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Review Article

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A LITERARY STUDY ON AYURVEDIC MANAGEMENT ON ARSHA (HEMORRHOIDS): AN ANALYSIS OF TRADITIONAL AND MODERN APPROACHES

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ABSTRACT

Background: Arsha, commonly known as hemorrhoids or piles, is one of the most prevalent anorectal disorders and is classified under the Asthamahagada (eight great diseases) in Ayurvedic literature. The condition has been recognized for thousands of years and remains a significant health issue, with nearly half of the population experiencing hemorrhoidal symptoms at some point in their lives. The primary etiological factors include improper dietary habits, sedentary lifestyle, anatomical deformities, and hereditary predispositions. Clinically, Arsha is characterized by the engorgement of the hemorrhoidal venous plexus, along with the abnormal displacement and enlargement of the anal cushion, leading to symptoms such as inflamed or prolapsed pile mass, bleeding per rectum, and discharge. Objective: This study aims to explore the Ayurvedic understanding and management of Arsha, comparing traditional therapeutic approaches with modern medical treatments, particularly focusing on the recurrence rates and long-term efficacy. Methods: A detailed review of classical Ayurvedic texts, including Charaka Samhita, Sushruta Samhita, and Ashtanga Hridayam, was conducted to gather insights into the traditional classification, etiology, and treatment modalities for Arsha. The study also examines contemporary research on Ayurvedic treatments and compares them with modern medical procedures such as hemorrhoidectomy. The Ayurvedic treatments discussed include Bheshaj Chikitsa (conservative treatment), Kshar Karma (alkali therapy), Agnikarma (thermal cauterization), Shastra Karma (surgical excision), and Kshar Sutra therapy. Results: The review identifies multiple Ayurvedic treatment modalities based on the chronicity and severity of Arsha. Bheshaj Chikitsa involves dietary regulation and the use of herbal formulations like Triphala and Haritaki to manage symptoms

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in the early stages. Kshar Karma and Agnikarma are indicated for more advanced cases, providing minimally

invasive options with a focus on reducing recurrence. Kshar Sutra therapy, a specialized procedure involving

the application of a medicated thread, has demonstrated significant success in managing both internal and

external hemorrhoids, with a lower recurrence rate compared to conventional surgical methods. Modern

hemorrhoidectomy, while effective, carries a higher risk of disease recurrence and postoperative

complications. **Conclusion:** Ayurvedic management of Arsha offers a comprehensive approach that addresses

the underlying causes and provides long-term relief. The combination of dietary and lifestyle modifications,

along with various therapeutic interventions like Kshar Sutra and Kshar Karma, presents a viable alternative

to conventional hemorrhoidectomy, particularly in reducing recurrence rates. Further clinical research is

needed to establish the comparative efficacy of these treatments in larger patient populations.

Keywords: Arsha, Hemorrhoids, Bheshaj Chikitsa, Kshar Sutra, Anorectal disorders.

INTRODUCTION

Arsha, commonly known as hemorrhoids or piles, is a prevalent anorectal condition

characterized by the swelling and inflammation of veins in the rectum and anus. This

disorder has been acknowledged for thousands of years and holds a significant place in both

Ayurvedic and modern medical literature due to its chronicity and the discomfort it causes.

Hemorrhoids are essentially varicosities or engorgements of the hemorrhoidal venous

plexus, leading to symptoms such as pain, itching, and rectal bleeding.[1]

In Ayurveda, Arsha is one of the "Astha Mahagada" (eight grave diseases), as classified by the

ancient sage Sushruta. This classification highlights the seriousness of the condition,

particularly given its location in the Guda (anal) region, which is considered a Marma (vital

point) in Ayurvedic anatomy. [2] The chronic nature of Arsha, coupled with its association

with vital areas of the body, makes it a challenging condition to manage, requiring a

multifaceted approach that addresses both the symptoms and the underlying causes.

The etiology of Arsha is complex, with several factors contributing to its development. These

include irregular bowel habits, such as chronic constipation or diarrhea, a low-fiber diet,

prolonged sitting, and increased intra-abdominal pressure due to factors like pregnancy or

obesity.[3] Genetic predisposition and aging also play a significant role in the occurrence of

hemorrhoids. The condition is further classified based on various criteria, including the type

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of bleeding, the predominance of specific Doshas (Vata, Pitta, and Kapha), and the prognosis,

ranging from curable to incurable.[4]

Arsha is traditionally treated in Ayurveda through a combination of dietary and lifestyle

modifications, herbal remedies, and specialized procedures like Kshar Sutra therapy, which

has gained recognition for its effectiveness in managing both internal and external

hemorrhoids. The holistic approach of Ayurveda not only focuses on alleviating the

immediate symptoms but also on correcting the root causes to prevent recurrence. This

comprehensive management strategy underscores the importance of individualized care in

treating Arsha, making it a significant focus of both traditional and modern therapeutic

practices.[5]

Objective: This study aims to explore the Ayurvedic understanding and management of

Arsha, comparing traditional therapeutic approaches with modern medical treatments,

particularly focusing on the recurrence rates and long-term efficacy.

MATERIAL AND METHODS

Data Sources:

Classical Ayurvedic Texts: Key Ayurvedic scriptures, including Charaka Samhita, Sushruta

Samhita, and Ashtanga Hridayam, were reviewed to gather information on the Ayurvedic

understanding of Arsha, including its etiology, classification, and traditional treatment

methods.

Contemporary Ayurvedic Literature: Additional insights were derived from modern

Ayurvedic texts, research articles, and clinical studies published in peer-reviewed journals,

focusing on the application of Ayurvedic treatments for hemorrhoids in current practice.

Data Collection:

Ayurvedic Concepts: Key concepts related to the causes, classification, and treatment of

Arsha were extracted from classical Ayurvedic texts. These included descriptions of Dosha

imbalances, dietary factors, and various therapeutic interventions, such as Bheshaj Chikitsa

(conservative treatment), Kshar Sutra.

CONCEPT OF ARSHA

Arsha, commonly referred to as hemorrhoids in modern medical terminology, is a significant condition in Ayurveda, characterized by the swelling and inflammation of veins in the rectal and anal regions. This disorder is recognized in Ayurveda as one of the *Ashta Mahagada*—eight grave diseases—due to its chronic nature, potential for severe discomfort, and complexity in treatment. The term "Arsha" is derived from the root "Ruh," which means "to injure" or "to afflict," reflecting the pain and distress that the condition causes.[6]

Ayurvedic Understanding of Arsha:

In Ayurveda, Arsha is described as a condition where the vitiated Doshas—Vata, Pitta, and Kapha—affect the rectal veins and surrounding tissues, leading to the formation of mass-like structures known as piles or hemorrhoids. These masses can cause significant pain, discomfort, and bleeding, particularly during defecation.

Etiology (Nidana): [7]

The causative factors for Arsha are linked to the vitiation of the Doshas, which occurs due to various dietary, lifestyle, and genetic factors. According to Ayurvedic principles, the primary etiological factors include:

1. Dietary Factors:

- Consumption of heavy, oily, and spicy foods that are difficult to digest.
- Excessive intake of dry, cold, or incompatible foods (Viruddhahara).
- o Overeating or irregular eating habits.
- Low fiber intake leading to hard stools.

2. Lifestyle Factors:

- Sedentary lifestyle with minimal physical activity.
- o Prolonged sitting or standing, especially on hard surfaces.
- Suppression of natural urges, particularly the urge to defecate.

• Excessive straining during bowel movements due to constipation or diarrhea.

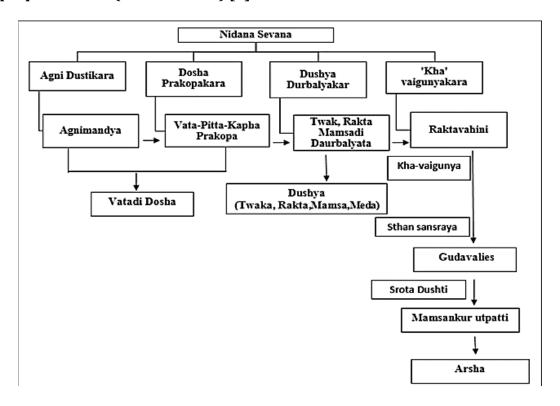
3. Genetic Factors:

- o Familial predisposition to weak rectal veins and tissues.
- o Congenital anomalies in the anal region.

4. Psychological Factors:

 Stress and anxiety, which can aggravate Vata Dosha, leading to constipation and subsequent development of Arsha.

Samprapti of Arsha (Hemorrhoids) [7]



[REF – Abdur Rahaman, Md Tanzil Ansari, Trisha Talapatra, Role of Bhesaja and Shalya Chikitsa in Arsha Roga W.S.R. to Haemorrhoids, World Journal of Advanced Research and Reviews, 2022, 14(02), 068–075]

Samprapti, in Ayurvedic terminology, refers to the pathogenesis or the process by which a disease develops in the body. The Samprapti of Arsha (hemorrhoids) involves a complex

interaction of various factors, including the vitiation of Doshas, the accumulation of Ama (toxins), and the impairment of digestive and circulatory functions.

1. Nidana (Causative Factors):

The development of Arsha begins with the exposure to Nidana (causative factors), which include:

• Aharaja Nidana (Dietary Factors):

- Consumption of heavy, oily, spicy, and low-fiber foods.
- Irregular eating habits and overeating.
- Excessive intake of dry, cold, and incompatible foods (Viruddhahara).

• Viharaja Nidana (Lifestyle Factors):

- Sedentary lifestyle with lack of physical activity.
- o Prolonged sitting or standing, especially on hard surfaces.
- Suppression of natural urges, particularly the urge to defecate.
- Excessive straining during bowel movements.

Manasika Nidana (Psychological Factors):

o Stress, anxiety, and other mental disturbances that aggravate Vata Dosha.

2. Dosha Prakopa (Aggravation of Doshas):

The Nidana leads to the vitiation of the Doshas, particularly Vata, Pitta, and Kapha. The specific roles of each Dosha in the pathogenesis of Arsha are as follows:

- **Vata Dosha:** Aggravated Vata leads to dryness and hardness of the stool, increasing pressure during defecation and causing strain on the rectal veins.
- **Pitta Dosha:** Aggravated Pitta, particularly in the form of Rakta (blood), contributes to inflammation and burning sensations in the anorectal region, leading to the formation of bleeding piles.

• **Kapha Dosha:** Aggravated Kapha causes stagnation and heaviness in the anal region, contributing to the development of large, soft, and mucus-secreting hemorrhoids.

3. Ama Utpatti (Formation of Toxins):

Due to improper digestion and the vitiation of Doshas, Ama (undigested food toxins) is formed. This Ama accumulates in the gastrointestinal tract, particularly in the rectal region, further aggravating the condition.

4. Srotorodha (Obstruction of Channels):

The accumulation of Ama and the aggravated Doshas lead to Srotorodha (blockage of the channels) in the rectal veins and tissues. This obstruction hinders the normal flow of Vata and Rakta, causing the veins to become engorged and swollen.

5. Raktadushti (Vitiation of Blood):

The vitiation of Rakta (blood) due to Pitta Dosha contributes to inflammation and congestion in the rectal veins. This leads to the development of Ardra Arsha (bleeding piles) where blood is a prominent symptom.

6. Formation of Arsha (Hemorrhoids):

The culmination of these pathological processes results in the formation of Arsha, characterized by the development of hemorrhoidal masses in the rectal and anal regions. These masses may be internal or external, depending on their location, and can vary in size and severity based on the predominance of the involved Doshas.

- Vataj Arsha: Dry, hard, and painful hemorrhoids with minimal bleeding.
- **Pittaj Arsha:** Inflamed, soft, and bleeding hemorrhoids with a burning sensation.
- **Kaphaj Arsha:** Large, soft, and mucus-secreting hemorrhoids with heaviness and minimal pain.

7. Prakopa and Sthanasamsraya (Manifestation and Localization):

As the Doshas become more aggravated, they localize in the Guda (anal region), where they manifest as Arsha. The severity of the symptoms and the chronicity of the condition depend on the degree of Dosha vitiation and the involvement of Ama.

8. Vyakti (Clinical Presentation):

The clinical presentation of Arsha includes symptoms such as pain, itching, rectal bleeding, swelling, and discomfort during defecation. The specific symptoms vary based on the type of Arsha (Vataj, Pittaj, or Kaphaj) and the severity of the condition.

9. Bheda (Complications):

If left untreated, Arsha can lead to complications such as thrombosis (formation of blood clots in the hemorrhoidal veins), prolapse (protrusion of internal hemorrhoids outside the anus), anemia (due to chronic bleeding), and secondary infections.

Classification of Arsha:[8]

Arsha is classified in Ayurveda based on several criteria:

1. Based on Dosha Predominance:

- Vataj Arsha: Caused by the predominance of Vata Dosha, leading to dry, hard, and painful piles with minimal bleeding.
- Pittaj Arsha: Caused by the predominance of Pitta Dosha, leading to inflamed, soft piles with profuse bleeding and a burning sensation.
- Kaphaj Arsha: Caused by the predominance of Kapha Dosha, leading to large, soft, and painless piles with mucus discharge.
- Raktaj Arsha: Primarily caused by the vitiation of Rakta (blood), characterized by bleeding piles.
- Sannipataj Arsha: Caused by the combined vitiation of all three Doshas, leading to a complex presentation of symptoms.

2. Based on Bleeding:

- Ardra (Sravi) Arsha: Bleeding piles, typically associated with Pitta and Rakta Dosha vitiation.
- Shushka Arsha: Non-bleeding piles, commonly linked with Vata and Kapha Dosha vitiation.

3. Based on Prognosis:

- Sadhya Arsha: Curable piles, particularly in cases involving a single Dosha and located in the superficial layers.
- Yapya Arsha: Palliative piles, which can be managed but not fully cured, especially those caused by the vitiation of two Doshas.
- Asadhya Arsha: Incurable piles, often associated with congenital causes, involvement of all three Doshas, and severe systemic symptoms.

4. Based on Location:

- o **Internal Arsha:** Piles located inside the anal canal, generally painless but prone to bleeding.
- External Arsha: Piles located outside the anal verge, which can be painful, especially if thrombosed.

Symptoms of Arsha:[9]

The symptoms of Arsha vary depending on the type of Dosha involved and the severity of the condition. Common symptoms include:

- **Pain:** Varying from mild discomfort to severe, sharp pain during and after defecation.
- **Bleeding:** Bright red blood, typically noticed during or after bowel movements.
- **Itching and Irritation:** In the anal region, especially in the case of external piles.
- **Swelling:** Noticeable lumps or swellings around the anus, which may be tender to the touch.
- **Mucus Discharge:** Particularly in Kaphaj Arsha, leading to discomfort and irritation.

Complications:

If left untreated, Arsha can lead to several complications, including:

- Thrombosis: Formation of blood clots within the hemorrhoids, leading to severe pain and swelling.
- **Prolapse:** Protrusion of internal piles outside the anal canal, which may require manual reduction or surgical intervention.
- **Anemia:** Chronic bleeding from hemorrhoids can lead to iron deficiency anemia.
- **Infection:** Secondary infection in the swollen tissues, leading to abscess formation.

Ayurvedic Management of Arsha:[10]

The management of Arsha in Ayurveda involves a comprehensive approach that includes dietary and lifestyle modifications, herbal treatments, and specialized procedures:

1. Dietary and Lifestyle Modifications:

- High-Fiber Diet: Emphasizing the intake of whole grains, fruits, vegetables,
 and other fiber-rich foods to prevent constipation.
- Regular Exercise: Encouraging physical activity to promote circulation and digestive health.
- o **Proper Hydration:** Adequate water intake to keep stools soft and easy to pass.
- Avoiding Straining: Recommendations to avoid prolonged straining during bowel movements.

2. Herbal Treatments:

- Laxatives: Such as *Triphala churna* and *Haritaki churna* to ensure regular bowel movements.
- Anti-Inflammatory Herbs: Turmeric and Neem to reduce inflammation and swelling.

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o **Astringents:** Arshoghna preparations like Sooranpak to reduce the size of

hemorrhoids.

Hemostatic Herbs: Rakta Stambhak herbs like Praval Pishti to control

bleeding.

3. Therapeutic Procedures:

o Kshar Sutra: A minimally invasive procedure involving the application of a

medicated thread to ligate the hemorrhoid, leading to its eventual shedding.

o **Agnikarma:** Cauterization to reduce the size of the hemorrhoid and alleviate

symptoms.

o **Shastra Karma:** Surgical excision of large or prolapsed hemorrhoids, followed

by post-operative care to promote healing.

MODERN PROSPECTIVE

Hemorrhoids, often referred to as piles, are a common anorectal condition characterized by

swollen and inflamed veins in the rectum and anus. The condition can affect people of all

ages, but its prevalence increases with age, with a significant proportion of the population

experiencing hemorrhoidal symptoms at some point in their lives. Modern medicine views

hemorrhoids as varicosities or abnormal enlargements of the hemorrhoidal venous plexus,

typically resulting from increased pressure in these veins due to various factors.

Anatomy and Physiology: In the anal canal, there are three main hemorrhoidal cushions—

left lateral, right anterior, and right posterior—which help maintain continence by sealing

the anal canal. These cushions are composed of blood vessels, smooth muscle, and

connective tissue. Hemorrhoids occur when these cushions become enlarged due to

increased venous pressure, leading to the typical symptoms of pain, swelling, and bleeding.

Etiology: The exact cause of hemorrhoids is not entirely understood, but several factors are

known to contribute to their development:

- Increased Intra-Abdominal Pressure: Conditions such as chronic constipation, straining during bowel movements, prolonged sitting on the toilet, pregnancy, and obesity increase the pressure on the hemorrhoidal veins, leading to their enlargement.
- 2. **Aging:** As people age, the connective tissues in the rectum and anus weaken, making them more susceptible to the development of hemorrhoids.
- 3. **Genetics:** A family history of hemorrhoids suggests a genetic predisposition, possibly due to inherited weaknesses in the vein walls or connective tissue.
- 4. **Dietary Factors:** A low-fiber diet can lead to hard stools and straining during defecation, both of which are major risk factors for hemorrhoids.
- 5. **Sedentary Lifestyle:** Lack of physical activity can contribute to poor circulation, which in turn may lead to increased pressure in the rectal veins.
- 6. **Other Factors:** Diarrhea, heavy lifting, and certain medical conditions, such as liver disease, can also contribute to the development of hemorrhoids.

Classification: Hemorrhoids are generally classified into two types based on their location:

- 1. **Internal Hemorrhoids:** These are located inside the rectum and are usually not visible. They are often painless but can cause bleeding during bowel movements. Internal hemorrhoids are graded based on their degree of prolapse:
 - o **Grade I:** No prolapse, just prominent blood vessels.
 - o **Grade II:** Prolapse upon bearing down but spontaneously reduce.
 - o **Grade III:** Prolapse upon bearing down and require manual reduction.
 - Grade IV: Prolapsed and cannot be manually reduced; often require surgical intervention.

2. **External Hemorrhoids:** These develop under the skin around the anus and can be seen and felt. They are often painful, especially if they become thrombosed (when a blood clot forms in the hemorrhoid).

Symptoms: The symptoms of hemorrhoids vary depending on their type and severity. Common symptoms include:

- **Rectal Bleeding:** Bright red blood typically seen on toilet paper or in the toilet bowl.
- **Pain or Discomfort:** Especially during bowel movements or when sitting.
- **Itching or Irritation:** In the anal region, caused by mucus discharge or prolapsed internal hemorrhoids.
- **Swelling:** Around the anus, indicative of external hemorrhoids.
- **Lump Formation:** A noticeable lump near the anus, which may be sensitive or painful.

Diagnosis: Diagnosis of hemorrhoids typically involves a physical examination, including a digital rectal exam and visual inspection of the anus. For internal hemorrhoids, an anoscopy or sigmoidoscopy may be performed to visualize the internal structures and confirm the diagnosis.

Management and Treatment: The management of hemorrhoids in modern medicine ranges from conservative measures to surgical interventions, depending on the severity of the condition:

1. Conservative Treatment:

 Dietary and Lifestyle Modifications: Increasing dietary fiber intake and fluid consumption are key strategies to soften stools and reduce straining. Regular physical activity is also recommended to improve circulation and prevent constipation.

- Topical Treatments: Over-the-counter creams, ointments, and suppositories containing hydrocortisone, witch hazel, or lidocaine can provide relief from symptoms such as pain and itching.
- Sitz Baths: Soaking the anal area in warm water several times a day can help reduce inflammation and discomfort.

2. Minimally Invasive Procedures:

- Rubber Band Ligation: This procedure is commonly used for treating internal hemorrhoids. A rubber band is placed around the base of the hemorrhoid, cutting off its blood supply, causing it to shrink and fall off.
- Sclerotherapy: A chemical solution is injected into the hemorrhoid, causing it to shrink and eventually disappear.
- Infrared Coagulation: This method uses infrared light to coagulate the blood vessels in the hemorrhoid, leading to its shrinkage.

3. **Surgical Treatment:**

- Hemorrhoidectomy: The surgical removal of hemorrhoids is considered the most effective treatment for severe or recurrent cases. It can be performed using various techniques, including conventional excision, diathermy, or newer methods such as the Ligasure or Harmonic scalpel.
- Stapled Hemorrhoidopexy: This procedure involves the use of a circular stapling device to remove a ring of excess tissue in the anal canal, pulling the prolapsed hemorrhoids back into their normal position and reducing blood flow to the hemorrhoid, causing it to shrink.
- Doppler-Guided Hemorrhoidal Artery Ligation (DGHAL): This technique uses ultrasound to identify the hemorrhoidal arteries, which are then tied off to reduce blood flow to the hemorrhoids, leading to their shrinkage.

Complications: If left untreated, hemorrhoids can lead to complications such as:

- **Thrombosis:** The formation of a blood clot within an external hemorrhoid, causing severe pain and swelling.
- Prolapse: Advanced internal hemorrhoids may prolapse and become trapped outside the anus, leading to significant discomfort and requiring manual reduction or surgical intervention.
- **Anemia:** Chronic blood loss from hemorrhoids can lead to iron deficiency anemia.
- **Infection:** Hemorrhoids can become infected, leading to abscess formation and further complications.

Prevention: Preventing hemorrhoids involves adopting a lifestyle that minimizes the risk factors associated with their development. Key preventive measures include:

- **Dietary Adjustments:** Eating a high-fiber diet rich in fruits, vegetables, and whole grains helps prevent constipation and straining.
- **Hydration**: Drinking plenty of fluids, particularly water, helps soften stools.
- **Regular Exercise:** Physical activity promotes healthy bowel function and circulation.
- **Avoiding Prolonged Sitting:** Reducing time spent sitting, especially on the toilet, can prevent increased pressure on the rectal veins.
- **Proper Bowel Habits:** Encouraging regular bowel movements without straining and avoiding delaying the urge to defecate can help prevent hemorrhoids.

KSHARA KARMA

Kshara Karma is a unique and highly effective procedure in Ayurveda, primarily used in the management of Arsha (hemorrhoids) and other anorectal disorders. The term "Kshara" refers to an alkaline substance derived from medicinal plants, which has the properties of cauterization. Kshara Karma involves the application of this alkaline substance to the affected area, where it acts as a chemical cauterant, leading to the dissolution of the hemorrhoidal tissue. This minimally invasive procedure is valued for its precision, efficacy, and ability to reduce recurrence rates compared to other treatments.[11]

The Kshara Karma procedure is traditionally divided into three main stages: Poorva Karma (preoperative preparation), Pradhana Karma (main procedure), and Pashchat Karma (postoperative care). Each stage is critical to ensuring the safety, effectiveness, and successful outcome of the treatment.

POORVA KARMA (PREOPERATIVE PREPARATION):[12]

Poorva Karma refers to the preparatory steps taken before the main Kshara Karma procedure. This stage is essential for optimizing the patient's condition and ensuring the readiness of the body for the procedure.

- Patient Assessment: A thorough examination of the patient is conducted, including
 a detailed medical history and physical examination to assess the type, size, and
 location of the hemorrhoids. The patient's Prakriti (constitution), Dosha involvement,
 and overall health are also considered.
- **Internal Cleansing (Shodhana)**: The patient is usually advised to undergo internal cleansing therapies, such as Virechana (therapeutic purgation), to eliminate toxins (Ama) from the body and reduce Dosha imbalances. This step helps to purify the digestive tract and enhance the effectiveness of the Kshara application.
- **Local Preparation**: The anorectal region is thoroughly cleansed, and the patient is advised to take a warm Sitz bath with herbal decoctions like Triphala Kwatha or Panchavalkala Kwatha to soothe the aea and prepare the tissues for the procedure.
- **Dietary Recommendations**: The patient is advised to follow a light, easily digestible diet leading up to the procedure. Foods that aggravate the Doshas, such as spicy, oily, or heavy foods, are avoided.

PRADHANA KARMA (MAIN PROCEDURE): [13]

Pradhana Karma is the main phase of Kshara Karma, where the Kshara is applied to the hemorrhoidal tissue. This step requires precision and expertise to ensure the effective removal of the hemorrhoidal mass with minimal complications.

- **Positioning**: The patient is placed in a comfortable position, typically the lithotomy position, which allows easy access to the anorectal area.
- **Application of Kshara**: The Kshara paste is carefully applied to the hemorrhoidal tissue using a specially designed applicator or probe. The duration of application varies depending on the size and severity of the hemorrhoid, but it is typically applied for a few minutes. During this time, the Kshara causes a chemical reaction that leads to the cauterization and eventual sloughing off of the hemorrhoid.
- **Neutralization**: After the desired effect is achieved, the Kshara is neutralized using a weak acidic solution, such as lemon juice or buttermilk, to stop the chemical action and prevent damage to the surrounding healthy tissues.
- Observation: The treated area is closely observed for any signs of excessive bleeding, discomfort, or adverse reactions. If necessary, additional measures are taken to manage these complications.

PASHCHAT KARMA (POSTOPERATIVE CARE): [14]

Pashchat Karma refers to the postoperative care and follow-up required after the Kshara Karma procedure. This stage is crucial for ensuring proper healing, preventing complications, and promoting the patient's recovery.

- Wound Care: The treated area is kept clean and dry to prevent infection. The patient may be advised to continue Sitz baths with herbal decoctions to soothe the area and promote healing. Ayurvedic medicated oils or ointments, such as Jatyadi Taila or Nirgundi Taila, may be applied to the area to aid in the healing process.
- **Dietary and Lifestyle Advice**: The patient is advised to continue following a diet that supports digestion and prevents constipation. Fiber-rich foods, adequate hydration, and regular bowel movements are encouraged. Straining during defectation should be avoided to prevent recurrence.
- **Monitoring for Complications**: The patient is monitored for any signs of complications, such as infection, excessive pain, or recurrence of hemorrhoids.

Follow-up visits are scheduled to assess the healing process and ensure the

effectiveness of the treatment.

• Herbal Supplements: The patient may be prescribed Ayurvedic herbal supplements,

such as Triphala Guggulu or Abhayarishta, to support digestion, enhance healing, and

prevent constipation.

BENEFITS OF KSHARA KARMA:[15]

• Minimally Invasive: Kshara Karma is less invasive than surgical procedures like

hemorrhoidectomy, leading to less pain and faster recovery.

• **Effective in Recurrence Prevention**: The procedure has a lower recurrence rate

compared to other treatments, making it a preferred option for chronic cases.

Cost-Effective: Kshara Karma is generally more affordable than surgical

interventions.

• Can be Performed on an Outpatient Basis: The procedure is relatively quick and

can often be performed on an outpatient basis, reducing the need for hospitalization.

DISUCSSION

Arsha, or hemorrhoids, is a prevalent anorectal disorder characterized by swollen and

inflamed veins in the rectum and anus. Both Ayurveda and modern medicine offer distinct

perspectives and treatment approaches for managing this condition. [16]

In Ayurveda, Arsha is considered one of the Ashta Mahagada (eight grave diseases),

highlighting its severity. The Ayurvedic approach attributes the condition to the vitiation of

Doshas (Vata, Pitta, Kapha) due to improper diet, lifestyle, and genetic factors. Treatment

focuses on balancing the Doshas, detoxifying the body, and using procedures like Kshara

Karma and Kshar Sutra, which are known for their effectiveness and lower recurrence

rates.[17]

Modern medicine, meanwhile, views hemorrhoids as the result of increased pressure in the

hemorrhoidal veins, often due to factors like chronic constipation, prolonged sitting, and

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obesity. The condition is classified into internal and external hemorrhoids, with treatments

ranging from dietary changes and topical treatments to minimally invasive procedures and

surgical interventions like hemorrhoidectomy.[18]

While modern treatments offer quick symptom relief, they can be associated with higher

recurrence rates and complications. On the other hand, Ayurvedic treatments emphasize

long-term management and prevention through holistic approaches, though they may

require more time and patient compliance.

Hemorrhoids are a common condition involving swollen and inflamed veins in the rectum

and anus, leading to symptoms like pain, itching, and rectal bleeding. The condition is caused

by increased pressure in the hemorrhoidal veins, often due to factors such as chronic

constipation, straining, prolonged sitting, pregnancy, or obesity.

Hemorrhoids are classified as internal or external, depending on their location. Internal

hemorrhoids are usually painless but may cause bleeding, while external hemorrhoids can

be painful, especially if thrombosed.

Management of hemorrhoids ranges from conservative treatments like dietary changes and

topical ointments to minimally invasive procedures (e.g., rubber band ligation) and surgical

interventions (e.g., hemorrhoidectomy). The choice of treatment depends on the severity

and persistence of symptoms. An integrative approach that addresses both symptoms and

underlying causes is often most effective in managing this condition.

Role of Kshara Karma in Arsha Chikitsa [19]

Kshara Karma is a prominent therapeutic procedure in Ayurveda, particularly in the

management of Arsha (hemorrhoids). It is considered one of the most effective treatments

for hemorrhoids due to its minimally invasive nature and ability to target the root cause of

the condition.

Mechanism of Action: Kshara Karma involves the application of a specialized alkaline paste,

known as Kshara, directly to the hemorrhoidal tissue. The Kshara acts as a chemical

cauterant, which means it chemically burns and dissolves the hemorrhoidal mass without

causing excessive damage to surrounding healthy tissue. This process leads to the shrinkage and eventual sloughing off of the hemorrhoid.

Benefits of Kshara Karma in Arsha Chikitsa:[20]

- 1. **Targeted Treatment:** Kshara Karma allows for precise application to the affected area, effectively reducing the size of the hemorrhoid while preserving the surrounding tissues.
- Minimally Invasive: Compared to surgical procedures like hemorrhoidectomy, Kshara Karma is less invasive, resulting in fewer complications, less pain, and quicker recovery.
- 3. **Reduced Recurrence:** One of the significant advantages of Kshara Karma is its ability to reduce the likelihood of recurrence. By chemically cauterizing the hemorrhoidal tissue, the procedure helps prevent regrowth.
- 4. **Versatility:** Kshara Karma can be used to treat both internal and external hemorrhoids, as well as other anorectal conditions like fistulas and fissures.
- 5. **Outpatient Procedure:** Kshara Karma is typically performed on an outpatient basis, which means it does not require hospitalization, making it a convenient option for patients.
- 6. **Cost-Effective:** The procedure is generally more affordable than surgical options, providing an effective treatment alternative that is accessible to a broader range of patients.

CONCLUSION:

Arsha, or hemorrhoids, is a prevalent and distressing anorectal condition characterized by swollen and inflamed veins in the rectal and anal regions. Both Ayurveda and modern medicine recognize the significant impact of hemorrhoids on an individual's quality of life, and both systems offer various treatment modalities to manage the condition effectively. Among the various Ayurvedic treatments, Kshara Karma stands out as a particularly

effective and minimally invasive procedure for managing hemorrhoids. This technique involves the application of a specialized alkaline substance (Kshara) directly to the hemorrhoidal tissue, resulting in chemical cauterization and subsequent reduction or elimination of the hemorrhoid. Kshara Karma offers several advantages, including targeted treatment, reduced recurrence rates, quicker recovery, and lower costs compared to surgical interventions. Kshara Karma plays a vital role in the management of Arsha, providing an effective, safe, and minimally invasive alternative to conventional surgical treatments. Its ability to address both the symptoms and the root causes of hemorrhoids makes it a valuable tool in the holistic treatment of this condition. As such, Kshara Karma represents a significant contribution of Ayurvedic medicine to the broader field of anorectal disorder management, offering patients a reliable option for long-term relief and improved quality of life.

CONFLICT OF INTEREST -NIL

SOURCE OF SUPPORT -NONE

REFERENCES

- 1. Sharma PV. Sushruta Samhita: With English Translation of Text and Dalhana's Commentary. Varanasi: Chaukhambha Vishvabharati; 2001.
- 2. Dash B, Sharma RK. *Charaka Samhita: Text with English Translation and Critical Exposition Based on Cakrapani Datta's Ayurveda Dipika*. Varanasi: Chaukhamba Sanskrit Series Office; 2005.
- 3. Srikantamurthy KR. *Ashtanga Hridayam: Text, English Translation, Notes, Appendix and Indices*. Varanasi: Krishnadas Academy; 2001.
- 4. Srikantha Murthy KR. *Bhavaprakasha of Bhavamisra: Text with English Translation and Commentary*. Varanasi: Chaukhambha Krishnadas Academy; 2000.
- 5. Tewari PV. *Ayurvediya Prasuti Tantra Evam Stri Roga*. Varanasi: Chaukhambha Vishvabharati; 2010.
- 6. Tripathi BN. *Charaka Samhita with Charaka Chandrika Hindi Commentary*. Varanasi: Chaukhambha Surbharti Prakashan; 2004.

- 7. Shastri AD. *Rasa Tarangini: Commentary of Hindi*. New Delhi: Motilal Banarsidass Publishers; 2004.
- 8. Dwivedi AK. Clinical efficacy of Kshara Sutra in the management of Arsha (Haemorrhoids). *Ayurveda Journal.* 2011;32(2):45-52.
- 9. Goyal M, Gupta M, Bhardwaj V. Comparative study of Kshara Karma and Arsha Chikitsa in the management of Haemorrhoids. *Int J Ayurveda Res.* 2014;5(4):33-39.
- 10. Sharma AK, Singh P. A clinical study on the efficacy of Kshara Karma in the treatment of haemorrhoids. *J Res Ayurveda Siddha*. 2015;36(1):24-28.
- 11. Patwardhan K. Understanding Arsha: Hemorrhoids in Ayurvedic perspective. *Ancient Sci Life*. 2009;29(1):13-16.
- 12. Mishra LC. Scientific Basis for Ayurvedic Therapies. Boca Raton: CRC Press; 2004.
- 13. Vaidya AB, Singh RH. *The Role of Kshara Sutra in Ayurvedic Surgery*. New Delhi: Central Council for Research in Ayurveda and Siddha; 2003.
- 14. Bhatnagar M, Rathi V. Kshara Karma and its significance in the management of Arsha. *Ayurvedic Medicine*. 2010;30(2):78-84.
- 15. Deshpande P. *An Overview of Kshara Sutra Therapy in the Management of Haemorrhoids and Fistula-in-Ano*. Pune: Arya Vaidya Pharmacy; 2012.
- 16. Agnivesha. *Charaka Samhita* (English translation by R.K. Sharma and Bhagwan Dash). Varanasi: Chaukhambha Sanskrit Series Office; 2006.
- 17. Gopal P, Sharma R. Comparative study of Kshara Karma and hemorrhoidectomy in the management of Arsha. *J Ayurveda Integr Med.* 2016;7(3):167-172.
- 18. Reddy SK, Rao PS. Evaluation of Kshara Karma as a non-invasive treatment for hemorrhoids: A clinical study. *Ayurveda Med.* 2013;9(1):22-27.
- 19. Tewari PV, Chaturvedi GN. *Ayurveda Prasuti Tantra Evam Stri Roga*. Varanasi: Chaukhambha Orientalia; 2010.
- 20. Nadkarni KM. *Indian Materia Medica*. Bombay: Popular Prakashan; 2000.