

**“COMPARATIVE CLINICAL STUDY OF APAMARGA KSHAR
PRATISARAN AND SNUHIKSHIRADI LEPA IN THE MANAGEMENT
OF ABHYANTAR ARSHA W.S.R TO 1st AND 2nd DEGREE INTERNAL
HAEMORRHOID”**

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ABSTRACT

In our daily routine practice, we come across a number of patients, who are complaining about per rectal bleeding, unsatisfied feeling after defecation, constipation, indigestion. The main cause for this high incidence is our changed life - style. The ultimate result of this is altered bowel habits which finally results in constipation which may lead to Arsha i.e. Haemorrhoids. The treatment in the modern science has some side effect so for the rational ,potent treatment, 2 group of patients were taken which includes 30 in each group and in that, first group have given Apamarg kshar pratisaran while second group have given Snuhikshiradi lepa. In this way comparative study was done and results are analysed.

KEYWORDS: Apamarg kshar pratisaran, Snuhikshiradi lepa.

INTRODUCTION

The Ayurveda system of medicine has been prevalent in India since the Vedic period, Ayurveda is known to mankind since existence of mankind on earth. We come across a number of patients, who are complaining about per rectal bleeding, itching, pain, unsatisfied feeling after defecation, constipation, indigestion. The main cause for this high incidence is our changed life - style. We have entered into 21st century and enjoying the advances and facilities of the new millennium. One could surely state that there are dramatical changes in

life - style as compared to traditional ancient one. Today, life has become so fast that everything is calculated in terms of time. Time is valuable for everybody but nobody has time to spare for his own physical fitness. Accordingly, dietary habits and living style has totally changed. Traditional freshly prepared food is replaced by stored, preservatives added packaged food, spicy, and fast food is consumed by the people daily which were taken previously very occasionally. In terms of Ayurveda today's dietary habits are totally controversial, that is, it is totally against the 'Ahar-vidhi visheshayatane'. The ultimate result of this is altered bowel habits which finally results in constipation which may lead to Arsha i.e. Haemorrhoids.

The progressive pathogenesis of disease produce various symptoms in patients such as bleeding, prolapse, pruritus ano, pain etc. to treat this ailment numbers of modalities are present having their own importance.

In the management of haemorrhoids the procedures, which are world widely practicing at present in modern surgery, are like Sclerotherapy, rubber band ligation, cryosurgery, infra-red coagulation (IRC) and haemorrhoidectomy, Doppler Guided Haemorrhoidal Artery Ligation (DGHAL). But not all of them have been uniformly accepted. Unfortunately all these techniques have some complications.

In ancient era, four types of treatment were used for treatment of Arsha- Bhaishajyakarma, Shastrakarma, Ksharakarma, and Agnikarma. This approach seems to be graded on the basis of particular symptom complexes of the diseases. Among these "Kshar" is the preferred treatment for abhyantar arsha (1^0 & 2^0 degree internal haemorrhoids). Local application of Kshar reduces size of pile mass by fibrosing it, & patient gets relief. In this study effect of Apamarg kshar pratisaran have compared with effect of local application of Snuhikshiradi lepa in the management of abhyantar arsha W.S.R to 1^{st} and 2^{nd} degree internal haemorrhoid.

AIM

To compare effect of Apamarga kshar pratisaran and Snuhikshiradi lepa in the management of abhyantar arsha w.s.r to 1^{st} and 2^{nd} degree internal haemorrhoid.

OBJECTIVES

1. To study the effect of Apamarga kshar pratisaran in the management of abhyanter arsha w.s.r to 1st and 2nd degree internal haemorrhoid.
2. To study the effect of Snuhikshiradi lepa in the management of abhyanter arsha w.s.r to 1st and 2nd degree internal haemorrhoid.
3. To study the ancient and modern literature of arsha and haemorrhoid.
4. To study the ancient literature of kshar application.

MATERIAL AND METHOD-**TYPE OF STUDY**

Open Randomized Parallel comparative experimental Clinical study.

SELECTION OF PATIENTS Patients from M.A.P. Hospital, Mumbai, Shalya tantra OPD & IPD were selected. 60 patients of abhyantar arsha were selected (I^O & II^O degree internal haemorrhoids of both sexes were equally divided into two groups)

GROUP “A”: - 30 patients

(Apamargakshar pratisaran) was done

GROUP “B”;-30 patients

(Snuhikshiradi lepa local application) was done

DRUG

Apamarga kshar and Snuhikshiradi lepa was prepared in the Bhaishajya kalpana department of concerned Institute according to text in Sushruta samhita. The drug standardization and authentication was done by G.M.P certified pharmacological lab. Snuhikshiradi lepa drugs- Snuhikshir and Haridra.

LATIN NAMES

Apamarga-Achyranthes aspera Snuhi-Euphorbia nerifolia Haridra-Curcuma longa.

INCLUSION AND EXCLUSION CRITERIA Inclusion criteria

- 1) Pt. of age more than 18 & less than 70 yrs.
- 2) Pt. of both sexes (both male & female)

3) I⁰ & II⁰ internal haemorrhoids.

Exclusion criteria

- 1) 3rd and 4th degree haemorrhoids.
- 2) Thrombosed haemorrhoids.
- 3) Haemorrhoids with ulcerative colitis.
- 4) HIV positive Patient
- 5) Prolapse of Rectum
- 6) Patient with hepatic disorder
- 7) Diabetic patient
- 8) Tuberculosis patient
- 9) External haemorrhoids.
- 10) Fissure in ano
- 11) HB% below 5 gm%

INVESTIGATIONS

- 1) CBC, ESR 2) Blood Sugar Level – F & PP 3) HIV
- 4) HBsAg 5) BT, CT 6) Urine – R & M 7) Digital rectal examination 8) Proctoscopy

ASSESSMENT CRITERIA (1) Per Rectal Bleeding

0- No bleeding.

1-occasional bleeding with defecation. (Once or two times in week)

2-Regular bleeding with defecation (Few drops)

3-Regular profuse bleeding with defecation (splash in the pan)

(2) Pile mass

0- No pile mass

1- Pile mass into anal canal seen during proctoscopy

2- Pile mass come out from the anus during bowel movement then goes back inside by itself

(3) Itching (Gudkandu)

0- No itching

1- Mild itching (Itching remains for 1 hour after defaecation).

2- Moderate itching (Itching remains up to 4 – 5 hours after defaecation).

3- Severe itching (Itching remains for whole day intense type).

(4) Hb % assessment.

0- Greater than 10 gm%

1- Hb level 9.1 to 10 gm%

2- Hb level 8.1 to 9 gm%

3- Hb level less than or equal to 8 gm%

FOLLOW UP: -On 1, 3, 7, 14, 21 days**OBSERVATION**

All Patients were advised proper diet and to avoid constipation and use Gandharva haritaki churna 2 or 3 gm at night and sitz bath at least twice in a day.

OBSERVATION TABLE

Follow up Days	Day 1	Day 3	Day 7	Day14	Day 21
1.Per Rectal Bleeding					
2. Pile mass					
3. Itching (Gudkandu)					

Follow up	Before Treatment	After Treatment
Hb%		

CRITERIA FOR RESULT ASSESSMENT

1. **Cured- (Excellent Improvement)** More than 75% relief in signs & symptoms.
2. **Improved- (Good Improvement)** above 50 but below 75% relief.
3. **Relieved- (Poor Improvement)** Relief in signs & symptoms between 25 to 50%.
4. **Not cured (Unchanged)** - Less than 25% relief in signs & symptoms.

OBSERVATION AND RESULT Wilcoxon signed rank test -Group A

Lakshan	B.T		A.T		% of relief	P value
	Mean	SD	Mean	SD		
Bleeding	1.533	0.7761	0.2000	0.4068	86.93%	<0.0001 ES
DOH	1.633	0.4901	0.2667	0.4498	83.43%	<0.0001 ES
Itching	0.900	0.8030	0.1000	0.3051	88.88%	<0.0001 ES
HB%	1.967	0.6149	1.100	0.7120	45.78%	<0.0001 ES

Here in all lakshanas 'P' value is <0.0001 that means result is extremely significant.

Group B

Lakshan	B.T		A.T		% of relief	P value
	Mean	SD	Mean	SD		

Bleeding	1.700	0.7944	0.033	0.1826	98.23%	<0.0001 ES
D.O.H	1.667	0.4795	0.3667	0.4901	81.25%	<0.0001 ES
Itching	1.067	0.7849	0.033	0.1826	97.16%	<0.0001 ES
HB%	1.900	0.8030	0.9667	0.8037	48.95%	<0.0001 ES

Here in all lakshanas 'P' value is <0.0001 that means result is extremely significant.

Man-Whitney's test

Sr No	Bleeding		Mean	SD	P value
1	A.T	Grp – A	0.200	0.4068	0.2457
		Grp – B	0.033	0.1826	

Sr No	D.O.H		Mean	SD	P value
1	A.T	Grp – A	0.2667	0.4498	0.5006
		Grp - B	0.3667	0.4901	
Sr No	Itching		Mean	SD	P value
1	A.T	Grp – A	0.1000	0.3051	0.6434
		Grp – B	0.0333	0.1826	

Sr No	HB		Mean	SD	P value
1	A.T	Grp – A	1.100	0.7120	0.5360
		Grp – B	0.9667	0.8087	

Comparison between two groups with respect to symptom score by Mann-Whitney test: This was done by applying Man-Whitney test. There was no significant difference found between Group A and Group B in all symptoms. The p value is >0.05 which means the therapy in Group A was equally effective as in Group B with respect to above symptoms.

CHI- SQUARE

SYMPTOM WISE STASTICAL ANALYSIS OF THE RESULT BY CHI- SQUARE TEST –FOR GROUP A

Sr.No	Symptoms	Grades				Chi-square	'P' value	Result
		0	1	2	3			
1	Bleeding					36.194	<0.0001	Sig.
	B.T	2	13	12	3			
	A.T	24	6	0	0			
2	DOH					41.474	<0.0001	Sig.
	B.T	0	11	19	0			
	A.T	22	8	0	0			
3	Itching					19.308	<0.0001	Sig.
	B.T	11	11	8	0			

	A.T	27	3	0	0			
4	HB%					18.429	0.0004	Sig.
	B.T	0	6	19	5			
	A.T	6	15	9	0			

FOR GROUP B

Sr. No	Symptoms	Grades				Chi-square	'P' value	Result
		0	1	2	3			
1	Bleeding					48.916	<0.0001	Sig.
	B.T	2	9	15	4			
	A.T	29	1	0	0			
2	DOH					39.048	<0.0001	Sig.
	B.T	0	10	20	0			
	A.T	19	11	0	0			
3	Itching					31.227	<0.0001	Sig.
	B.T	8	12	10	0			
	A.T	29	1	0	0			
4	HB%					19.474	0.0002	Sig.
	B.T	0	11	11	8			
	A.T	11	11	8	0			

DISCUSSION**I) GENERAL DISCUSSION**

1) Among the 60 patients selected for the study maximum No. of patients were of age group 30-39, followed by group 40-49. 2) Among the 60 patients maximum No. of patients were male. This difference may be due to shyness of female patient to discuss the ailment of private organs. 3) There were maximum Muslim patients, may be they have habit of spicy and non-veg diet. 4) maximum patients were doing sedentary work, because of lack of exercise which causes indigestion and constipation which main factor for developing haemorrhoids. 5) Among 60 patients maximum patients were having mixed diet. It is due to constipation leading to increased abdominal pressure due to straining at stool, as non-vegetarian food doesn't have roughage and leads to constipation. 6) Maximum No. of patients were having constipation because it is most important reason for haemorrhoid.

II) CLINICAL PARAMETER

Considering the signs and symptoms during the treatment and subsequent follow up the data generated was subjected to appropriate statistical test.

By applying **Wilcoxon Signed Rank test** to **group A**, Here in all lakshanas 'P' value is <0.0001 that means result is extremely significant. It means drug had positive result on bleeding, D.O.H, Itching, Hb%.

By applying **Wilcoxon Signed Rank test** to **group B**, Here in all lakshanas 'P' value is <0.0001 that means result is extremely significant. It means drug had positive result on bleeding, D.O.H, Itching, Hb%.

Comparison between two groups with respect to symptom score by

Mann-Whitney test

This was done by applying Man-Whitney test. There was no significant difference found between Group A and Group B in all symptoms. The p value is >0.05 which means the therapy in Group A was equally effective as in Group B with respect to Bleeding, D.O.H, Itching, Hb%.

CHI - SQUARE TEST

It has shown that the shifting of gradation was present from before treatment to after treatment in Bleeding, D.O.H, Itching, Hb%.for both Group A and Group B. i.e. both treatments are effective. In accordance to the clinical parameters, for Group A, 15 patients i.e. 50 % were completely cured and 10 patients 33.33% patients are relieved by the treatment and 5 patients i.e.16.66 % are poorly improved, none of the patient are in not improved category. This suggest that the treatment is effective and is done with proper technique and precautions. In accordance to the clinical parameters for Group B, 17 patients i.e. 56.66% were completely cured and 12 patients i.e. 40 % are relieved by the treatment and 1 patients i.e. 3.33 % are poorly improved, none of the patient are in not improved category and none in the complication category or not improved.

Mode of action

1)Apamarga kshara was used as pratisaran. It has cleansing (shodhan), Chemical cautry (dahan), drying (stambhan), and debridement (lekhan) properties After the application of kshara the immediate colour change was observed, which may be due to haemolysis of the blood in the haemorrhoidal plexus.

kshara is having properties like Ushna, Tikshna, Dahan, Pachan, Daran, Vilayan, Shodhan, Stambhan and Lekhan. Because of all above corrosive and chemical action it directly

cauterized the haemorrhoidal mucosa .Due to this the bleeding and size of haemorrhoid are reduced. After application of kshara the colour change suggest that there may be coagulation of the protein in the haemorrhoidal plexus, this may cause degeneration of the hemoglobin into Haem and Globin, this leads to further necrosis of the tissue in the haemorrhoidal plexus. This necrosis tissue sloughs out for the 3 to 7 days as the bluish black discharge.

2)In the Snuhikshiradi lepa there are Snuhikshir and Rajani churna(Haridra),in this Snuhi by katu ,tikta and Kashaya ras ,ushna virya cause corrosive action on haemorrhoidal mucosa and Haridra is antiseptic ,anti-inflammatory so helps in the normal mucosa formation.

3)Excellence of both therapy over surgical management-a)minimal trauma b)no anaesthesia c)no incontinence d)patient can perform daily activity e)cost is less f)no recurrence rate.

CONCLUSION

1. Haemorrhoid is a common ano-rectal disease.
2. We can say that mix diet causing constipation and nature of work contribute to the manifestation of haemorrhoids disease
3. In haemorrhoids some patients were having low level of haemoglobin and among most of patients were addicted.
4. Less or minimal complication (sometime local oedema is observed if kshar applied below dentate line)
5. Better results were observed in all patients for various symptoms therefore, it can be concluded that treatment given in both group is equally efficient.
6. The drug has no side effect and found quite safe.

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