



Management of *Arsha* (Hemorrhoid) Through Multimodal Treatment Approach- A Case Report

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ABSTRACT:

Hemorrhoid is a common disease among people. Considering the clinical features of hemorrhoid, it can be correlated with different types of *Arsha* described in Ayurveda texts. 42 years old Male patient presented with the complain of some masses coming out during defecation which has to reduce manually for one year. Case is diagnosed as intero-external hemorrhoids at 7 and 11o'clock positions and internal hemorrhoid at 3 o'clock position. Apart from the pile masses, there was a pedunculated polyp on the 7' o clock pile mass. *Dhanya Panchaka Kashaya, Avipattikara Churna, Dhatri Churna, Abhayarishta* and *Panchawalkala* sitz bath were given. He was undergone for *Chedana Karma* of polypoidal mass. A broad based inflamed external pile mass was acutely aroused immediate after *Chedana Karma* of the polyp. It was treated with *Vasti* and external paste initially and leech application on 4th and 6th days. *Chedana Karma* for the mass was performed on 8th day. Patient was free from symptoms after three months and no-recurrent or adverse effect was observed up to the date. It can be concluded that *Arsha* can be successfully managed with combined treatment modalities such as internal drug administration, sitz bath, application of pastes, leech application and *Shastra Karma*.

KEY WORDS: *Arsha*, Thrombosed pile mass, *Chedana Karma*.

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INTRODUCTION:

Hemorrhoid is a disease which affect one third of the population and it can be a disease which disturb normal lifestyle of the people. [1] Hemorrhoids are pathologically enlarged anal cushions which help to maintain continence.

Various surgical treatments are practiced in the management of hemorrhoid, such as Ligasure hemorrhoidectomy, hemorrhoidal artery ligation, stapled hemorrhoidopexy, [2][3] but hemorrhoidectomy is considered as the gold standard method. [4] According to Ahmad Khan, 2020, colorectal surgeons cannot manage hemorrhoid with a single technique most of the time due to its heterogenous nature. [5] Considering the clinical features of hemorrhoid, it can be correlated with *Arsha* described in Ayurveda texts. There are various types of



Arsha according to its clinical features and vitiated Dosha. Sushruta Samhita described that. Arsha is a disease which occurs due to consumption of food before previous meal being digested. excessive sexual intercourse, bad habits such as spending more time in squatting posture, inhibition of natural evocatory reflexes etc. These causative factors aggravate Dosha and enter in to the main artery then goes down to the rectum to afflict its walls and produce fleshy Sushruta masses. Acharya specially described the external features of different types of pile masses [6]. Ayurveda has its own treatment principles based on Dosa involved rather symptomatic treatment. Management of Arsha also based on the same principle. Among authentic Ayurveda texts, Acharva Sushruta's description of features of Arsha can be considered as a description based on the selection of modalities such surgical as Kshara (application of medicated alkaline drugs), Shastra (using instruments) and Agni (therapeutic cauterization) [7]. Chedana Karma for Arsha is indicated in Ashtavidha Shastrakarma also [8]. Not only surgical approach, he considered administration of internal medicines emphasizing Ayurveda has a holistic treatment approach. The case report discussed in this paper has a long history and has a treatment failure several times. Case was presented with intero-external hemorrhoid with unusual polyp over the pile mass. Management of the piles and polyp along with acutely aroused external pile mass through multi model treatment approach is described in this paper.

CASE REPORT:

42 years old Male patient presented to Ayurveda Hospital-Thenna, Matale, Central Province, Sri Lanka, with the complain of some masses are coming out through rectum during defecation since one year. According to the history of the disease, he has noticed bleeding per rectum during defecation before 20 years. He has observed that symptoms were increased after taking food and beverages which has a potent to increase Pitta such as prawn, alcohol etc. and taken care to avoid those foods. He was suffering from constipation since the beginning of the disease. After 10 years of the appearance of initial symptoms, some masses came out per rectum during defecation. Then he has sought for indigenous medical treatment from a traditional physician and symptoms were controlled for some times. Then again symptoms had increased. He went for allopathic treatments and diagnosed as grade 3 hemorrhoid. Then undergone for Sclerotherapy for all 3 positions (3, 7, and 11) of pile masses in September 2020.

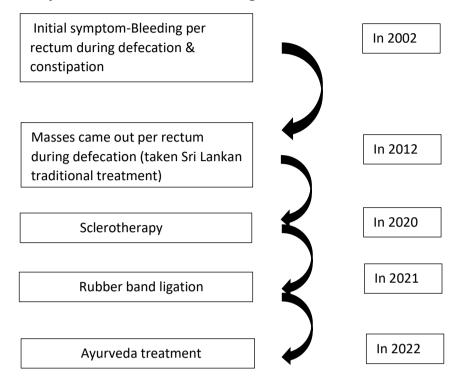
After three months of the date of sclerotherapy, same symptoms were reappeared. Then rubber band ligation (for all 3 columns) was done in April 2021. But masses came out after one month from the procedures. He has come for the Ayurveda treatments in February 2022. During proctoscopy examination it was observed pile masses in 3 and 7 and 11o'clock positions. 7 and 11 o' clock masses were more prominent. And also, a pedunculated polyp was observed which was arose on the 7' o clock pile mass. After local examination, the case was diagnosed as intero-external hemorrhoids at 7 and 11oclock positions and internal hemorrhoid at 3 o clock position.

Symptoms were assessed using Symptoms Severity Score [9] including frequency of the 5 symptoms, pain, itching, bleeding, soiling and prolapse. Each symptom was graded on a 5-point scale (0 = never, 1 = less than once a month, 2 = less than once a week, 3 = 1-6 days per week, 4 = every day or always). Total score is ranged from 0 to 20. Initial score was 8.



Pre-treatment investigations (Full Blood Count, Clotting Time, Bleeding time) were within normal range.

History of the disease with timeline is given below.



TREATMENT METHOD:

Initially, patient was treated with Dhanya Panchaka Kashaya 60 ml twice a day, Avipattikara Churna 5gms twice a day and Dhatri Churna 2.5gms at night for 12 days. He got relieved from constipation after initial treatment and his appetite was increased. Then Avipattikara Churna and Dhatri Churna was continued with Abhayarishta 15ml twice a day. Patient was advised to take sitz bath with Luke warm Panchavalkala Kashaya for 5 minutes, twice a day.

After 1 month, under local anesthesia, polypoidal mass was transfixed at the base of the peduncle and ligated using linen thread. *Chedana Karma* (excision) was carried out distal to the ligated point. Patient was kept under observation for 2 hours. It was observed that there is acutely swollen broad based (extend from 6 o' clock to 11 o'clock) external mass and patient

complained moderate pain in the mass. (Figure 1,2) Gradually pain was increased and pain became severe in mid night. Patient was treated with 10 ml Vasti (enema) with Mahanarayana oil to reduce the pain and a Sri Lankan traditional paste was applied (mixture of Bacopa Monnieri and sesame oil) to reduce inflammation for 5 days (Figure 3). After 2 days, pain was decreased but size of the mass and inflammation was not totally resolved. Leech application was done on 4th and 6th days (Figure 4). After two days from the leech application, pain reduced and other inflammatory signs also reduced but size of the mass remained same.

Shastra Karma was planned on 8th day because of discomfort of the patient due to the mass. After giving local anesthesia to the base of the mass, v shaped incision was taken at the outer surface of the base of the mass. The mass was transfixed and ligated





in three places separately using linen thread as the base of the mass was broad which was difficult to make a single point ligation. After ligation the base of the mass at three points with linen thread, *Chedana Karma* of the mass was taken place from 11 o'clock to 8 o' clock first, from 6 o'clock to 7 o' clock and then 7 to 8 o' clock. Packing was done with *Seethodaka* oil (traditional oil for wound healing used in Sri Lanka). After performing *Chedana Karma* of the mass it was observed that mass was full of clotted blood (thrombosed).

POST- OPERATIVE MANAGEMENT:

Patient kept under observation for 2 hours and discharged. He passed stool normally next day and packing was removed. Wound was cleaned with *Panchavalkala Kashaya* and dressed with *Seethodaka* oil. Patient was advised to do Sitz bath with *Pancha Valkala Kashaya* morning and evening for 5

minutes. He was given 10 ml *Vasti* with *Mahanarayana* oil for 3 days.

POST- OPERATIVE OBSERVATIONS:

Patient complained mild oozing of blood from the wound for 3 days. But it was reduced with the time by itself. Necrosed part of the distal part of the ligated peduncle was sloughed out in second day (Figure 5). Pain was totally relieved after 7 days. Mild yellow color discharge from the wound was observed until 3rd week. Small raw area was observed after 4 weeks (Figure 6).

Patient was advised to avoid straining at defecation and take proper diet to avoid constipation. After three months, patient has no complaints like bleeding or masses and has normal bowel movements up to the date. Symptoms Severity Score is zero after 3 months of the treatment.

Clinical images:



Figure 1: Acutely aroused mass.
Ligated point of excised polyp

Figure 2: Inflamed Mass day 1

Figure 3: Inflamed Mass after application of paste





Figure 4: leech application

Figure 5: 2nd day after excision of the mass

Figure 6: after one month

DISCUSSION:

The patient was suffering from Arsha (intero-external hemorrhoids) management was carried out using a combination of treatment modalities i.e. conservative and operative management for total duration of three months. Patient was treated with Dhanya Panchaka Kashaya to breakdown the pathogenesis of Arsha. Acharya Sushruta mentioned Mandagni as one of the main reasons for Arsha. Dhanya Panchaka Kashaya is indicated because of its Dipana, Pachana properties [10] Dhanya (Coriandrum sativum) of Dhanya Panchaka *Kashaya* has *Dipana*, *Pachana* properties [11]. Patel et al in 2004 mentioned that it has a digestive simulative action [12]. One of the indications of Avipattikara Churna is Agnimandya [13]. Most of the ingredients used in it have Dipana and Pachana properties. Dhatri Churnaya [14] is prepared using Cassia senna leaves and fruits of **Embilica** officinalis. Powder has virechaka(laxative) action hence it would support to breakdown the disease cycle. Abhayarishta is indicated for Arsha [15] in Bhaisajja ratnavali in Arsho Roga Chikitsa. The pedunculated mass on 7 o'clock pile mass was fulfilled the features which is for Chedana suitable Karma i.e. pedunculated and prominent according to Sushruta Samhita. [16] Considering its

features such as blue tips over the surface, thin overline skin, spreading nature, moist Vrutta(round), Mahamula (broad based), Sthira(firm), Snigdha(oily), the broad-based external mass was diagnosed a Kapha-Pittaja Arsha [17]. Bacopa proven for its monerea is antiinflammatory action. Bhavaprakasha mentioned that its external application reduces edema and pain [18] Sesame oil is used because of its Vāta Pacifying action. Palandu is mixed in to the paste for its Shothahara and Vedanasthapana actions [19]. These properties may have been playing a role to reduce the inflammation and pain of the mass though it was less in amount in this case. Ingredients of *Pancha Valkala*^[20] have Kashaya Rasa and Sheeta Guna which pacifies Pitta Dosha. Leech application was done for the mass due to slow prognosis of above-mentioned treatments.

Acharya Charaka says that if the disease is not relieved by the application of cold, hot, unctuous type of treatments, then the *Arsha* is likely to be caused by the vitiation of *Rakta*. In such condition's bloodletting should be done either using leeches or sharp instruments [21]. According to Acharya Sushruta, leech application is good for *Pittaja* diseases due to its cold nature which may be helpful to reduce inflammation. [22] Further he mentioned *Raktaja Arsha* is

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having similar features of *Pittaja Arsha* [23]. Hence, leech application was done for the mass and reduction of pain, tenderness and redness (signs of inflammation) of the mass can be justified using Acharya Sushruta's concept.

CONCLUSION:

Thrombosed external pile mass is successfully managed with combined treatment modalities such as internal drug administration, sitz bath, Application of pastes, leech application and Shastra Karma all together.

LIMITATION OF STUDY:

This protocol may be tried in more number of cases for its scientific validation.

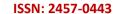
PATIENTS CONSENT:

Patient's written consent has been taken for treatment and publication of data without disclosing identity of the patient.

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