WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 8.084

Volume 11, Issue 13, 1992-2001.

Research Article

ISSN 2277-7105

PALASH PRATISARANEEYA TIKSHNA KSHARA IN SECOND **DEGREE HAEMORRHOID – A CLINICAL EXPERIENCE**

¹*Moriom Hembrom, ²Pankaj Kumar Barman, ³Ramakanta Sarmah and ⁴Champak Medhi

¹PG Scholar Department of Shalya Tantra, Govt. Ayurvedic College and Hospital, Jalukbari, Guwahati-14.

²Professor and HOD Department of Shalya Tantra, Govt. Ayurvedic College & Hospital, Jalukbari Guwahati-14.

³Professor and HOD, Department of Rasasastra and Bhaisajya Kalpana, Govt. Ayurvedic College and Hospital Jalukbari, Ghy-14.

⁴Assistant Professor, Department of Shalya Tantra, Govt. Ayurvedic College & Hospital, Jalukbari Guwahati-14.

Article Received on 18 August 2022,

Revised on 08 Sept. 2022, Accepted on 28 Sept. 2022

DOI: 10.20959/wjpr202213-25734

*Corresponding Author **Moriom Hembrom**

PG Scholar Department of Shalya Tantra, Govt.

ABSTRACT

Arsha roga is a very common troublesome disease in mankind which represent different causes of bleeding per rectum. It is described in both Brihatrayee and Laghutrayee, the important treaties of Ayurveda. Aetiopathogenesis, clinical features, diagnostic procedures and four kinds of treatment modalities described in Sushrut Samhita like bhesaja karma, kshara karma, agni karma and shastra karma. The indication of different modalities of treatment are specified and distinct based on the different stages of the disease. In this Clinical study application of Palash Pratisaraneeya Tikshna Kshara done in the

second degree Haemorrhoid by following all exclusion and inclusion criteria. Pre-operative, operative and post-operative care of the patient was in accordance with standard surgical practice clinically as guided by sushrut Samhita. During and after the procedure no significant complication has been observed. In this study it is found that palash pratisaraneeya tikhna kshara is very much effective in second degree haemorrhoids in terms of reduction of swelling, bleeding etc. This study is very popular in recent era of Ayurvedic Surgical practice as it is very much cost effective and reliable.

KEYWORDS: Arsha roga, Pratisaraneeya tikshna kshara, Sushrut Samhita, Haemorrhoids.

INTRODUCTION

Kshara Karma is a parasurgical procedure described in Sushrut Samhita for treatment of different diseases including Arsha. For external application Pratisaraneeya Kshara and for internal application Paniya Kshara described in Ayurveda. Kshara are considered superior to the Shastra(Surgery) and Anu-Shastra(Pera-Surgery) due to its Tridoshaghna properties and to perform Chedana(excision), Bhedana(incision), Lekhana(scraping) Vranaropana(wound healing) properties. Kshara is alkaline in nature. Arsha is a disease when muscles like fleshy projections (mamsakeela) kill a person like enemy and create obstruction in the Guda marga including three guda valis. Acharya Sushruta while describing Arsha Chikitsa has mentioned four types of treatment modalities i.e. Bhesaja Chikitsa (medical treatment), Kshara Karma(application of caustic alkali), Agni Karma (thermal cautery) and Shastra Karma (surgical treatment) according to different stages of the disease. Sushruta again mentioned that Arsha which are Mridu (soft), Prasrita (extended), Avagadha (deep seated) and Uchrita (elevated) should be treated by Kshara Karma. Kshara karma procedure can be interpreted as chemical cataurization which is found to be suitable and acceptable as compared with other prevelent methods in medical science. The symptoms complex of the condition of Arsha resembles with haemorrhoids and some other causes of bleeding per rectum mentioned in modern science texts. But the concept of Arsha in Ayurvedic literature is much wider than the concept of haemorrhoids. In modern science there are wide spectrum of treatment modalities including operative procedures like haemorrhoidectomy and nonoperative measures like Cryosurgery, Infrared coagulation, Rubber band ligation, Sclerotherapy, Electro cautery, Laser therapy and radio wave ablation etc. which have their own merits, demerits, advantages, limitations and complications. In Sushrut Samhita different medicinal plants has been described which are having properties alkaline in nature. This study has been conducted to evaluate the efficacy of Palash pratisaraneeya tikshna Kshara in the management of second degree haemorrhoids (abhyantar arsha).

MATERIALS AND METHOD

1. Selection of patients

30 numbers of patients fulfilling the diagnostic criteria for second degree Haemorrhoids (Arsha) were selected in open trial method irrespective of their sex, religion, occupation, etc from the outpatient department (OPD) of Govt. Ayurvedic College and Hospital, Jalukbari, Guwahati-14.

2. Criteria of diagnosis

- Based on symptomatology of Arsha mentioned in classical text in addition to the signs & symptoms of haemorrhoids mentioned in modern text.
- On the basis of findings of digital rectal examination and proctoscopic examination.

3. Inclusion Criteria

- Patient of diagnosed case of second degree haemorrhoid.
- Ages group 20-60 years of either sex.
- Both fresh and already treated failed cases of conservative treatment.
- Patients of Abhyantar Arsha which are Mridu Prasrita, Avagada and Uchrita.

4. Exclusion Criteria

- Patients with haemorrhoid age less than 20 years and more than 60 years.
- 3rd degree, 4th degree and external haemorrhoids.
- Haemorrhoids associated with other ano-rectal diseases like fissure in ano, fistula in ano. Patients with other systemic illness like uncontrolled diabetes mellitus, hypertension, malignancy, tuberculosis, hepatitis B and hepatitis C, positives cases, HIV positive cases, ulcerative colitis, chron's disease, rectal prolapse etc.
- Pelvic pathology and pregnancy.

5. Criteria For Withdrawal:

- Discontinuations of the treatment during trial by patients.
- Development of any complications.
- Aggravation of the disease symptoms.
- Any side effect of the drug.

6. LABORATORY INVESTIGATION

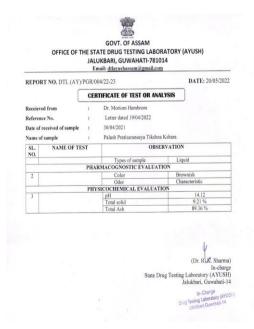
- Blood routine test-TC, DLC, ESR, Hb%, BT, CT, platelet count, prothrombine time
- Blood sugar
- **RBS**
- Fasting blood sugar

- Post prandial blood sugar
- Urine routine & microscopic
- Stool routine & microscopic
- Stool for occult blood
- Viral profile- HIV, HBsAg, HCV
- ECG (optional)
- Chest- Xray (PA view)
- Colonoscopy (optional)
- Sigmoidscopy (optional)
- MRI (optional)

7. Materials

- Palash Pratisaraneeya Tikshna kshara
- Nimbu swaras
- Jatyadi ghrita
- slit proctoscope
- Sterile gauze
- Light sources
- Other required surgical instruments etc.

Pharmacognostic and Physiochemical evaluation of Palash Pratisaraneeya Tikshna Kshara



METHODOLOGY

Kshara Karma-Kshara application was done in operation theatre (OT) by adopting classical methods of Trividha Karma (operative procedure) of Sushruta samhita as mentioned below.

1 Purva karma (Pre-operative)

written informed consent was taken prior to the procedure. Patient was kept nil orally for at least 6 hours before the procedure. Injection Tetanus toxoid (0.5ml) I/M was given and xylocain sensitivity test was performed in each patient. I/V line is get opened.

2 Pradhana Karma (Operative Procedure)

After the patient was position in lithotomy on the operation table, local anaesthesia was infiltrated after the part preparation and draping. The diseased part is exposed by special slit proctoscope and examined for site of pile mass. The adjoining healthy region of anus was covered with gauze piece to prevent the spread of Kshara on healthy tissue. The Kshara was applied on proposed lesion by spatula and was kept on piles mass up to the counting 100 that is 1-2 minutes.

3 Paschat Karma (Post-Operative)

As soon as pakwa jambu phala varna appears in the kshara applied pile mass, the Kshara is rapidly neutralized by nimbu swaras. Later, on the cauterized part is washed out with distilled water. Jatyadi ghee was applied on the cauterized lesion and dressing was done. Patients were allowed to orally sip liquids after 6-8 hour of Ksharkarma and were shifted to normal diets.

Adjuvent Therapy

- 1. Avagaha Sweda (sitz bath with warm water up to 5-10 minutes twice a day).
- 2. Arshoghni vati 500mg twice daily after meal.
- 3. Triphala churna 5gm at bed time with leukwarm water as laxative.
- 4. Jatyadi taila vasti 10ml twice daily was prescribed initially for 7days to reduce pain, inflammation and to promote healing.

Follow up: Follow up study was done after 7th, 14th, 21th and 28 days of treatment.

Criteria of Assessment

Assesment was done based on Subjective and Objective parameters.

Subjective parameters

A. Bleeding quantity

Amount	Score
No bleeding	0
Mild bleeding (<5 drop/defaecation)	1
Moderate bleeding (>5 drops/defaecation)	2
Severe bleeding (sprouting during defaecation)	3

B. Bleeding frequency

Frequency	Score
No bleeding	0
Occasional (1-4 times in a month)	1
Very often (2-4 times in a week)	2
Regular (with every defaecation)	3

C. Period of straining

Time	Score
<3 minutes	0
3-6 minutes	1
6-10 minutes	2
>10 minutes	3

Objective parameters

A. Size of the pile mass

Size	Score
<3mm	0
3-6 mm	1
6-10 mm	2
>10 mm	3

B. Haemoglobin% of the patient

Hb% before and after treatment have been checked and the differences have been analyzed.

OBSERVATION AND RESULT

In this study Palash Pratisaraneeya Tikshna Kshara applied in 30 numbers of cases of second degree Haemorrhoids and the result found very satisfactory based on the assessment of subjective and objective parameters. The result was statistically analysed by using paired t test.

Table 1: Showing the effect of Palash pratisaraniya tikshna kshara on Bleeding quantity at 7^{th} , 14^{th} , 21^{st} and 28 days of treatment (paired t test at p<.05)

Mean		SEM	Df	t	р	Remarks
Mean _{BT} ±SD	1.66±0.66	0.12	29	6.24	< 0.0001	Highly Significant
Mean _{D7} ±SD	1.03±0.31	0.06	29	0.24	<0.0001	Highly Significant
Mean _{D14} ±SD	0.43±0.50	0.09	29	13.4	< 0.0001	Highly Significant
Mean _{D21} ±SD	0.2±0.40	0.07	29	15.8	< 0.0001	Highly Significant
Mean _{AT} ±SD	0±0	0	29	13.8	< 0.0001	Highly Significant

Note

- 1. At the end of 7th day of treatment by Palash pratisaraneeya tikshna kshara t29=6.24, p<0.5, hence the result is statistically significant.
- 2. At the end of 14th day of treatment t29=13.4, p<0.5, hence the result is statistically significant.
- 3. At the end of 21st day of treatment t29=15.8, p<0.5, hence the result is statistically significant.
- 4. At the end of 28th day (after treatment) t29=13.8, p<0.5, hence the result is statistically significant.

Table 2: Showing the Effect of Palash pratisaraniya tikshna kshara on Bleeding frequency at 7^{th} , 14^{th} , 21^{st} and 28 days of treatment (paired t test at p<.05)

Mean		SEM	Df	t	р	Remarks
Mean _{BT} ±SD	1.53±0.62	0.11	20	6.6	<0.0001	Highly Cignificant
Mean _{D7} ±SD	0.73±0.86	0.16	29	6.6	<0.0001	Highly Significant
Mean _{D14} ±SD	0.66±0.47	0.09	29	9.36	< 0.0001	Highly Significant
Mean _{D21} ±SD	0.06±0.25	0.05	29	12.78	< 0.0001	Highly Significant
Mean _{AT} ±SD	0±0	0	29	13.35	< 0.0001	Highly Significant

Note

1. At the end of 7th day of treatment by Palash pratisaraneeya tikshna kshara t29=6.6, p<0.5, hence the result is statistically significant.

- 2. At the end of 14th day of treatment t29=9.36, p<0.5, hence the result is statistically significant.
- 3. At the end of 21st day of treatment t29=12.78, p<0.5, hence the result is statistically significant.
- 4. At the end of 28th day (after treatment) t29=13.35, p<0.5, hence the result is statistically significant.

Table 3: Showing the effect of Palash pratisaraniya tikshna kshara on Period of straining at 7th, 14th, 21st and 28 days of treatment (paired t test at p<.05)

Mean		SEM	Df	t	р	Remarks
Mean _{BT} ±SD	1.8±0.76	0.14	20	7.60	<0.0001	Highly Cignificant
Mean _{D7} ±SD	1.13±0.81	0.15	29	7.62	< 0.0001	Highly Significant
Mean _{D14} ±SD	0.63±0.66	0.12	29	13.86	< 0.0001	Highly Significant
Mean _{D21} ±SD	0.30±0.46	0.09	29	14.35	< 0.0001	Highly Significant
Mean _{AT} ±SD	0±0	0	29	12.95	< 0.0001	Highly Significant

Note

- 1. At the end of 7th day of treatment by Palash pratisaraneeya tikshna kshara t29=7.6, p<0.5, hence the result is statistically significant.
- 2. At the end of 14th day of treatment t29=13.86, p<0.5, hence the result is statistically significant.
- 3. At the end of 21^{st} day of treatment t29=14.35, p<0.5, hence the result is statistically significant.
- 4. At the end of 28th day (after treatment) t29=12.95, p<0.5, hence the result is statistically significant.

Table 4: Showing the effect of Palash pratisaraniya tikshna kshara on Size of pile mass in mm² at 7th, 14th, 21st and 28 days of treatment (paired t test at p<.05)

Mean		SEM	Df	t	p	Remarks
Mean _{BT} ±SD	1.73±0.69	0.13	29	5.76	< 0.0001	Highly Significant
Mean _{D7} ±SD	1.2±0.84	0.15	29	3.70	<0.0001	Highly Significant
Mean _{D14} ±SD	0.73±0.69	0.13	29	12.04	< 0.0001	Highly Significant
Mean _{D21} ±SD	0.33±0.47	0.09	29	15.39	< 0.0001	Highly Significant
Mean _{AT} ±SD	0±0	0	29	13.73	< 0.0001	Highly Significant

Note

- 1. At the end of 7th day of treatment by Palash pratisaraneeya tikshna kshara t29=5.76, p<0.5, hence the result is statistically significant.
- 2. At the end of 14th day of treatment t29=12.04, p<0.5, hence the result is statistically significant.
- 3. At the end of 21st day of treatment t29=15.39, p<0.5, hence the result is statistically significant.
- 4. At the end of 28th day (after treatment) t29=13.73, p<0.5, hence the result is statistically significant.

Table 5: Showing the effect of Palash pratisaraniya tikshna kshara on Hb% before and after treatment (paired t test at p<.05)

Mean		SEM	Df	t	р	Remarks	
Mean _{BT} ±SD	12.06±1.64	0.30	29	20	9.36	< 0001	Highly Cignificant
Mean _{BT} ±SD	12.06±1.64	0.30	29	7.30	<.0001	Highly Significant	

Note: After treatment by Control drug on Hb% t29=9.36, p<0.05, hence the result is statistically significant.

DISCUSSION

Kshara has the property of Ksharanad and Kshananad and in Arsha there is protrusion of mamsankur which need removal. In this study Palash Pratisaraneeya Tikshna Kshara applied to the fleshy Haemorrhoidal mass and the Kshara acted as Sclerosing agent and there by reduces the size and checked bleeding. Nimbu swaras applied after the application of Kshara to prevent deep tissue injury by Kshara having the opposite property after this for healing of the epithelium Jatyadi taila vasti applied which helps in tissue replacement. Arshogni vati as vata anulomak and raktasthambhak, Triphala churna as deepaniya, vata anulomak and virechak and Avagaha sweda(Sitz bath) reduced pain and swelling and to maintain anal hygiene.

CONCLUSION

- The application of Palash Pratisaraneeya Tikshna Kshara is a very simple and cost effective day care procedure which need skill man power and properly prepared kshara.
- Pratisaraneeya Tikshna Kshara is a very much effective in second degree Haemorrhoids in terms of reduction of size and caesation of bleeding.
- Multicentric study needs further evaluation in large sample size.

 Kshara karma in second degree Haemorrhoid needs oral drugs to correct and regulate bowel habit.

REFERENCES

- 1. Sushruta: Sushruta Sutra Sthana Hindi commentary by: Kaviraj Ambikadatta Shastry, Published by: Chaukhambha Sanskrit Samsthana Varanasi, Edition: reprint 2016, 11/11.
- 2. Sushruta: Sushruta Chikitsa Sthana Hindi commentary by: Kaviraj Ambikadatta Sastry, Published by: Chaukhambha Sanskrit Samsthana Varanasi, Edition: reprint 2016, 6/3.
- 3. Vagbhata: Astanga Hridaya Nidan Sthan, 7th Chapter, Hindi Commentary by Brahmananda Tripathi, Edition Reprint 2019, 7/1, 7/10-14.
- 4. Charaka: Charaka Sharir Sthana Hindi commentary by: Ganga Suhay Pandeya Published by: Chaukhambha Sanskrit Sansthan Varanasi, Edition: 7th 2002, 7/10.
- 5. Sushruta: Sushruta Sharir Sthana Hindi commentary by: Kaviraj Ambikadatta Shastry, Published by: Chaukhambha Sanskrit Samsthana Varanasi, Edition: reprint 2016, 5/10.
- 6. Charaka: Charaka Sharir Sthana Hindi commentary by: Ganga Suhay Pandeya Published by: Chaukhambha Sanskrit Sansthan Varanasi, Edition: 7th 2002, 3/6.
- 7. Sushruta: Sushruta Nidan Sthana Hindi commentary by: Kaviraj Ambikadatta Shastry, Published by: Chaukhambha Sanskrit Samsthana Varanasi, Edition: reprint 2016, 2/5-7.
- 8. John Goligher. Surgery of the Anus, Rectum and Colon "Piles or piles" chapter. Edited bn John goligher.
- 9. Bailey and Love's: Short Practice of Surgery by Norman S. Williams, Christopher, JK Bulstrode, 25th edition, 2008.