

**MANAGEMENT OF ABHYANTARA GUDA-ARSHA (GRADE-2) WITH 'KASISADI TAILA – MATRABASTI' AND TRIPHLA GUGGLU – A CASE STUDY**Arya Poonam<sup>1</sup>, Gujjarwar Shrinivas<sup>2</sup>, Singh Rajender<sup>3</sup>, Anamika<sup>4</sup><sup>1</sup>PG Scholar, P.G. Dept. of Shalya Tantra Shri Krishna Govt. Ayurvedic College, Kurukshetra, Haryana, India<sup>2</sup>Professor, PG Dept. of Shalya Tantra Shri Krishna Govt. Ayurvedic College, Kurukshetra, Haryana, India<sup>3</sup>Associate Professor, PG Dept. of Shalya Tantra Shri Krishna Govt. Ayurvedic College, Kurukshetra, Haryana, India<sup>4</sup>Assistant Professor, PG Dept. of Shalya Tantra Shri Krishna Govt. Ayurvedic College, Kurukshetra, Haryana, IndiaCorresponding Author: [drpoonamarya95@gmail.com](mailto:drpoonamarya95@gmail.com)<https://doi.org/10.46607/iamj4110042022>

(Published Online: April 2022)

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Article Received: 30/03//2022 - Peer Reviewed: 04/04/2022 - Accepted for Publication: 05/04/2022

**ABSTRACT**

**Background:** In Ayurveda, Haemorrhoids are associated with *Arsha Vyadhi*. Acharya Sushruta, the father of surgery explained more about *Arsha Vyadhi* in his book. *Arsha* is Fleshy's projection which causes a breakdown in the anal canal. The cause is "*Mandagni*" i.e., the hypoactivity of the digestive pancreatic enzymes leads to constipation, itching, burning sensation and pain in the guda region, and eventually bleeding. At present, the disease is called Haemorrhoids. The term 'Haemorrhoids' is derived from a Greek word. *Haima* (Bleed) + *Rhoos* (flowering), means bleeding. It is a slippery slope of the anus cushions unusually due to stress, constipation, or other causes. **Objectives:** "Acharya Sushruta" - a pioneer in the field of surgery has developed four treatments for haemorrhoids, (a) '*Bheshja, Kshara, Agni & Shastra Karma*. On the other hand, in modern procedures such as sclerotherapy, cryosurgery, lord's dilation, laser treatment, haemorrhoidectomy, etc. It works but unfortunately all procedures have their complications & reoccurrence. **Matra Basti:** Small amount of medicated oil enema is injected through the anus. Further, it has been advocated that a combination of local drug administration adjuvant to

palliative herbal drugs is an effective and acceptable treatment in the early stage of Haemorrhoids. So, it was decided to study the efficacy of Ayurvedic conservative management in the management of *Gudarsha* with special reference to Grade II internal haemorrhoids. **Material And Methods:** In this observational study, a male patient aged 38-year-old, who has diagnosed with a case of *Gudarsha* (Grade 2-internal haemorrhoids) was treated with *Kasisadi Tail Matrabasti* (medicated enema locally 60 ml 1 sitting, 7 days daily) adjuvant to *Triphala Guggulu* -internally for 30 days. The clinical features assessed for prognosis were per rectum bleeding, size, and color of the pile pedicle. Periodic follow-up of the patient was done weekly till the completion of treatment.

**Keywords:** *Kasisadi Taila, Guda-Arsha, Triphala, Haemorrhoids.*

## INTRODUCTION

Sushruta Samhita is one of the most important ancient medical manuscripts and is regarded as the original text of Ayurveda. This word pile is derived from the Latin word 'pila' which means a 'ball'. Thus, growth in the anus which is similar in ball like shape is designated as piles.<sup>1,2</sup> The analysis was based on 4 data sources: from the United States, the National Health Interview Survey, the National Hospital Discharge Survey, and the National Disease and Therapeutic Index; from England and Wales, Illness Statistics from General Work. Results show that 10 million people in the United States complain of haemorrhoids, with a 4.4% prevalence rate. In Ayurveda, this disease is called Arsha which is Flesh's projection that causes a breakdown in the anal canal and kills life as an enemy. The cause of this disease is primarily "Mandagni" i.e. the hypoactivity of the digestive pancreatic enzymes leads to constipation, itching, burning sensation, and pain in the *Guda* region and eventually bleeding and thus *Arsha* emerges.<sup>3</sup>

At present, the disease is called Haemorrhoids. The term 'Haemorrhoids' is derived from the Greek word. *Haima* (Bleed) + *Rhoos* (flowering), means bleeding. It is a slippery slope of the anus cushions unusually due to stress, constipation, or other causes.<sup>4</sup> "Acharya Sushruta" - a pioneer in the field of surgery has developed four treatments for haemorrhoids, apparently categorized based on specific symptoms. (a) '*Bheshja Chikitsa*' (b) '*Kshara Karma*' (c) '*Agni karma*' (d) '*shastra karma*'. "*Kshara Karma*" is very effective and acceptable in all medical procedures because it performs actions in both shastras and *Anushastra* and acquires all three doshas.<sup>5</sup> Prime cause of *Arsha* is

vitiating of *Jatharagni* leading to vitiation of *Tridosha*, mainly *Vata Dosha*.<sup>6</sup> These vitiated Doshas get localized in *Guda Vali* and *Pradhana Dhamani* which further vitiates *Twak, Mansa, and Meda, Dhatus* due to *Annavaha srotodushti* leading to the formation of *Arsha*.<sup>7,8</sup> Furthermore, it is advocated that conservative management by a combination of local drug administration adjuvant to palliative herbal drugs is an effective and acceptable treatment in the early stage of *Gudarsha* or Haemorrhoids. In Bhaishajya Ratnavali, a distinct treatment regimen *Kasisadi taila matrabasti* locally has been described to treat *Gudarsha*. Practically also it is noticed that conservative management by a combination of local drug administration adjuvant to palliative herbal drugs is effective and acceptable first-line management of *Arsha*.<sup>9, 10</sup> Hence, to study the efficacy of *Kasisadi taila matrabasti* (medicated enema -with 1 sitting daily till 7 days) adjuvant to *Triphala Guggulu* internally (to pacify *Jatharagni* and cure constipation, which is the root cause of *Arsha*) was prescribed to the patient who was diagnosed with *Gudarsha* (Grade-II internal hemorrhoid). Periodic follow-up of the patient was done till the completion of treatment to assess the result of the treatment. The observation revealed that this specific treatment remedy proved very effective in relieving symptoms of *Gudarsha*.

## METHODOLOGY

This was an observational case study, wherein, a patient diagnosed with Grade-II internal hemorrhoid was treated with a *Kasisadi taila matrabasti* -locally along with *Triphala Guggulu* -internally and the assessment of the effect of treatment was observed pe-

riodically. Further, counseling of patient, written informed consent was taken after an explanation of the proposed line of treatment, following International Council for Harmonised Tripartite guidelines.

### CASE REPORT

A 38-year-old male patient, who had symptoms such as bleeding per rectum- on and off, pain in the anal region, and constipation for 6 months approached Shalya tantra OPD of shri Krishna govt. Ayurvedic college Kurukshetra, Haryana for Ayurvedic non-surgical management. Further, pain in the anal region and per rectal bleeding aggravated over the last 7 days. He did not reveal any significant past illness, drug, or relevant family history. The personal history revealed that the patient was non-vegetarian, with a good appetite and meals at a regular time and frequency. His sleep pattern and micturition were normal, no history of any addiction. The patient had no previous surgical history.

**General Examination:** Pallor, Icterus, Clubbing, Cyanosis, Oedema, and Lymphadenopathy was found absent. The patient was hemodynamically stable, vital parameters recorded as **Pulse** – 74/min, **Respira-**

**tory Rate** – 18/min, **B.P.** – 110/70 mm of Hg.

**Local Examination:** Bulge was seen at anal verge at anal region 7 O'clock position. Per rectal examination showed spasm, slight bleeding, and discharge but no tenderness from the anal region.

**Proctoscopy** showed- A grade II internal hemorrhoid seen at 3, 7 & 11 O'clock positions.

**Investigation:** The routine test CBC, Blood Sugar (Fasting & PP), BT&CT & LFT test results were found within normal limit.

**Final Diagnosis-** Based on physical examination and clinical findings, the patient was diagnosed with a case of Abhyantar *Gudarsha* (Grade II Internal Haemorrhoid).

**Plan of treatment-** The patient was treated with *Kasisadi taila matrabasti* (1 sitting daily till 7 days) adjuvant to *triphala Gugglu* internally for 30 days (till completion of treatment).

### ASSESSMENT PARAMETER

The parameters assessed to record the efficacy of treatment were per rectal bleeding, size of pedicle, and color of pile pedicle (on proctoscopy)<sup>11</sup>

**Table 1:** Gradation parameters for assessment

Para meters	Gradation
<b>1 Per Rectal bleeding (as per patient complaints)</b>	
Baseline	+++
50% relief	++
25% relief	+
Complete relief	0
<b>2 Size of the pedicle (on proctoscopy)</b>	
Size resembling the size of a groundnut or larger than a groundnut	+++
Size resembling the size same as peanut	++
Size resembling the size smaller than peanut	+
No pile pedicle visualized	0
<b>3 Color of pile pedicle(on proctoscopy)</b>	
Bluish or Blackish colour	+++
Reddish colour	++
Pinkish colour	+
Colour resembling that of Mucosa	0

**Drug Profile:**

**1. Matrabasti** (for medicated enema)- *Kasisadi Taila*

Ingredients-

- i. *Kasisa* (FeSO<sub>4</sub>, H<sub>2</sub>O)
- ii. *Danti mool* (*Baliospermum montanum* wild. Moll Arg.)
- iii. *Saindhav* (Rock salt)
- iv. *Karviramool* (*Neriumindicum* Mill)
- v. *Chitrakmool* (*Plumbago zeylanica*)

**Kasisadi Taila preparation:** *Kalka* of the drug *Kasisa*, root of *Danti*, rock salt, root of *karavira* and *Chitrakmool*. prepared in equal parts and processed in *tila taila* as per the standard medicated *tail* preparation method.

**Internal medicine** – *Triphala Guggulu* - 500 mg tablet prepared by standard method.

**Kasisadi Taila Matrabasti procedure-**

The patients were instructed to come after taking a light diet. The perianal region was cleaned with a cotton piece soaked in betadine and wiped with dry gauze. Thereafter, the patient was placed in the left lateral position. The anal region is smeared with a small quantity of *Kasisadi taila*. After removing the air from the disposable, single-use, sterile *matrabasti* pouch, the nozzle was inserted into the anus and the medicine was administered slowly. After the administration of *Kasisadi taila basti*, the patient was advised to lie in the supine position for 30min. The maximum duration for the return of the

*sneha basti* mentioned in Ayurvedic classic text is 3 *Yama* which is 9 hours. Further, it has been mentioned that *matrabasti* can be given at any time and in any season without any restriction<sup>12</sup>

**OBSERVATION & RESULT**

This patient who was diagnosed with a case of Grade - 2 internal hemorrhoids was given *Kasisadi taila matrabasti* - 1 sitting daily for 7 days. There was significant relief in rectal bleeding, pain, and constipation on local examination. After Day 5, the size of the pile pedicle was reduced to peanut size and colour of the pile pedicle also changed from bluish to red. The bleeding per rectum stopped completely on Day 7, wherein, the size of pile pedicle was reduced significantly to smaller than peanut size on Day 14 of treatment. Similarly, the pile mass colour turned to pink on Day 14 and further resembled the mucosa on Day 21. The patient was called daily till Day 7, and thereafter, every week for follow-up till 28<sup>th</sup> days of treatment and the prognosis was recorded accordingly. *Triphala Guggulu*- 500 mg, 2 tablets at bedtime was given to the patient till the completion of treatment with Lukewarm water aiming to cure constipation. The present case study showed that *Kasisadi taila matrabasti* adjuvant to *Triphala Guggulu* was effective in relieving symptoms like bleeding per rectum, reducing size and colour of pile pedicle, and also proved safe and user friendly in terms of administration of drug locally.

**Table 2:** Overall efficacy of the therapy

Symptoms	0	1 <sup>st</sup> day	2 <sup>nd</sup> day	3 <sup>rd</sup> day	4 <sup>th</sup> day	5 <sup>th</sup> day	6 <sup>th</sup> day	7 <sup>th</sup> day	14 <sup>th</sup> day	21 <sup>st</sup> day	28 <sup>th</sup> day
Bleeding PR	+++	+++	+++	++	+	+	+	0	0	0	0
Size of Pile pedicle	++	++	++	++	++	+	+	+	+	+	+
Colour of Pile Pedicle	++	++	++	++	++	++	++	++	+	+	+



**Figure 1:** Before treatment status



**Figure 2:** Removal of the cap from the nozzle



**Figure 3:** Insertion of the nozzle Figure



**4:** After treatment recovery through the anal orifice

## DISCUSSION

In the present observational case study, *Kasisadi taila matrabasti* (locally 60 ml 1 sitting, 7 days daily) was given to the patient of *Gudarsha* (Grade II internal hemorrhoids). The assessment of therapy was recorded based on prognosis in symptoms and clinical findings. Along with *matrabasti*, *Triphala Guggulu* 500 mg tablet -2 tablets at bedtime given to the patient daily till completion of treatment. This specific treatment regimen showed significant relief in the symptoms as bleeding per rectum, reducing the size of the pedicle and colour of the pile pedicle to normal. This proved that in the primary stage of bleeding Hemorrhoids, palliative medicinal treatment is a more effective regimen. *Kasisadi taila matrabasti* was given with the help of a specially designed sterile, disposable and single-use pouch –the kit was the patient-friendly mode of treatment. The *Matrabasti*

expels the vitiated *Doshas* along with *mala* from the body and also it acts as *Shamana*, *Brimhana*, *Vatahara*, and even *Balya*. Vagbhata has mentioned that *Matrabasti* improves *Varna* and *Bala*. He adds that it can be given regularly, which is indicated for *Bala*, *Vridhdha*, and *Alpagni* person.<sup>13</sup> Although *Matra* is less it has widespread action throughout the body. Sushruta has given the dose as  $\frac{1}{2}$  of the dose of *Anuvasana Basti* and according to him the dose of *Anuvasana Basti* is  $\frac{1}{2}$  of the dose of *Sneha Basti*.<sup>14</sup> In *Sneha Basti*, the dose given is  $\frac{1}{4}$  of the total dose of *Niruha Basti* i.e. 6 *Pala* (24 *Tola*). Hence, the dose of *Matrabasti* is  $1\frac{1}{2}$  *Pala* = 6 *Tola* = 72 ml. *Matrabasti* can be administered anytime irrespective of age, day, and time. As the quantity of *Matrabasti* is less, it remains in the body for a longer duration compared to other *Basti* and does not produce any complications even though it does not expel out. Further,

*Kasisadi taila matrabasti* helped in a reduction in the size of pile pedicle because of its corrosive effect on the wall of the affected vessels and mucosa by acidic nature pH – (3.7) and *lekhana* property.<sup>15</sup> Similarly, *Triphala Guggulu* given internally for 1 month, pacifies the root cause of hemorrhoid that is constipation, thus, helps in the permanent cure of *Arsha*.

## CONCLUSION

In the case study, *Kasisadi taila matrabasti* (medicated enema -locally) along with *Triphala Guggulu* (internally) proved efficacious in relieving symptoms such as bleeding per rectum, size, and colour of pile pedicle without any untoward effect. The combination regimen given to this *Arsha* patient proved effective, safe, and user-friendly. *Matrabasti* procedure with advanced, sterile, disposable, single-dose enema pouch found painless, user-friendly, ambulatory technique. Further, to validate its significance and establish this conservative treatment modality, a large number of cases need to treat with this combination treatment.

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**Source of Support: Nil**

**Conflict of Interest: None Declared**

How to cite this URL: Arya Poonam et al: Management Of Abhyantara Guda-Arsha (Grade-2) With 'Kasisadi Taila – Matrabasti' And Triphala Guggulu – A Case Study. International Ayurvedic Medical Journal {online} 2022 {cited April 2022} Available from: [http://www.iamj.in/posts/images/upload/1088\\_1093.pdf](http://www.iamj.in/posts/images/upload/1088_1093.pdf)