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Case Study

ROLE OF *JALOUKAVACHARANA* IN MANAGEMENT OF *RAKTHARSHAS* (THROMBOSED HEMORRHOIDS)

N. Divya Sravani^{1*}, K. V.Vijaya Bhaskara Reddy²

*1PG Scholar, ²Professor, Department of Shalya Tantra, S.V. Ayurveda College and Hospital, Tirupati, Andhra Pradesh, India.

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ABSTRACT

Arsha's is one among the *Astamahagada*, and a commonest ano-rectal disease with a wide range of symptoms. It affects all economic groups of the population. In Ayurveda, *Arsha's* is a growth of *Mamsa* with obstructs the anal opening. Anatomically anal canal is 51/2 *Angula's* length. A faulty lifestyle and dietary habits along with occupational and physical stress triggers the pathology of *Arsha's*. Doshic involvement includes *Rakta a*long with *Mamsa dhatu* at *Rakthavaha Dahmanis* of *Guda*, which forms as *Mamsa Ankura*. *Acharya Susrutha* mentioned 4 curative measures for the treatment, they are *Bhesaja*, *Kshara karma*, *Agni karma*, *Shastra karma*. Hemorrhoids are dilated rectal veins. Thrombosed piles occur where there is high venous pressure, which is associated with severe pain, which hampers their daily routine, thereby they avoid defecation which leads to hardening of stool, constipation and rectal bleeding. The treatment includes the surgical excision of the thrombosed pile mass. A case study of thrombosed pile treated with *Jaloukavacharana* (leech therapy) has been recorded which has reduced the mass, pain, bleeding per rectum.

INTRODUCTION

Ayurveda is oldest system of medicine which includes eight branches, where Shalva tantra has got its utmost superiority by Acharya Susrutha different surgical techniques. Ayurveda explains Arshas as Dhirghakalanubandhi (chronic), Duschikitsya (difficult to cure). There are many classifications of Arshas according to different Samhithas which are Sravi Shuska (oozing), (dried), Sahaja (congenital) Jatasyanantara (after birth). Arshas is one among the Astamahagada, and a commonest ano-rectal disease with a wide range of symptoms. It affects all economic groups of the population. In Ayurveda, Arshas is a growth of Mamsa with obstructs the anal opening. Anatomically anal canal is 51/2 *Angulas*^[1] length. Faulty lifestyle and dietary habits along with occupational and physical stress trigger the pathology of Arshas. Doshic involvement includes Raktha along with Mamsa dhatu at Rakthavaha dhamanies of Guda,

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which forms as Mamsa ankura. Acharya susrutha mentioned 4 curative measures for the treatment, they are Bhesaja, Kshara karma, Agni karma, Shastra karma.^[2] Hemorrhoids are dilated rectal veins. Thrombosed piles occur where there is high venous pressure, which is associated with severe pain, which hampers their daily routine, thereby they avoid defecation which leads to hardening of stool, constipation and rectal bleeding. The treatment includes the surgical excision of the thrombosed pile mass. Engorgement of hemorrhoidal vessels with acute swelling may allow blood to pool and subsequently, clot this leads to the formation of acutely thrombosed external hemorrhoids, A bluish purple discoloration always accompanied with severe incapacitating pain. A case study of thrombosed pile treated with [aloukavacharana ^[3] (leech therapy) has been recorded which has reduced the mass, pain, bleeding per rectum. Susruta has indicated Rakthamokshana or Rakthavisravana in Arshas, it has been explained that thrombosed piles are to be treated carefully because of their painful nature and tendency to strangulate. Indications also include Raktharshas. The effect of Jaloukavacharana (bloodletting through Jalouka) in thrombosed piles has been taken as a study to reduce the size of the mass and pain.

Case Report

A 49-year-old male patient presented with complaints of severe unbearable pain while defecating in the last 3 months. He is a known case of hemorrhoids and complaints of masses at anal region and bleeding per rectum. He gave the history of constipation and burning sensation while defeating. On examination thrombosed piles were noticed at 3.7.11 0' clock positions with bluish discolored mass at 11 0' clock position. On examination stented anal canal was observed with severe sphincter spasm. After complete evaluation of the patient Jaloukavacharana was decided as the Choice of treatment based on the patient's ideology regarding the surgery. As he was not interested in undergoing surgery, we have decided to undergo Jaloukavachara as the best treatment for Thrombosed hemorrhoids.

Plan of the Study

MATERIALS AND METHODS

Leeches 2-3 in number.

Surgical sterile gloves 2 pairs. And cotton swabs.

Haridra Churnam

Subjective Parameters

The general examination and systemic examination were done properly.

The complete history along with examination of masses diagnosed it as *Raktharshas*.

Local examination

Inspection of perianal skin

A. Number of thrombosed masses in clockwise position.

B. Associated lesions of any fissure, fistula-in-Ano, sentinel pile tags.

General Investigation

- 1. Bleeding time
- 2. Clotting time
- 3. RBS
- 4. HB%

1. Pain uveda	
No pain	Grade 0
Pain Before Defecation	Grade1
Pain During Defecation	Grade2
Pain During and After Defecation	Grade3
2 Bleeding per rectur	1 22

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No Bleeding Per Rectum	Grade0
Dropping of Blood	Grade1
Syringing	Grade2
Streaming	Grade3

3. Constipation

1	
No constipation	Grade0
Hard stools once a day	Grade1
Hard stools once in two days	Grade2
Hard stools once in three days	Grade3

Objective Parameters

Size of the mass

Lesser than ½ inch	Grade 0
1 inch	Grade 1
Greater than 1 inch	Grade2

Method Of Application

Poorvakarma

Leeches which are selected are activated by keeping in *Haridra* powder for 10 mins. Later leeches were kept in a clean bowl of water.

Preparation of the part: *Pradhana karma*

Patient is advised to be in lithotomy position, the exposed is cleaned with normal saline solution and dried properly.

Now leeches are administered at the site of thrombosed pile mass, which was expected to be fixed at the site. After leeches are covered with a gauze piece, few drops of water were poured on and often.

Leeches start sucking blood by showing the signs of raised hump with peristaltic movements anteriorly.

Precautions should be taken, that leches should not enter the anal canal.

Paschat Karma

After the leeches get detached, the site should be washed, and *Haridra* Churnam is applied th stop the bleeding. T- bandage is done properly.

Local swelling and thrombosed masses are observed with reduction in size and tenderness.

OBSERVATIONS

Before Treatment

Complaints of the Patient	Gradation Before Treatment
Pain	Grade 3
Bleeding Per Rectum	Grade 3
Constipation	Grade 2
Size of the mass	Grade 3

The gradation of the patient with this clinical feature has reduced after the treatment of Jaloukavacharana.



After Treatment

Complaints of Patient	Reduced Gradation after Treatment
Pain	Grade 0
Bleeding Per Rectum	Grade 1
Constipation	Grade 0
Size of the mass	Grade 1

DISCUSSION

Recurrent constipation and straining defecation lead to increased pressure at the hemorrhoidal plexus and thereby leading to the pooling of blood and formation of the clot. A severe incapacitating pain is always associated with bluish discoloration of the pile mass. Leeches therapy has already given importance in the treatment of venous disorders Due to the presence of Hirudin in leeches saliva can restore the blood circulation in the site of inflammation and removes ischemia to the organs and improves the capillary perfusion and tissue exchange. Anti-coagulating property of the leech aids in preventing the formation of clots. Vasodilation property will improve the blood circulation to certain areas. It sucks out the blood clots there by reducing pain by its analgesic action and inflammation by antiinflammatory action which are the prime symptoms of thrombosed hemorrhoids. In thrombosed hemorrhoids, leeches exhibit thrombolytic action leading to break down of the thrombus at the hemorrhoidal plexus of rectum. By these actions and properties which help in clearing out the formed blood clot and thereby leading the free flow of blood to the veins.

CONCLUSION

Application of leeches to the thrombosed piles has reduced the size of the pile mass along with pain. This therapy has analgesic property which helped in reducing severe pain and breaking out the thrombus at veins by thrombolytic property and anti- coagulating property. As this treatment is less painful and requires minimum invasive techniques this treatment is considered as the best treatment for all age groups, which is cost effective, minimal invasive, less time taking.

REFERENCES

- 1. Susrutha. Susrutha samhitha, Nidana sthana, Arshanidanam adhyayam, 2/5, Srikanta murthy, Chowkambha Sanskrit samsthan.
- 2. Susruta. Susrutha samhitha, Chikitsa adhyaya, Arshochikitsa adhyaya, 6/3, Srikanta murthy, chowkambha Sanskrit samsthan.
- 3. Susruta. Susruta Samhitha, Sutra sthana, Jaloukavacharaniya Adhyaya, 13/1, Srikanta murthy, Chowkambha Sanskrit Samsthan.
- 4. Susruta. Susruta Samhitha, Nidana sthana, Arshanidanam, Adhyayam, 2/4, Srikanta murthy, Chowkambha Sanskrit Samsthan.

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*Address for correspondence Dr. N. Divya sravani PG Scholar, Department of Shalya tantra, S.V Ayurveda College and Hospital, Tirupati, Andhra Pradesh. Email: divyashravani29@gmail.com

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