

Therapeutic Approaches To Raktarsha: An Evidence-Based Ayurvedic Review

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ABSTRACT

Background: *Raktarsha* (bleeding piles) is a common anorectal disorder characterized by bleeding during defecation, often accompanied by pain and prolapse. In *Ayurveda*, it is classified under *Arsha* and is primarily attributed to the vitiation of *Pitta* and *Rakta*. Despite being a frequently encountered clinical condition, its comprehensive management requires a detailed understanding of both traditional and modern therapeutic approaches.

Aim To review Ayurvedic therapeutic approaches for *Raktarsha* and evaluate their efficacy with modern evidence.

Objectives To study *Nidana* and *Samprapti* of *Raktarsha*. To review Ayurvedic treatments including *Bheshaja*, *Kshara*, *Agni*, and *Shastra Karma*. To correlate Ayurvedic and modern concepts. To assess evidence-based studies on Ayurvedic management. To suggest integrative treatment protocols.

Materials and Methods: A critical review of classical *Ayurvedic* texts, published research articles, and modern medical literature was conducted. Databases such as PubMed, Google Scholar, and AYUSH Research Portal were searched using relevant keywords. Studies focusing on *Raktarsha* etiology, pathogenesis, clinical features, and therapeutic approaches were included.

Results: *Ayurvedic* management emphasizes *Shamana* (palliative) and *Shodhana* (purificatory) therapies including *Kshara Karma*, *Agnikarma*, and *Bhedana Karma* alongside herbal formulations like *Arshoghni Vati*, *Abhayarishta*, and *Triphala*. Dietary modifications and lifestyle corrections are integral. Modern treatments include oral venotonic agents, rubber band ligation, sclerotherapy, and surgical hemorrhoidectomy. Evidence suggests that integrative approaches improve symptomatic relief and quality of life.

Conclusion: An integrative approach combining evidence-based *Ayurvedic* therapies with modern techniques offers effective management of *Raktarsha*, addressing both symptomatic relief and underlying pathology.

Keywords: *Raktarsha*, *Arsha*, *Ayurvedic management*, *Kshara Karma*, *Agnikarma*, *hemorrhoids treatment*

1. INTRODUCTION

Raktarsha, commonly known as bleeding piles, is a prevalent anorectal disorder that significantly impacts the quality of life. In *Ayurvedic* literature, *Arsha* is described as a growth or swelling in the anal region caused by the vitiation of *Tridoshas*, particularly *Pitta* and *Rakta*. Among the types of *Arsha*, *Raktarsha* is characterized by per rectal bleeding, pain, discomfort, and, in severe cases, prolapse. The condition is compared with internal hemorrhoids in modern medical science, which occur due to the engorgement and prolapse of the hemorrhoidal venous plexus.¹

The pathogenesis (*Samprapti*) of *Raktarsha* involves factors such as chronic constipation, sedentary lifestyle, faulty dietary habits (*Guru*, *Snigdha*, *Abhishyandi* foods), and hereditary predisposition, leading to the derangement of *Doshas* and *Dushyas*. *Ayurveda* offers a holistic approach for the management of *Raktarsha*, emphasizing internal medications (*Bheshaja Chikitsa*), minimally invasive procedures like *Kshara Karma* and *Agni Karma*, surgical interventions (*Shastra Karma*), dietary modifications, and lifestyle regulation (*Pathya-Apathya*). Several classical formulations, including *Arshoghni Vati*,

Abhayarishta, *Triphala Churna*, and specific *Basti Chikitsa*, are indicated for effective symptomatic relief and recurrence prevention.²

In recent years, efforts have been made to validate these traditional therapies through modern clinical trials and evidence-based research. This review aims to explore the therapeutic approaches mentioned in *Ayurvedic* classics, analyze their efficacy based on contemporary studies, and establish a correlation with modern treatment protocols for *Raktarsha*.³

Epidemiology

Hemorrhoids, including bleeding piles (*Raktarsha*), are among the most common anorectal disorders worldwide. Globally, the prevalence of hemorrhoids ranges between 4.4% to 36%, affecting individuals across all age groups, though middle-aged adults are more commonly affected. Studies indicate that nearly 50% of people over the age of 50 may experience hemorrhoidal symptoms at some point in their lives. In India, while exact prevalence data is limited, population-based studies suggest that anorectal disorders, including piles, affect approximately 20–30% of adults, with higher incidence reported in urban populations due to sedentary lifestyles, poor dietary habits, and increased constipation prevalence.⁴

From a modern medical viewpoint, hemorrhoids are classified as internal or external based on their anatomical location relative to the dentate line. Contributing factors include increased intra-abdominal pressure due to chronic constipation, straining during defecation, pregnancy, obesity, low-fiber diets, and prolonged sitting. Clinically, internal hemorrhoids commonly present with painless rectal bleeding, while external hemorrhoids may cause pain and swelling. Modern management strategies focus on conservative treatments like dietary fiber supplementation, stool softeners, and topical therapies, with procedural interventions such as rubber band ligation, sclerotherapy, infrared coagulation, and surgical hemorrhoidectomy reserved for more severe cases.⁵

2. AIM AND OBJECTIVES

Aim

To review Ayurvedic therapeutic approaches for *Raktarsha* and evaluate their efficacy with modern evidence.

Objectives

1. To study *Nidana* and *Samprapti* of *Raktarsha*.
2. To review Ayurvedic treatments including *Bheshaja*, *Kshara*, *Agni*, and *Shashtra Karma*.
3. To correlate Ayurvedic and modern concepts.
4. To assess evidence-based studies on Ayurvedic management.
5. To suggest integrative treatment protocols.

3. MATERIAL AND METHOD

A comprehensive review of classical *Ayurvedic* texts (*Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*) was conducted to gather information on *Raktarsha* including its etiology, pathogenesis, and therapeutic approaches. Modern medical literature, clinical research articles, and systematic reviews were analyzed using databases like PubMed, Google Scholar, and AYUSH Research Portal to collect evidence supporting Ayurvedic treatments. Selection criteria included studies focusing on Ayurvedic interventions, clinical trials, and comparative studies. Data was compiled to evaluate efficacy, safety, and relevance of Ayurvedic management in the context of modern clinical practice.

4. CONCEPTUAL STUDY

Nirukti

The term *Arsha* is derived from the Sanskrit root "Rish" meaning "to torment." It signifies a condition that troubles the patient severely, akin to an enemy (*Shatru*). When *Rakta* (blood) vitiation predominates, it is termed *Raktarsha*, indicating hemorrhoids associated with bleeding.⁶

Definition

According to *Ayurvedic* texts, *Arsha* refers to abnormal growths or swellings in the *Guda Pradesh* (anal region), caused by the vitiation of *Doshas* affecting the *Mamsa*, *Meda*, and *Rakta*. *Raktarsha* is specifically characterized by bleeding during defecation due to *Pitta* and *Rakta Dushti*. In modern terms, it correlates with internal hemorrhoids presenting with painless rectal bleeding.⁷

Classification

Ayurvedic texts classify *Arsha* in several ways:

1. According to Dosha predominance⁸
 - *Vataja Arsha*

- *Pittaja Arsha*
- *Kaphaja Arsha*
- *Sannipataja Arsha*
- *Raktarsha*

2. According to origin⁹

- *Sahaja* (congenital)
- *Jatottara* (acquired)

3. According to curability¹⁰

- *Sadhya* (curable)
- *Kashtasadhya* (difficult to cure)
- *Asadhya* (incurable)

Types and Description of Each Type¹¹

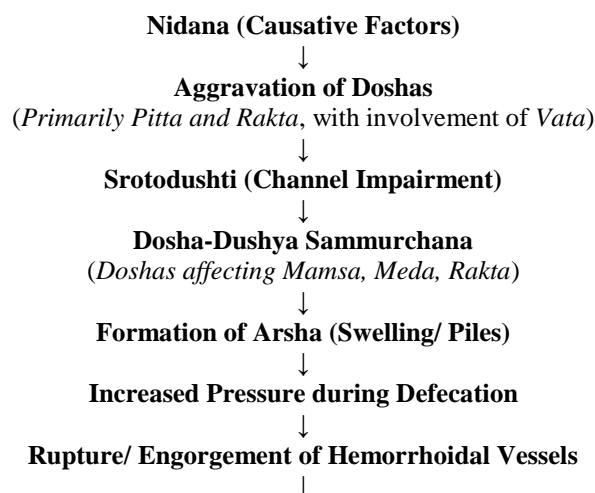
- **Vataja Arsha:** Characterized by severe pain, dryness, and blackish swelling. Bleeding is usually absent or minimal.
- **Pittaja Arsha:** Presents with burning sensation, redness, and profuse bleeding. It corresponds closely to *Raktarsha* due to *Pitta* and *Rakta* vitiation.
- **Kaphaja Arsha:** Swelling is large, pale, slimy, and painless. Bleeding is usually absent.
- **Sannipataja Arsha:** Shows mixed symptoms due to involvement of all three *Doshas*, often severe and difficult to treat.
- **Raktarsha:** Marked by bleeding during defecation, burning sensation, and occasional prolapse. It is typically associated with *Pittaja* predominance and *Rakta Dushti*.

Etiology (Nidana)¹²

- Excessive intake of heavy (*Guru*), oily (*Snigdha*), and obstructive (*Abhishyandi*) foods.
- Irregular eating habits and excessive spicy or sour foods.
- Sedentary lifestyle and lack of exercise.
- Chronic constipation and excessive straining during defecation.
- Hereditary predisposition.
- Suppression of natural urges (*Vegadharana*).

Pathogenesis (Samprapti)¹³

The aggravated *Doshas*, primarily *Pitta* and *Rakta*, affect the *Mamsa* and *Meda* tissues in the anal region, causing swelling (*Arsha*). Increased pressure during defecation leads to rupture of vessels, resulting in bleeding (*Raktarsha*). Chronic vitiation may result in prolapse, pain, and other complications.



Bleeding (Raktarsha Lakshana)

+
Pain, Burning, Prolapse

Therapeutic Approaches¹⁴

1. Shodhana Chikitsa (Purification Therapies)

- *Virechana* (purgation) for *Pitta* and *Rakta Shodhana*.
- *Basti Karma* (medicated enemas), especially *Niruha* and *Anuvasana Basti*.

2. Shamana Chikitsa (Palliative Therapies)

- Internal medications like *Arshoghni Vati*, *Abhayarishta*, *Triphala Churna*, *Kutaja Ghanavati*.
- Hemostatic and anti-inflammatory herbs such as *Nagakeshara*, *Mochras*, and *Durva*.
- Local applications (*Pratisaraniya* drugs) to reduce swelling and promote healing.

3. Kshara Karma-Chemical cauterization using alkaline preparations, effective for minimizing bleeding and reducing mass size.

4. Agni Karma-Thermal cauterization for advanced, non-responsive piles.

5. Shastra Karma (Surgical Management) - Surgical excision (*Arsha Chhedana*) when conservative measures fail.

6. Pathya-Apathya (Dietary and Lifestyle Regulation) - High-fiber diet, adequate hydration, regular bowel habits, and avoiding straining are crucial for both prevention and management.

Modern Review

In modern medical science, *Raktarsha* correlates with **internal hemorrhoids**, which are swollen and inflamed vascular structures in the anal canal. Hemorrhoids are classified as internal or external based on their position relative to the dentate line. Internal hemorrhoids typically present with **painless rectal bleeding**, while external hemorrhoids may cause pain and swelling.¹⁵

Etiology includes chronic constipation, prolonged straining during defecation, pregnancy, obesity, low-fiber diets, prolonged sitting, and hereditary factors. Increased intra-abdominal pressure leads to venous congestion in the hemorrhoidal plexus, resulting in the dilation and prolapse of hemorrhoidal cushions.¹⁶

Pathophysiology involves:

- Weakening of the supporting connective tissues and ligaments.
- Increased venous pressure leading to vascular dilation.
- Prolapse of hemorrhoidal tissue with or without bleeding.¹⁷

Risk Factors / Etiology

(Chronic constipation, straining, pregnancy, obesity, sedentary lifestyle, low-fiber diet)

↓
Increased Intra-abdominal Pressure

↓
Venous Hypertension in Hemorrhoidal Plexus

↓
Dilation and Engorgement of Hemorrhoidal Veins

↓
Weakening of Supporting Connective Tissue

↓
Formation of Hemorrhoidal Cushions

↓
Prolapse (in advanced stages)

↓
Clinical Symptoms

- Painless rectal bleeding
- Discomfort
- Itching
- Mucosal prolapse

- Pain (if thrombosed or strangulated)

Clinical features of internal hemorrhoids include:¹⁸

- Bright red bleeding during defecation.
- Mucosal prolapse.
- Discomfort or itching.
- Advanced grades may cause pain and soiling.

Management is staged based on severity:¹⁹

- **Conservative treatment:** High-fiber diet, stool softeners, sitz baths, and topical agents.
- **Minimally invasive procedures:** Rubber band ligation, sclerotherapy, infrared coagulation.
- **Surgical interventions:** Hemorrhoidectomy or stapled hemorrhoidopexy for severe or recurrent cases.

5. RESULT AND FINDINGS

- *Raktarsha* mainly involves *Pitta* and *Rakta* vitiation leading to bleeding piles.
- Ayurvedic treatments like *Bheshaja Chikitsa*, *Kshara Karma*, *Agni Karma*, and *Shastra Karma* are effective.
- *Kshara Karma* is minimally invasive and offers low recurrence.
- Herbal formulations (*Triphala Churna*, *Arshoghni Vati*, *Abhayarishta*) provide significant symptomatic relief.
- Modern studies confirm Ayurvedic treatments reduce bleeding, pain, and prolapse effectively.
- Combining Ayurvedic therapies with diet and lifestyle changes improves long-term outcomes.²⁰

6. DISCUSSION

The review highlighted that *Raktarsha* is well-described in *Ayurvedic* classics, emphasizing the role of *Pitta* and *Rakta Dushti* in the pathogenesis. Causative factors such as consumption of heavy, oily foods, sedentary lifestyle, and chronic constipation contribute to *Dosha* aggravation and *Srotodushti*, ultimately leading to vascular swelling and bleeding in the anal region. The detailed classification based on *Dosha*, origin, and prognosis allows for a comprehensive understanding of the disease in *Ayurveda*.²¹

Various therapeutic modalities are described in classical texts. *Bheshaja Chikitsa* includes internal medications like *Triphala Churna*, *Arshoghni Vati*, and *Abhayarishta*. *Kshara Karma* and *Agni Karma* offer minimally invasive interventions, while *Shastra Karma* (surgical treatment) is recommended in advanced cases. Modern clinical studies have validated many of these treatments, showing significant improvement in symptoms such as bleeding, pain, and prolapse, with minimal side effects.²²

Kshara Karma, in particular, has been highlighted as an effective and less invasive alternative to surgical procedures. Studies comparing *Kshara Karma* with modern interventions like rubber band ligation and sclerotherapy have shown comparable or better results, especially in reducing recurrence. Herbal formulations demonstrated anti-inflammatory, hemostatic, and wound-healing properties, contributing to overall therapeutic success.²³

Lifestyle modifications and dietary regulation (*Pathya-Apathya*) were found to be equally important in preventing disease progression and recurrence. Integrating *Ayurvedic* principles with modern medical knowledge offers a holistic approach for managing *Raktarsha*. This integrative model improves not only symptom relief but also long-term patient outcomes, supporting the relevance of traditional therapies in contemporary practice.²⁴

7. CONCLUSION

Raktarsha, as described in *Ayurveda*, is a complex condition involving *Pitta* and *Rakta* vitiation leading to bleeding piles. Classical *Ayurvedic* treatments—including *Bheshaja Chikitsa*, *Kshara Karma*, *Agni Karma*, and surgical methods—have demonstrated significant efficacy in both ancient practice and modern clinical studies. Herbal formulations and minimally invasive procedures like *Kshara Karma* provide effective symptom relief with minimal recurrence. Modern research supports these traditional therapies, highlighting their relevance and safety. Integrating Ayurvedic therapies with dietary regulation and lifestyle modifications offers a holistic and patient-centered approach to the management of *Raktarsha*, ensuring better outcomes and improved quality of life.

CONFLICT OF INTEREST –NIL

SOURCE OF SUPPORT –NONE

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