

**MULTIMODAL TREATMENT APPROACHES FOR ARSHA: A CRITICAL REVIEW****Bhinya Ram<sup>1</sup>, Manmahendra Singh<sup>2</sup>, Neha Chauhan<sup>3</sup>, P. Hemantha Kumar<sup>4</sup>**<sup>1</sup>M.S Scholar, Department of Shalya Tantra, National Institute of Ayurveda, Deemed University, Jaipur.<sup>2</sup>Ph.D Scholar, Department of Shalya Tantra, National Institute of Ayurveda, Deemed University, Jaipur.<sup>3</sup>M.S Scholar, Department of Shalya Tantra, National Institute of Ayurveda, Deemed University, Jaipur.<sup>4</sup>M.S, Ph. D (Ayu.), Professor & H.O.D, Department of Shalya Tantra, National Institute of Ayurveda, Deemed University, Jaipur.**Corresponding Author:** [drbrsiyag1991@gmail.com](mailto:drbrsiyag1991@gmail.com)<https://doi.org/10.46607/iamj09p7062023>**(Published Online: September 2023)****Open Access**

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*Arsha* (piles) is one of the commonest diseases of ano-rectal region which is included under the *Ashtamahagada* (eight great diseases). *Arsha* (Hemorrhoids) is clinically an engorged condition of hemorrhoidal venous plexus along with abnormally displaced enlarged anal cushion, characterized by inflamed or prolapsed pile mass, bleeding per rectum and some abnormal discharge from anus. Modern medical science has treatment alternatives such as diet- lifestyle modification, sclerotherapy, banding, LASER ablation etc. in early stage and various surgical procedures such as Haemorrhoidectomy, and other minimal invasive procedures. in advanced stage with varied prognosis. Haemorrhoid can be co-related with *Gud-Arsha* in *Ayurveda*. *Ayurvedic* texts suggest fourfold treatment for *Arsha* such as *Bheshaja* (Medicinal treatment), *Kshara karma* (Herbal caustic paste), *Agnikarma* (thermal heat burn) and *Shastra karma* (Surgery). In this review article, information from modern surgery texts in view of available treatment options as per stage of disease and a gist of contemporary texts of *Ayurveda* related to *Arsha* (Haemorrhoid), have been documented to understand integrated and holistic treatment approach towards haemorrhoid management. The article attempts to simplify haemorrhoid management and touches maximum aspects of this disease with an integrated approach. Hence, this article will certainly prove useful to proctologist and researchers belonging to field of Modern and Ayurveda, to know about holistic haemorrhoid management.

**Key words:** Multimodal approaches, *Arsha*, Haemorrhoids, *Ashtamahagada*

## INTRODUCTION

In today's modernized world, shift duties, stressful life, eating of unhealthy foods makes people more prone to the ano-rectal diseases such as fissure and haemorrhoid (*Arsha*). *Arsha* is explained in ayurveda as *Mahagada*. It is defined as "arivat pranam shrinoti hinasti iti arshah". A disease which pains patient's vital force (prana) as enemy is called as *Arsha* [1]. The deranged *vayu*, *pitta*, *kapha* etc. become dislodged from their natural seats in the body and carried down through large intestine in the descending colon and getting lodged there to give rise to growths of polyp which are known as piles. It is *Dirghakalanubandhi*, *Dushchikitsya* in nature, and *Tridoshik* and involves the *Marma* [2]. Different treatment modalities have been advocated for *Arsha* in *Ayurveda*. In early stage with less signs - symptoms *Arsha* can be treated with *Bheshaja* (internal medicine), *Ksharkarma* (herbal caustic paste locally) or *Agnikarma* (thermal heat burn) and if not cured with all above treatment, it should be treated by *Shastrakarma* (Surgery) [3]. To treat this ailment numbers of modalities are present having their own importance.

Haemorrhoids can be co-related with *Guda-Arsha* as per *Ayurvedic* classical text. Haemorrhoids are the most common anorectal disease [4], characterized by alteration in vasculature of the anal canal including blood vessels supporting tissues, muscles and elastic fibres [5]. There is a network of small veins within the inner lining of the anus and lower rectum [6]. The estimated worldwide prevalence ranges from 2.9% to 27.9%, of which more than 4% are symptomatic [7,8]. Age distribution demonstrates a Gaussian distribution with a peak incidence between 45 and 65 years with subsequent decline after 65 years [9,10]. Men are more frequently affected than women [11]. The progressive pathogenesis of disease produces various symptoms in patients such as bleeding, prolapse, pruritis in anus, pain etc.

In this article various treatment alternatives from modern surgery and *Ayurveda* have been dealt in detail.

## MATERIALS AND METHODS

All references have been collected from our ancient *ayurvedic* texts viz., *Sushruta Samhita*, *Charaka Samhita*, *Dalhana teeka*, *Ashtanga Hridaya*, *Ash-tanga Samgraha*. Modern books like Baily and Loves's, Short Practice of Surgery, Surgery of the Anus Rectum and Colon, Atlas of General Surgery Jaypee Brothers medical publishers are used as literary source.

### Management of *Arsha* [11-17]

#### Modern Perspective

Therapeutic treatment of haemorrhoids ranges from dietary and lifestyle modification to radical surgery, depending on degree and severity of symptoms.

Management Approaches: -

1. Preventive- Diet and lifestyle modifications
2. Curative:
  - (A) Diet and lifestyle modification- For mild to moderate symptoms, a high-Fiber diet and bulk dietary supplements can help alleviate pressure and bleeding. Patients should be encouraged to drink water and defecate without delay at the urge sensation. It is useful in all patients with grade I or II Haemorrhoids.
  - (B) Medical- Warm sitz bath, Topical Anaesthesia, Analgesics, Laxatives, Anti-inflammatory drugs, Protectants, Vasoconstrictors, Antiseptics, Suppositories
  - (C) Non-operative- When dietary and lifestyle modifications fail to reduce symptoms in all patients with grade I or II and most patients with -grade III, several techniques may avoid surgical haemorrhoidectomy in up to 80% of patients with first- and second-degree internal haemorrhoids. Sclerotherapy, Rubber band ligation, Cryosurgery, Lords anal dilation, Bipolar diathermy, Laser therapy, Infrared photocoagulation, Ultroid, doppler guided haemorrhoid artery ligation (DGHAL)
  - (D) Operative- - Surgical haemorrhoidectomy is indicated for grade III and IV haemorrhoids and

for patients with grade I and II haemorrhoids who have failed conservative management. Open haemorrhoidectomy, closed haemorrhoid-

ectomy, Submucous haemorrhoidectomy, stapled haemorrhoidectomy

Condition	Management
First Degree	Exclusion of other causes of bleeding, diet, rubber band ligation, infrared coagulation, bipolar electrocoagulation, sclerotherapy, DGHAL
Second Degree	Rubber band ligation, infrared coagulation, sclerotherapy, DGHAL
Third Degree	Rubber band ligation, infrared coagulation, bipolar electrocoagulation, Haemorrhoidectomy
Fourth Degree	Haemorrhoidectomy
Prolapsed, Strangulated	Emergency Haemorrhoidectomy
Thrombosed external haemorrhoids	Excision

**External Haemorrhoids Management-** In Acute stage (if patient comes within 48 hrs) with symptoms like severe pain with haematoma, then Analgesics, Anti-inflammatory drugs are prescribed internally along with Xylocaine ointment for local application and hot water Seitz bath with KMNO<sub>4</sub> is also advised. Similarly, Laxatives and Antibiotics can be prescribed adjuvantly. Further, if haematoma do not resolve, then it is incised under local anaesthesia & the wound is allowed to heal by granulation tissue. If untreated, the haematoma undergoes either resolution or ulceration/suppurative to form an abscess/fibrosis which give rise to skin tag.

**Internal Haemorrhoids Management-** Treatment for internal haemorrhoids depends on the severity of symptoms and response to conservative management. Moreover, various treatment alternatives practiced can be categorized as below-

1. Sclerotherapy
2. Barron's Rubber Band Ligation
3. Doppler Guided Haemorrhoid Artery Ligation (DGHAL)
4. Infra-Red Coagulation
5. Haemorrhoid Laser Procedure
6. Electrocoagulation
7. Anal Dilatation and Sphincterotomy
8. Haemorrhoidectomy
9. Stapled Haemorrhoidopexy

**Ayurvedic Perspective**

Haemorrhoids can be correlated with Gudarsha as per Ayurvedic classical texts. Further, Arsha is included

in *Ashtamahagada* category (amongst 8 diseases which are difficult to treat). Arsha is defined as a disease which produces extreme discomfort to the patient resembling one's enemy, leading to painful defecation and pile mass formation. According to *Ayurveda*, *Mithya aahar vihar* is one of the major aetiological factors of *Arsha*, it is unavoidable in this busy modern lifestyle due to junk food habit and uncontrollable addictions.

**Ayurvedic Management**

The aim of *Ayurveda* is to cure the disease of the diseased person and maintain the health of healthy person. Thus, in the management of *Arshas* also, the treatment can be classified into preventive and curative measures.

**Preventive Measures** - For the prevention of any disease one should avoid the causative factors of that disease. *Mandagni* is the primary etiological factor; therefore, measures viable to improve *Agni*, and regulate bowel habits would prevent the development of *Arshas*.

**Curative measures** - *Acharya Charaka* and *Acharya Sushruta* have mentioned four types of treatment for *Arshas* viz. *Bheshaja chikitsa*, *Kshara karma*, *Agni karma* & *Sastra karma* based on stage of *Arsha*. Further, *Bheshaja*, *Kshara karma* and *Agni karma* is effective in Grade I & II haemorrhoids whereas, *Shalya karma* is practiced in Grade III & IV haemorrhoids [18]. Medical line of treatment advised by *Acharya Sushruta* is as under [19]

Types of Arsha	Measures
Vataja	Snehana, swedana, vasti
Pittaja	Virechana
Kaphaja	Administration of shunthi & kulattha
Raktaja	Sanshamana Karma
Sannipataja	Tridoshaghna Dravyas

Vataja and Kaphaja Arshas should be treated with Ksharakarma and Agnikarma; whereas Pittaja and Raktaja Arshas should be treated only with Mridu Ksharakarma [20]. In the case of Raktarshas if it is Vatanubandha, should be treated with Snigdha and Shita drugs as well as the dietetic regimens having similar qualities. Kaphanubandha Raktarshas should be treated with Ruksha and Shita drugs along with similar dietetic regimens [21]. In the patients of Raktarshas, if Vata vitiation is more and Pitta, Kapha vitiation is less administration of Snehapana, Snehabhyanga and Sneha Basti should be done [22]. Special emphasis has been given to the administration of Bhallataka in Shuskarshas and Kutaja Twak in Sravi Arshas. Takrapana is common for both varieties of Arshas [23].

**Bheshaja/Aushadhi chikitsa-** Bheshaja chikitsa is advocated when symptoms are mild & less complicated. The basic conservative Ayurvedic management is primarily aimed at Agni Deepan- Pachan (improving digestion), Vata Anuloman (pacifying bowel movements), Rakta shodhan (blood purifier) – stambhana Chikitsa (Hemostatic medicines) and Malsaraka Chikitsa (Laxatives).

1. Prevention of constipation- Laxative- Triphala churna, Panchasakar churna, Haritaki churna, Abhayaarista.
2. Deepan pachana- Chitrakadi vati, Lavan Baskar churna, Agnitundi vati.
3. Arshoghna-Sooranpak, Arshakuthar ras, Shigru guggulu.
4. Hot sitz bath- Tankan bhasma Sphatic bhasma, Triphala kwath Panchawalkal kwath.
5. Rakta stambhaka-Bol baddha rasa, Bol parpati, Kukutandatwak bhasma Praval pisthi.
6. Vran ropak-Jatyadi tail, Nirgundi tail.

7. Vednahara- Madhuyastyadi tail, Triphala guggulu

1. LOCAL TREATMENT [24] - In this, medicines are to be given by anal route. These measures are aimed to relive pain and local congestion this includes.

1. AABHYANG - Medicated oil application to the Arshas, then Dhupana given.

2. BASTI - There are two types of Basti described in the management of Arshas oily and non-oily. It has both systemic as well as local benefits. Anuvasana Basti is helpful in correcting vitiated Vata. Acharya Charaka (in Arsho Chikitsa in Chikitsa Sihana) indicated it for prolapsed rectum, pain, dysuria, dysentery, pain in back and thigh, weakness, tympanitis, frothy discharge from anus and retention of stool and flatus similarly Niruha basti is also helpful in eliminating pain itching, numbness, discharge etc, in Arshas.

3. DHUPANA - Fumigation with human hair serpent slough and drumstick tree leaves, etc. it has better effect in combination with Abhanaga to treat the Arshas.

4. AWAGAHA - When the patient of Arshas is suffering from pain he should take Sitz bath in the decoction of mentioned medicines.

5. PRALEP - Acharya Charaka advocated Pralepa and Pradeha in those Arshas which are inflamed and with pain this help in bloodletting of vitiated blood accumulated in the piles.

6. PARISEKA - It is a measure to wash Arshas (Raktaja Arshas) with a medicated decoction

**Kshara karma (Application of Alkaline paste):** Kshara karma i.e., application of 'Pratisaraneeya Kshara' (alkaline-caustic paste) on the pile pedicle is mentioned in Sushrut samhita. This is indicated in

Grade II & III non-bleeding internal haemorrhoids where pedicle is *Mridu* (soft), *Prasrut* (Extensive), *Avagaadh* (Deep seated-internal) & *Uchhrita* (Projecting).

**Kshara sutra ligation:** it is a very effective procedure for haemorrhoids in which the medicated herbal coated thread is ligated on the external and internal piles mass. And after 5 to 7 days piles mass falls off.

**Agni karma (Heat Burn Therapy):** This is indicated when pile pedicle is *Karkash* (Rough), *Sthir* (Firm), *Prithu* (Thick) & *Katthin* (Hard-fibrosed). It can be co-related this with IRC, Electro-coagulation and advanced Laser Techniques used for Grade II & III haemorrhoid ablation, in which various heat sources are used to perform thermal/heat burn.

**Shastra karma/ Chhedana Karma (Excision of Pile mass):** *Shalya karma* i.e., excision of piles is indicated when pile mass is of *Tanu Mool* (Narrow Base), *Uchhrita* (Projecting/Prolapsed) & *Kleda yukta* (Discharging/Bleeding) resembling III grade & IV prolapsed haemorrhoids. *Chhedana karma* is very much similar to conventional surgical haemorrhoidectomy.

## DISCUSSION

According to *acharya Sushruta arsha* is a *tridoshaja vyadhi*. It involves *mamsha*, *meda*, *twak dhatus*. It is occurring mainly due to *mandagni*. *Ayurveda* is the science which deals with this route cause of the disease.

For the management of *Arsha Roga*, *Bhesaja chikitsa* should be the primary approach to treat the *Arsha Roga*. So, at first, we need to correct *mandagni*. Accordingly, *deepan dravya* followed by *pachan dravya* helps in increasing digestive fire and facilitates digestion. *Anuloman dravya* deals with digestion of stools and then expelling them. Moreover, as per severity of symptoms of constipation, *Sharangdhar samhita* explains further treatment modalities of expelling of stools like – *Sransan*, *Bhedana*, *Rechana* which should be adopted as per the body constitution (*prakruti*) and disease manifestation. Treatment for haemorrhoids ranges from dietary and lifestyle changes to surgical excision and depends on the se-

verity of symptoms and response to conservative management.

Diet and lifestyle modification- For mild to moderate symptoms, a high-fiber diet and bulk dietary supplements can help alleviate pressure and bleeding. Patients should be encouraged to drink water and defecate without delay at the urge sensation. It is useful in all patients with grade I or II Haemorrhoids.

**Kshara karma-** *Kshara* is a caustic chemical, alkaline in nature obtained from the ashes of different medicinal plants. It is the superior most among the sharp and subsidiary instruments because of performing *Chhedana*, *Bhedana* and *Lekhana karma* along with *Tridoshahara* property. *Kshara karma* is more effective than the other modalities of treatment regarding *Arsha*, because they can be administered both internally and externally. The *Arsha* which are soft, extensive, deep seated, projectile is treated by *Kshara*.

**Agni Karma-** It is also an important para-surgical procedure and is still used extensively in surgical practice in modified form by way of electric heat cautery and freezing. Direct treatment of any lesion by *Agni karma* is regarded superior than other surgical and para-surgical measure because of its capacity to destroy the diseased tissues completely and its wide applicability even of lesions incurable by other measure. *Agni karma* is indicated in rough, fixed, broad and hard types of masses and mainly in *Vataja* and *Kaphaja arsha*. Those patients suffering from prolapsed and third-degree piles can be treated with *Agni karma*.

Application of *Ayurvedic* conservative management is found to be a safe, efficacious, cost effective. Day care surgery does not need admission. These *karmas* are useful in all ages and even in cardiac patients. There are no complications, no re-occurrence. Success rate is very high. No antibiotics required. So, we can say, holistic approach will be best for *Arsha* management.

## CONCLUSION

We can conclude that the proper diagnosis of the disease should be done appropriately. Then one should choose the right opinion for the treatment to get cured

soon from the disease. When we consider the therapy alternatives outlined by ayurveda and current science, we can see that many of the fundamentals of *arsha* remedies are the same. However, in terms of removing the fundamental problem, ayurveda has provided more illustrated additional possibilities.

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