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Review Article

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AYURVEDIC REVIEW ARTICLE ON ARSHA

Vd. Vaishnavi Shivprasad Golwa¹*, Vd. Ramesh Vanaji Ahire² and Vd. Aparna Abhay Raut³

¹PG Scholar Dept. Shalyatantra, Shree Saptashrungi Ayurved College and Hospital, Kamal Nagar, Hirawadi, Panchvati, Nashik.

²Guide, Shree Saptashrungi Ayurved College and Hospital, Kamal Nagar, Hirawadi, Panchvati, Nashik.

³HOD, Shree Saptashrungi Ayurved College and Hospital, Kamal Nagar, Hirawadi, Panchvati, Nashik.

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*Corresponding Author Vd. Vaishnavi Shivprasad Golwa

PG Scholar Dept.
Shalyatantra, Shree
Saptashrungi Ayurved
College and Hospital,
Kamal Nagar, Hirawadi,
Panchvati, Nashik.

ABSTRACT

The word Arsha is self-explanatory, indicating that the disease troubles a person like an enemy. Arshascan be corelated to haemorrhoids in modern science. Arshas is clinically an engorged condition of haemorrhoidal venous plexus characterized by prolapsed mass per anum, bleeding per anum mainly. In contemporary science there are treatments for haemorrhoids like sclerotherapy, banding, laser ablation, lifestyle modifications, surgical procedures like haemorrhoidectomy and other invasivetechnique. In Ayurvedictests Chaturvidha Chikitsais said, such as Bheshaja (Medicinal), Kshara Karma (Caustic treatment), Agni Karma (Thermal hear burn) and Shastra Karma (Surgery). In this review article, treatments from Ayurvedic texts are documented so that proctologists around the world get a better understanding about the disease and its exact treatment modalities in both the sciences.

KEYWORDS: Arshas, Kshara Karma, Agni Karma, Shastra Karma.

INTRODUCTION

In today's world full of stress and unhealthy food habits along with unhealthy lifestyles make people prone to ano-rectal diseases such as fissure-in-ano, haemorrhoids, fistulas-in-ano. In Ayurveda Arsha is explained as Mahagada. Shalya Tantrahas a wealth of information related to modern surgical theory. The father of surgery, Acharya Sushruta, thoroughly described the

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Arsharogain his treatise, which was thought to be one of the Mahagadaand was cured indefinitely. Arsha is a troublesome disease that can affect anyone, anywhere, at any time. Haemorrhoids are a common issue in the present world and almost everyone has experienced them at some point in their lives. Arshais described as a fleshy growth that obstructs the anal canal and eliminates the existence like enemy. [1] The primary causes of Arshas are binge eating and a sedentary lifestyle, which decreases the activity of digestive enzymes and causes constipation, itching, burning, and pain near the Guda, which eventually results in bleeding. [2] The estimated worldwide prevalence ranges from 2.9% to 27.9%, of which more than 4% are symptomatic. [3,4] Age distribution demonstrates a Gaussian distribution with a peak incidence between 45 and 65 years with subsequent decline after 65 years. [5,6]

Nidana of janmottar kalaj arsha

A) Samanya hetu

Samanya hetu of Arsha mentioned by Acharya Charak has been described as below ग्रमध्रशीताभिष्यन्दिविदाहिविरुद्धाजीर्णप्रमिताशनासातम्यभोजन ततस्तास्वशांसिप्राद्भावन्ति ॥च.चि.१४/९

1) Aaharaj hetu

तत्रानात्मवतांयथोक्तैःप्रकोपणौविरुद्धाध्यशनस्त्रीप्रसङ्गोत्कट्कासनपृष्ठयानवेगविधारणादिभिःर्विशे षै:प्रकृपितादोषाएकशोद्विश:समस्त:शोणितसहितावायथोक्तंप्रसृता:प्रधानधमणी:अन्प्रपदयाधोगत्वा ग्दमागम्यप्रदुष्यग्दवलीर्मांसप्ररोहान्जनयन्तिविशेषतोमन्दाग्ने:,

तथातृणकाष्टोपललोण्ठवस्त्रादिभिःशीतोदकसंस्पर्शनाद्वाकन्दाःपरिवृद्धिमासाद्यन्ति, तान्यशांसीत्याचक्षते॥ -स्.नि.२/४

Guru, Madhura, AsatmyaBhojan, VirudhhBhojan, Sheeta, Vidahi, Abhishyandi, Krusha, Shushka, Pranimamsa, Aja, Mahish, Matsya, Varahmamsa, Nava Shuka & Shamidhanya, Teela, Gudavikruti, Pinyak, Shaluka, Shrungatak, Vasa, Virudhadhanya, Gurushaka, Kasheruka, Kilat, Kroncha, Lasuna, Ikshu Rasa, Dadhi, Gurujala, Atikranta, Madya, Mamsa Yusha, Atisnehapana, Manda, Ksheera.

2) Viharaj hetu

दोषप्रकोपहेत्स्त् प्राग्क्तस्तेन सादिते

अग्नौ मलेऽतिनिचिते प्नश्चातिव्यवायत:॥

यानङक्षोभविषमकठिनोत्कटकासनात।

आमगर्भप्रपतनाद्वर्भवृद्धिप्रपीडनात्॥ -अ.ह्.नि.७/१०-१४

Agnimandya, Ativyayam, Vegodharan, Gudagharshan, Asya Sukha, Asamyak Bastinetra, PranishtanBasti, Vibhrama, Asamyakshodhan, Ushtrayana, Sheetambu, Peedan, Diwaswap, aamgarbha prapatan.[7]

Poorvaroop of arsha: Poorvarupa of arsha starts to appear when vitiated apana vayu along with doshas lodges in the Guda Valis. During its upward migration, this pratiloma Vayu impacts the upper gastrointestinal system. The following poorvarupas are described in Ayurvedic literature, namely Charak, Sushrut, and Vagbhata. The following are some of them:-

तेषां त् भविष्यतां पूर्वरुपाणि अन्नेऽश्रद्धा कृच्छ्रात्पक्तिरम्लीका

परिदाहो विष्टम्भः पिपासा सिक्थसदनमाटोपः काश्यम्दगार बाहल्यमक्ष्णोः

कासश्वासौ बलहानिर्भ्रमस्तन्द्रा निद्रेन्द्रियदौर्बल्यं च॥ -स्.नि.२/९

विष्टमभोऽन्नस्य दौर्बल्यं क्क्षेराटोप एवच।

काश्यम्द्गारबाह्ल्यं सिक्थसादोऽल्पविटकता॥

ग्रहणीदोषपाण्ड्रवर्तेराशङ्का चोदरस्यच।

पूर्वरूपाणि निर्दिष्टान्यशंसामभिवृद्धये। -च.चि.१४/२१,२२

तत्पूर्वलक्षणं मन्दवन्हिता॥

विष्टम्भ:सिक्थसदनं।

आशङ्काग्रहणीदोषपाण्डूगुल्मोदरेषुच॥ -अ.ह.नि.७/१५- २०

Rupa of arsha

बध्दपक्वप्रिषत्वं सरक्तं वा कृशात्मनः।

ग्दनिष्पीडनम् कण्ड्तोदम् च अशांसि लक्षयेत् ॥ -का. सं. सू. २५/२३

Badhha- PakvapurishatwaSarakta, Gudapradeshi kandu,Gudapradeshi Toda etc

Samprapti ghatak of arsha

- 1. Sankhya: Six components are involved in the development of Arsha.
- 2. Vikalpa: Pradhan Dosha Vata, Anubandha Doshas: Pitta and Kapha
- **3. Pradhanya:** This is classified as a Swatantra Vyadhi (Independent disease).
- **4.** Bala: Varies from individual to individual, reflecting the patient's overall strength and constitution.
- 5. Kala: There is no specific season associated with the onset of Arsha, indicating that it can occur at any time.
- **6.** Adhishthanas: Gudavalis (The structures within the anal canal) serve as the primary site for the disease.
- 7. **Dosha:** Involves the Pancha Vayu (Five types of Vata), along with Pitta and Kapha.
- **8. Dushya:** Affects various tissues, including Twak (Skin), Rasa (Plasma), Rakta (Blood), Mamsa (Muscle), and Meda (Fat).
- **9. Upadhatu:** Sira (Veins) are implicated in the condition.
- 10. Srotasa: Involves the Annavaha (Digestive) and Purishvaha (Excretory) srotas (Channels).
- 11. Udbhayasthana: The disease arises primarily in the Aampakwashaya (The area of the colon).

Upadravas

तेषां प्रशमने यत्नमाशु कुर्याद्विचक्षण:।तान्याशु हि गुदं बदधा कुर्युर्बध्दग्दोदरम्॥ च.चि.१४/३२ दुर्नाम्नामित्युदावर्तः परमोऽयम्द ।वाताभिभूतकोष्ठानांतैर्विनाऽपिसजायते॥ अ.ह.नि. ७/५२

Charak & Vagbhata has mentioned Baddha Gudodara and Udavarta [43,44]

Sushrut states reduction of Jatharagni and blood in the body.

Harita: Hasta – Pada – Mukha – Nabhi – Medhra – Guda Shotha, Jwara, Chardi, Moha, Tamakshwasa, Pravashoola, Vibandha are upadravas.

Gananathsen in Siddhanta Nidana suggested Bhagandar, Udavarta, Yakrit Vidradhi, Gudabhransha, Kamala, Pandu, Baddhagudodara as upadravas. Due to increase in Dushta Arsha there is obstruction of Guda which leads to Buddhagudodara.

Obstruction of the Guda due to increase in Arsha reduces the space which causes Apana Vayu prakopa and there is utpathi of Udavarta vyadhi.

Sadhya – Asadhyatwa

बाह्यमध्यवलिस्थानां प्रतिक्याद्भिषग्वरः।

अन्तर्वलिसम्तथानां प्रत्याख्यायाचरेत्कियाम्॥ -स्.नि.२/१७

त्रिदोषाण्यल्पलिङगानि याप्यानि तु विनिर्दिशेत।

द्वद्वजानि द्वितीयायां वलौ यान्याश्रितानिच॥

कृच्छ्रसाध्यानि तान्याहु:परिसंवत्सराणि च।

सिन्नपातसम्तथानि सहजानि त् वर्जयेत्॥ -स्.नि.२/२५,२६

सहजानि त्रिदोषाणि यानि.....

अशांसि स्खसाध्यानि चचिरोत्पतितानिच॥ -च.चि.१४ /२८-३१

सहजानि त्रिदोषाणि यानि.....

अशांसि स्खसाध्यानि च चिरोत्पतितानि च॥ -अ.ह.नि.७/५३-५५

$Table \ showing \ the \ description \ of \ Sadhya-Asadhyatwa \ of \ Arsha^{[8,9,10,11]}$

According to	Sadhya (Curable	e)	Asadhya (Uncurable)	
	Sukh –Sadhya	Kruchha –Sadhya	Yaapya	Pratyaakheya
	(Easily curable)	(Difficulty cured)	(Palliable)	(Irremediable)
Sthana	Samvarni	Visarjani	-	Pravabini
Dosha	Ek – Doshaj	Dwi- Doshaj	Tri doshaja with mild symptoms	Sannipataj
Hetu	Janmottar	Janmottar	Janmottar	Sahaj
Duration	-	More than one year	-	-

Also Acharya Charak indicated the symptoms of incurable stage of Arsha, which are as given below—

हस्ते पाद म्खे नाभ्यां ग्दे वृषणयोस्तथा।

शोथो हत्पार्श्वशूलं च यस्यासाध्योऽर्शसो हि स॥

हृत्पार्श्वशूलं सम्मोहश्छिद्दरङ्स्य रुग् ज्वर:

तृष्णा गुदस्य पाकश्च निहन्युर्गुदजातुरम्

सहजानि त्रिदोषाणि यानि च आभ्यन्तरां बलिम्

जायन्ते अशांसि संश्रित्य तानि असाध्यानि निर्दिशेत्। -च.चि.१४/२६-२८

Hasta – Paad – Nabhi – Guda – Vrushan shotha, Hrud – Paarshwa Shool, Sammoha, Chhardi, Trushna, Guda-Paak, Angomarda.

DISCUSSION

Chikitsa of arsha

According to Sushruta following Chikitsa has been described.

चतुर्विधोऽशसां साधनोपाय:।

तद्यथा-भेषजं क्षारोऽग्नि शस्त्रमिति॥ -स्.चि.६/३

तत्राह्रेके शस्त्रेण कर्तनं हितमर्शसाम्।

दाहं क्षारेण चाप्येके, दाहमेके तथाऽग्निना॥ -सु.चि.१४/३३

Acharya Charak has also specified such management, but only Aushadhi – Chikitsa was discussed in detail. Acharya Sushruta has detailed descriptions of several methods of therapy and their indications.

तत्र, अचिरकालाजातान्यल्पदोषलिङगोपद्रवाणि भेषज साध्यानि,

मृदुप्रसृतावगाढान्युच्छ्रितानि क्षारेण,कर्कशस्थिरपृथुकठिनान्यग्निना,

तन्म्लान्य्च्छितानि क्लेदवन्तिच शस्त्रेण।

तत्र भेषज साध्यानामर्शसामदृश्यनां त् भेषजं भवति॥ -स्.चि.६/३

- 1. Bheshaj Chikitsa
- 2. Kshara karma
- 3. Agni karma
- 4. Shastra karma

Table showing the description of treatment of Arsha

Sr. no.	Mode of Treatment	Indications	
1.	Aushadhi chikitsa	 Which are newly occurred Having less Dosha Dusthi 	
		3) In which symptoms are not fully developed.4) Without complications.	
2.	Kshar Karma	 Soft in consistency Widely spread 	
		3. Deeply situated	

		4. Which are protruded out
3.	Agni karma	1. Having rough surface.
		2. Having fixed base
		3. Which are thickened
		4. Harder in consistency
4.	Shastra karma	1. Which are thin rooted
		2. Projected out
		3. Having mucus discharge

Bheshaj (Aushadhi) chikitsa

The medicinal treatment of Arsha has been mentioned by all Acharya. The line of medicinal treatment in Sushruta – samhita is as shown below–

तत्र, वातप्रायेषु स्नेहस्वेद वमनविरेचनास्थापनानुवासनमप्रतिषिद्धं, पित्तेजेषु

विरेचनम्, एवंरक्तजेषुसंशमनं, संशमनं, कफ़जेषुशृगंबेरकुलत्थोपयोगः,

सर्वदोषहरंयथोक्तंसर्वजेषु, यथास्वौषधिसिद्धंचपयः सर्वेष्ठिति॥ -सु.चि६/१६

Vataj Arsha: Snehan, Swedan, Vaman, Virechan, Asthapa and Anuwasan basti.

Pittaj Arsha: Virechana

Raktaj Arsha: Sanshamana

Kapahj Arsha: Ardrak, Kulathya

Tridoshaj Arsha: All Doshanashak chikitsa and Siddha milkAcharya Charak and Vagbhat

havedesribed the various preparations for the treatment of different types of Arsha.

स्निग्धशीतं हितं वाते रुक्षशीतं कफ़ान्गे।

चिकित्सितमिदं तस्मात्संप्रधार्य प्रयोजयेत्॥१७५॥च.चि.१४/१७५

अथ रक्तर्शसां वीक्ष्य मारुतस्य कफ़स्य वा।

अन्बन्धं ततः स्निग्धं रुक्षं वा योजयेद्धितम॥९४॥ -अ.ह.चि.८/९४

Ksharkarma

तत्र, बलवन्तमातुरमशॉभिरुपद्रुतमुपस्निग्धं....

.....वामात्पृष्ठजं,ततोऽग्रजमिति॥स्.चि.६/४

क्षारमात्रा नखोत्सेधप्रमाणाऽद्या प्रकीर्तिता।

द्विगुणा मध्यमा मात्रा त्रिगुणा महतीमता॥

पित्ते श्लेष्मणि वाते च यथासंख्यंप्र योजयेत्॥सु.चि.६/५

Procedure overview

Positioning: The patient is placed in the lithotomy position.

Preparation

Apply Ghruta (Clarified butter) to the anus and Arsha-yantra. Introduce the yantra into the anus to visualize the Arsha.

Kshar application: Use a shalaka (Tool) to apply Kshar directly. Maintain the yantra in the anus for a few minutes to protect the normal mucosal layer.

Monitoring: Observe the color change of the Arsha to that resembling ripe Jambu (Jamun fruit). Use Amla Dravya (Sour substances) like fresh lime juice or Kanji to wash out the Kshar once the desired color is achieved.

Reapplication: Repeat Kshar application until the desired color change is consistently observed.

Post-Treatment: After achieving the appropriate color, apply a paste of Yashtimadhu (licorice) and Ghruta to the treated area.

Treating multiple arshas: Prioritize treatment of Arsha on the right side, followed by the left.

Kshar-Pratisarana frequency: If multiple sessions are necessary, maintain a gap of 7 days between treatments.

Kshar dosage by type of arsha

Pittaj arsha: Nakhotsed matra (Minimal amount).

Kaphaj arsha: Double nakhotsed matra.

Vataj arsha: Triple nakhotsed matra.

Complications of kshar

परं च यत्नमास्थाय गुदे क्षाराग्निशस्त्राण्यवचारयेत्, तद्विभ्रमाध्दि षाण्ढयशोफ़

दाहमद मूर्च्छाटोपानाहातिसारप्रवाहणानि भवन्ति मरणंवा॥ -सु.चि.६/१०

Kshar must be applied very carefully at anus, otherwise complications may occur i.e. Napunsakata (Sterility), Shooth, Daaha, Moorcha, Aatopa, Anaha, Atisara, Pravahana, Death.

Agnikarma

महान्तिचप्राणवतश्चित्वादहेतु एवसर्वस्थानगतानामर्शसांदहन:कल्प:॥ - स्.चि.६/७

The pre-procedure measures are same as for that for Ksharkarma. The only difference is instead of Kshar – application, the hot shalaka is applied at Arsha. Even after the excision of Arsha, Agnikarma is recommended by Acharya Sushruta.

Shastrakarma

महद्वा बलिनच्छित्वा वीतयन्त्रमथात्रम्॥ -अ.इ.चि.८/७

Acharya Sushruta mention, If the pile masses are big and patient having good strength of body and mind, then it should be cut (Excised) and the area burnt with fire with thermal cautery.

Raktamokshan

Raktamokshan is also indicated in Arsha Chikitsa. It is done with the help of Jaluka, Suchi, Shastra etc.

Pathya – Apathya

वेगावरोधस्त्रीपृष्ठयानान्युत्क्टुकासनम्।

यथास्वं दोषलं चान्नमर्शःसु परिवर्जयेत॥ -सु.चि.६/२२

भित्वा विबन्धानन्लोमना थयन्मारुतस्याग्निबलायच्च।

तदन्नपानौषधमर्शसेन सेव्यं विवर्ज्य विपरीतमस्यान्॥ -अ.ह.चि. ७/१६३

Pathya aahara

Anna varga – Godhum, Yava, Raktashali, Kulattha

Shaka varga –Surana, Nimba, Patola, Balamula

Ksheera varga – Aja ksheera, Takra phala varga

Mams varga –Goha, Mushaka, Vanara ashva

Apathya aahara

Ahara – virudha, visthamhi, dushta udak, anup mamsa, matsya, tila khalli, ruksha ahar, dadhi, kareer, bilva patra, tumbi, jaliya kanda.

Vihara – uttkatukasana, vegadharana, atistreesanga, atapsevana, poorva desh vayu sevan, viruddha dravya in rasa, veerya, vipaka.

CONCLUSION

Ayurved has each system for heap the executives. Moderate as well as careful Patient shouldn't hold back to impart the issue to the ayurvedic doctor and not drag out the issue. Kshar sutra ligation is the best treatment of heap that requires some investment it tends to be act in those patient which might experience the ill effects of various heart sicknesses likewise requires no confirmation and monetary as well. So Kshar Sutar substantially more advantageous in correlation with hemorrhoidectomy. Arsha is an issue connected with way of life, age, occupation and dietary elements. It is a truly horrendous condition, patient fears poop as a result of torment with draining per rectum. Besides, patient turns out to be extremely restless subsequent to noticing container brimming with blood. Hence, Ayurveda most certainly can possibly deal with all phases of Arsha effectively with next to no confusions.

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