

## A CLINICAL STUDY OF SURAN PINDI IN ARSHA (HAEMORRHOIDS)

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## ABSTRACT

In the present time, human is full of anxiety or depression, follows sedentary routine and often under mental stress. All these factors disturb digestive system resulting in many diseases. Among them, one important group is that of ano-rectal disease, and of these, Arsha commonly known as haemorrhoids or piles is quite common in the human. Ano-rectal disorders are increasingly developing in society. Devoid many of the causes, some relevant are lethargic lifestyle, unreliable and inadequate diet, prolonged sitting or standing and some psychological disturbance as well. A clinical trial was conducted in 15 patients, each diagnosed clinically and symptomatically as Arsha (haemorrhoids). Patients were selected randomly irrespective of their religion, race, occupation, etc. They were administered Suran Pindi, a herbal formulation, at a dose of 1gm BD for two months. Patients were monitored at every 15 days interval during the study period. Constipation, bleeding, pain or discomfort, itching, size of pile mass and prolapse of pile mass were observed over the treatment.

**KEYWORDS:** Arsha, Haemorrhoids, Suran Pindi, herbal formulation.

## INTRODUCTION

In Ayurveda, life has been defined as a combination of Sharir (body), satva and aatma (soul). Each has its importance in the conservation of health and protection from diseases. In the present time, human is full of anxiety or depression, follows sedentary routine and often under mental stress. All these factors disturb digestive system resulting in many diseases. Among them, one important group is that of ano-rectal disease, and of these, Arsha commonly known as haemorrhoids or piles is quite common in the human. Ano-rectal disorders are more and more developing in the society. Devoid many of the causes, some relevant are lethargic lifestyle, unreliable and inadequate diet, prolonged sitting or standing and certain psychological disturbances too.

In Ayurveda, all Acharyas described Arsha in separate chapters and Acharya Sushruta,<sup>[1]</sup> explained Arsha in Nidan sthan chapter 2<sup>nd</sup> "Arsha nidan" and chikitsa sthan chapter 6<sup>th</sup> "Arsha chikitsa". He also described Arsha in Astha mahagada,<sup>[2]</sup> (Eight Supreme Disease). Ashta mahagada defines that the eight diseases like Vatavyadhi, Prameha, Kushta, Mudha Garbha, Arsha, Bhagandara, Ashamari and Udara Roga are dread-full diseases. This shows the gravity of this disease. Arsha is Dirghakala-nubandhi, Duschikitsya in nature and involves the Marma. Arsha occurs in Gudabhaga, which

is undoubtedly a Marma and it is well known for its chronicity and difficulty to treat.

Arsha is an adhimamsa vikara which gets formed at the gudavalies due to vitiated doshas along with the vitiated twak, mamsa and medas.<sup>[3]</sup> Fleshy bud or growth in the anal region and agony to the patient seem the most characteristic features of Arsha.

The Father of Surgery Acharya Sushruta has explained 4 types of treatment for Arsha according of different condition- 1- Bheshaj chikitsa 2- Kshar chikista 3- Agni chikitsa and 4- Shastra chikitsa

Above these types Bheshaj chikitsa is first line of treatment for Arsha because there is no complication, no fear for pain or bleeding or discomfort, etc. The patients suffering from 1<sup>st</sup> & 2<sup>nd</sup> degree piles were selected for the present study. The patients were subjected for detail clinical examination and investigations. Suran Pindi was taken for the present study. Suran Pindi has been described by Acharya Sharangdhar in his Samhita's madhyam khand and said that it is "अर्शनाशनी पराम्".

The present research work was planned for to find out an effective and safe conservative modality for Arsha in early stage of disease. The present clinical study comprises of 15 patients which were treated by oral intake of Suran-Pindi.

### Need For the Study

Although, there are many surgical and para-surgical treatment for *Arsha* (Haemorrhoids) in today's modern medical field, like Haemorrhoidectomy, Rubber-band ligation, Photo-coagulation, Cryo-surgery, sclerotherapy, *Kshar-karma*, Leech-therapy etc. All these procedure are not free from complications like pain, discomfort, etc. In *Ayurveda*, *bheshaj chikitsa* is the first line of treatment for *Arsha*, in which many herbal formulations are mentioned for successful treatment of 1 and 2<sup>nd</sup> degree pile masses without known complications. Of these *Suran Pindi* was selected for the present study.

*Suran Pindi* is described by *Acharya Sharangdhar* in his *Samhita's madhyam khand*.

#### ➤ Contents of *Suran Pindi*

- 1- *Suran*
- 2- *Chitrak mool*
- 3- *Shunthi*
- 4- *Kali Marich*
- 5- *Gud*

### Method of Preparation of Drug

lqj.k fi.Mh&

'kq'd 'kwj.k pw.kZL; Hkkxkan~okf=ka'knkgjsr~A  
HkkxkU''kksM'k fp=dL; 'kq.B;k Hkkx prq''V;e~AA  
n-okS HkkxkS efjpl;kfi lokZ.;sd=k pw.kZ;srA  
xqMsu fif.Mdka dq;kZn'kZlka ukluha ijke~AA  
'kk- lafgrk eè;e [k.M,<sup>[4]</sup>

First of all 32 parts of dry *Suran* was crushed into fine *Churna*, then 16 part of *Chitrak mool Churna*, followed by 4 parts of *Shunthi Churna* and 2 parts of *Kali Marich Churna* was taken together and 2 part of jaggery (*Guda*) was mixed to form *Vati*.

## MATERIAL AND METHODS

### Plan of Study

- Criteria of selection of patient
- Criteria for diagnosis
- Criteria for assessment

### Selection of patients

- 15 patients of *Arsha* were selected randomly from OPD and IPD of *Shalya Tantra, Rishikul Campus Hospital, U.A.U., Haridwar, U.K.* for present clinical trial.
- The study was conducted on the basis of criteria of inclusion and exclusion with detailed clinical history and physical examination and other necessary/ desired investigations.

### Selection Criteria

The patient were diagnosed on the basis of *Ayurvedic* as well as Modern parameters /examination like –

- Symptomatology
- History of the patient

- Local examination-Inspection, palpation, digital per rectal examinations, proctoscopy.

### Diagnostic Criteria

Patient having sign and symptoms of *Arsha* (Haemorrhoids) as follows-

- Constipation
- Bleeding per rectum
- Pain in anus
- Pruritus ani
- Mucus discharge
- Prolapse of pile mass
- Anemia

**Examination:** Following examination were performed on each patient-

- Inspection of the Anal region
- Digital examination
- Proctoscopy

### Investigations

- Haemogram :- Hb%, TLC , DLC, ESR, CT, BT
- Blood sugar- RBS
- HIV, HCV, HBsAg
- Urine:-routine and microscopy
- Stool:- ova and cyst

**Assessment Criteria:** Assessment was done on subjective & objective criteria before & after the treatment.

### Subjective Criteria

- Constipation
- Pain in anal region
- Itching in anal region

### Objective Criteria

- Number of pile mass
- Size of Pile mass
- Prolapse of pile mass
- Bleeding per rectum

### Grading of Assessment Criteria

#### Subjective Criteria

##### 1. Constipation

- G<sub>0</sub> – Easy evacuation of stool
- G<sub>1</sub>- Hard stool once a day
- G<sub>2</sub>- Hard stool after 2 days
- G<sub>3</sub>- Hard stool after more than 2 days

**2. Pain:** - Assessed by MRC (Medical Research Council) scale.

- G<sub>0</sub>- Absence of pain.
- G<sub>1</sub> –Mild pain- that can easily be ignored
- G<sub>2</sub>- Moderate Pain- that can't be ignored, interferes with function, and needs treatment from time to time

- G<sub>3</sub>- Severe pain – That is demanding constant attention.

### 3. Itching

- G<sub>0</sub> -No itching
- G<sub>1</sub>- Once or twice a day
- G<sub>2</sub>- Often in a day and discomfort
- G<sub>3</sub>- Severe itching and discomfort whole day

### Objective Criteria

#### 1. Number of pile mass

- G<sub>0</sub>- No pile mass
- G<sub>1</sub>- one pile mass
- G<sub>2</sub>- two pile mass
- G<sub>3</sub>- three pile mass

#### 2. Size of pile mass

- G<sub>0</sub>- Almost none
- G<sub>1</sub>- Size of the tip of little finger (approx 0.5cm)
- G<sub>2</sub>- Size of the tip of index finger (approx 0.5cm to 1.0cm)
- G<sub>3</sub>- Size of the tip of thumb (approx 1.0cm to 1.5cm)

#### 3. Prolapse of pile mass

- G<sub>0</sub>- No prolapse of pile mass
- G<sub>1</sub>- Pile mass prolapse during defecation & reduces itself
- G<sub>2</sub>- Pile mass prolapse during defecation & require manual reduction
- G<sub>3</sub>- Permanent prolapse of pile mass

#### 4. Bleeding

- G<sub>0</sub>- No bleeding
- G<sub>1</sub>- Mild bleeding with defecation (1-5 drops occasionally)
- G<sub>2</sub>- Moderate bleeding (6-12 drops)
- G<sub>3</sub>- Profuse bleeding

### Inclusion Criteria

- Any age group.
- Patients who are suffering from *Arsha* (1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> degree piles)
- Irrespective of sex.

### Exclusion Criteria

- 4<sup>th</sup> degree piles.
- Thrombosed & Strangulated piles.
- Rectal prolapse.
- Haemorrhoids associated with fissure and fistula in ano.
- Rectal polyp.
- Pregnant women.
- Patient with known systemic disorder like HTN, DM, Malignancy, etc.
- Hepatitis B, HIV, HCV positive cases.

**Drug Dose:** *Suran Pindi* tablets (500 mg each) were given orally, two tablets twice in a day, after meal with Luke warm water.

### Criteria for Overall Assessment of Therapy

1. Complete remission: 100% improvement
2. Marked Improvement: 75% to <100% improvement
3. Moderate Improvement: 50% to <75% improvement
4. Mild Improvement: 25% to <50% improvement
5. Unchanged: less than 25% improvement

### RESULT

#### Percentage relief in Symptoms.

Percentage relief in Symptom	%
1. Constipation	86.7%
2. Pain	62%
3. Itching	60.9%
4. Bleeding	84%
5. Number of pile mass	84%
6. Size of pile mass	65%
7. Prolapse of pile mass	64.3%

### DISCUSSION

1. Maximum number of patients in the present study belonged to the age group 31-40 years (5), Male (9), Resident of rural area (8), Muslim (9), Middle class (8), Serviceman (5), Married (9) and Literate (13).
2. Maximum number of patients was having addiction of both Tea and alcohol (13&10 resp.), Sedentary life style (6), and *Madhyam* body built (9).
3. Maximum patients were practiced to mix diet (12), hard stool consistency (10), Chronicity of less than 3 months were present in 7 patients and 3 patients were having family history.
4. Maximum number of patients was having *Pitta-Kapha prakriti* (8).
5. 100% patients complained of Constipation, 100% patients complained of pain, 100% patients complained of itching, 66.66% patients complained of bleeding and prolapse of pile mass was seen in 73.33% patients.

### Effect of Therapy

#### 1. Effect on Constipation

The mean rank of constipation was 2.43 which got reduced in 15 days to 1.98, then after 30 days 1.68 and in 45 days to 1.28 and in 60 days it was reduced to 1.08. Since the data is on ordinal scale (gradation), observed at specific interval of time, we have used Friedman's Test (Non parametric Repeated measures ANOVA). Statistically highly Significant result (p<0.00001) was found (%age relief-86.7%). The initial mean score of the symptom constipation was 2.43 which was reduced to 1.08 at the completion of the therapy.

#### 2. Effect on pain in ano-rectal region

The mean rank of pain was 2.37 which got reduced in 15 days to 2.37, then after 30 days 1.98 and in 45 days to 1.62 and in 60 days it was reduced to 1.39. Since the data is on ordinal scale (gradation), observed at specific interval of time, we have used Friedman's Test (Non parametric Repeated measures ANOVA). Statistically

Significant result ( $p < 0.0000122$ ) was found (%age relief=60%). The initial mean score of the symptom pain was 2.37 which were reduced to 1.39 at the completion of the therapy.

### 3. Effect on itching in ano-rectal region

The mean rank of itching was 2.25 which got reduced in 15 days to 2.02, then after 30 days 1.95 and in 45 days to 1.45 and in 60 days it was reduced to 1.23. Since the data is on ordinal scale (gradation), observed at specific interval of time, we have used Friedman's Test (Non parametric Repeated measures ANOVA). Statistically Significant result ( $p < 0.000052$ ) was found (%age relief=60.9%). The initial mean score of the symptom itching was 2.25 which was reduced to 1.23 at the completion of the therapy.

### 4. Effect on Bleeding

The mean rank of bleeding was 2.50 which got reduced in 15 days to 1.83, then after 30 days 1.65 and in 45 days to 1.45 and in 60 days it was reduced to 1.13. Since the data is on ordinal scale (gradation), observed at specific interval of time, we have used Friedman's Test (Non parametric Repeated measures ANOVA). Statistically highly Significant result ( $p < 0.000016$ ) was found (%age relief=84.0%). The initial mean score of the symptom bleeding was 2.48 which was reduced to 1.13 at the completion of the therapy.

### 5. Effect on Number of pile mass

The mean rank of number of pile mass in ano-rectal region was 2.48 which got reduced in 15 days to 1.83, then after 30 days 1.65 and in 45 days to 1.45 and in 60 days it was reduced to 1.15. Since the data is on ordinal scale (gradation), observed at specific interval of time, we have used Friedman's Test (Non parametric Repeated measures ANOVA). Statistically highly Significant result ( $p < 0.000016$ ) was found (%age relief=84.0%). The initial mean score of the symptom number of pile mass in ano-rectal region was 2.48 which was reduced to 1.15 at the completion of the therapy.

### 6. Effect on size of pile mass in ano-rectal region

The mean rank of size of pile mass was 2.73 which got reduced in 15 days to 1.83, then after 30 days 1.65 and in 45 days to 1.38 and in 60 days it was reduced to 1.27. Since the data is on ordinal scale (gradation), observed at specific interval of time, we have used Friedman's Test (Non parametric Repeated measures ANOVA). Statistically Significant result ( $p < 0.0000001$ ) was found (%age relief=65.00%). The initial mean score of the symptom size of pile mass was 2.73 which was reduced to 1.27 at the completion of the therapy.

### 7. Effect on prolapse of pile mass in ano-rectal region

The mean rank of prolapse of pile mass was 2.68 which got reduced in 15 days to 1.87, then after 30 days 1.68 and in 45 days to 1.47 and in 60 days it was reduced to 1.28. Since the data is on ordinal scale (gradation),

observed at specific interval of time, we have used Friedman's Test (Non parametric Repeated measures ANOVA). Statistically Significant result ( $p < 0.0000001$ ) was found (%age relief=64.3%). The initial mean score of the symptom size of pile mass was 2.68 which was reduced to 1.20 at the completion of the therapy.

### Discussion on drug action of Suran Pindi

- *Suran-kand* has special effect (*Prabhav*) as *Arshoghna*.<sup>[5]</sup> So it is the drug of choice in *Arsha*. As it is *Ushna*, *Tikshna guna* helps *Rakta dhatu* to flow in regular manner without any congestion at veins 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*, *Kali Marich*, *Sunthi*) in this formulation are *Katu ras pradhan*<sup>6</sup> 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 root cause of *Arsha* is *Mandagni* and *Vibandh*. So *Chitrak*, *Kali Marich* and *Sunthi* are having *Deepan*, *Pachan* and *Vata anulomak guna* due to its *Katu vipak* and *Ushna virya*.
- Thus, the *Chikitsa* with *Suran Pindi* correct the pathological disturbance of *Arsha* and ultimately patients get relief from signs and symptoms of *Arsha*.

### CONCLUSION

- *Arsha* is a common problem of middle age group irrespective of the gender. In the study majority of patients were from age group of 31-40 years of age. The knowledge of etiological factors is very essential because they are said to be half of the treatment and it is advised to patients to strictly avoid these etiological factors.
- The fourfold treatment protocol given in the textbooks of Ayurveda gives more emphasis to start with conservative management in *Arsha*.
- Present western lifestyle, bad food habits, and day to day regimen gives rise to *Mandagni* and finally leads to *Arsha*.
- Bowel habit along with prolong sitting has a significant role in development of *Arsha*.
- The disease can be diagnosed on the basis of chief complaints like Constipation & presence of *Arsha ankura*.
- In present study maximum patients have addictions like tea & alcohol. These are also to be considered for causative and aggravating factors the disease. Apart from the above factors socio - economic condition, mental stress and sedentary life style play an important role in causing and aggravating the disease.

- Oral medication of *Suran pindi* is effective in treating the constipation, control of bleeding and reduction in number as well as size of pile masses.

Thus, this classical preparation can very well be advised as a curative, cost effective conservative remedy for patients of *Arsha* (Haemorrhoids). Moreover, no adverse effects of the medication were observed during and after completion of the clinical study.

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