

AYURVEDIC MANAGEMENT OF HEMORRHOIDS***Dr Sunil Kumar Pandey**

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ABSTRACT

Human the supreme creation of almighty becomes unable to enjoy the different kind's beauty pervaded on this earth due to various diseases. A hemorrhoid is one of them. It occurs in the anal canal and cause both discomfort and embarrassment to the sufferers. Direct costs to the health care system and indirect cost through absence from work are high. It is a common problem in primary care due to sedentary life style, westernization of diet, stress and constipation. This article covers the causes, pathology, clinical presentation and ayurvedic management of hemorrhoids.

KEYWORDS: hemorrhoids, dentate line, thrombosis, surgery, ksharsutra.

INTRODUCTION

Varicosities of the veins of anal canal are known as hemorrhoids.^[1] It is also known as piles. It may be internal or external depending on the position of the varicosity. If it is above the dentate line it is called internal hemorrhoids and if it below the dentate line it is called the external hemorrhoids. So internal hemorrhoid is covered by mucous membrane where as the external hemorrhoid is covered with skin. The primary piles occur in 3, 7, and 11 o'clock position of the anal wall (when viewed in the lithotomic position).^[2] They are formed by enlargement of the three main radicals of the superior rectal vein which lie in the anal columns, which occupy the left lateral, right posterior and right interior position. Varicosities in other position in the lumen are called secondary piles.

Causes: The exact cause of symptomatic hemorrhoids is unknown^[3] but the numbers of factors are believed to play the cause of piles may be the following

- Constipation causes excessive straining.
- Diarrhea

- Sitting or standing for long periods of time
- Obesity
- Heavy Lifting
- Pregnancy, due to compression on superior rectal veins or due to progesterone which relaxes smooth muscle in the wall of the veins.
- Carcinoma of rectum, by blocking the veins can produce back pressure and can manifest as piles.
- Portal hypertension is an uncommon cause of piles.
- Familial or genetic absence of valves or congenital weakness of vein wall.

Clinical features

Internal Hemorrhoids

Painless Bleeding-- Fresh bleeding occurs after defecation-**Splash in the Pan.**^[4] This causes chronic anemia. Life threatening bleeding is even more uncommon^[5] other symptoms may include mucus discharge, a perianal mass if they prolapsed through the anus, itching and fecal incontinence. *Pain is rare as they originate above dentate line.*

Grades: for practical purpose internal hemorrhoids can be divided into four grades.

I- Hemorrhoids only bleed

II- Prolapses during defecation and reduce spontaneously after defecation

III- Require replacement

IV- Permanently Prolapsed



■ External Hemorrhoids

Asymptomatic except when secondary thrombosis. Thrombosis may result from defecators straining or extreme physical activity or may be random event. Patient presents with constant

anal pain of acute onset. Physical examination identifies external thrombosis as purple mass at anal verge.

Investigations

- Hemorrhoids cannot be felt by rectal examination unless they are thrombosed.
- Proctoscopy – As the obturator is removed, piles prolapsed into the lumen of proctoscope as cherry red masses.

Complications

- It can cause chronic anemia.
- This causes painful lumps in the anal area.
- Ulceration and secondary infection.
- Thrombosis and fibrosis.

Treatment of piles

1. RUBBER BAND LIGATION

- Grade I or Grade II hemorrhoids and, in some circumstances, Grade III hemorrhoids.
- Complications include bleeding, pain, thrombosis and life threatening perianal sepsis.
- Successful in two thirds to three quarters of all individuals with first and second degree hemorrhoids.

2. INFRARED COAGULATION

- Generates infrared radiation which coagulates tissue protein and evaporates water from cells.
- Most beneficial in Grade I and small Grade II hemorrhoids.

3. SCLEROTHERAPY

- Injection of an irritating material into the sub mucosa in order to decrease vascularity and increase fibrosis.
- Injecting agents have traditionally been 5% phenol in almond oil, sodium morrhuate, or quinine urea.

4. Lords dilation: Manual anal dilatation was first described by Lord.

5 Cryosurgery Cryotherapy was used in the past with the belief that freezing the apex of the anal canal could result in decreased vascularity and fibrosis of the anal cushions.

6 HAEMORRHOIDECTOMY

- The triangular shaped hemorrhoid is excised down to the underlying sphincter muscle.
- Wound can be closed or left open
- Stapled hemorrhoidectomy has been developed as an alternative to Standard hemorrhoidectomy

According to **acharya Sushruta** there are **four** methods for the managements of hemorrhoids^[6]

- **Aushadh**- the employment of (active) medicinal remedies,
- **Kshara**- the application of an alkali (into the seat of the disease),
- **Agni** - actual cauterization (of the polypii)
- **Shastra karma**- surgical operation.

Conservative management

- Use laxative in case of constipated patient like triphla churna, panchsakar churna etc.
 - Use of grahi aushdhi in case diarrhea patient like kutajarist 20ml bd after meal with equal water
 - Arshkuthar ras 125mg tds
 - Abhayarist 20ml bd after meal with equal water
 - Kankayan modak 1 tds
 - Pranada gutika 1 tds^[7]
 - Kasishadi tail per rectal 3ml bd in bleeding piles
- **Taktra** has been highlighted to be one of the best dravya in piles patients.^[8]
- Two single drugs, **Kutaja** and **Bhallataka** is drug of choice in piles.^[9]

Treatment of piles by ksharsutra ligation

Kshara sutra is a medicated thread (Seton) coated with herbal alkaline drugs like Apamarga (Kshara –ash of *Achyranthus aspera*), Snuhi (*Euphorbia neruifolia*) latex and haridra (*Curcuma longa*) powder in specific order



- First of all clean local area after lying down the patient in lithotomic position.
- Inject the local anesthesia (lignocain2%) in pile mass with the help of proctoscope.
- Hold the pile mass with pile holding forceps.
- Transfix the pile mass with ksharsutra.
- In case of multiple piles mass ligate with Kshara sutra one by one.
- After ligating piles mass sterile bandaging is done.

CONCLUSION

Hemorrhoids can be prevented by eating high fiber diet, drinking plenty of liquids, doing sufficient regular exercise, should avoid long periods of standing or sitting, don't strain and go as soon as you feel the urge. Hemorrhoids treated by Kshara sutra ligation in comparison to hemorrhoidectomy has maximum advantage like minimum hospital stay, no bleeding during or after ligation, no post operative anal stenosis, less pain and a low cost therapy.

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