

Conservative Ayurvedic Medical Management in an Elderly Person with Fourth Degree Haemorrhoids- A Case Report

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ABSTRACT:

Haemorrhoids are a widespread lifestyle disorder with a high incidence rate. The superior, middle, and inferior rectal veins generate the radicles of haemorrhoids, which are dilated veins within the anal canal in the subepithelial region. The most severe form of haemorrhoids, in which the piles have fully prolapsed, are known as fourth degree haemorrhoids. In this case report, a 70-year-old male patient visited to outpatient department of GAVC Tripunithura with complaints of mass per rectum associated with severe pain for four days. On local examination, the case was diagnosed as fourth degree inflamed haemorrhoids at 3, 7, 11 o clock position. The case was managed with internal medication, sitz bath in *triphala kashaya* and *murivenna* local application. The mass was reduced partially within 15 days and completely reduced in 1 month. No complications were reported after the treatment. Hence this case highlighted a case of inflamed fourth degree haemorrhoids managed with conservative ayurvedic treatment protocol using *nirgata arsha chikitsa* and *udavarta chikitsa* within a short period of time.

KEYWORDS: *Arsha*, Fourth degree haemorrhoids, *Nirgata Arshas*, *Udavarta Chikitsa*

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INTRODUCTION:

Arshas is one of the most prevalent anorectal ailments and one among *Ashta Mahagada*. The Haemorrhoids are very common anorectal condition with a high incidence rate which are told to be the varicosities of haemorrhoidal venous plexus. Factors contributing to the development of haemorrhoids are constipation, sedentary life style practices etc. Main symptomatology of haemorrhoids are bleeding and mass per rectum. As it is a painless condition it is not get cared initially. Due to various reasons, persons neglect the condition and on

continuous progression, will completely be prolapsed which is called fourth degree haemorrhoids. [1] There will cause intense pain, mucous discharge, bleeding, itching, fecal soiling, ulceration of anal region associated with this prolapsed mass. If untreated this condition again worsen and mass become strangulated which is very painful condition. So, haemorrhoids need to be treated right away to avoid complications including gangrene, thrombosis, or strangulation. So immediate treatment option is surgical management. Haemorrhoidectomy is one of the treatment

options usually suggested with very severe post-operative pain as complication which can further leading urinary retention and infection. Stapled haemorrhoidopexy helps in restoring to anatomy while procedure but when there is a leak from the staple line, it results in rectal perforation and rectovaginal fistulae. [2]

Haemorrhoids can be correlated to *arshas* in Ayurveda. *Samprapti* of *arshas* mainly contributed by *mandagni* which was aggravated by various *nidanas* like sedentary lifestyles, irregular diets, alcoholism, prolonged standing or sitting, improper defecation practises etc. These factors derange the *jataragni* to cause *mandagni* and vitiate *tridoshas*, particularly *vata dosha*. Due to *Annavaha srotodushti*, these vitiated *doshas* localise in *guda vali* and *pradhana dhamani*, where they further vitiate *twak mamsa* and *meda dhatu* and cause the development of *arsha*. [3] The vitiated *doshas* can lead the *arshas* to prolapse from these *gudavalis*. As *arshas* is a *tridoshaja vyadhi* arising due to *mandagni*, internal medications for *arshas* basically depend on *agnideepana*, *vatanulomana* and *raktastambaka*. Most ingredients with this property can influence *samprapti vighatana* and prevent further progression of disease. Treatment principles of *udavarta* can also adopted as it is associated with constipation. Susrutha advised *abhyantara nirgata arsha* or *bhrasta guda arsha* can be managed with it with *swedana*, *abyanga*, *snehana*, and *avagaha*. [4] Acharya vagbada while explaining 4 types of *swedana*, *avagaha* can be used for *krichra arshas* ie., *arsha* with pain [5]. In the context of *raktaja arshas*, Acharya Susruta described a general *samshamana chikitsa*. [6] Drugs are utilised in *raktaja arshas* are *seetavirya* and *rakta stambhana* in property. *Tikta dravyas* can serve as *agnideepaka* and *rakta stambaka*, according to Acharya Charaka. [7] Since *pitta* is the primary *dosha* responsible for thrombosed

nature of *arshas*, *seetavirya dravya*, which is primarily *pittashamaka* can be adopted here. Thus, it inhibits piles from thrombosis and associated acute pain while also reducing local inflammation on the basis of *virya*. This case report elucidates fourth-degree haemorrhoids in an elderly person were totally treated by conservative ayurvedic medical management.

CASE HISTORY:

A 70-year-old male patient presented to Shalyatantra outpatient division of Government Ayurveda College, Tripunithura, Ernakulam, Kerala, India on 21.01.2022 with mass per rectum associated with severe pain for last 4 days. He had a history constipation for last 7 years which was not cared by him. Gradually he developed mass per rectum which was painful and was nonreducible in nature He underwent conservative Ayurvedic management for the same and got relief.

5 days before he has taken alcoholic beverages majorly in his diet. Suddenly after one day he developed mass per anus with severe pain and slight bleeding. He was unable to stand, sit, sleep and to do his daily routine activities. Then he consulted an Allopathic physician and underwent conservative management. But he didn't get any relief. So, they advised surgery for the same. As he was unwilling for surgery, he consulted our OPD for management.

The patient used to take mixed diet with more preference to spicy nonvegetarian food, tapioca and pickles. He had constipation and appetite was normal. He had a habit of intake of alcohol occasionally Sleep was disturbed due to pain in anal region.

On physical examination the illness was severe in nature and gait was stooped due to pain.

State of nutrition was intact and built was normal.

Blood pressure was 130/86mm Hg, Pulse rate was 74/min, Temperature was 98.6° F and Respiratory rate was 18/min at the time consultation on 21.01.2022

Prakrithi of the patient was *Vatapitta*

Anorectal Examination (21/01/2022):

Inspection

- Prolapsed internal haemorrhoids (4^o haemorrhoids) at 3,7, 11 o clock positions with inflamed reddish mucosa, slight bleeding, mucoid discharge and offensive smell.
- Strangulated in nature
- External haemorrhoids at 3, 7, 11 o clock positions.

Palpation

- Non-reducible

- Tenderness grade 2

Per rectal examination: Not done due to severe pain

Proctoscopy - Not done due to severe pain

THERAPEUTIC MANAGEMENT: The prescribed medications are mentioned in Table 1.

Advised *Pathya* and *Apathya*:

- *Pathya*: Fruits, vegetables-especially yam, onion, whole grains, fibre rich food, 10 glasses of water
- *Apathya*: Avoid hot and spicy food items, non-vegetarian diet, tuberous vegetable, alcoholic beverages, prolonged sitting

ASSESSMENT: The assessed results are mentioned in Table 2

Table 1: Treatments given in OPD:

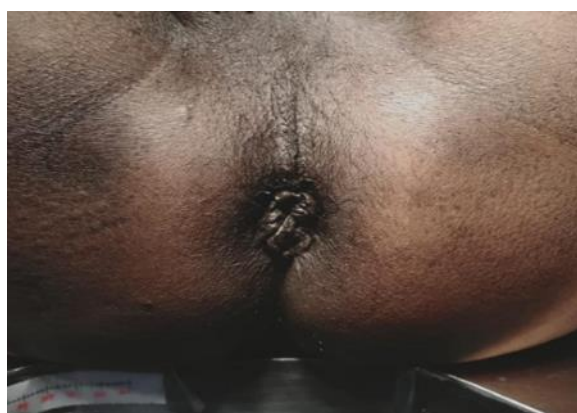
Date	Internal Medication	Procedures
21.01.2022-18.02.2022	1. <i>Panchathiktakam kashayam</i> 90ml bd before food twice daily 2. <i>Hinguvachadi choornam</i> 10 gram with luke warm water before food 3. <i>Triphala choornam</i> - 10 gram with luke warm water at bed time	1. Sitz bath in luke warm <i>triphala kashayam</i> -for 15 minutes twice daily 2. Topical application of <i>Murivenna</i> - with fingers over the mass daily

Table 2: Assessed by anorectal examination:

	21.01.2022	04.02.2022	18.02.2022
Inspection	Prolapsed internal haemorrhoids (4 ^o haemorrhoids) at 3,7, 11 o clock position with inflamed reddish mucosa, slight bleeding, mucoid discharge and offensive smell. Strangulated in nature	4 ^o haemorrhoids at all primary positions with reddish mucosa. No mucoid discharge No foul smell Size of pile mass reduced than previous examination. External haemorrhoids at 3, 7, 11 o clock positions.	External haemorrhoids at 3, 7, 11 o clock positions.

	External haemorrhoids at 3, 7, 11 o clock positions.		
Palpation	Non-reducible Tenderness grade 2	Tenderness-Grade 1 Non-reducible	Tenderness absent
Per digital examination	Not done due to severe pain	Not done due to pain	No spasm No tenderness No discharge on withdrawal of gloved finger
Proctoscopy	Not done due to severe pain	Not done due to pain	2 ^o haemorrhoids at all primary positions No bleeding points No mucous discharge


Fig 1: Anorectal examination on 1st day

Fig 2: Anorectal examination on 14th day

Fig 3: Anorectal examination on 21st day

RESULT:

After 1 month of treatment, patient with fourth degree haemorrhoids got a complete relief from symptoms through Ayurvedic medical management without any analgesic or antibiotic treatment during the treatment. Constipation was relieved and complete reduction of internal haemorrhoids was observed in anorectal examination.

DISCUSSION:

The dilation of the anal and perianal venous plexus causes haemorrhoids. Constipation, the most common cause of *arshas*, which can lead to disturbance of *Jatharagni*. Increased back pressure into hemorrhoidal veins caused by constipation can ultimately paved a path for *arshas*. The haemorrhoids which are *nirgata* and *doshapurna* should be managed with the help of external applications such as *swedana*, *snehana*, *avagaha*, *upanaha*, *visravana*, *alepana* etc. [4] The adopted management here includes internal medications, sitzbath in *triphalakashaya* and topical application of *murivenna*. It is better than conventional management like *ksharasutra* ligation here because of the chance of bleeding, post-operative pain, local infection and retention of urine which can be missed out in op-based management. [8]

Panchathiktakam kashayam is a *kashaya* with 5 *thikta dravyas* like *guduchi*, *vasa*, *katuki*, *bhunimba*, *nimbatwak* which are having *thikta rasa*, *laghu guna*, *deepana*, *pachana*, *pittahara*, *krimighna*, *raktashodhaka* in action. [9] *Triphalachoornam* used internally which helps to relieve constipation due to its *rechana* and *vatahara* property. Due to *kledovranadeenam sravaharatwa* property, it also used externally in the form of sitz bath daily for 1 month. [10] *Avagaha sedana* is indicated in *krchra arshas* ie., *arshas* with pain. *Hinguvachadi choornam* also helps to relieve the *udavarta*, *payushoola*, *vatavinmootra*

sangam in the patient. [11] Drugs in *hinguvachadi churna* possesses properties like *vatanulomana*, *sulahara*, *sothahara*, *srotovishodhana* properties which facilitates normal flow of *vata* and alleviates *kapha*. This helps in normalising the *agni* which in turn leads to subsidence of disease. *Murivenna* is used here as it directly indicated in haemorrhoids with pain. [12] Due to its *tridosha shamaka*, *soolaprasamana*, *sophahara guna* it is effective in management of *arshas*. The base oil in *murivenna* is coconut oil which helps in increase the permeability of skin and in turn increases the bioavailability of drugs. Coconut oil is *seetha* in *veerya* which helps in sudden reduction in inflammation of haemorrhoids. Proper *pathya* regulations and avoidance of *apathya* help to attain bowel regularity which avoid constipation.

CONCLUSION:

In the present case of fourth degree haemorrhoids in an elderly patient was completely cured by conservative ayurvedic management of *nirgata arsha chikitsa* and *udavarta chikitsa* within short duration as op basis.

Limitation of study:

This is a single case report; more research on a sizable group is anticipated to provide scientific proof.

Strength of study:

This case report paved anew way of ayurvedic conservative management in fourth degree haemorrhoids. Simultaneous application of *nirgata arsha* and *udavarta* management protocols have a positive impact in fourth degree haemorrhoids.

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Informed written Consent:

The written informed consent has been obtained from patient for treatment and publication of data and photos.

REFERENCES:

1. Somen Das. A Concise Textbook of Surgery, Published by Dr. S. Das. 13 old Mayor's Court. Kolkata. 6th Ed. 2010, p-1077.
2. Hardy A, Chan CL, Cohen CR. The surgical management of haemorrhoids—a review. Dig Surg 2005; 22 (1-2): p 26-33.
3. Agnivesha, Charaka samhita, Chikitsasthana 14/6 published by Chaukhambha Bharti Academy, Varanasi edited in 2012 p -575.
4. YT Acharya, Susruta Samhita Chikitsasthana 6/6 9th Ed. Chaukhambha Sanskrita Pratisthana. Varanasi 2007 p-79.
5. Vagbada, Ashtanga Hridaya Sutrashtana, 17/11, Chaukhambha Sanskrit Pratisthan, Varanasi 2015 p-47.
6. YT Acharya, Susruta Samhita Chikitsasthana 6/16 9th Ed. Chaukhambha Sanskrita Pratisthana. 2007 p-84.
7. Agnivesha, Charaka samhita, Chikitsasthana 14/182 published by Chaukhambha Bharti Academy, Varanasi edited in 2012 p-618
8. Sachin N. Patil, Chetan D. Kulkarni. Kshar-Sutra: A Magic Remedy Volume Indian Journal of Applied Research. 2016: 6(7) p-572-574.
9. Cheppad Achutha Varyar, Chakradatta, Edition 27, Printed by S.T Reddiar, Kollam 2005 p- 337.
10. Vagbada, Ashtanga Hridaya Sutrashtana, 6/159, Chaukhambha Sanskrit Pratisthan, 2015 p-178
11. Vagbada, Ashtanga Hridaya Chikitsasthana, chapter 14/31-33, Chaukhambha Sanskrit Pratisthan, 2015 p-406
12. B. Syleswariamma et. Al, Pharmacopeia, Publication division; Government Ayurveda College Trivandrum 1st edition 1996 p-174.

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