



A COMPARATIVE CLINICAL STUDY TO EVALUATE THE EFFICACY OF NYGRO-DHAPATRA LEPA & ARSHOGHNA LEPA IN ARSHAS

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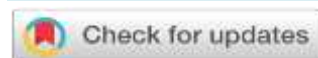
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ABSTRACT

Background and Objectives: *Arshas* is considered as one among the *Ashtamahagada*. The formation of *Arshanakura* in *Gudavali* is the *Pratyatma Lakshana* of *Arshas*. The general *Lakshanas* seen in a person suffering from *Arshas* are *Gudagata Vedana*, *Gudagata Raktasrava*, *Malabaddata* and *Ankurapratiti*. The four therapeutic measures of *Arshas* include *Bheshaja Chikitsa*, *Shastra karma*, *Kshara Karma*, and *Agni Karma*. *Lepa* is the first and foremost *Bheshaja Chikitsa* explained. *Nyagrodhapatra Lepa* and *Arshoghna Lepa* indicated for *Arshas* was taken for the clinical trial. **Method:** Patients presenting with the classical features of *Arshas* and between the age group of 16 years and 70 years irrespective of sex were selected for this study and allotted in Group A and Group B with 30 patients in each. *Nyagrodhapatra Lepa* was applied in Group A and *Arshoghna Lepa* was applied in Group B once in a day for 7 days. **Result:** Data was tabulated and analysed using Wilcoxon signed rank test, which showed marked improvement in patients with *Arshas* in both groups. **Interpretation and Conclusion:** *Nyagrodhapatra Lepa* as well as *Arshoghna Lepa* were found to be effective in reducing the signs and symptoms - pain, bleeding per anum, constipation and mass per anum. Hence this study proved the efficacy of *Nyagrodhapatra Lepa* in the management of *Arshas* and it is having an almost similar effect to the standard *Arshoghna Lepa*. So, *Nyagrodhapatra Lepa* can be used as an alternative for *Arshoghna Lepa* in the management of *Arshas*.

Keywords: Arshas, Nyagrodhapatra Lepa, Arshoghna Lepa, Haemorrhoids.

INTRODUCTION

Ano-rectal disorders are increasing in society due to sedentary lifestyle, irregular and inappropriate diet or insufficient dietary fiber content, prolonged sitting, and psychological disturbances like anxiety and depression. Among them, *Arshas* is the commonest condition. *Arshas* is considered one among the *Ash-tamahagada*¹, which is incurable due to the development of complications. Here the *Doshas* get aggravated either individually or in a combination of two or all three or together with *Raktha*, spread out and travelling through the *Pradhana Dhamani* in the downward direction reach the *Guda* and causes the vitiation of *Gudavalis* resulting in the production of *Mamsankuras*². *Arshas* can be correlated to Hemorrhoids. These are the dilated veins within the anal canal in the sub-epithelial region formed by radicles of the superior, middle and inferior rectal veins³. Studies show that hemorrhoids occur frequently in the adult general population, worldwide the prevalence of symptomatic hemorrhoids is estimated at 4.4% of the general population⁴. Hemorrhoidectomy, Sclerotherapy, Infrared photocoagulation, Rubber band ligation, Cryosurgery are the treatment of choice for hemorrhoids. But it is also associated with several disadvantages including recurrence. Here arises the need for *Alepa Chikitsa*, the first *Upakrama* which is common for all kinds of swellings as it mitigates the *Doshas* and relieves burning sensation, itching & pain⁵. *Alepa* is indicated specially for diseases localized on vital spots and private organs⁵. So *Alepa Chikitsa* can be given which is result oriented, easy to adopt and cost-effective. *Nyagrodhapatra Lepa* is mentioned in *Arshoroga Nidana Lakshana Chikitsa Adyaya* of *Basavarajeeyam*⁶. Which contains *Nyagrodha patra* & *Tila taila*. *Arshoghna Lepa* is mentioned in *Arshorogadikara Adyaya* of *Bhaishajya Ratnavali*. Which contains *Haridra Choorna* and *Snuhi Ksheera*. Hence here an attempt was made to compare the effect of *Nyagrodhapatra Lepa* and *Arshoghna Lepa* in the management of *Arshas*.

MATERIALS AND METHODS

Literary Source: All the classical *Ayurveda* texts, modern literature, internet sources, concerned articles, and previous works done.

Sample source: Patients attending OPD and IPD of Alva's Ayurveda Medical College Hospital, Moodbidri, and from other camps and referrals were selected.

Study Design: Comparative Clinical Study.

Sample Size: 60 patients suffering from *Arshas* fulfilling the diagnostic and inclusion criteria were selected and assigned into two equal groups Group A and Group B.

Diagnostic criteria

- Mass per anum
- Bleeding per rectum
- Mucous discharge per anum
- Itching
- Constipation
- Pain
- Proctoscopic Examination: Position, degree and number of Haemorrhoidal masses were examined.

Inclusion criteria

- Patients of both gender between the age group of 16 – 70 years.
- Patients with clinical features of 2nd & 3rd degree haemorrhoids.

Exclusion criteria

- 1st & 4th degree haemorrhoids.
- Haemorrhoids that are Thrombosed, Strangulated and Inflamed.
- Haemorrhoids with Fissure in ano, Fistula in ano, Rectal polyps, CA rectum, Rectal prolapse, inflammatory bowel disease, Proctitis, Perianal & Rectal abscess.
- Patients having TB, DM, Hypertension, Coagulopathies, HIV, HBsAg.
- Pregnant women.

Procedure for both group A and group B

Group A

Materials required: *Nyagrodhapatra*, *Tila Taila*, slit proctoscope, 2% lignocaine jelly, sterile gloves, ster-

ile gauze, cotton pads, povidone iodine solution, and sterile water.

Group B

Materials required: *Haridra Choorna*, *Snuhi Ksheera*, slit proctoscope, 2% lignocaine jelly, sterile gloves, sterile gauze, cotton pads, povidone iodine solution, and sterile water.

Purva karma: Part preparation.

Pradhana karma:

- The patient was advised to lie down in a lithotomy position.
- Anus and surrounding parts were cleaned with povidone iodine lotion.
- Then a lubricated slit proctoscope was introduced into the anal canal and then the obturator was removed. Haemorrhoid mass protruded through the slit of the proctoscope.
- Clean with sterile water and *Lepa* was applied over the haemorrhoid mass. Group A with *Nyagrodhapatra Lepa* and Group B with *Arshogna Lepa*.
- After 15 minutes *Lepa* was removed.

Paschat karma: The patient was asked to lie down in a comfortable posture for 15- 20 minutes.

Study period: Including observation and follow up total 60 days.

Interventions:

Group A: Application of *Nyagrodhapatra Lepa* once a day for 7 days.

Group B: Application of *Arshogna Lepa* once a day for 7 days.

The assessment was done on the 3rd, 5th, 8th, 15th, 22nd and 29th day after treatment.

Follow-up: The patient was reviewed on the 45th and 60th days.

Assessment criteria

Subjective parameters

- Bleeding per anum
- Pain
- Constipation

Objective parameters:

- Mass per anum

RESULTS

Table 01: Comparative results of Group-A and Group-B

Parameters	Group A	Group B	Mann Whitney test	
			T value	P value
Bleeding	0.5	0	957.50	0.534
Pain	1	1	871.0	0.520
Constipation	1	1	922.0	0.923
Mass per Anum	1	1	807	0.111

The difference in the median values between the two groups is not great enough to exclude the possibility that the difference is due to random sampling varia-

bility; there is not a statistically significant difference between the groups in all parameters.

Table 02: Percentage of improvement/relief in the symptoms of Arshas in Group A and Group B after treatment

Percentage of improvement/relief	Group A	Group B
Bleeding	100%	100%
Pain	100%	100%
Constipation	100%	90%
Mass per anum	45.45%	55.21%

DISCUSSION

Discussion related to Demographic data

Age: In the present study, it was found that out of 60 patients, 19 (31.66%) patients were in the age group of 31- 44 years. 18 (30%) patients were in the age group of 16-30 years. The affliction of the disease is more common in 31- 44 years. These age group persons are working, busy in their daily routine work have irregular dietary habits, which are responsible for altered bowel habits and maximum exposure to aetiological factors hence more incidence is seen in middle age group.

Gender: Out of 60 patients 37 (61.66%) were male. This is probably because males are mostly exposed to *Nidana* of *Arshas* like riding, traveling, irregular food habits, smoking, etc. Which is aggravating *Doshas* leading to the manifestation of *Arshas*. Less number of female patients in the present study may be probably due to the hesitancy of female patients for exposure to anal examination.

Religion: According to the religion-wise incidence of the disease, the prevalence was more seen in the Hindu religion (73.33%). It cannot be concluded on this basis that Hindus are more affected by this disorder. People of all religions are susceptible to this disease. This may be due to the geographical distribution of communities in and around Dakshina Kanna-da.

Socio-economic status: Maximum incidence of *Arshas* seen in middle class people they were 53.33 %. Middle-class people work hard to live a happier life causing physical and mental stress while increasing economic needs in the fast-growing society or not taking care of the problem may be the reason.

Family history: Here, even though there is no familial cause, 76.6% of patients were suffering from haemorrhoids because of their habits. And again, a noticeable thing was, that the family history of piles has an important role in its formation.

Food habits: Out of 60 patients 42 patients belonged to mixed food habits (70%). This shows the incidence of *Arshas* among the patients with a mixed diet as their dietary habit included meat, fish, spices which is

Ushna, *Vidahi* and *Viruddha Ahara* and are likely to have an influence on the causation of *Arshas*.

Appetite: Out of 60 patients, 53.33% of the patients were having reduced appetite. It shows that patients who are having reduced appetite are more prone to this disease. The finding of this study is in parlance with classical reference.

Bowel habits: Out of 60 patients, 55% of patients were found with constipated bowel habits and 45% of patients were found with regular bowel habits. Constipation is a chief causative factor for *Arshas*. The patient will do more straining for expelling constipated stool and this will cause the dilatation of the venous plexus.

Duration of disease: Out of 60 patients, when severity is considered 56.66% had a history for less than 3 months, 26.66% had a history between 4 to 6 months and 16.66% had the complaints for a period of 7 to 9 months. It shows the health consciousness of the population.

Discussion on Results

Effect of treatment on bleeding: In Group A patients got 100% relief from the bleeding after application of *Nyagrodhapatra Lepa* once a day for 7 days, the mean score before treatment was 0.66, after treatment mean score was got reduced to 0, it may be due to the *Sthambana*⁷, *Vranaghna*⁸ action of *Nyagrodhapatra*. In Group B patients got 100% relief from the bleeding after application of *Arshoghna Lepa* once a day for 7 days, the mean score before treatment was 0.50, after treatment mean score was got reduced to 0, which may be due to the *Raktha Stambana* and *Vranaropana*⁹ property of *Haridra*. *Curcuma longa* contains Demethoxycurcumin and Zingiberin which have haemostatic property also¹⁰.

Effect of treatment on pain: In Group A patients got 100% relief from the pain after application of *Nyagrodhapatra Lepa* once a day for 7 days, the mean score before treatment was 1.13, after treatment mean score was got reduced to 0, it may be due to the presence of *Tila Taila* which is having *Vata Shamaka* and *Vedanasthapana*¹¹ property. The *Lepa* also contains *Ficus benghalensis* Linn., which consists of antioxidant phyto chemicals such as flavonoids and

tannins, so it is having anti-inflammatory action¹². In Group B patients got 100% relief from the pain after application of *Arshoghna Lepa* once a day for 7 days, the mean score before treatment was 1.26, after treatment mean score was got reduced to 0, It may be due to the *Vata Shamana* and *Vedanasthapana* properties of *Haridra* and *Snuhi*, *Shotha Hara* property of *Haridra*¹³. *Curcuma longa* L. contains desmethoxycurcumin, zingiberin are having anti-inflammatory effect¹⁴.

Effect of treatment on constipation: In Group A patients got 100% relief from constipation after application of *Nyagrodhapatra Lepa* once a day for 7 days, the mean score before treatment was 0.93, after treatment mean score was got reduced to 0, it may be due to the presence of *Tila Taila* which is having *Rechaka*¹⁵ property. In Group B patients got 90% relief from constipation after application of *Arshoghna Lepa* once a day for 7 days, the mean score before treatment was 1, after treatment mean score was got reduced to 0.10, It may be due to *Ushna*, *Teekshna Vata Hara* and *Vatanulomana* properties of *Haridra* and *Snuhi Ksheera*¹⁶.

Effect of treatment on the mass per anum: In Group A patients got 45.45% relief from mass per anum after application of *Nyagrodhapatra Lepa* once a day for 7 days, the mean score before treatment was 2.20, after treatment means score was got reduced to 1.20, it may be due to the *Arshoghna* action of *Nyagrodhapatra*¹⁷. The pH of ash of *Nyagrodhapatra* is 11.68 i.e., towards the alkaline side, so it may help in the reduction of the size of the haemorrhoidal mass. In Group B patients got 55.21% relief from mass per anum after application of *Arshoghna Lepa* once a day for 7 days, the mean score before treatment was 2.3, after treatment mean score was got reduced to 1.03, which may be due to the *Lekhana*, *Shodhahara* properties of *Haridra* and corrosive nature of *Snuhi Ksheera*¹⁸.

Probable mode of action of Nyagrodhapatra Lepa: *Nyagrodhapatra* is having *Kashaya Rasa & Sheetha Veerya*¹⁹, so it may be having *Rakta Stambana* and *Arshoghna* action. *Tila Taila* is having *Madhura Rasa*, *Guru Guna & Ushna veerya*²⁰, so it can be acted

as *Vata Shamaka* and as a *Vedanasthapana Dravya*. The pH of ash of *Nyagrodhapatra* is 11.68 i.e., towards the alkaline side, so it may help in the reduction of size. Leaves of *Ficus benghalensis* Linn. contain rutin, taraxosterol, lupeol, β -amyrin, psoralen, bergapten which are having anti-inflammatory activity, along with β sisterol and quercetin-3-galactoside and friedlin.

Probable mode of action of Arshoghna Lepa: *Haridra* is having *Katu, Tikta Rasa, Ushna Veerya*, *Katu Vipaka, Rooksha, Laghu Guna, Kapha Vata Hara, Lekhana, Shothahara, Vranaropana, Rakta-shodaka* and *Raktastambaka* properties²¹. *Snuhi Ksheera* is having *Katu, Tiktha Rasa, Laghu, Ruksha Guna, Ushna Veerya* and *Katu Vipaka*²². *Curcuma longa* contains demethoxycurcumin, zingiberin, etc which have haemostatic and anti-inflammatory effect²³. Chemical cauterization and corrosive nature of *Snuhi Ksheera* help in reduction in the size of the mass of haemorrhoids ultimately there is a reduction of the size of the haemorrhoidal mass.

CONCLUSION

Based on the review of literature and observations made in this clinical study, the following conclusions are drawn.

- Both the groups showed highly satisfactory results in all the presenting signs and symptoms.
- Recurrence rate was not noticed during the follow up period.
- In the present study, incidence of *Arshas* was more in age group between 31- 44 years male patients with duration less than 3 months.
- Application of *Lepa* on *Arshas* can be done in OPD without anaesthesia. Hospitalization is not required. It is a simple procedure with inspiring result but should be done under proper supervision. It is cost effective also.
- There were no other complications like burning sensation while applying the *Lepa*.
- In comparison about the effect of treatment there was not a statistically significant difference between the groups in all parameters.
- Therefore, we can conclude that application of *Nyagrodhapatra Lepa* is also highly beneficial in *Arshas*.

So, the null hypothesis H_0 i.e., there is no significant difference in the action of *Nyagrodhapatra Lepa* and *Arshoghna Lepa* in *Arshas* is accepted.

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