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PILOT STUDY ON EFFICACY OF SNUHIKSHEERHARIDRACHURNA ALEPA IN ARSHA WITH SPECIAL REFERENCE TO II AND III DEGREE INTERNAL HAEMORRHOID

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ABSTRACT

Background - Haemorrhoid is the most common disease amongst anorectal disorders and is becoming one of the common problems in the society now a day. Haemorrhoids also known as Arsha according to Ayurvedic science, are characterized by prolapse of mass, per rectal bleeding, pain, itching and discharge. Numerous treatment protocols are available for haemorrhoid in both modern and ayurvedic science. Based on the degree of haemorrhoids, the treatment strategies including conservative management and surgical intervention. Surgical management may lead to complications. So, it becomes necessary to find out the alternative effective therapy as well as affordable treatment option for the disease. Aim- To evaluate the effect of local application of Snuhiksheerharidrachurna Alepa in the management of II and III degree haemorrhoid. Material and method -Total 15 diagnosed patients of Arsha were treated with local application along with supportive adjuvant treatment. Follow up was taken weekly till the complete healing of wound. Observation -Symptoms like prolapse of pile mass, per rectal bleeding and pain were significantly reduced within 3 weeks along with sloughing of the pile mass and healing of wound. Considering overall effect, out of 15 patients 7 patients were completely cured i.e. 46.66% and 7 patients were markedly improved i.e. 46.66 % and 6.66% i. e 1 patient was moderately improved at the end of 21 days. Result - Very encouraging result was obtained with local application of Snuhiksheerharidrachurna Alepa in management of II and III degree haemorrhoid. Conclusion: Considering the properties of individual drugs, observation and result obtained as well as overall effectiveness of Snuhiksheerharidrachurna Alepa, it can be concluded that it can prove safe and effective alternative option for management of II and III degree haemorrhoid.

KEYWORDS: Arsha, haemorrhoid, Snuhiksheerharidrachurna Alepa.

INTRODUCTION

Haemorrhoid is the most common disease amongst anorectal disorders and is becoming one of the common problems in the society now a day. One of the cause for its existence is sedentary life style. This problem not only disturbs the daily routine but also it decreases the quality of life of a person. Haemorrhoids are characterized by prolapse of mass, per rectal bleeding, pain, itching and discharge. In Ayurveda science, haemorrhoids are being described as *Arsha*.

Acharya Sushruta categorized *Arsha* under *Ashtamahagada*,^[1] which shows the gravity of the disease. *Arsha* occurs in the *Guda* which is undoubtedly a vital spot i.e *Sadyopranhaar* and *mamsa marma* as per Sushruta. *Arsha* is well known for its chronicity and complexity. It is a local manifestation of systemic derangement of *dosha*. Vitiliation of *doshas* adversely

affects the digestive fire resulting in *Mandagni*,^[2] which in turn leads to constipation. Prolonged contact of accumulated *Mala* vitiates *Gudavali* and *Pradhan dhamani* which further vitiates the *twak*, *mansa* and *meda dhatu* due to *purishvah stroto dushti* leading to development of *Arsha*.^[3] The prevalent Dosha involved in the disease is *Vata*, *Pitta* and *Kapha* and *Dushya* are *Twak*, *Rakta and Mamsa*. *Arsha* is described in detail by *Bruhattrayi*, according to *Acharya Vaghbhata*, well known definition of *Arsha* (haemorrhoid) is, it is an entity in which muscular projections trouble the patients like *enemy*.^[4]

Prevalence of the disease - Globally the incidence ranges from 50-80% and in India it affects around 75% of the population. Haemorrhoids, generally has the peak prevalence at the age of 45 to 65 years and affects both the genders.^[5] As per the modern system of medicine, Haemorrhoids are the varicose condition of the veins within the anal canal in the sub epithelial region formed by the radicals of the superior, medial and inferior rectal veins. Most frequent symptoms leading to surgical intervention for haemorrhoidal sufferers are bleeding, protrusion, anorectal discomfort, discharge, pain and anaemia.

The factors associated with the development of haemorrhoids encompass constipation, straining during defecation, high fat diet and low fibre intake. Haemorrhoids are clearly divided into two categories-internal and external. Based on the degree of prolapse haemorrhoids are classified into four grades. Thus, first degree piles has visible vessels, second degree piles prolapse with defecation and restore instantly, third degree piles prolapse but requires manual replacement and fourth degree piles prolapse out of the anal canal.^[6] Most frequent symptoms leading to surgical intervention for haemorrhoidal sufferers are bleeding, protrusion, anorectal discomfort, discharge, pain and anaemia.

There are numerous treatment protocols for haemorrhoid in both modern and ayurvedic science. Based on the degree of haemorrhoids, the treatment strategies including conservative management and surgical intervention. Surgery includes sclerotherapy, rubber band ligation, stapler haemorrhoidectomy, scalpel and laser surgery, Infrared coagulation (IRC), Doppler guided hemorrhoidal artery ligation (DGHAL), LASER, radio frequency ablation, etc.^[7] But nowadays in the hard and fast life, people prefer quick relief, less hospital stay. So, it is necessary to find out effective and affordable conservative treatment option for the management of haemorrhoid.

In Ayurveda, Acharya Sushruta advocated four fold treatment for the management of Arsha viz., Bheshaja (medical management), Kshar (alkaline ayurvedic preparation) Agni (cauterization) and Shastra(surgery).^[8] Sushrata has given first preference to Bheshaja Chikitsa. Application of Alepa for the treatment of haemorrhoids can be categorized under bheshaj chikitsa. Alepa is one of the treatment modality described in Shashtiupkrama,^[9] for the management of vranashofa i.e inflammation. Alepa is common for all types of inflammatory conditions. It is advocated for the shaman of local vitiated Doshas. Arsha is the manifestation of viatiated tridoshas and rakta, mamsa dushti in anal canal. In this context, Alepa plays a crucial role in pacifying doshas as well as local rakta, mamsa dushti.

Despite advances in various procedures and better surgical approaches, post-procedural pain and disease recurrence is the most challenging problems in the treatment of haemorrhoids. On this background, application of *Snuhiksheerharidrachurna Alepa*.^[10] may prove a better treatment option for II and III degree haemorrhoids.

Alepa on Arsha (haemorrhoid) is one such treatment modality mentioned by Sushruta in Chikitsathan1/14. Most of the patients need quick relief without complications which can be attained by local application as Alepa rather than the use of internal medications. Alepa not only relieves the pain and swelling, it also alleviates dosha, causes shodhana and helps in the healing process.^[11] Acharya Sushruta has described many Alepa in the treatment of Arsha in Sushruta Arshachikitsa Adhvaya 6/12. Amongst them, one is Snuhiksheerharidrachurna Alepa. Efficacy of Snuhiksheerharidrachurna Alepa is still unexplored sufficiently on scientific base. So present study is planned evaluate the effect to of Snuhiksheerharidrachurna Alepa in Arsha with special reference to the reduction of size of pile mass as well as bleeding per rectum in II and III degree hemorrhoids.

OBJECTIVES

- 1. To evaluate the role of *Snuhiksheerharidrachurna Alepa* on reduction of size of plie mass in II and III degree haemorrhoid.
- 2. To evaluate the effect of *Snuhiksheerharidrachurna Alepa* in *Gudgata raktastrava* (PR Bleeding) and anorectal pain II and III degree haemorrhoid.

MATERIAL AND METHODS

Method of collection of Data

In current pilot study, 15 patients of both genders were randomly selected from the OPD of the Institute. Selected patients were subjected to Snuhiksheerharidrachurna Alepa after taking their voluntary consent. All aspects including medical history, physical examination and necessary laboratory investigations were recorded in specially prepared case proforma. Changes in parameters before, during, and after the intervention were recorded as well.

Study design

An observational, clinical, non- comparative study.

Method of selection of study subjects

- Inclusion criteria
- 1) Diagnosed patients of II and III degree haemorrhoids in the age group of 18-60yrs.
- 2) Selection will be irrespective of gender, religion, education and socio-economic status of the patients.

• Exclusion Criteria

- 1) Patients with grade II and III degree haemorrhoids.
- 2) Patients suffering from different pathologies of anal canal and rectum like carcinoma rectum and anal canal, ulcerative colitis, proctitis etc.
- 3) Patients with uncontrolled diabetes mellitus, immune-compromised patients
- 4) Known patients of portal hypertension will be excluded.

Methods of treatment

All patients under the study were treated on OPD basis. *Snuhiksheerharidrachurna Alepa* was applied locally in patients with II and III degree haemorrhoid and next sitting was done on 7th day if required. Follow up of the patients was taken weekly upto three weeks. Adjuvant treatment comprising *Triphala churna* 5 gm orally with luke warm water at bed time and sitz bath with *triphala kwath* thrice a day was advised.

Method of preparation of Alepa

- *Haridra churna* was prepared rom dessicated rhizomes of *haridra*.
- The *churna* of *haridra* was mixed properly with *Snuhi Ksheer* to form *Alepa*.
- This *Alepa* will be used on grade II and III degree haemorrhoids.
- Investigations: Routine haemogram, blood sugar level, HIV, HBSAg, physician fitness were carried out.
- It will be conducted according to the principles of *trividha karma*.
- Procedure for application of *Snuhiksheerharidrachurna Alepa*.

Purva karma

- 1. Routine investigations mentioned were done.
- 2. Written and informed consent of the patient taken.
- 3. Physician's fitness done.
- 4. Evacuation of bowel be done by soap water enema in morning prior to procedure.
- 5. Shaving and preparation of parts done.

Pradhan karma

Method of drug application

- 1. Under all aseptic precautions, the patient laid down in lithotomy position.
- 2. Painting and drapping of perianal area will be done.
- 3. Then, a slit proctoscope lubricated with Lignocaine 2% jelly was introduced in the anal canal.
- 4. The pile mass was fixed at the suitable place into the aperture.

Table 1:

Sr. No.	Assessment Parameters	Assessment Criteria	Grade
1. Size of pile mass		75% and above reduction in size of pile mass	0
		50% to 74% reduction in size of pile mass	1
		25% to 49% reduction in size of pile mass	2
		Below 24% reduction in size of the pile mass	3
2.	Per rectal bleeding	No bleeding	0
		Bleeding during defecation up to 5 ml	1
		Bleeding during defecation up to 10ml	2
		Splash in a pan	3
3.	Pain	No pain (score on VAS - 0)	0
		Mild pain (score on VAS- 1-3)	1
		Moderate pain (score on VAS - 4-6)	2
		Severe pain (score on VAS- 7-10)	3

- and remaining mucosa was covered with gauze to avoid *Alepa* application on normal tissue.6. *Snuhiksheerharidrachurna Alepa* was applied over
 - the fixed pile mass.

Pile mass was identified and cleaned with dry gauze

- 7. Applied *Alepa* was kept for 2 minutes in situ.
- 8. *Alepa* was removed using cotton swabs and normal saline. Same procedure was repeated for each pile mass.

Paschat karma

5.

- 1. *Trifala churna* at night was administered with luke warm water.
- 2. Sitz bath with *triphala kwatha* was advised thrice a day.
- 3. Follow up was taken on 7th, 14th day. Second sitting was done on 8th day if required.

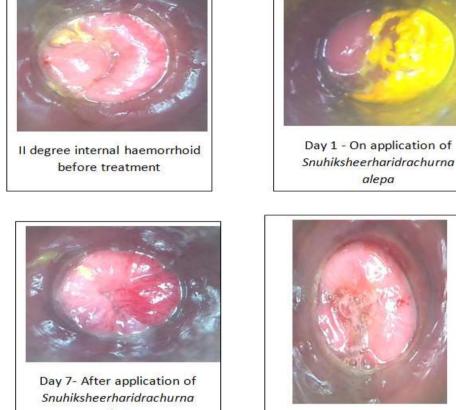
Criteria for assessment

Patients were assessed on following criteria.

Assessment Criteria

The signs and symptoms of haemorrhoid as per rectal bleeding ,pain, prolapse of mass, constipation were noted in the special case proforma during history taking of the patient Assessment of the result was done on different criteria like reduction in size of pile mass, per rectal bleeding, and ano rectal pain.

Photos



Day 21- Sloughed out haemorrhoid

Day	7- After application of
Snu	hiksheerharidrachurna
	alepa
	and the second second

OBSERVATIONS AND RESULTS Table 2: Result of the parameters. A polysis report

Analysis report Sr. No. **Parameters** Time Mean SD Median Range F- value P value Before treatment 0 0-3 3 3 2 1st day 0 2 0-2 1. Size of pile mass 295.35 < 0.0001 7th day 1.06 0.25 1 1-2 14th day 0.2 0.56 0 0 - 12.73 3 2-3 Before treatment 0.45 1st day 7th day 2 1.73 1 - 20.45 2. Per Rectal Bleeding 134.80 < 0.0001 1 0.53 1 0-214th day 0.2 0.41 0 0-1 3 Before treatment 2.66 0.48 2-3 3 1st day 2.6 0.50 2-3 3. Pain 75.74 < 0.0001 7th day 1-2 1.33 0.48 1 14th day 0.4 0.50 0 0-1

Statistical Analysis

Data analysis was done with the help of Statistician. Data was coded and entered in MS- Excel worksheet and analyzed by appropriate statistical software. Data was collected from the analytical data it was initiated that, the incidence rate of Haemorrhoid was more in 21-40 years of age group (66.67), and also male were more prone to this disease (56%). Also patient having mixed diet i.e. both vegetarian and non-vegetarian diet were found to be more prone to this study.

In the present study, interval of every 7 days assessment was done to find out the efficacy of local application of *Snuhiksheerharidra churna alepa* in terms of reduction in the size of Arsha, per rectal bleeding and pain in II and III degree haemorrhoid. Being the qualitative data, one-way repeated measure ANOVA test was applied. Highly significant results were obtained with p- value < 0.001 in all three parameters.

day respectively. P-value was 0.001 which is highly

significant This shows that this treatment modality was

On comparing the effectiveness of treatment in reducing

ano rectal pain, in every follow up, it was found that

before treatment mean score was 2.66 which was gradually reduced to 2.6, 1.33 and 0.4 on 1st, 7th and 14th day respectively. P-value was 0.001 which is highly

significant. This shows that this treatment modality was

effective in reducing the per rectal bleeding.

effective in the reducing the ano rectal pain.

On comparing the effectiveness of treatment on reduction of size of pile mass, in every follow up, it was found that before treatment mean score was 3 which was gradually reduced to 2, 1.06 and 0.2 on 1st, 7th and 14th day respectively. P-value was 0.001 which is highly significant. This shows that this treatment modality was effective in the reduction of size of pile mass.

On comparing the effectiveness of treatment in reducing per rectal bleeding, in every follow up, it was found that before treatment mean score was 2.73 which was gradually reduced to 1.73, 1 and 0.2 on 1^{st} , 7^{th} and 14^{th}

Overall assessment of therapy Table 3:

Assessment criteria	No. of patients	Percentage
100% complete cure	7	46.66
76 – 100 markedly improved	7	46.66
50 – 75 moderately improved	1	6.66
25 - 50	0	0
<25 Unchanged	0	0

Considering the overall effect 7 i.e 46.66 % patients were completely cured while there was moderate improvement seen in 6.66 % patients.

Overall effect of therapy is 91.84%.

DISCUSSION

The disease haemorrhoid affects the patients irrespective of their gender and age It was commonly found in males who work in the service sector and have more of sitting work and are likely to suffer from habitual constipation. In this study maximum number of patients were from the age group of 21- 40 years of age. Also students were more susceptible due to prolonged sitting and having spicy and junk food in their diet.

In this study, *Snuhiksheer* and *Haridra* are the major ingredients of the *Alepa*. *Snuhi*.^[13,14] posseses some qualities which are same as that of *Kshar*. *Snuhiksheer* has pH of 4.96 and *haridra* has pH 7.4 and the combination of *snuhiksheer* mixed *haridra* paste has a ph of 8.7, this increase in the alkaline nature of drugs which have the potency to burn (cauterize).^[12] *Snuhiksheer* is the latex of the plant Euphorbia nerifloria, having *ras katu, laghu and tikshna guna, vipak- katu and virya* – *ushna*. *Sudhaksheer* having properties of *Lekhana, Tikshan-Virechak, Kapha Nisarak laghu, Tikshna Snigdha Guna and ushna virya*. It cauterizes the pile mass directly because of its corrosive nature thus reducing the size of pile mass.

Snuhi and haridra both having Ushna Virya, Snuhi latex coaggulates the haemorrhoidal plexus leading to the seize of per rectal bleeding and fibrosis of the plexus, thus sloughing of the necrose tissue. Also haridra.^[15,16] has tikta katu ras, ruksha laghu guna and katu vipak and ushna virya. Haridra posseses tridoshamak, varnya, lekhana vishaghna, krimighna, vrananashak property,

ushna virya, analgesic and antimicrobial properties. *Haridra* has anti-inflammatory activity so this *alepa* helps in reducing the size and prolapse of of pile mass and maintains the local hygiene due its anti-bacterial, anti- fungal activity and hence also helps in the healing of wound and reduces the itching caused in the anal region. *Snuhi* and *haridra* both have *shoolhara* properties which helps in reducing the anorectal pain subsequently after 3 -4 days.

Thus, *Snuhiksheer haridra churna Alepa* is a better therapeutic combination in the management of *Arsha*.

CONCLUSION

Based on the analysis of statistical data, it can be concluded that application of *Snuhiksheer haridra churna Alepa* significantly reduces the size of pile mass, per rectal bleeding and ano-rectal pain. Therefore, considering overall effectiveness, it can be concluded that *Snuhiksheer haridra churna Alepa* can prove safe and better alternative option for management of haemorrhoids. There were no adverse effect observed during the course of treatment with *Snuhiksheer haridra churna Alepa*.

REFERENCES

- Sushrut samhita. Sushrutasamhita, Ayurved Tatva Sandipika. Dr. Ambikaduta Shastri. Sutra Sthan-33/4 12th ed. Chaukhamba Sanskrit Sansthan Varanasi, 2001; 126.
- 2. Agnivesh CharakSamhita, Chakrapanidutta, Kashinath Shastri. Chikitsasthan Sanskrit Sansthan. Varanasi, 2006; 355-356.
- Purishvah stroto Agnivesh. Charak Samhita. Savimarshvidhyotini hindi Vyakhya, publisher Chaukhamba bharti academy, Chikitsa Sthan, 2011; 14/6.

- Enemy Vaghbhat, Ashtangrhudayam, Vidyotini commentary. Kaviraj Atridev Gupt. Nidan Sthan-7/3. Reprint Ed, Chaukhamba Sanskrit Sansthan Varanasi, 2005; 243.
- 5. Incidence Prashant R Shinde A study of surgical profile of patients with heamorroids at a tertiary care, 2019.
- Dr.S.Das. A Concise Textbook of Surgery, published by Dr.S.Das.Calcutta, printe in March. 11th ed., 2020; 1074.
- Dr.S.Das. A Concise Textbook of Surgery, published by Dr. S. Das. Calcutta, printe in March. 11th ed.pg no.1074 treat modalities, 2020.
- Bheshaj Sushrut. Sushrut Samhita, Ayurved Tatva Sandipika. Dr. Ambikadutta Shastri. Chikitsasthan-6/3 12th Ed, Chaukhamba Sanskrit sansthan Varanasi, 2001; 36-37.
- Shashti upkram Sushrut, Sushrut Samhita, Ayurved Tatva Dr. Ambikadutta Sandipika by. shastri, Chaukhamba Sanskrit Sansthan, Chikitsasthan, 1/8; 5.
- 10. Snuhiksheer aleapa Sushrut, Sushrut Samhita, Ayurved Tatva Sandipika by Dr.Ambikadutta shastri, Chaukhamba Sanskrit Sansthan, Chikitsasthan, 6/12: 49.
- 11. Alepa alleviates dosha Sushrut, Sushrut Samhita, Ayurved Tatva Sandipika by Dr. Ambikadutta shastri, Chaukhamba Sanskrit Sansthan, Chikitsasthan, 1/14: 6.
- The Ayurvedic Pharmacopoeia Of India, Part-1, Volume-1, first edition printed, published by the controller of publications civil lines, delhi, 1990; 134,135.
- Prof.P.V Sharma, Dravyaguna Vigyan vol-2 published by chaukhamba bharti academy, 2015; 430.
- 14. The Ayurvedic Pharmacopoeia Of India, Part-1, Volume-1, first edition printed – 1990, published by the controller of publications civil lines, delhi, 60,61
- 15. Prof.P.V Sharma, Dravyaguna Vigyan vol-2 published by chaukhamba bharti academy, 2015; 162.