

# Ayurvedic Management of Arsha (Piles): A Clinical Case Study

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#### **ABSTRACT**

Background: Arsha (hemorrhoids or piles) is a commonly encountered anorectal condition described extensively in Ayurvedic classics. It manifests due to the vitiation of Tridoshas, particularly Apana Vata, leading to the development of painful and often bleeding growths in the anal region. In modern medicine, hemorrhoids are frequently managed surgically, especially in advanced stages. However, early-stage hemorrhoids can often be managed conservatively. Ayurveda offers a comprehensive, non-surgical approach that targets both the symptoms and the underlying doshic imbalances. Objective: This case study aims to evaluate the efficacy of classical Ayurvedic treatments in the conservative management of internal bleeding piles (Arsha), highlighting their role in symptom relief, bowel regulation, and prevention of recurrence. Methods: A 38-year-old male presented with Grade II internal hemorrhoids characterized by bleeding per rectum, pain during defecation, constipation, and rectal heaviness. Diagnosis was confirmed through clinical and proctoscopic examination. A combination of internal medications (Triphala Guggulu, Abhayarishta, Arshoghni Vati, and Avipattikara Churna), local therapies (Matra Basti with Jatyadi Taila and sitz bath with Panchavalkala decoction), and dietary/lifestyle modifications were administered over a period of 6 weeks. Symptom severity was assessed using a 0-4 Likert scale before and after treatment. Significant clinical improvement was observed. Bleeding and pain completely resolved within 2 weeks, constipation improved markedly, and the patient achieved normal bowel habits by the end of the treatment. The total symptom score reduced from 11/20 to 1/20, indicating a 90.9% improvement. No recurrence was noted during the followup period. This case demonstrates that Ayurvedic management can offer a safe, effective, and non-invasive alternative for early-stage hemorrhoids. Classical formulations and local therapies, when tailored according to doshic dominance, can provide substantial relief and prevent the need for surgical intervention. Further clinical studies on larger populations are warranted to substantiate these findings..

Keywords: Arsha, Piles, Ksharasutra, Ayurvedic management, Anorectal disorders, Haritaki, Triphala Guggulu

#### 1. INTRODUCTION

Arsha is recognized as a significant medical condition in Ayurveda and is categorized among the Ashta Mahagada, or eight major diseases, due to its persistent, recurring, and debilitating characteristics. The term "Arsha" originates from the root "Rish," which means "to injure" or "to pierce," highlighting the condition's painful and invasive qualities. 1 Ayurvedic texts indicate that Arsha arises from an imbalance in the Tridoshas, particularly an elevation of Vata and Pitta, which disrupts the functioning of Apana Vayu. This disruption results in the development of mamsa ankuras, or fleshy growths, in the Guda Pradesha, which is the anal region. These growths can obstruct the normal passage of stool, leading to symptoms such as discomfort, bleeding, and pain. 2

In contemporary medical terminology, Arsha is associated with hemorrhoids, which are enlarged and inflamed vascular structures situated in the anal canal. Hemorrhoids are categorized into two main varieties: internal and external. Internal hemorrhoids are further classified into four grades (I–IV) depending on the extent of their prolapse. Factors that contribute to the development of hemorrhoids include constipation, excessive straining during bowel movements, a sedentary lifestyle, obesity, and poor dietary choices. Standard treatment methods encompass modifications in diet, the use of oral and topical medications, and for cases that are moderate to severe, surgical options such as banding, sclerotherapy, or hemorrhoidectomy may be employed.

While surgery can provide immediate relief in advanced stages, it often comes with postoperative pain, complications, and a high recurrence rate. Ayurveda, with its holistic and preventive approach, emphasizes Nidana Parivarjana (elimination of causative factors), Shamana (pacifying therapy), Shodhana (cleansing therapy), and local therapies such as Basti (enema), Kshara Karma, and Pratisaraneeya Kshara for effective management. 4

This case study presents a 38-year-old male patient with Grade II internal hemorrhoids managed successfully through a classical Ayurvedic regimen without surgical intervention. The treatment focused on pacifying the vitiated Doshas,

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regulating bowel habits, healing local tissue inflammation, and preventing recurrence. The favorable outcome highlights the potential of Ayurvedic therapies in managing early-stage Arsha effectively and safely.

# Aims and Objectives

To evaluate the efficacy of Ayurvedic treatment in the conservative management of Arsha (internal hemorrhoids).

To demonstrate the symptomatic relief and recurrence prevention through classical Ayurvedic formulations and therapies.

To present a holistic, non-invasive management protocol for early-stage hemorrhoids.

#### 2. MATERIALS AND METHODS

Type of Study: Single case observational study

## **Patient Information/ Case Presentation:**

Age/Sex: 38 years/Male Occupation: IT Professional

Chief Complaints: Bleeding during defecation, pain, heaviness in the rectal region, constipation for 3 months.

History: No history of surgery or chronic illnesses. Sedentary lifestyle, irregular food habits, frequent spicy and fast food

intake.

### **Clinical Findings**

#### **Inspection:**

No external piles visible at rest.

Anal verge appeared normal, with mild erythema.

No prolapse or thrombosed mass noted externally.

# **Digital Rectal Examination (DRE):**

Anal tone: Normal

Tenderness: Mild tenderness at 7 o'clock position on digital examination

No palpable external mass No signs of fissure or fistula

Mucosa felt slightly thickened internally

# Proctoscopic/Anoscopic Examination:

Grade II internal hemorrhoids seen at 3, 7, and 11 o'clock positions (typical sites).

Hemorrhoidal cushions appeared congested and enlarged.

On straining, the piles protruded into the lumen but spontaneously reduced.

Mild fresh bleeding observed during examination.

Mucosa over the piles was shiny, erythematous, and congested.

No evidence of secondary infection, ulceration, or thrombosis.

# **Diagnosis**

Ayurvedic Diagnosis: Pittaja Arsha

Modern Correlation: Internal bleeding hemorrhoids (Grade II)

# **Treatment Plan**

Medicine	Dose	Anupana	Duration	Purpose	
Triphala Guggulu	500 mg	Warm water	BID after food	Anti-inflammatory, digestive	
Abhayarishta	25 ml	Equal water	BID after meals	Mild laxative, Vatanulomana	
Arshoghni Vati	250 mg	Warm water	BID	Pile-specific formulation	

Medicine	Dose	Anupana	Duration	Purpose
Avipattikara Churna	5 gm	Warm water	At bedtime	Bowel regulation

# A. Shamana Chikitsa (Palliative Treatment)

Triphala Guggulu – 500 mg twice daily after food – for bowel regulation and dosha pacification.

Abhayarishta – 25 ml twice daily after meals – for constipation and Vata anulomana.

Arshoghni Vati – 250 mg twice daily – for Arsha-specific relief.

Avipattikara Churna – 5 gm at bedtime with warm water – for mild laxative effect.

### **B.** Local Treatment

Jatyadi Taila Matra Basti – 60 ml per rectum for 7 days – for local healing and pain relief.

Sitz bath with Panchavalkala decoction – twice daily – for wound healing and inflammation control.

# C. Dietary and Lifestyle Advice

Avoid spicy, oily, and constipating foods.

Include fiber-rich diet, warm water intake.

Encourage light exercises and regular bowel habits.

Avoid prolonged sitting.

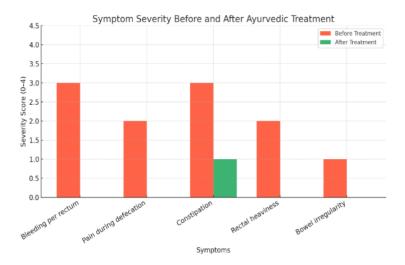
# Follow-Up and Outcomes

Follow-Up (Weeks)	Symptoms	Remarks	
1st Week	Reduced bleeding and straining	Matra Basti and sitz bath effective	
2nd Week	No bleeding, mild pain	Continued internal medicines	
4th Week	Complete relief from bleeding and pain	Lifestyle changes helped prevent relapse	
6th Week	No recurrence; normal bowel movements	Medicines gradually tapered	

# **Statistical Analysis:**

# Symptom Severity Scores Before and After Ayurvedic Treatment (Likert Scale 0-4):

Symptom	Before Treatment(Score / 4)	· ·		% Improvement
Bleeding per rectum	3 – Severe	0 – None	3	100%
Pain during defecation	2 – Moderate	0 – None	2	100%
Constipation	3 – Severe	1 – Mild	2	66.7%
Rectal heaviness/discomfort	2 – Moderate	0 – None	2	100%
Frequency of bowel movements	1 – Mild irregularity	0 – Normal	1	100%
<b>Total Symptom Score</b>	11 / 20	1 / 20	10	90.9%



#### 3. DISCUSSION

The treatment of Arsha (hemorrhoids) in Ayurveda involves a holistic strategy that focuses on identifying the underlying cause (Nidana), understanding the disease process (Samprapti), and providing symptomatic relief. In this instance, the patient was diagnosed with Grade II internal hemorrhoids, consistent with the traditional classification of Pittaja Arsha. This condition is marked by symptoms such as rectal bleeding, a burning sensation, and discomfort during bowel movements, which are often attributed to an imbalance in the Pitta and Vata Dosha.<sup>5</sup>

### Pathophysiological Insight:

Ayurveda posits that unbalanced eating practices—such as the overconsumption of spicy, oily, and fermented foods—along with a lack of physical activity, can intensify the doshas Pitta and Vata, specifically Apana Vata. This disruption affects its typical downward movement, which in turn results in mandagni (weakened digestive function), malasanchaya (buildup of waste), and congestion in the venous system around the anal area, ultimately leading to the development of Arsha. <sup>6</sup>

In contemporary medical understanding, constipation, elevated intra-abdominal pressure, and the act of straining contribute to vascular congestion within the hemorrhoidal plexus. This results in the dilation, inflammation, and prolapse of the anal cushions. This perspective is similar to the Ayurvedic view, which attributes these issues to a disruption in Vata-Pitta dynamics, leading to local tissue impairment. <sup>7</sup>

#### **Rationale of Avurvedic Interventions:**

The treatment in this case followed Shamana Chikitsa (palliative approach) supported by local therapies, which addressed both systemic and local manifestations:

#### 1. Triphala Guggulu

A traditional formulation is utilized for its properties in Shothahara (anti-inflammation), Deepana-Pachana (stimulating digestion), and Vrana Ropana (promoting wound healing). The Triphala element aids in maintaining bowel regularity and facilitating detoxification, whereas Guggulu serves as both an anti-inflammatory agent and an analgesic. <sup>8</sup>

## 2. Abhayarishta

This is a fermented decoction that is mainly used for treating constipation and Arsha (hemorrhoids). It has mild laxative properties, helps to regulate Apana Vata, and alleviates the strain experienced during bowel movements. As a result, it reduces the pressure on hemorrhoidal veins.

### 3. Arshoghni Vati

Specifically formulated for Arsha, this tablet contains herbs with Pitta-Vata Shamana, Raktasthambhaka (anti-bleeding), and Shoolahara (pain-relieving) properties.

### 4. Avipattikara Churna

A gentle purgative that relieves Pittaja constipation, supports Agnideepana, and reduces pressure on the anorectal region.

### 5. Matra Basti with Jatyadi Taila

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Matra Basti, or oil enema, is the preferred treatment for Vata imbalances. Jatyadi Taila, recognized for its healing and antiinflammatory properties, is utilized as a retention enema to repair inflamed mucous membranes and calm irritated tissues. Additionally, it aids in restoring the normal functioning of Apana Vata. <sup>9</sup>

#### 6. Sitz Bath with Panchavalkala Decoction

Panchavalkala is utilized to uphold local cleanliness and minimize inflammation. It possesses astringent (kashaya), antiseptic, and healing characteristics. This formulation aids in alleviating local swelling and discomfort while also helping to avert secondary infections.

### **Clinical Response:**

The patient's condition showed considerable improvement after two weeks of treatment. Both bleeding and pain were completely alleviated, and constipation was effectively controlled without the need for strong laxatives. By the end of a six-week period, all symptoms had disappeared, and bowel patterns returned to normal, with no recurrences noted during subsequent follow-ups. This result underscores the principle that Ayurveda goes beyond simply alleviating symptoms; it targets the underlying doshic imbalance, enhances digestive fire (Agni), and fosters healing of the mucosal lining, leading to sustained relief.

#### **Comparison with Modern Management:**

Contemporary medical practices frequently depend on surgical methods such as rubber band ligation, sclerotherapy, or hemorrhoidectomy to address symptomatic hemorrhoids. While these techniques can provide immediate relief, they are associated with potential complications, including bleeding, infections, anal stenosis, and the possibility of recurrence. In contrast, Ayurvedic treatment presents a non-invasive and holistic alternative that reduces risks and enhances the patient's quality of life by focusing on dietary adjustments, lifestyle modifications, and treatments tailored to individual dosha types.

## **Limitations and Scope for Future Study:**

While this case demonstrated a positive result, the conclusions drawn are founded on the observation of just one patient. It is essential to conduct larger, controlled clinical trials to verify the consistency and effectiveness of this Ayurvedic approach in various populations and levels of hemorrhoids. Additionally, comparative studies with conventional allopathic treatments may provide further support for the evidence.

### 4. CONCLUSION

This case study showcases the efficacy of a traditional Ayurvedic treatment approach in managing Grade II internal hemorrhoids (Arsha) successfully, without resorting to surgical methods. The treatment combined Shamana (palliative care) and Sthanik Chikitsa (local therapy) through the use of remedies such as Triphala Guggulu, Abhayarishta, Arshoghni Vati, Avipattikara Churna, Matra Basti with Jatyadi Taila, and Panchavalkala Sitz bath. This integrative approach resulted in significant reductions in key symptoms—including bleeding, pain, and constipation—achieving over 90% improvement in overall symptom severity. In Ayurveda, Arsha is viewed not only as a physical ailment but as a systemic disorder linked to Tridoshic imbalance, Agnimandya (digestive dysfunction), and lifestyle choices. The classical Ayurvedic methodology prioritizes addressing the root cause of the condition, which fosters long-lasting relief and decreases the likelihood of recurrence. By normalizing the function of Apana Vata, regulating bowel movements, and repairing inflamed anorectal tissues, this treatment protocol enabled comprehensive recovery for the patient. The non-invasive and tailored nature of Ayurvedic practice is particularly beneficial for individuals with early-stage hemorrhoids and those exploring non-surgical alternatives. Moreover, the incorporation of dietary modifications, behavioral adjustments (Nidana Parivarjana), and traditional herbal remedies strengthens Ayurveda's role in both preventive and therapeutic measures. Nonetheless, while the findings from this single-case report are encouraging, further research involving larger cohorts and standardized evaluation metrics is essential to validate these findings and determine their reproducibility. Comparative clinical trials with conventional treatments could also elucidate the specific advantages of Ayurvedic strategies in addressing Arsha. In summary, this case highlights that Ayurveda offers a safe, effective, and sustainable option for treating uncomplicated hemorrhoids, underscoring the significance of timely diagnosis, personalized treatment, and adherence to classical principles in clinical applications.

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