

**STUDY THE ROLE OF APAMARGKSHARA IN ARSHA (HEAMORRHOIDS)****Mali Sandip Matu<sup>1</sup>, Vijay Bhagat<sup>2</sup>**<sup>1</sup>Assistant Professor, Shalyatantra Dept, <sup>2</sup>Assistant Professor, Samhita Dept, Sumatibhai Shah Ayurved Mahavidyalaya, Hadapsar, Pune, Maharashtra, India**ABSTRACT**

*Arsha* (Hemorrhoid) is engorgement of the heamorrhoidal venous plexus, characterized by bleeding P/R, constipation, pain, prolapsed and discharge. It is manifested due to improper diet, prolonged standing and faulty habit of defecation causing derangement of *tridosha*, mainly *vata*dosha, vitiated *dosha* localized in *gudavali*, *pradhan dhamani* and *mandharakala* and *vitiates twak, mansa, meda* and *rakta*, resulting in the *annawaha strotodushti*<sup>(1)</sup>. Modern management of *arsh* needs, mainly a surgical approach i.e. heamorrhoidectomy<sup>(2)</sup>, wherein the result was found to be less satisfactory. In this regard to determine a solution for satisfactory cure, the observation revealed that maximum advantage like minimum hospital stay, no bleeding during or after operation, no post-operative anal stenosis, a low cost, effective and more acceptable to different categories of people etc. were noticed in treatment. No adverse effects were recorded during the follow up period.

**Keywords:** *Arsh*, Hemorrhoid, *Apamargkshara*.

**INTRODUCTION**

Ayurveda has immense potential to solve many challenging and unresolved problem of the medical world. *Shalya Chikitsa* is one of the most important branches of ayurveda, which has its own originality with authenticity, contributing to the modern surgical technology to today, Sushruta Samhita is the only available text in surgical practice, and it has been opined that there are many diseases that are difficult to manage by conservative treatment alone. Among them *arsh* is one such grave disease, for which it has been included in *Ashtamahagada* by Sushruta, showing the gravity of this disease<sup>(3)</sup>. The present westernized lifestyle is adding to the prevalent rate of this disease. The incidence of this disease is showing augmentation with advancing age. At least 50% of the people over the age 50 years have some degree of

symptom related to *arsha*. In Sushruta Samhita, the whole treatment is covered under four categories of treatment i.e. *Bheshaja chikitsa* (palliative treatment), *Ksharkarma* (potential cauterization agent therapy), *Agnikarma* (direct cauterization agent therapy), *Shastrakarma* (operation)<sup>(4)</sup>. As far as modern modalities are concerned, the conservative treatment of piles consists of use of laxative and high residual diet. But not more than 80% of the heamorrhoidal symptom can usually be controlled by non-exclusion technique. Other methods of treatment like sclerotherapy, rubber band ligation, infrared photocoagulation, laser therapy, Lord's anal dilatation, cryosurgery, heamorrhoidectomy, heamorrhoidal artery ligation under Doppler/USG and stapled heamorrhoidectomy<sup>(5, 6)</sup> etc. are in practice. Despite a range of treatment

modalities, the options are limited in concern with their effectiveness. There still exist controversies and lack of agreement on the treatment strategies. Keeping in view authenticity, *Shalya Chikitsa* i.e. Para surgery, has been selected. Under the heading of Para surgery the *Ksharkarma* procedure, interpreted as potential cauterization application therapy is the specific field taken in the present research work<sup>(7)</sup>.

**AIM AND OBJECTIVE:** To study the efficacy of *Apamarga Kahara* in the management of *Arsha*.

**METHOD AND MATERIALS:**

Total 15 patients of I, II degree piles were selected from OPD and IPD of Kalpataru Ayurved hospital with informed consent of each and every patient. All general examinations and routine

laboratory investigations were done of all patients. All the patients had completed the course of treatment with local application of *Apamargakshara* in piles for 15 days daily. All the symptoms like P/R bleeding, *vedana* (pain), constipation and mucus discharge were recorded daily. Specially prepared proforma was used to evaluate the patients during the study and follow up. S.O.P.: *Apamargakshara* was prepared as mentioned in Ayurveda text<sup>(8, 9)</sup>. Position of the patient-Patient was lying in lithotomic position. Anal region was cleaned first with distilled water then cleaned with beta dine. All the dressing material used was autoclave. *Apamargakshara* was placed on piles properly for hundred word time count. Then washed with lime, same procedure was done daily for 15 days.

**Table: 1 Criteria of Assessment: All the patients registered for the current study were assessed on following parameters during the course of treatment.**

Grade	Bleeding P/R	Pain P/R	Constipation	Discharge P/R
0	No bleeding	Painless condition	Regular bowel evacuation	No discharge
1	Dropping	Dull pain and no requirement of medication	Hard stool once a day	Dropping
2	Syringing	Pain requires oral medication	Hard stool after two days	Staining
3	Streaming	Unbearable pain, requires injectable drug	Hard stool after more than two days	Scanty

**Patient`s selection:**

**A) Exclusion criteria:**

1. Bleeding piles
2. Prolapse of rectum
3. Fissure/Fistula in ano
4. Abscess
5. Malignancy
6. Chronn`s disease
7. Ulcerative colitis
8. Rectal polyp
9. Diverticulitis
10. Diabetes mellitus
11. Hypertension.

**B) Inclusion criteria:** Piles of I, II degree with any of the clinical symptom such as pain with constipation, prolapsed of pile mass, mucus discharge, itching.

**Withdrawal criteria:** Development of severe drug reaction, profuse bleeding or occurrence of any other serious illness

**Dietary regimen:** The patients were directed to follow dietary restrictions according to the etiology of hemorrhoids. Apart from this, all the patients were restrained from taking other medications, internally or externally, strong and spicy

foods, coffee, tea, increased quantity of milk and milk products, condiments, advice to take regular and proper fibrous diet with adequate of water.

**Diagnostic criteria:** Clinical diagnosis was done by assessing the presenting signs and symptoms of seven international criteria for piles such as bleeding P/R, pain, difficulty in passing stool, protrusion, confirmatory test like digital examination and proctoscopy were also done in each case.

**Laboratory investigation:**

1. Hematological investigation- Hb%, TLC, DLC, ESR.
2. Coagulation profile-BT, CT

3. Biochemical investigation-BSL, Lipid profile

4. Urine examination-Random, Microscopy for albumin, sugar, casts, crystals, microorganism.

**Follow up:** 15 days for every day.

**Disease criteria used for assessment:**

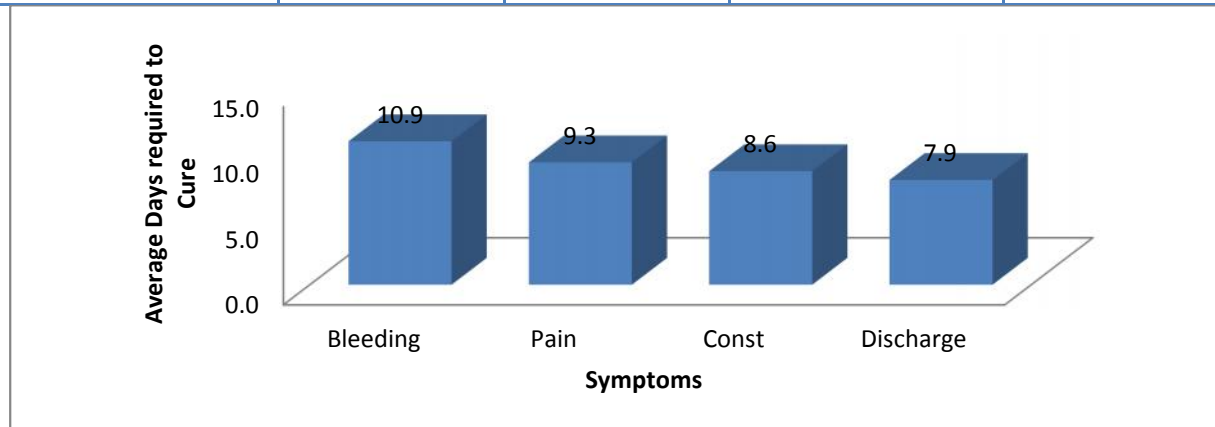
1. Heamorrhage per rectum.
2. Pain with relation to defecation.
3. Constipation.
4. Mucus discharge.

**RESULTS AND OBSERVATIONS:**

In the clinical study 15 patients were taken. The data collected observed, summarized and statistically presented as follows:

**Table: 2**

Symptom	N	Mean	Std. Deviation	Std. Error Mean
Bleeding	15	10.9	1.2	0.3
Pain	15	9.3	1.3	0.3
Const	15	8.6	0.8	0.2
Discharge	15	7.9	1.3	0.3



1. Bleeding

H<sub>0</sub>: Average days required to cure bleeding are 11 days. i.e.  $\mu=11$  days.

H<sub>1</sub>: Average days required to cure bleeding is not 11 days. i.e.  $\mu \neq 11$  days

Using one sample t-test we got the following result,

**Table: 3**

	Mean Difference	95% C.I.		t	df	P-Value
		Lower	Upper			
Bleeding	-.13333	-.7908	.5241	-.435	14	.670

**Conclusion**

From the above table since P-Value is more than 0.05, we cannot reject null

hypothesis hence we conclude that average days required to cure bleeding are 11 days.

2. Pain:

H<sub>0</sub>: Average days required to cure Pain are 9 days. i.e.  $\mu=9$  days.

**Table.4**

	Mean Difference	95% C.I.		t	df	P-Value
		Lower	Upper			
<b>Pain</b>	.26667	-.4421	.9754	.807	14	.433

**Conclusion:** From the above table since P-Value is more than 0.05, we cannot reject null hypothesis hence we conclude that average days required to cure Pain are 9 days.

3. Constipation:

**Table: 5**

	Mean Difference	95% C.I.		t	df	P-Value
		Lower	Upper			
<b>Const</b>	-.40000	-.8586	.0586	-1.871	14	.082

**Conclusion:** From the above table since P-Value is more than 0.05, we cannot reject null hypothesis hence we conclude that average days required to cure Constipation are 9 days.

4. Discharge:

	Mean Difference	95% C.I.		t	df	P-Value
		Lower	Upper			
<b>Discharge</b>	-.06667	-.7754	.6421	-.202	14	.843

**Conclusion:** From the above table since P-Value is more than 0.05, we cannot reject null hypothesis hence we conclude that average days required to cure Discharge are 8 days.

## DISCUSSION

Based on the etiology of the *tri-doshic* concepts, the mode of treatment in ayurveda is to rectify the pathology through the diet and drugs. Constitutional peculiarities of a person are also attributed to the preponderance of the different *doshas* in him/her even at the time of conception. An herbal remedy is made from a medicinal plants and used to prevent as well as to treat diseases and

H<sub>1</sub>: Average days required to cure Pain is not 9 days. i.e.  $\mu \neq 9$  days

Using one sample t-test we got the following result,

H<sub>0</sub>: Average days required to cure Constipation are 9 days. i.e.  $\mu=9$  days.

H<sub>1</sub>: Average days required to cure Constipation is not 9 days. i.e.  $\mu \neq 9$  days

Using one sample t-test we got the following result,

H<sub>0</sub>: Average days required to cure Discharge are 9 days. i.e.  $\mu=8$  days.

H<sub>1</sub>: Average days required to cure Discharge is not 9 days. i.e.  $\mu \neq 8$  days

Using one sample t-test we got the following result,

ailments or to promote healing and health. Therapeutic objectives in piles are shrinkage of pile mass, subsiding inflammation and infection in the anal region, preventing bleeding from the rectum, curing itching in the anal region and relieving constipation as well. The use of *apamargkshar* which is an astringent by nature immediately helps in stopping bleeding due to its *raktstambhak karma*. *Apamargkshara* despite the *ushna* and *tikshna* in nature, acted due to its *kashay* nature.

## CONCLUSION

*Apamarg kshara* because of its astringent property helps in stopping

bleeding and acts as highly effective in the management of hemorrhoids. Due to its *kashaya* nature it decreases the discharge. But time demands to work more and detail research on hemorrhoids

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