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**MANAGEMENT OF *SHOPHA YUKTA BAHYA ARSHAS* (INFLAMED  
THROMBOSED EXTERNAL HEMORRHOIDS) THROUGH PARA-  
SURGICAL PROCEDURE - A CASE REPORT**

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**ABSTRACT**

A case of 21 years old male, presented with mass over anal verge associated with severe pain and difficulty in sitting since 3days, during per rectal examination diagnosed as Inflamed Thrombosed external hemorrhoids.

*Arshas* is a disease of great clinical relevance in the modern era because of improper food habits and sedentary lifestyle, these causes interfere with digestive system which leads to many ailments amongst them ano rectal diseases constitute a major group. *Arshas* which is compared to haemorrhoids in the contemporary science is the commonest ano-rectal condition seen in the practice of proctology.

External hemorrhoids arise from inferior hemorrhoidal plexus and are covered by squamous epithelium which occur below the pectinate line and may become thrombotic and ulcerate. According to *Acharyas Bahya Arshas* which is hard, bluish red in colour with severe pain which can be co-related to thrombosed external hemorrhoids.

**Method:** *Jalaukavacharana* which is one among the *Anushastra* / parasurgical procedure is selected as treatment modality for current case study.

Results: Patient got symptomatic relief by 5<sup>th</sup> day of *Jalaukavacharana* and Complete cured of Inflamed thrombosed external hemorrhoids within 15 days without surgical intervention using *Jalaukavacharana*.

Conclusion: *Jalaukavacharana* as a *Anushastra* better treatment rather than surgical intervention in *Bahya Arshas* and in patient who are afraid of surgery.

**Keywords:** *Shopha Yukta Bahya Arshas, External Thrombosed Hemorrhoids, Jalaukavacharana*

## INTRODUCTION

According to *Ayurveda arivat prāṇino māmsakīlākā visasanti yat arśāmsi tasmāt ucyate guda mārga nirodhajah* is defined as (External hemorrhoids) that obstructs anal opening causing severe pain like enemy [1]. *Arshas* (haemorrhoids) is defined as the engorgement of the haemorrhoidal venous plexus, External hemorrhoids arise from inferior hemorrhoidal plexus and are covered by squamous epithelium which occur below the pectinate line and may become thrombotic and ulcerate, external hemorrhoids which are found at the external anal orifice is of two types one occurs predominantly in the form of dilatation and engorgement of veins beneath the skin and other is manifested as thrombosis of these veins, which is are highly painful, associated with difficulty in defecation and sitting [2].

The vitiated *Doshas* (*Vata* (*Vyana Vata, Apana Vata*), *Pitta, Kapha*) contaminate *Twak, Mamsa, Medas* and *Rakta dhatu* causes *Mamsa ankura* at the anal opening which has symptoms like bluish red hard mass which is extremely painful [3].

According to *Acharya Sushruta Jalauka* is the best among *Anushastra*, *Jalaukavacharana* is one among *Shastrakarma*, according *Acharya Charaka Jalaukavacharana* is done commonly in *Raja, Adhya Rogi, Bala, Bheeru, Vriddha, Stree*, and *Sukumara* [4-7].

In current case study patient was afraid to undergo surgery, so for such patient's para surgical procedure / *Anushastra* is choosed (i.e *Jalaukavacharana*), which provides thrombolytic, anti-inflammatory and analgesics effect which helps in reduction of pain and dissolving of thrombus.

## Case Report

Complaints of hard mass over anal verge associated with severe pain and difficulty in defecation Since 3days.

## HISTORY OF PRESENT ILLNESS

Patient was apparently healthy 3 days back, suddenly he noticed a mass around anal verge after continuous straining to defecate which gradually increased in size associated with severe pain and difficulty in defecation. So, he approached *Shalya Tantra* ARC OPD

and got admitted in SDM College of Ayurveda and Hospital, Hassan.

### History of past illness

No known case of diabetes mellitus, hypertension, thyroid disorder or any other medical disease.

### Medical history

He first consulted in Kodagu Institute of Medical Science (KIMS) and suggested for surgery, since he was not ready to undergo surgery, patient took some analgesics medication for 2 days from which he didn't get any relief so later he approached SDMCAH Hassan.

### Surgical history

No History of surgical intervention

### Personal history

Weight – 54kg

Height -165cm

BMI –19.8

Appetite – Good

Bowel – Hard stools (1-2 times /day)

Micturition- Regular

Sleep- Disturbed due to pain

### Examination of the patient

General examination

General appearance – ill look

Nutritional status: poorly nourished

Pallor: Absent

Icterus: Absent

Cyanosis: Absent

Clubbing: Absent

Oedema: Absent

Lymphadenopathy: Absent

### Vitals

Bp – 120/80 mmhg

Temperature- 97 F

Pulse- 74 bpm

Respiratory Rate-16cpm

### Systemic examination

CNS: Intact, conscious, well oriented to time, place and person

RS: equal air entry to B/L lung field, NBVS present

P/A: Soft, Non-tender and No-organomegaly

### Per Rectal examination

Inspection – Inflamed Thrombosed External Haemorrhoids at 3, 11 'O' clock position

Digital rectal examination – Not done due to pain

Proctoscopy- Not done due to pain

### INVESTIGATIONS

Hb:13gm/dl, TC: 6,400cells/mm<sup>3</sup>, ESR: 02 mm/hr, Blood Urea:24.9 mg/dl, Serum Creatinine:0.8 mg/dl

HIV & HbsAg: NEGATIVE

LFT – Within normal limit

CXR – PA View – Normal

USG Abdomen & Pelvis – Normal Study

### DIAGNOSIS

*Shopha Yukta Bhaya Arshas* / Inflamed Thrombosed External Haemorrhoids 3, 11 'O' clock position

### TREATMENT GIVEN

*Poorva karma*

Prior to *Jalaukavacharana* sitz bath with *Triphala churna* in luke warm water for 10 minutes done.

### **Pradhana karma**

Perianal region is cleaned with normal saline.

Under aseptic precaution activated *Jaluka* was kept over the 3 o'clock and 11 o'clock inflamed thrombosed external haemorrhoids and waited for 30 minutes or till *Jaluka* leaves its own for 5 days.

### **Paschat karma**

Post *Jalukavacharana* there was triangular wound was created by *Jaluka*, the blood comes out from the post *Jaluka* wound was checked by application of pressure bandaging with use of *Haridra Churna*.

Pressure bandaging daily with *Haridra churna* after *Jalaukavacharana*.

### **Precaution during *Jalaukavacharana***

1. Bleeding and clotting time of the patient should be normal
2. Gentle handling of *Jalauka*
3. Cover the *Jalauka* with the wet gauze
4. Remove *Jalauka* if any adverse effects present (e.g. pain, severe itching and allergic reactions etc.)

### **Oral medication**

Tab. *Anuloma ds* 0-0-2 B/F

*Dasamoola Kashaya* 100ml TID A/F

Tab. *Chandraprabha Vati* 2-0-2 A/F

### **Observation**

#### **Pain around the anal region**

|  |                        |
|--|------------------------|
| 1 <sup>st</sup> sitting of <i>Jalaukavacharana</i> | Pain reduced by 30-40% |
| 3 <sup>rd</sup> sitting of <i>Jalaukavacharana</i> | Pain reduced by 70-80% |
| 5 <sup>th</sup> sitting of <i>Jalaukavacharana</i> | Pain reduced by 100%   |

#### **Reduction of swelling (Inflamed thrombosed external haemorrhoids)**

|   |  |
|---|--|
| On 1 <sup>st</sup> sitting of <i>Jalaukavacharana</i> | Swelling (external haemorrhoids reduced by 10%)                        |
| On 3 <sup>rd</sup> sitting of <i>Jalaukavacharana</i> | Swelling (external haemorrhoids reduced by 30%)                        |
| On 5 <sup>th</sup> sitting of <i>Jalaukavacharana</i> | Swelling (external haemorrhoids reduced by 50%)                        |
| On 15 <sup>th</sup> day                               | Complete reduction of Swelling (external haemorrhoids reduced by 100%) |

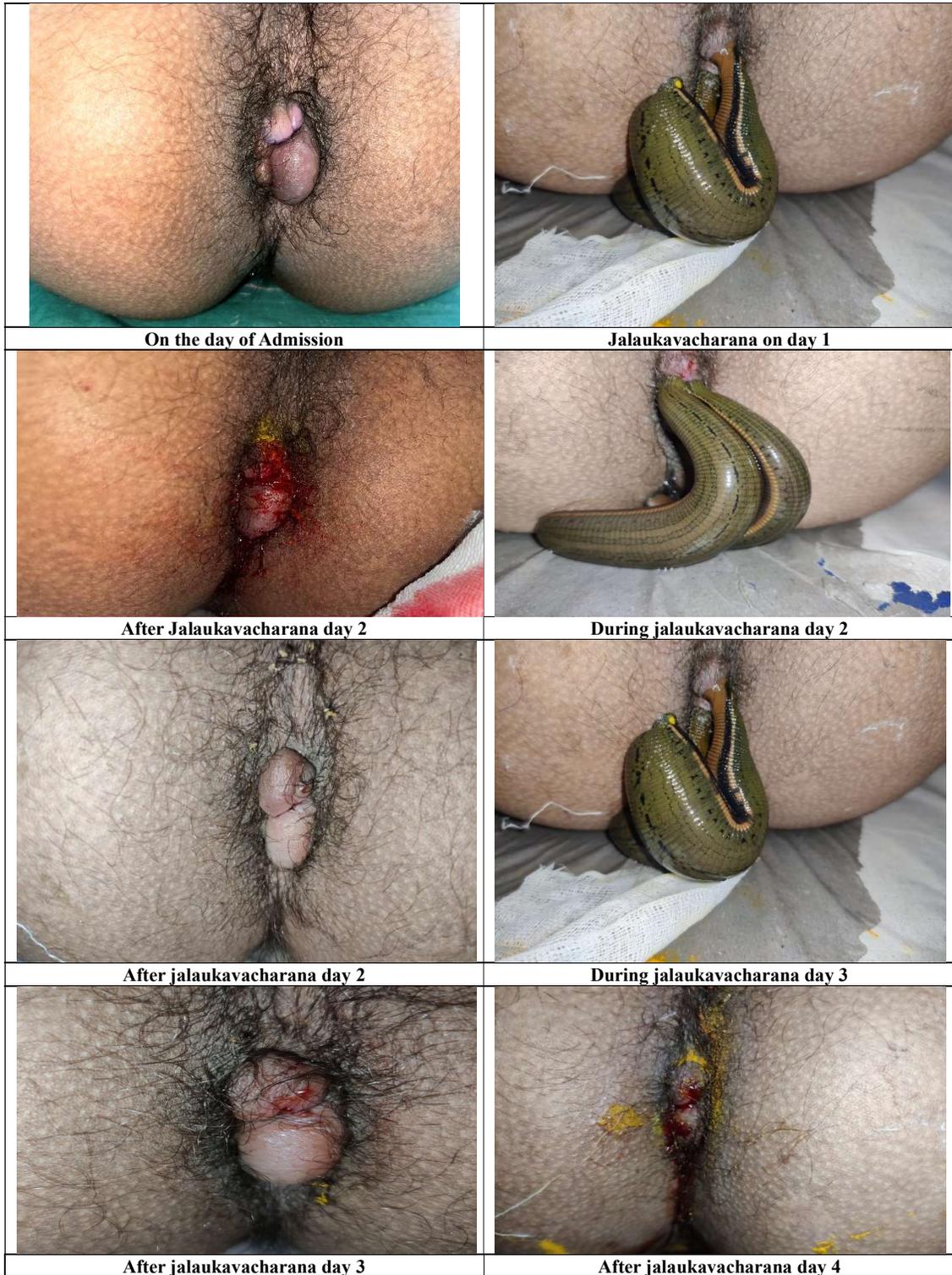
### **RESULTS**

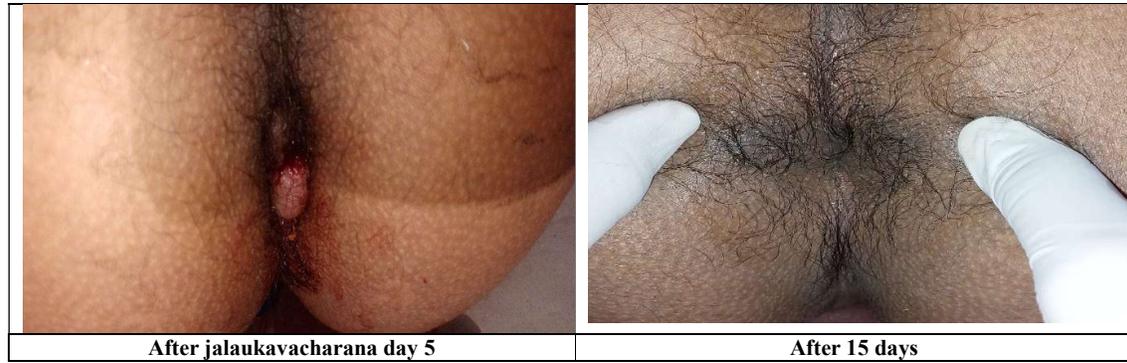
Patient got relief from pain by 100% on the day of discharge (5<sup>th</sup> day).

Discomfort - patient is unable to sit properly and difficulty in defecation on the day of admission, after 1<sup>st</sup> day sitting of *Jalaukavacharana* patient is able to sit

properly and defecate without pain regularly once in a day

Complete resolution of Inflammation on the day of discharge and swelling (external haemorrhoids / *Bahya Arshas*) reduced completely in size after 15 days.





## DISCUSSION

According to *Acharya Sushruta Raktamokshana* is considered as *Ardha Chikitsa* of *Shalya Tantra*, *Jalaukavacharana* is one among the *Raktamokshana*, here we selected *Jalaukavacharana* as first line of treatment since *Bhaya Arshas*/ inflamed thrombosed external haemorrhoids has occurred due to vitiation of *Vyana Vata, Apana Vata, Pitta, Kapha Dosha*) which further contaminate *Twak, Mamsa, Medas* and *Rakta dhatu* causes *Mamsa ankura*,

*Jalaukavacharana* helps in *Rakta and Pitta Vishodana*. So, it helps in reduction of pain and swelling due to blood-letting (*Raktamokshana*) which will allow the patient to sit and lie without discomfort.

*Acharya Vagabhata and Sushruta* indicated the use of *Jalauka* in *Arshas* since the saliva of leech contain substances such as *bdellin, Hirudin, Destabilise, Hyaluronidase* which act as antioxidant, antibiotic, anticoagulant, and it has thrombolytic, analgesic, anti-inflammatory property which reduces the

inflammation, swelling, and dissolves the thrombus by which pain and discomfort reduced, to support the process of healing.

*Anuloma DS* acts as simulant laxative and powerful carminative does *Vata Anulomana* and relives from *Vibandha, Chandraprabha Vati* pacifies pain, inflammation and does *Shopahara Dashamoola Kashaya* does *Vata Shamaka* and *Sholahara*.

Patient's symptoms are reduced and quality of life is improved after 5<sup>th</sup> days of *Jalaukavacharana* and complete cured of Inflamed Thrombosed External Haemorrhoids at 3,11 o'clock after 15 days.

## CONCLUSION

*Jalaukavacharana* over *Shopa Yukta Bahya Arshas* helped in dissolving the thrombus which in turn reduced the pain and discomfort while sitting and defecation.

Thus, it can be concluded that use of *Jalaukavacharana* over *Shopayukta Bahya Arshas* (Inflamed thrombosed external haemorrhoids) is found to be effective para-surgical procedure and without any surgical

intervention symptoms can be reversed and quality of life can be improved or regained.

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