

A Case Study: Effect Of Suranadi Lepa in The Management of Arsha W.S.R. To 1st & 2nd Degree Internal Hemorrhoids

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Abstract—Nowadays the life style of people is very different. people are preferring the junk foods, fast foods over the healthy, satvik *ahara*, which earlier was a pattern of healthy life of people. Now non *satvik ahara*, fast food, junk food is responsible for every issue related to health. On of those issues being the constipation and which causes the hemorrhoids. The current case study is about the arsha w.s.r to 1st and 2nd degree hemorrhoids. *Arshas* being the most common and one of the 8th most intractable disorders i.e. '*Ashta Mahagada*' mentioned by Acharya Sushruta & Vagbhata. In Ayurveda, *Mandagni* is mentioned as a main causative factor for the development of various disorders. Too much pressure on the veins in your anus or rectum, as well as irregular bowel movements, cause hemorrhoids. This pressure and irritation lead to swelling and inflammation of your veins. Vitiating of *agni* causes the constipation and then the *arshas* therefore for the management of *arsha*, *suranadi lepa* application is performed showing the significant results. along with the lepa a *anulomaka avipattikara choorna* is given internally to relieve the constipation.

Index Terms—Arsha, Avipattikara Choorna, Internal Hemorrhoids, Suranadi Lepa.

1. INTRODUCTION

The term '*arsha*' is gotten from "ru gatau" dhatu with the addition "asun", gives the significance of as vicious as adversary. It is the commonest ano rectal sickness and influences anybody whenever and wherever¹.

In *ayurveda*, *mandagni* is mentioned as a main causative factor for the development of various disorders².

Among them, one of the important groups is ano-rectal disease and one of these is *arsha* which is commonly known as 'haemorrhoids' or 'piles' is quite common in humans. *Arshas* being the most common and one of the 8th most intractable disorders i.e. '*ashtau mahagada*' mentioned by *acharya sushruta & vagbhata*.^{3,4}

Arsha occurs in *guda pradasha*, which is the vital *marma*⁵, and it is well known for its chronicity and difficult management. This shows the gravity of the disease. *Acharya sushruta* mentioned 4 main types of treatments for the management of *arsha* which includes *bheshaja*, *kshara*, *agni* and *shastra karma*⁶. *Bheshaja chikitsa* as first line of treatment for this disease. Because there is no complication, no fear for pain, bleeding or discomfort. The patients suffering from 1st & 2nd degree haemorrhoids will be selected for the present study.

Vitiated *doshas* in *arsha* disease get localized in the area of *gudavali*⁶. *Arsha* is one of the *adhimamsha vikara* which is formed at the site of *gudavalis*, along with vitiated *doshas* it also vitiates *twak*, *mamsa* and *medas*⁷. Fleshy bud or growth in the anal region and agony to the patients are the most characteristic features of *arsha*.

Haemorrhoids are defined as the dilated veins within the anal canal in the subepithelial region formed by radicles of the superior, middle and inferior rectal

veins. According to modern, arsha is compared to haemorrhoids. Haemorrhoids are defined as the dilated veins within the anal canal in the subepithelial region formed by radicles of the superior, middle and inferior rectal veins.⁸

Haemorrhoids are an extremely common anorectal problem reported since vedic period with a prevalence rate that is highest among all the anorectal disorders. The prevalence rate of haemorrhoids is 4.4 % worldwide approximately 40 to 75% population are suffering from haemorrhoids. Haemorrhoids are more common in humans and effect 1 in 20 indians. Symptomatic haemorrhoids affect at least 50 of the populations at some phase and 5% of the populations at any given time.⁹

In spite of modern, the present therapeutic modalities like haemorrhoidectomy, sclerotherapy, cryosurgery, rubber band ligation, infrared photo coagulation etc, these need high cost with disadvantages. Post-operative complications such as haemorrhage, secondary infections etc.

Lepana karma is one of the effective procedures and it can replace sastra karma and has supreme place in the management of arsha and has lekhana, shodana, ropana and tridosha property¹⁰ and which cures in shorter time as well as economically better.¹¹

Suranadi lepa clinically, *suranadi* ointment demonstrated significant relief in hemorrhoidal symptoms and was well tolerated. Mechanism: traditional ayurvedic principles back its use, hinging on its anti-inflammatory, cooling (*shita veerya*), and vascular-stabilizing (*rakta-stambhana*) actions.

To relieve the further constipation *avipattikara choorna* acts as *rechana* (laxative) and *vata*-balancing properties are central: *avipattikara churna* is traditionally used to alleviate constipation by acting gently to relieve bowel obstruction while pacifying aggravated *vata dosha*.

Here a case study is done on the disease *arsha* i.e 1st and 2nd degree hemorrhoids. Treatment being *suranadi lepa* externally and *avipattikara choorna* internally.

2. OBJECTIVES

- To study *arsha* in detail with the help of case.
- To evaluate the effect of *suranadi lepa* in the management of *arsha* w.s.r to 1st and 2nd degree hemorrhoids.

- To study treatment principles/ *siddhanta* / protocol of ayurveda for the management of *arsha*.

3. MATERIAL AND METHODS

- a) Source of Data: a patient suffering from the *arsha* was selected from the dept. of *shalya tantra* opd from R.P.K ayurvedic hospital ilkal, dist bgalkote
- b) Study design: a single case study to evaluate the effect of *suranadi lepa* in the management of *arsha*.

- Criteria for selection of patients:

Diagnostic criteria

Diagnosis will be based on clinical features of *arsha* and internal hemorrhoids.

1. *Raktasrava* [bleeding per rectum]-Bright red, painless bleeding, splashes in the pan as the stools comes out.
2. Prolapse of Hemorrhoids during defecation but reduces spontaneously.
3. On proctoscopy, internal Hemorrhoids will be seen bulging into the proctoscope.

a. Inclusion criteria

- Patients with 1st and 2nd degree hemorrhoids.
- Patient with Hb >8 gm %.
- 20 Patients of age between 18 to 60 years were taken
- Single or multiple Hemorrhoids at 3,7,11 clock position.

b. Exclusion criteria

- Known case of 3rd and 4th degree hemorrhoids.
- Patients with Hb <8 gm%.
- Pregnant and lactating women.
- Known case of HIV, HBsAg excluded.
- Patients below 18 and above 60 years are excluded.
- The associated conditions like Fistula in ano, fissure in-ano, Ulcerative colitis, chron's disease, CA of Rectum.
- Hemorrhoids in patients with cirrhosis or portal hypertension.

4. CASE HISTORY

4.1. H/O Present illness;

45 years old, Male, c/o bleeding p/r after defecation, feeling of incomplete poop, 1 week, associated complaints of burning sensation in anal region after defecation, mild itching sensation sometimes. The Patient was apparently asymptomatic 1 week ago. He had gradually developed above symptoms. He was diagnosed with 2nd degree internal hemorrhoids by doing examination at some modern hospital. and was prescribed modern medical treatment. But he didn't get any relief. Since last 2 days, his bleeding p/r got worsened. So he approached R.P.K. ayurvedic hospital Ilkal, dist. Bagalkote.

Past illness: No history of any major medical or surgical illness.

Diet : Veg and non-vegetarian both.

Family history: nothing significant.

Medication history: Not Specific.

Examination of the patient:

Vitals:

- On examination PR- 84/min
- BP- 120/70 mm of Hg
- Spo2 : 99%
- Temp: normal

Systemic examination

- RS- B/L NVBS, no added sounds
- CVS- S1,S2 Normal
- CNS- Conscious and Oriented
- P/A- Soft and nontender

Local examination

Position: lithotomy

Inspection: Performed before digital or instrument exam.

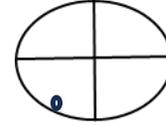
At rest: hemorrhoid mass was not visible externally.

On straining (asked the patient to bear down or cough) Hemorrhoids prolapse out of the anal canal but then spontaneously reduced once the strain is relieved.

Palpation: soft, pink, moist swellings at the anal opening

Digital rectal examination (p/r): Used a lubricated gloved finger to gently insert into the anal canal, a soft small masslike structure felt.

proctoscopy



Inserted a well-lubricated anoscope gently into the anal canal.

Asked the patient to strain during the exam.

Findings: Prolapse into the anoscope on straining Red, engorged, cushion-like mucosal bulge at right posterior position (at 7 o'clock position)

4.2. Ashtavidha Pareeksha:

- *Nadi: VataPittaja*
- *Mala: Asamyak* (Constipation i.e., hard, sticky, unsatisfactory bowel evacuation most of the time)
- *Mutra: Anavilam, Samyak Mutrapravartana*
- *Jihwa: Saama*
- *Sabda: Prakrita*
- *Sparsa: Anushna Aseeta*
- *Drik: Prakrta*
- *Akriti: Madhyamam*

Agni: Vishamagni,

Abhyavaharana

Shakti and Jarana Shakti reduced.

Koshta: Madhyamakoshta

Prakruti: vatapradhana kaphaja

Nidana Aharaja nidana: lavana, viruddha ahara, adhyashana, ajirna bhojana, junk food intake (bajji, deep fried items, chips)

Viharaja nidana: more time spent in squatting position for passing stool, diwaswapna, ratri jagarana, avyayama

Manasika: krodha, shoka, chinta

• *Samprapti :*

The pathogenesis of Arshas, according to Sushruta, is caused by Nidanas, which lead to the vitiation of Doshas in one, two, or more combinations, along with Rakta. Doshas then move downward through the Mahadhamani, affecting the Gudavalitraya and causing Arshas in people who have Mandagni and other local causes.¹²

According to Charaka, Arshoroga is created when all the Doshas get vitiated, followed by Bahya and Abhyantara rogamarga, and has an impact on Gudavalitraya.¹³ Vagbhata asserts that vitiation of the Doshas results in the formation of Mandagni, vitiation of the Apanavayu causes the

stagnation of Mala in Gudavali, and prolonged contact with Mala results in the emergence of Arshas.¹⁴

4.3. Samprapti Ghatak

- i. Dosha - vata Pradhana, tridosha
- ii. Dushya – Rakta, Mamsa, Medas and Twak.
- iii. Strotodushti- raktavaha Strotas, mamsavaha Strotas, medavaha, rasavha strotas.
- iv. Vyadhi Avastha- Sama Avastha, local dilated veins within the anal canal in the subepithelial region
- v. Agni- jatharagni
- vi. Udhbhava sthana- amashaya, pakshaya
- vii. Avayava Vikriti - Gudavalitraya
- viii. Vyadhimarga- abhyantaraMarga
- ix. Vyadhi vinicshaya-arsha.
- x. Adhistana- guda
- xi. Sadhyosadhyatva- Sadhya vyadhi

4.4. Treatment (Chikitsa)

Considering the arsha here lepa as a bahirparimarjana chikitsa is applied i.e with suranadi lepa on the internal hemorrhoid. Avipattikara choorna given internally.

• Surandi Lepa

Ingredients of suranadi lepa: suranakanda, haridra, chitraka, tankan, guda, aranala.

Sufficient quantity of churna of all ingredients in equal quantity taken, mixed with aranal to make paste and applied on the hemorrhoid by using applicator with the help of proctoscope.

Table no.1; treatment given

Kalpa	Suranadi Lepa
Matra	Quantity sufficient
Kala	Lepa L/A-once daily
Treatment Duration	7 days
Observation period	4 th and 7 th day
Follow up	Taken on 14 th day

Medicine – Avipattikara choorna

Ingridients : shunti, maricha, pippali, triphala, musta, vidanga, saindhava lavana, ela, patra, lavanga, trivrut, sharkara.

Dose – 5gm

Anupana – Warm water

Duration – At bedtime

Purpose – Bowel regulation

4.5. Pathyapathya

- i. Pathya: Ahara: include fiber-rich diet, warm water intake of green leafy vegetables, Vihara: mild exercise, regular cleansing and hygiene straining much on toilet seat
- ii. Apathya: Ahara: Avoid spicy, oily, and constipating foods., Viruddhahara, fried foods. Vihara: avoid. Avoid squatting position with much pressure, Diwaswapna, Ratri jagarana, Avyayam. anger, anxiety

Table 2: Assessment of symptoms before and after treatment.

S.no	PARAMETERS	BT	AT
1.	Raktasrava [bleeding per rectum]	3	0
2.	Pile mass	1	0

Table 3: Grading for subjective & objective parametrs

S.NO	SUBJECTIVE PARAMETER	GRADING
	PARAMETERS	
	Raktasrava [bleeding per rectum]	
1.	No bleeding	0
2.	Soiling of faeces with blood or staining of hand on cleaning after defecation	1
3.	Drop by drop 5-10 drops	2
4.	Drop by drop > 10 drops / during entire act of defecation	3
5.	Jet of blood / splashes in the pan	4
S.NO	OBJECTIVES PARAMETERS	
	Size of the pile mass	
1.	Complete regression of the Pile mass	0
2.	Size of tip of the little finger [approximately 2 cm]	1

3.	Size of tip of the Index finger [approximately 3 cm]	2
4.	Size of tip of the Thumb [approximately 4 cm]	3

5. RESULT

suranadi lepa by applying on the hemorrhoid along with *avipattikara choorna* internally shown good results. it has reduced symptoms as shown in the table.2. There is significant results shown with before and after treatment.

6. DISCUSSION

In this study observations were done before and after the intervention based on the symptoms and the results are mentioned in the table 2. The result shows reduction in all the symptoms, being completely cured. The present study was aimed at finding a safe and effective method for managing *arsha*.

Ingredients of *suranadi lepa* are *suranakanda, haridra, chitraka, tankan, guda, aranala*. *Suranadi lepa* is having properties like *Raktapittakara, Deepana, Kaphahara, Ruchya* having *katu* and *kashay rasa* which stop bleeding in hemorrhoid.it Reduces inflammation and swelling, acts as Anti-inflammatory, antiseptic, Absorbs moisture, reduces edema, *Shunthi* Improves circulation, reduces pain

Shothahara (anti-inflammatory)

reduces inflammation and edema in prolapsed piles mass

Vedanahara (analgesic)

alleviates pain during and after defecation

Stambhana (astringent)

reduces bleeding by vasoconstriction

Dosha shamana

especially pacifies *vata* and *kapha doshas*, which are often vitiated in *arsha*

Suran-kand has special property as *Arshoghna* (*Prabhav*). So it is the classical drug of choice in *Arsha*. As it is *ushna, tikshna guna* helps *rakta dhatu* to flow in regular manner without any congestion at *rakta-vahi sira* and hence *shotha* (inflammation)

decrease and size of pile mass seems to be decreased as *ushna* *guna* dilates the channel of *raktavaha srotas*.

• All ingredients' (*Suran Chitrak, Sunthi*) in this formulation are *katu ras pradhan* and *ushna virya* so they help in reducing the blood accumulation as they are said to be having action as "*Shonit Sanghat Bhinnati*". It is stated that *Arsha* is the congestion of vein and *katu ras* dissolve the congestion.

• The main cause of *Arsha* is *Mandagni* and *Vibandh*. So *chitrak* and *Sunthi* are having *Deepan.pachan* and *vata anulomak guna* due to its *ushna virya* and *katu vipak*.

Avipattikara choorna does the following actions. *Rechana*-Softens stool and prevents straining during defecation *Deepana,Pachana* - improves digestion, reduces *Ama*, a root cause of *dosha* vitiation.*Vatanulomana* - Corrects *Apana Vata* dysfunction—restores normal bowel movement. *Pitta-Shamana*-Reduces inflammation and burning sensation associated with piles.

7. CONCLUSION

The results suggested that *suranadi lepa* showed significant result after treatment in *arsha*, the efficacy of the treatment was highly significant. Here through the *lepa* application *samprapti vighatana* can be done so the *arsha* can be treated well with *suranadi lepa*. Hence it can be suggested that *suranadi lepa* along with *avipattikara choorna* can be used in the patients suffering from *arsha*.

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Disclosure of conflict of interest

The authors declare that there was no conflict of interest regarding the publication of this manuscript.

Statement of informed consent

Written informed consent was taken from patient.

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