

EFFICACY OF APAMARGA TEEKSHNA KSHARA PRATEESARANIYA IN THE MANAGEMENT OF ARSHA (1ST AND 2ND DEGREE PILES) - PILOT STUDY

Dr. Komang Sudarmi¹, Dr. T.S. Dudhamal², Dr. S.K. Gupta³, Dr. V.D. Mahanta⁴

Department of Shalya Tantra, Institute for Post Graduate Teaching and Research in Ayurveda, Gujarat Ayurveda University, Jamnagar, Gujarat, India

ABSTRACT

Piles are becoming one of the common problems in the society now a day. One of the factor causes its existence is sedentary life style of the society. This problem not only disturbs the daily routine but also it decreases the quality life of a person. In *Ayurveda* Piles comes under *Arsha*, *Susrutha Acharya* had explained 2 types of *Arsha* ; *Antah Arsha* (Internal Piles) and *Bahya Arsha* (External Piles). Further He had explained various types of management of both the ailments, right from surgical procedure and para-surgical procedure. *Antah Arsha* (Internal Piles) said to be managed very well by using *Apamarga Teekshna Kshar* therapy. *Apamarga teekshna Kshar* is said to have strong potency scrapes the mucosal layer and alkaline in nature which has the capacity to burn out the internal piles without disturbing its functional surrounding system. In this pilot study, cases were taken up with the criteria of 1st and 2nd degree Internal Piles excluded with the involvement of other ailments, such as; Fistula in-ano, Fissure, Abscess, etc. The *Apamarga Teekshna Kshar* had been made according to the Literature review and particular test had been done to meet the standard of its efficacy. Nine patients were completed the treatment and all their data was recorded. End result of the treatment shown a meaningful success rate, starts from the pacification of the symptoms till increase the quality of life within less period of treatment. Hence it is proved that *Apamarga Teekshna Kshar* management shows the significant result for the management of 1st and 2nd degree Internal Piles.

Keywords: *Arsha*, *Teekshna Kshar*, Piles.

INTRODUCTION

In the classical text, *Kshara* means a dravya which capable of vitiates the tissues and make them fall off since it's a torments to the tissue. *Kshara* is included under most important one among the sharp instruments (*sastra*)¹. It has the quality of excising (*cedhya*), cutting (*bhedhya*), scraping (*lekhy*), alleviates the three dosha (*tridoshaghna*)². Among two, *apamarga teekhsna kshara karma* has been categorized under *pratisaraneeya* which means to be applied externally.

Practically, *Apamarga teekshna kshar* has been used in the management of *Arsha* (piles). *Arsha* is an ailment which mainly caused by improper dietetic habit which is very important to maintain the stability of *agni* and other *doshas*. Briefly, the derangement of the *doshas* produces a muscle sprout in the *guda valli* (anal canal) and further disturbs its functional system impacted on reducing the quality of life. *Kshara karma* is becoming analternate way to rectify its normalcy. And this study

has been made to see how far the efficacy of *Kshara karma* in regards to safety, less complications and its end result.

Material and Methods:

Apamarga Teekshna Kshara was prepared according to the classical principle³ and latest standardization which had been done from some research article. The ingredients of this *kshara* are *Apamarga (Achyranthes aspera* Linn.), *Shukti* (Pearl) powder, *Citarak (Plumbago zeylanica)*, limestone, *Shankha (conch)*.

Selection of Patient: 9 patients fulfilling the clinical criteria made for the diagnosis of piles (*Arsha*) were selected irrespective of their sex, religion, occupation, etc from the outpatient department (OPD) of IPGT & RA, Gujarat Ayurveda University, and Jamnagar.

Criteria of Diagnosis: Diagnosis was made on the basis of physical, P/R examination i.e. Inspection, palpation and Proctoscopic examination

Investigation: All Routine examination of Blood was carried out.

Inclusion criteria: Patients with age of (17-60 years) having internal piles of 1st and 2nd degree were included in this study.

Exclusion criteria: The patients of carcinoma rectum, hepatitis, heart diseases, 3rd and 4th degree piles, external piles, inflamed prolapsed, thrombosed piles, involvement of fissure-in-ano and fistula-in-ano. Patients of tuberculosis and pregnant women were also excluded from study.

Methodology: After confirming the adequate investigation according to the inclusion criteria, patient was given proctolysis enema half an hour before the actual procedure. After a complete rectal evacuation, the patient is taken to the minor OT table and painting of the part was done with beta dine solution. Proctoscope examination was further done after lubricating both anal canal and proctoscope to confirm the location of the

piles with steel proctoscope. After withdrawing the steel proctoscope, the slit plastic proctoscope is inserted and the lower end of the slit is fixed for better visualization of piles. Anal canal was cleaned from the gross material by gauze piece. A wet sterile cotton ball is placed just behind the internal piles to preserve the healthy tissues. *Kshara* is taken by using the blunt tip of the BP handle and applied to the internal piles without rubbing it and left for about 100 matra (approx. 2 min.)⁴. The changes of piles's colour was observed and 5ml of pure lemon juice was pushed to neutralized the alkaline nature of *kshara* and left for about 60 second, at this time presence of bubble was observed. Cotton ball was used to drain and wiped the anal canal. Then 5ml of distilled water was pushed to clean the rest of particle. Then cotton balls were used to drain the liquid content. Proctoscope was withdrawn and picchu of *yasthi madhu ghrit* was introduced and kept for 3 hours. Application of *Apamarga Teekshna Kshara* was done at one sitting when there was found multiple sites of internal piles. Repetition of the procedure were done whenever required in gap of 7 days. Ayurvedic laxative (*eranda brstha haritaki* powder 5g) has been prescribed for at least a week after the procedure. Analgesic was prescribed whenever required. And *Matra basti* has been suggested whenever the bowel movement was not regular.

Observation and Result: Follow up was done after a month of the procedure (Table-2). During the follow up, subjective experience were asked related to the discomfortness, bleeding and prolapse of piles from each and every patient and the proctoscopic examination was done to assess the size of the piles. Among 9 patients who underwent the procedure, total 66.7% were getting the complete remission (Table-1) which means that

Apamarga Teekshna Ksara is effective treatment for the management of Arsha.

Table-1 Total Effect of Therapy

Total effect	No. of patients	Percentage
Complete remission (100%)	6	66.7
Marked Improvement (76%-99%)	2	22.2
Moderate Improvement (51%-75%)	1	11.1
Mild Improvement (26%-50%)	0	0
Unchanged (25%)	0	0

Criteria for Assessment: The assessment will be done on the basis of following parameters by scoring method as mentioned bellow.

1. Rakta Srava (Bleeding Per Rectum)

Description	Grading
No bleeding	0
Drooping	1
Syringing	2
Streaming	3

2. Alpa Shoola (Mild Pain or Discomfort)

Description	Grading
No pain (No discomfort)	0
Mild pain (Feeling of discomfort with in tolerable limit, no analgesic is required)	1
Moderate pain (Oral analgesic is required for pain relief)	2
Severe pain (Injectable analgesic is required for pain relief or pain does not reduce after oral analgesic)	3

3. Bramsha (Prolapse Piles Per Rectum)

Description	Grading
No Prolapse of Piles	0
Pile prolapse during defecation & reduces itself	1
Pile prolapse during defecation and requires manual reduction	2
Permanent prolapse of Pile and does not reduced manually	3

4 Sleshma Malatyaga (Discharge Per Rectum)

Description	Grading
No discharge	0
Mild discharge & no requirement of pads	1
Changing of pads once a day only	2
Changing pads more than once a day	3

5. Size of pile:

Description	Grading
Size of pile < 0.5 cm	0
Size of pile 0.5 cm – 1.5 cm	1

Size of pile 1.5 cm – 2.5 cm	2
Size of pile > 2.5 cm	3

Table-2 . Assessment result

Figure.1 Before Kshar application

Figure. 2 During Kshar application

Figure. 3 After Kshar application

Pt's name	Before treatment					After treatment				
	Bleeding P/R	Discomfort	Prolapse	Discharge	Size	Bleeding P/R	Discomfort	Prolapse	Discharge	Size
Case-1	1	3	2	0	1	0	0	0	0	1
Case-2	2	2	1	0	1	0	0	0	0	1
Case-3	2	2	1	1	1	0	0	0	0	1
Case-4	1	1	1	1	1	0	1	0	0	1
Case-5	2	3	2	1	2	0	0	0	0	1
Case-6	2	3	1	1	1	0	0	0	0	1
Case-7	1	2	2	1	1	0	0	0	0	1
Case-8	2	3	2	2	2	0	0	0	0	1
Case-9	2	2	1	1	2	0	0	0	0	1



DISCUSSION:

Traditionally, *Apamarga* herbs (*Achyranthes Aspera*), the plant was used in asthma and cough. It is pungent, anti-phlegmatic, antiperiodic, diuretic, purgative and laxative, useful in oedema, dropsy and piles, boils and eruptions of skin etc⁵ It is also said to have several property like triterpenoid which contain Oleanolic acid which exhibits anti inflammatory, antitumour and antiviral properties⁶ This can be one of the advantage of *Ksara Karma* procedure that there was almost zero result for infection's incident during or after the treatment. Combination of *Apamarga* and cow's urine increased the alkaline nature of the drugs and have the potency to burn (cauterize). Further it fibrosed the unhealthy tissue results in shrinking off the piles, and indirectly it ceased the bleeding. The patient who were basically came for complaint of bleeding

per ano (dropwise or syringing pattern), has a very significant result for bloodless defecation experience after the very first day of the application of *Ksara*.

CONCLUSION:

Beside the effectiveness, *Apamarga Teekshna Kshara Pratisaraneeya Karma* is also a very safe, easy procedure, less time consuming and no hospitalization required. Hence *Apamarga Teekshna Kshara* is very effective for the management of internal piles (especially 1st and 2nd degree) and practically can be adopted.

REFERENCES:

1. Susrutha samhita, Vol.1, Translated by Prof. K. R Srikantha Murthy, Published by Chaukambha Orientalia, Edition 2014, Sutra Sthana, chapt. 11, page no. 63.
2. Susrutha samhita, Vol.1, Translated by Prof. K. R Srikantha Murthy, Published by Chaukambha Orientalia, Edi-

- tion 2014, Sutra Sthana, chapt. 11, page no. 63.
3. Sushruta Samhita with Nibandhasangraha commentary of Sri Dalhanacharya By Vaidya J. T. Acharya and Narayan Ram Acharya, Sutra Sthanam, Chapter 11, Page no. 47-50, Published by Chokhambha Sanskrita Sansthan – Varanasi, edition, 2013.
 4. Sushruta Samhita with Nibandhasangraha commentary of Sri Dalhanacharya By Vaidya J. T. Acharya and Narayan Ram Acharya, Sutra Sthanam, Chapter 11, Page no. 45-50, Published by Chokhambha Sanskrita Sansthan – Varanasi, Edition, 2013.
 5. J. Nat. Prod. Plant Resour., 2011, 1 (1): 1-14
 6. Indian Herbal Pharmacopia Vol. II, Page-5. (<http://scholarsresearchlibrary.com/archive.html>)

CORRESPONDING AUTHOR

Dr. Komang Sudarmi

Department of Shalya Tantra, Institute for Post Graduate Teaching and Research in Ayurveda, Gujarat Ayurveda University, Jamnagar, Gujarat, India

Email: Komang.sudarmi@gmail.com

Source of Support: Nil

Conflict of Interest: None Declared