

## EFFICACY OF *JALAUKAVACHARANA* IN THE MANAGEMENT OF ARSHA W.S.R TO PROLAPSED THROMBOSED EXTERNO INTERNAL HAEMORRHOIDS – A CASE STUDY

\*Dr. Akshada V. Kadam<sup>1</sup> and Dr. Shankar V. Annapure<sup>2</sup>

<sup>1</sup>\*M.S Shalyatantra (P.G. Scholar, Final Year), GAC, Nanded, Maharashtra, India.

<sup>2</sup>Professor and guide, Shalyatantra Department, GAC, Nanded, Maharashtra, India.

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### \*Corresponding Author

**Dr. Akshada V. Kadam**

M.S Shalyatantra (P.G.  
Scholar, Final Year), GAC,  
Nanded, Maharashtra, India.

### ABSTRACT

In the present era, we are blessed with many improved life aids. Besides this, today's life style has given us many ailments. *Arsha* (haemorrhoids) is one of it which affects all economical group of population. *Arsha* is *gudagata mamsa vikar* and as "*Guda*" is one of the vital *marma*, *Acharya Vagbhata* advised *Raktamokshana* in various ways in *Arsha vyadhi*. *Jalaukavacharana* -simple, minimally invasive procedure and can be carried out easily. thrombosed haemorrhoids are clot forming engorgement of blood vessels at anal orifice. it is a very painful and uncomfortable condition. The present case study was done

to evaluate the efficacy of *Jalaukavacharana* in the management of prolapsed thrombosed externo-internal haemorrhoids followed by *Awagaha sweda* (medicated sitz bath) and laxative. The inflammation and pain gets reduced by leech application which is less commonly achieved by other conventional management. Though it is not the radical treatment for the disease, but it gives early symptomatic relief to the patient. the saliva of leeches contain more than 100 bioactive substances which have bacteriostatic, analgesic, anti oedematous properties. It provides local analgesic, anti inflammatory action and reduction in size of pile mass. The observation may help in further study as "*jalaukavacharana*" A best parasurgical procedure in management of prolapsed thrombosed externo-internal haemorrhoids.

**KEYWORDS:** *Arsha*, haemorrhoids, *jalaukavacharana*.

## INTRODUCTION

In the present era, we are blessed with many improved life aids. Besides this, today's life style have given us many ailments. *Arsha* (haemorrhoids) is one of it which affects all economical group of population.<sup>[1]</sup>

अरिवत्प्राणिनो मांसकीलका विशसन्ति यत्।

अर्शोसि तस्मादुच्यन्ते गुदमार्गनिरोधतः॥ अ.ह.नि. 7/1<sup>[2]</sup>

*Arsha* is fleshy projection (*Manskeel*) in the *gudavalis* and that creates obstruction in the *gudamarga* and disturbs normal activity of body like enemy.<sup>[3]</sup>

*Arsha* is *gudagata mamsa vikar*<sup>[3]</sup> and as “*Guda*” is one of the vital *marma*<sup>[4]</sup>, even though *Acharya Vagbhata* advised *Raktamokshana* in various ways in *Arsha vyadhi*<sup>[5]</sup>. we have used *Jalaukavacharana* -simple and minimally invasive procedure.

In the modern science, haemorrhoids are dilated veins within the anal canal<sup>[6]</sup> thrombosed haemorrhoids are clot forming engorgement of blood vessels at anal orifice.<sup>[7]</sup> it is a very painful and uncomfortable condition.

Leech is indicated to remove the stagnated blood. the saliva of leeches contain more than 100 bioactive substances which have bacteriostatic analgesic, anti oedematous properties and lead to elimination of micro circulation disorder, restores permeability of tissues and organs.<sup>[8]</sup>

The inflammation and pain gets reduced by leech application which is less commonly achieved by other conventional management. Though it is not the radical treatment for the disease, but it gives early symptomatic relief to the patient.

The present case study was done to evaluate the efficacy of *Jalaukavacharana* in the management of prolapsed thrombosed externo-internal haemorrhoids followed by *Awagaha sweda* (medicated sitz bath) and laxative.

## AIM

To study the effect of *jalaukavacharana* in the management of prolapsed thrombosed externo-internal haemorrhoids.

## OBJECTIVES

- 1) To study the management of prolapsed thrombosed externo-internal haemorrhoids with the help of ayurvedic parasurgical procedure.
- 2) To study the effect of *jalaaukavacharana* in prolapsed thrombosed externo-internal haemorrhoids to reduce pain, inflammation and size of pile mass.

## METHOD

A clinical case study of prolapsed thrombosed externo internal haemorrhoids.

*Jalaaukavacharana* done on 1<sup>st</sup> day of O.P.D visit in GAC, Nanded.

Patient was advised for second setting after 7 days. but as the thrombosed and prolapsed pile mass gets reduced on 7<sup>th</sup> day, there was no need of second setting. patient was advised for follow up on 7,14<sup>th</sup> day and told for *pathya aahar-vihar*, *nidana parivarjana*, and *awagaha sweda* and laxative.

## CASE REPORT

A male patient of name :- XYZ / male

Age :- 60 yrs ; address :- Ganesh nagar, Nanded

OPD Reg no.:- 6740 came in opd no.6 of *shalya* department in government ayurvedic hospital, nanded.

He had following complaints

1. Mass felt at anal verge
2. Severe pain in anal region
3. Difficulty in passing stool and
4. Constipation.

He was healthy before 5-6 days. then he was complaining for above symptoms since 5 days. As symptoms get aggravated, so for the management. patient come in O.P.D.

## Past history

No H/o – DM/HTN/PTB/Asthma or any other major illness

S/H/O – No any major surgical history noted

No H/O – any drug allergy.

**Family history**

No relevant family history noted.

**Personal history**

Occupation :- auto driver

Addiction :-tobacco chewing (□ 25-30 yrs)

Diet :- mixed (non veg- more)

Appetite :- regular

Urine :- regular

Stool :- constipated bowel

**O/E**

G.C – fair, afebrile

No pallor

P.R – 74/min

No icterus

B.P – 130/90 mm hg

No lymphadenopathy

Temp – 97.2 F

No clubbing of nails

**S/E**

R.S :- Air Entry Bilaterally Equal and Clear.

No abnormal sounds heard.

C.V.S :- S<sub>1</sub> S<sub>2</sub> normal

No Cardiac Murmur heard

C.N.S :- Conscious and Oriented

P/A :- Soft, Non tender

Liver, Spleen not palpable.

**Local Examination**

Patient was examined in left lateral position.

1) Perianal region :- NAD

2) Anal verge :-Externo- internal prolapsed thrombosed haemorrhoids at 3,7 and 11' o clock position.

- tenderness present

-non reducible

3) P//R digital – not done (as it was painful)

4) P/S – not done.

So, it was diagnosed as a case of externo -internal prolapsed thrombosed haemorrhoids.

### Investigations

Hb:- 10.8 gm %

B.T :- 3.40 min

C.T :- 3.45 min

BSL® :- 93 mg/dl

HIV I & II :- Non reactive

HbsAg :-Non reactive

### Nidanpanchaka

#### Hetu(causes)

- 1) *Guru, vidahi aahar sevan*
- 2) *Utkatukasan (squatting position), visham kathin aasana*
- 3) *prushtayan (yansankshobh)*
- 4) *vega vidharana*
- 5) *atipravahanat (constipation)*
- 6) *matsya aja aavik pishit bhakshnat*

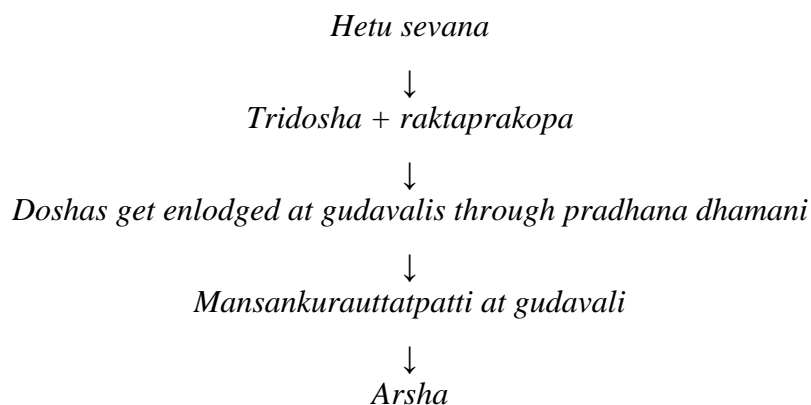
### Purvarupa

*Avyakta lakshana.*

### Rupa

Mass felt at anal verge, severe pain in anal region, difficulty in passing stool and constipation.

### Samprapti



**Figure 1: pathogenesis in patient.**

**Upashaya***Jalaukavacharana*

Medicated sitz bath (betadine solution and mgso<sub>4</sub> powder) and laxative (*gandharva haritaki churna*).

**Chikista***Jalaukavacharana*

Written informed consent of patient was taken.

**Procedure:-** The *jalaukavacharana* procedure was done on the local site of the prolapsed and thrombosed extemo- internal pile mass.

Step 1 - Inspection was done of local site and preparation of part was done.

Step 2 – comfortable position was given to the patient (left lateral position.)

Step 3 – A *nirvish* and hungry *jalauka* choosen, the *jalauka* who speedly swim in water. This *jalauka* put in *sarshap churna jala* to make her potential to suck blood.

Step 4 – *jalauka*'s mouth was put over the pile mass.

Step 5 – 30 min was taken by *jalauka* for blood letting. it removed herself after sufficient amount of blood sucking. About 15ml of blood letting was done.

Step 6 – dressing was done at *jalaukavacharana* site.

Step 7– *jalauka*'s *vaman* was done with the help of turmeric powder. And it is kept in new fresh water bottle.

Oral medication :- *Gandharva haritaki churna* 5gm at night time with lukewarm water.

Local application : -sitz bath with betadine solution and mgso<sub>4</sub> powder.

**RESULT AND DISCUSSION**

*Jalaukavacharana* helps to relieve pain and inflammation at local site of prolapsed thrombosed extemo- internal pile mass.

It also provide reduction in size of pile mass.

**A] Assessment criteria<sup>[9]</sup>**

- 1) Pain
- 2) Tenderness
- 3) Mass prolapsed
- 4) Difficulty to pass stool

Above symptoms were taken into considerations under grading system according to their severity.

No symptom – 0

Mild – 1

Moderate – 2

Severe – 3

Observations were done before treatment, after treatment, and on 7<sup>th</sup> and 14<sup>th</sup> day of treatment.

**Table No. 1: Assessment of patient.**

Variables	Before Treatment	After application of Leach	On 7 <sup>th</sup> day of treatment	On 14 <sup>th</sup> day of treatment
Pain	3	2	0	0
Tenderness	3	1	0	0
Mass prolonged	3 (IV degree)	2 (IV degree)	0 (II degree)	0 (II degree)
Difficulty to pass Stool	3	Can't predict just after leach application	1	0

**B]** In the above case, the symptoms are typical described in *vagbhata samhita* and where they have advised *Raktamokshana*.

अवर्तमानमुच्छूनकठिनेभ्यो हरेदसृक्।

अर्शोभ्यो जलजाशस्त्रसूचीकूर्चैः पुनः पुनः॥ अ.ह.चि. 8/28-29<sup>[6]</sup>

*Sanchit dushta rudhira* (thrombosed)

*Shoon* (swelling) *arsha* (pile mass)

*Kathin* (hard) *arsha* (pile mass)

As “*Guda*” is one of vital *marma* and leech application is simple and minimally invasive procedure, we had done *Raktamokshana* by *Jalaukavacharana*.

So as soon as ‘*Avartamanam*’ (*sanchit*) *dushta rudhira* i.e, (stagnated blood) was removed from *vyadhi lakshanotpatti sthana*, there was relief in pain and other symptoms also.

**C]** Ayurveda describe many parasurgical procedures and *jalaukavacharana* is one among them. since to relieve pain and inflammation as early in thrombosed and prolapsed haemorrhoids has limited options, so new therapeutic approaches should be considered.

Different mechanisms many explain the observed effects. Several biologically active substances besides hirudin (thrombin inhibitor which inhibit conversion of fibrin to fibrinogen and prevents blood clotting) have been found in leech saliva such as vasodilators (anti histamines), hyaluronidases, kallikrein, and tryptase inhibitors and natural anaesthetic substance.<sup>[10]</sup>

Due to presence of anti inflammatory substances in the saliva of medicinal leeches, leech therapy has been used in recent times to treat localised inflammation and pain.<sup>[11]</sup>

D) Though, we know *jalaaukavacharana* is not the radical treatment for prolapsed and thrombosed externo internal haemorrhoids, but it will help to reduce pain and inflammation in it. the ayurvedic treatment mentioned in *samhitas* includes *bheshaja*, *kshar*, *agni*, *shastra*<sup>[12]</sup> and *parisheka*, *awagaha*, *dhupana*, *gudavarti*, *lepa* by *arshoghana dravyas*.<sup>[13]</sup>

Modern science has also mentioned the treatment as analgesic to relieve pain and laxative to prevent constipation. If symptoms continue even after conservative treatment, surgery may be needed.<sup>[14]</sup>

*Jalaaukavacharana* followed by *awagaha sweda*, laxative, *pathya aahar* and *nidana parivarjana* helps to relieve the symptoms of patient.

## CONCLUSION

It is concluded that *jalaaukavacharana* plays an important role in the management of prolapsed thrombosed externo -internal haemorrhoids. It gives instant relief in pain and have good anti inflammatory action.so this observations may help in further as “*jalaaukavacharana*” A best parasurgical procedure in management of prolapsed thrombosed externo- internal haemorrhoids.



**Pictures****Before treatment**

**Figure 2a: prolapsed thrombosed external haemorrhoids (lithotomy position)** **Figure 2b: prolapsed thrombosed external haemorrhoids (left lateral position)**



**Figure 3a: During leech application.**

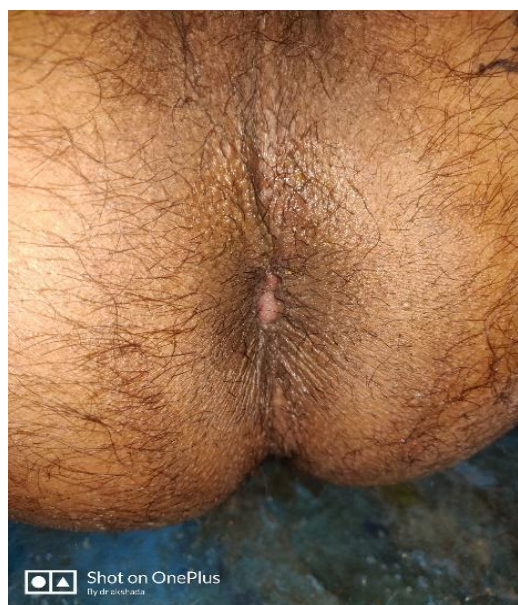
**Figure 3b: During leech application**

**After Leech application**

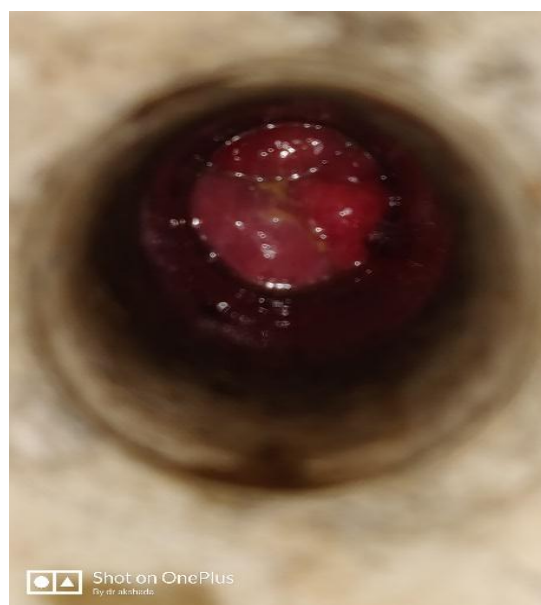
**Figure 4a: After leech application (lithotomy Position)**



**Figure 4b : After leech application (left lateral position)**

**1<sup>st</sup> Fallow up (on 7<sup>th</sup> day)**

**Figure 5a: External Thrombosed Haemorrhoids Reduced.**

**2<sup>nd</sup> Fallow up (on 14<sup>th</sup> day).**

**Figure 5b: internal thrombosed and Prolapsed haemorrhoids reduced.**





**Figure 6a: external thrombosed haemorrhoids reduced**



**Figure 6b: internal prolapsed and thrombosed haemorrhoids reduced.**

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