



**MANAGEMENT OF ARDRA ARSHAS BY KARANJAPRATISARANEYYA KSHARA – A CASE STUDY**

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**ABSTRACT**

*Arshas* is defined as *Arivat Pranash Shrinoti Hinasti*, A disease even though not fatal causes severe discomfort to the patient. *Arshas* is one of the commonest ano rectal disease. *Acharya Charaka* classifies *Arshas* into *Shushka* and *Ardra* types. *Ardra Arshas* is characterized by *Prasrava* and it is having *Rakta* and *Pitta Pradhanata*. *Acharya Sushruta* has enumerated *kshara karma* among four treatment modalities in *Arsha Chikitsa*. The drug *karanja* is mentioned in *Sushruta Samhita* as *Kshara dravya* in *Ksharapaka vidhi adhyaya*. It is easily available and is cost effective. Hence, this study is taken up to evaluate the efficacy of *karanja Pratisaraneeya Kshara* in *Ardra Arshas*. A patient suffering from *Ardra arshas* (second degree internal haemorrhoids) was selected from IPD of *Shalya Tantra SKAMCH & RC* and was treated with *Karanja pratisaraneeya kshara*. No any major or minor complications was reported by patient for a follow up period of 21days. Patient was assessed on parameters as per gradings. There was no post op discomfort or complications. Hence *Karanja pratisaraneeya kshara* can be used in the management of *Ardra arshas*

**KEYWORDS:** *Ardra Arshas* case report; *kshara karma*; Internal haemorrhoids.

**INTRODUCTION**

*Arshas* is considered as *Mahagada*,<sup>[1]</sup> due to its chronicity, difficulty in treating by conservative methods, involvement of *Tridoshas* and seat of disease being a *Marma Sthana*. Present mechanical modern life style is pushing the rise of prevalent rate of this disease. Its incidence increases as age advances, at least 50% of people over the age of 50 years have some degree of Haemorrhoidal symptoms.<sup>[2]</sup> The management of Haemorrhoids in modern medical science is changing from conventional surgical procedure, that is Haemorrhoidectomy to other procedures like Sclerotherapy, Band ligation, Cryosurgery, Laser therapy etc. unfortunately all these techniques have one or other types of limitations and post-operative complications. Hence it leaves a scope to find out a remedy which would offer the cure of the disease, free from complications and economically better. *Acharya Sushruta* has enumerated four treatment modalities in *Arsha Chikitsa*, which are *Bheshaja*, *Kshara*, *Agni* and *Shastrachikitsa*. Among these 4 treatment modalities, *Ksharakarma* is a minimal invasive technique. The *Arshas* having *lakshanas* like *Mrudu*, *Prasrutha*, *Avagadha* and *Uchrita* should be treated by *PratisaraneeyaKshara*.<sup>[3]</sup> *Kshara* is considered as *pradhanatama* among *shastra* and *anushastra* and is

*tridoshagna* and have properties like *chedana*, *bhedana*, *stambhana*, and *lekhana karma*.<sup>[4]</sup>

**CASE STUDY**

A male patient of age 29yrs approached to *Shalya Tantra OPD, SKAMCH&RC* with complaints of prolapse of mass during defecation through anal verge since 1yr and after defecation mass used to reduce on its own. Occasionally bleeding per anum as drops was noted and difficulty in passing stools since 2yrs. Patient had taken allopathic treatment but got no relief. After detailed history, digital examination and Proctoscopic examination revealed secong degree internal haemorrhoids at 3, 7 & 11'O'clock position. All routine investigations were done to rule out other causes and no specific etiology was found. Patient was posted for *pratisaraneeya kshara* with *karanja teekshna kshara*. Procedure was carried out under asptic precautions.

**MATERIALS AND METHODS**

**Pre Operative Procedure**

*Karanja pratisaraneeya teekshna kshara* was prepared with proper measures as mentioned in *Ksharapaka vidhi adhyaya* After premedication, part preparation, enema & informed consent was taken.

### Operative Procedure

The patient was taken in lithotomy position under spinal anesthesia, drapping was done. Proctoscopic examination was done to identify the pile mass and later slit proctoscope smeared with lox 2% gel was introduced at 11'0' clock position, pile mass was rubbed with gauze piece. *Karanja pratisaraneeya teekshna kshara* was applied with *darvimukha shalaka*. After application of *kshara* waited for 1min and the mouth of *arshoyantra*

was closed by hand for a period of hundred *matrakala*, or till the pile mass turns to *pakwa jambu phala varna*.<sup>[5]</sup> Then the *kshara* was neutralized with *nimbu swarasa* and washed with normal saline. Care was taken to avoid spillage of *kshara* over the normal mucosa. Same procedure was repeated over at 3 & 7 'O' clock position. 2 Zonac suppositories was kept in anal canal & was packed with gauze pieces soaked in betadine solution A tight bandaging was done.



Before Kshara Karma

Kshara Application

After Kshara Karma

### Post Operative Treatment

Post operatively (from 2<sup>nd</sup> day to 8<sup>th</sup> day after *Kshara Karma*), patient was managed twice a day with *sukoshnajala Avagaha Sweda*, followed by *Jatyaditaila*

infiltration 5ml once a day for 7 days. Internally Tab. *Triphala Guggulu* (500mg) 2 tab bid and *Swadishta Virechana Choorna* 5gms with warm water at bed time for 3 weeks.

### Observation

SYMPTOM	Before Treatment (BT)- Day 1	After Treatment (AT)- Day 9	At Follow up (AF)- Day 21
a) <i>Gudagata Raktasrava</i>	+	-	-
b) <i>Arshankura</i>	+	-	-
c) <i>Gudagata shoola</i>	++	+	-
d) <i>Malapravrutti</i>	+++	-	-

### DISCUSSION

*Karanja* is described as having *kapha vatahara*, *shothahara*, does *bhedana* and have *arshogna* properties. *Karanja* have varied degrees of *kshara* property =, analgesic and antimicrobial property Big advantage of *karanja* is easily available and cost effective *Kshara* is described as one among *anushastra* or *upayantra*. It does *chedana*, *bhedana*, *lekhana*, and *tridoshagna*. *Kshara* acts on *ardra arshas* by cauterizing the pile mass directly because of its *ksharana guna* (corrosive nature). It coagulates protein in haemorrhoidal plexus. The coagulation of protein leads to disintegration of haemoglobin in to haem and globin Synergy of these two actions causes decreasing in size of pile mass. Further necrosis of tissue occur, this sloughs out as brownish black discharge for 3-7 days The haem present in the slough gives colour to discharge The tissue becomes fibrosed and scar formation was seen. The patient was followed up weekly up to 21 days after complete healing of anal mucosa no prolapsed pile mass bleeding per anum and pain was noted due to necrosis of tissue with

obliteration of haemorrhoidal radicles. Wound was completely healed within 21 days.

### CONCLUSION

The present study shows good result of *Karanja pratisaraneeya kshara* on *ardra arshas* (second degree haemorrhoids) as it is safe, cost effective, easily available & has good wound healing property.

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