

Ayurvedic Protocol on Effectiveness of *Pippalyadi* and *Suranadi* Ointment in Management of *Arsha* (Haemorrhoids)

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Abstract

Background- Ano-rectal disorders are progressively increasing in the society. Out of many of the causes, some important are sedentary lifestyle, irregular and inappropriate diet, prolonged sitting or standing and certain psychological disturbances too. *Arsha* is one among the ano rectal diseases which occurs in *Gudapradesha*, which is a *sadhyopranaharaMarma*^[1]. In *Arsha* bleeding per anum is the principal symptoms. *Arsha* is a gift of modern diets and busy lifestyles and many people are suffering from some sort of Anorectal disorder, it may be simple constipation to complex carcinoma, in which prominent disorder is *Arsha*. It is manifested due to multifold factors viz. disturbed lifestyle or daily routines, improper or irregular diet intake, prolonged standing or sitting, faulty habits of defecation etc. which results in derangement of Jatharagni leading to vitiation of Tridosha, mainly VataDosha.

Keywords- *Arsha*, *Gudapradesha*, *sadhyopranaharaMarma*.

Introduction

Ano-rectal disorders are progressively increasing in the society. Out of many of the causes, some important are sedentary lifestyle, irregular and inappropriate diet, prolonged sitting or standing and certain psychological disturbances too. *Arsha* is one among the ano rectal diseases which occurs in *Gudapradesha*, which is a *sadhyopranaharaMarma*^[1]. In *Arsha* bleeding per anum is the principal symptoms. *Arsha* is a gift of modern diets and busy lifestyles and many people are suffering from some sort of Anorectal disorder, it may be simple constipation to complex carcinoma, in which prominent disorder is *Arsha*. It is manifested due to multifold factors viz. disturbed lifestyle or daily routines, improper or irregular diet intake, prolonged standing or sitting, faulty habits of defecation etc. which results in derangement of Jatharagni leading to vitiation

of Tridosha, mainly VataDosha. These vitiated Doshas get localized in GudaVali and PradhanaDhamani which further vitiates Twak, Mansa, and MedaDhatu due to AnnavaHashrotoDushti leads to development of *Arsha*.

In modern medical science *Arsha* can be compared with haemorrhoids. Hemorrhoid often described as “varicose veins of the anus and rectum”. Hemorrhoid are dilated, tortuous or varicose veins occurring in relation to the anus and originating in the epithelial plexus formed by radicals of the superior, middle and inferior rectal veins. While other scientist considered it as displacement of anal cushions. Haemorrhoids are divided into two categories-internal and external haemorrhoids. Internal haemorrhoids means it is within the anal canal and internal to the anal orifice and the external haemorrhoid is situated outside the anal orifice and is covered by skin. The two varieties may coexist and the condition is called intero-external haemorrhoids^[3].

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In the management of Haemorrhoids, the procedures, which are in practice at present in modern surgery, are laser surgery, rubber band ligation, sclerotherapy, bipolar diathermy, infrared photocoagulation, cryosurgery, infra-red coagulation and hemorrhoidectomy, but all procedures have their limitations^[4]. Though all the

modern modalities of treatment in haemorrhoids are universally acceptable but all have some limitations. In ancient *Ayurvedic* compendia various palliative measures have been mentioned in the management of *AbhyantarArsha*, *lepa karma* is one among them.

Need of Study-

Though all the modern modalities of treatment in hemorrhoids are universally acceptable but all have some limitations To find out a suitable solution there is need to find noninvasive treatment for management. In this present research work efforts were made to provide the treatment which is non- invasive, easy to implement, effective and were not need any hospitalization. To fulfil the above criteria the present research study was conducted to compare effects of *Pippalyadi* and *Suranadi* mentioned in *Bhaishajya Ratnavali* in the management of *abhyantarArsha*.

Aim-

Evaluate the efficacy of *Pippalyadi Ointment* over *Suranadi Ointment* in management of *Arsha*.

Objective

- To evaluate the efficacy of *Pippalyadi* Ointment in management of *Arsha*.
- To evaluate the efficacy of *Suranadi* Ointment in management of *Arsha*.
- To compare the effects of *Pippalyadi* Ointment and *Suranadi* Ointment in management of *Arsha*

Material-

The raw materials will be collected from reliable source and will be authenticated from Department of *Dravyaguna* and analysed in Pharmaceutical Laboratory, Sawangi Wardha.

Method-

Pippalyadi ointment was prepared with collection of drugs including *Pippali*, *Saindhav*, *lavan*, *Kushta*, *ShirishandSnuhi* are were made into a fine powder. *Til tail* is taken into clean stainless vessel and placed over mild heat until it starts foam appearing. Then beewax is

added to 1/5th of *til tail*, when all the wax is completely melting in oil, it is filtered and kept in another vessel. It was used as base for preparation of ointment called as *siktha tail*. In this *tail* fine powder of all above drugs were added and stirred. This mixture then attains thicker consistency as wax cool down and made into a soft paste.

Suranadi ointment was prepared with collection of drugs including. *Suran*, *Haridra*, *Chitrakmool*, *Sudhha Tankan* and *Guda* are made into a fine powder. *Til tail* is taken into clean stainless vessel and placed over mild heat until it starts foam appearing. Then beewax is added to 1/5th of *til tail*, when all the wax is completely melting in oil, it is filtered and kept in another vessel. It was used as base for preparation of ointment called as *siktha tail*. In this *Siktha tail* fine powder of all above drugs along with *Guda* were added and stirred. This mixture then attains thicker consistency as wax cool down and made into a soft paste.

Both the ointments will be prepared in *Rasa Shala* of MGACHRC under supervision.

PLACE- OPD and IPD of *Shalya Tantra* M.G.A.C.H and R.C

SAMPLE SIZE- 30, 15 for *pippalyadi ointment* and 15 for *suranadi ointment*

SAMPLE SELECTION TECHNIQUES-

GROUPS – 2 groups with 15 patient each

Group A- *Pippalyadi* ointment

Group B- *Suranadi* ointment

STUDY DESIGN- Double arm

STUDY TYPE- Interventional study

Inclusion Criteria-

§ Diagnosed without any major systemic disorder's cases of first and second degree internal haemorrhoids.

§ Age group of 20 to 50 years, irrespective of their sex, occupation, & economic

Exclusion Criteria-

§ Haemorrhoids that are thrombosed, third

degree and fourth degree.

§ Haemorrhoids associated with fissure in ano, fistula in ano, perianal abscess, rectal polyps, rectal prolapse and rectal CA.

§ Patients having tuberculosis, AIDS & Hepatitis, Ulcerative colitis, Crohn’s disease & Pregnant women

INVESTIGATIONS

Routine hemogram

Blood sugar

Routine and microscopic examination of urine and stools

Dosage-

Sufficient quantity of ointment will be taken for local application twice a day during the treatment period.

Any other departments expertise required- No

7. Observation-

A]Subjective criteria-

Constipation

Bleeding per Rectum

B]Objective criteria- Healing of *Arsha*

8. Assessment Criteria

A] Subjective Criteria-

1. Constipation

1) Subjective Criteria

1Constipation
1) Subjective Criteria

Sr.no	Grade	Explanation
1	0	Absent
2	1	Present

2. Bleeding per rectum

Sr.no	Grade	Explanation
1	0	Absent
2	1	Present

B] Objective Criteia

Grade 1	No prolapsed. Just prominent blood vessels.
Grade 2	Prolapsed upon bearing down but spontaneously reduce.
Grade 3	Prolapsed upon bearing down and require manual reduction.
Grade 4	Prolapsed and cannot be manually reduced.

Data management: Principal investigator will do coding of data.

Ethics and dissemination: Permission for research has been taken from Institutional Ethical Committee .

Consent or assent: Written informed consent will be obtained from the patient.

Dissemination policy: For future research results will be disseminated and research will be published in reputed journal

Informed consent materials: All the research related document and consent form will be given to the patients.

Discussion: In *Ayurveda*, *pippali* is used for the treatment of *vrana*, *gulma*, *bhagnasandhana*, *grahani*, *arsha*, *gudaroga*⁷. *Rasapanchak* of *pippali* is *Rasa- Katu, tikta, kashaya, Virya-Ushan, Vipaka-Katu, Karma -Vata-Kaphahara*. *pippali* has anti-inflammatory activity, analgesic, antifungal activity and anti-ulcer activity It is known for *Vranaropak* properties. In modern medical sciences Haemorrhoidectomy is ideal procedure but after procedure pain bleeding are common complication To sort out these problem we need treatment which is easily applicable and non surgical.

Conclusion-After the study is completed suitable conclusion will be withdrawn on the basis of results.

Ethical Clearance- Taken from Institutional Ethical committee

Conflict of Interest: NIL

Source of Funding- Self

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