vatanuloman and (3) Raktasthambhan Looking at the Dushya affected here are Twacha, Rakta, Mamsa and Meda.\(^9\)

- So far as the treatments of piles are concerned, Bhesaj Chikitsa is the first line of Management because there is no fear of complication in comparison of other procedures. So for the present study, “Swalp Suran Modak” and “Samangadi Churna” described in the Chakradutta Arsha Chikitsha has been taken as Test drug and has been taken as standard drug.

PROBABLE MODE OF ACTION OF SWALP SURAN MODAK

Now if we see the chief ingredient for this compound is Guda (Jaggery), the most important property of this single drug is that in contains high amount of alkali matter i.e. Kshara.\(^10\)

This was perform the part of Paneeya Kshara i.e. the Kshara that is taken internally to achieve the desired therapeutic effect. The Kshara with its properties like Tridoshahara Deepan, Pachan, Chhedan, Bhedan, Lekhana, Vilayana, Shodhana, Ropana etc\(^11\) certainly work at various levels in breaking the various channels of pathology formation of haemorrhoids Acharya Sushruta and Vagbhata clearly indicated the use of Paneeya Kshara in their treatise.\(^12,13\)

In the Samprapti of Arsha, the Mandagni status and disturbance in the mechanism of Apan Vayu is clearly seen, to overcome this pathology the therapeutic effect of Deepan- Pachan is achieved by Chitrak, Shunthi and Maricha. These entire mentioned drugs act at different levels and boosts up the Agni status at various levels of pathology formation. The therapeutic effect of Ama Pachan and Vatanuloman is also achieved with these drugs. Any formula to be
used in a disease must also possess the Vyadhi Pratyanik drugs for that particular disease. The classical references of Suran, Chitrak, and Shunthi indicate that all these drugs possess the “Arshaoghna” effect. Hence, these drugs will directly act upon the formed pathology.

Moreover, most of the drugs are Vatapittashamak, Tridoshahara, and Raktarsha is Pitta dominated Tridoshaj Vyadhi; hence these drugs has have certainly provide the “Dosha Pratyanik” therapeutic effect.

So, we can say that all the ingredients are arranged so scientifically that definitely they help in breaking the Samprapti of Arshas at different levels.

**PROBABLE MODE OF ACTION OF SAMANGADI CHURNA**

To cure Raktarsha drug should have Rakta Stambhan property also. Acharya Charaka advised that, Tikta Dravyas act as Agnideepak and Raktasamgrahak.[14]

Maximum contents of Samangadi Churna have Tikta and Kasaya Rasa. If the action of these Rasas is considered individually, so far the relationship with the Doshas is concerned, Tikta and Kasaya Rasa are said to be Pitta-Kapha Shamaka. As such the gross action of Samangadi Churna on the Dosha should be definitely Tridosha Shamaka mainly Pitta Shamaka, as Raktarsha is Pitta Pradhana Vyadhi. Kasaya Rasa causes coagulation of blood thus checks bleeding and Tikta Rasa act as Agnideepak and Raktasamgrahak.

Sheeta Veerya is mainly Pittashamaka and Pitta is the main Dosha responsible for bleeding piles. Thus on the basis of Veerya checks bleeding from piles as well as it also decreases the local inflammation. The drug Samangadi Churna has got all the above properties mainly Raktastambhaka property.

**Thus the combination of both these drugs gave better result in treatment of Raktarsha.**

To summarize we can say that Trial drugs has acted at the level of Samprapti Vigatan by Pacification of Vitiated Doshas as well as Rakta Stambhaka which help in relief in symptoms of patient as observed in the clinical Trial.

In out of 30 patients, 26 patients were completely cured from the symptom of bleeding per anum and rests of 4 patients are also improved. Appetite also improved in all the patients thus it can be concluded that these drugs are combined very effective to treat the main symptom of Arsha ‘Bleeding per anum’ and main cause of Arsha ‘Mandagni’.
CONCLUSION

- *Arsha* is the most afflicting disease man is facing present days.
- Urbanization, changing life style, dietary and bowel habits are contributing factors in increasing prevalence of bleeding piles.
- Further study on evaluation of clinical assessment criteria for *Raktarsha* is required.
- Bleeding is the principle and earliest symptoms of haemorrhoids for which patient seeks medical advice.
- *Bheshaja Chikitsa* (medical therapy) is more effective in early stage of *Raktarsha* (haemorrhoids) and has greatest advantage of wider acceptability by the patients.
- The trial medicine of present study was found simple, safe and effective in treating *Raktarsha*.
- The main principle of the management of *Raktarsha* is *Rakta shodhana, Raktastambhana, Pitta Kapha Shamana, Vatanulomana, Deepan and Pachana*.
- *Deepaniya* and *Pachaniya* drugs are essential in the treatment of *Raktarsha* for improvement in *Agni Bala*.
- The drugs selected for study “*Samangadi Churna*” and “*Swalp Suran Modak*” has *Tridosha Shamak* and *Pitta-Kapha Shamaka* properties working all together towards normalizing the vitiated *Doshas* and thereby alleviating the cause of *Raktarsha*.
- These drugs gave better results in stop the bleeding and increasing appetite.
- The *Ayurvedic* preparations in the present study did not impart any side effect, was well tolerated by the patient without any undesirable side effect, thus claiming that the medicine is safe for internal application.
- Thus, it can be concluded that *Swalp Suran Modak* and *Samangadi Churna* gave better results in cases of *Raktarsha* (esp. in case of internal 1st and 2nd degree bleeding piles) and can be prescribed with promising results. But as the sample size was small, working up upon a larger sample with practical modifications, as the disease runs a chronic course may help to bring about a better result.

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