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PREPARATION OF KADALI PRATISARANIYA KSHAR AND PROCEDURE OF ITS APPLICATION ON ARSHA

Ayurveda

Dr. Amit Paliwal M.S. Shalya Ph. D. (Sch). Assistant professor Department of Shalya tantra, College of Ayurved, Bharati Vidyapeeth (deemed to be university), Pune

Dr. Vasudha Asutkar* M. D. , Ph. D. Assistant professor department of Basic principals, College of Ayurved, Bharati Vidyapeeth (deemed to be university), Pune *Corresponding Author

Dr. Umesh Vaidya M.S. Shalya , Professor & HOD department of Shalya tantra, College of Ayurved, Bharati Vidyapeeth (deemed to be university), Pune

Dr. Rahul Kadam M.S. Shalya Ph. D. Associate professor department of Shalya tantra, College of Ayurved, Bharati Vidyapeeth (deemed to be university), Pune

ABSTRACT

Inclusion of Arśa (Haemorrhoids) in Aṣtaumahagada by Suṣrutacarya shows its importance[1]. This disease is explicit to human race only due to erect posture. The management of Hemorrhoids in contemporary medicene is changing from conventional surgical procedure i.e. Haemorrhoidectomy to other procedures like Sclerotherapy, Laser therapy etc. These procedures have postoperative complications. Unsuitable treatment or negligence may cause complications like thrombosis,fibrosis,haemorrhage etc[3].This leaves scope for Kṣārakarma treatment. It is considered as most effective practice for Arśa as it has simple technique and properties like Cedana, Lekhana, Ropana[5]. In texts Kadali being Pittahar, Balya, Ṣīta Vīryatmak it is beneficial in Arśa and also appropriate for Kṣāra formulation[6]. If patients of Ābhyantara Arśa are to be subjected to Kadali Pratisāranīya Kṣārakarma, an ideal method of preparation of kadali kshar and ideal method of its application on first and second degree hemorrhoid or internal non complicated hemorrhoids is needed. Also pre-operative, operative and post operative procedure of Kshara application along with explaination of complications if any and advantages and dis advantages is needed. This is done here.

KEYWORDS

Arsha, Hemmorhoids, Kadali kshar,

INTRODUCTION

Arśa is the commonest Ano rectal condition seen in the practice of proctology. It is the disease of yore. Incidence of this disease can be traced since Vedic period and description of the disease is available in almost all-ancient literature. Arśa is caracterized by formation of Swelling at Anal region. The disease even though not fatal, gives more trouble to the patient. Hence this disease has been considered as a *Mahagada*[1]

In Avaranīya Adhyaya Acharya Suṣruta explains Arśa, as a disease which when associated with Upadravas becomes Yāpya/ aSādhya [2] Inclusion of Arśa (Haemorrhoids) in Aṣtaumahagada by Suṣrutacarya Shows its importance[1]. References of Arśa are found from the time of Vedic period. This disease is very explicit to human race only, due to the erect posture. In modern paralance this condition is comparable with hemorrhoids that are one of the oldest ills known to mankind. One theory suggests that the erect posture, which humans adopted, led to increased pressure over the hemorrhoidal veins that is the cause for human beings to pay a price for their upright position.

Haemorrhoids have been given many names:

- Engorged sub mucous varicosities or arteriovenous communications.
- Mucosal capillary malformations,
- Mucosal slides and even erectile tissue or a sliding mucosal hernia.

As discovered from recent statistics irrespective of age, sex, socioeconomic status more than 04% of the population agonizes from this disease. Due to today's food habits, sedentary life style, its incidence has increased. Also it encumbers or stops an individual's daily activities. The management of Hemorrhoids in modern medical science is changing from conventional surgical procedure i.e. Haemorrhoidectomy to other procedures like Sclerotherapy, Band ligation, Cryosurgery, Laser therapy etc. Unfortunately all its management procedures like Sclerotherapy, Band ligation, Cryosurgery, Laser therapy etc[4], have limitations with postoperative complications. Unsuitable treatment or negligence may cause haemorrhoids to complicate for example thrombosis, strangulation, portal pyaemia, fibrosis, suppuration, haemorrhage etc[3]. Hence there is a scope to find a helpful measure.

Acarya Suṣruta has described four types of measures for the treatment of Arśa.

1) Bheṣaja,
2) Kṣāra,
3) Agni
4) Ṣastra.

The Kṣārakarma treatment is considered as most effective practice for Arśa, because of its simple technique due to its properties like Cedana, Lekhana, and Ropana[5]. Hence the repeated backing of Kṣārakarma by almost all the ancient Acarya in the disease "Arśa" has given a stimulus to work on the disease Arśa with the help of Pratisāranīya Kṣāra. Apart from this, the reason to work on this problem with the Kṣārakarma is the promising results, i.e. Shown by the previous work carried out at other centers as well. Acaryas have mentioned Kadali as appropriate for the Kṣāra formulation[6]. Kadali being Pittahar, Balya, Ṣīta Vīryatmak it is beneficial in Arśa.In the present study, patients suffering from Ābhyantara Arśa are subjected to Kadali Pratisāranīya Kṣārakarma, as described in classical texts. Formerly works on Arśa are carried out with Kṣār formulations suc as Apamārga Kṣār, Citrak Kṣāra as pratisāran on Arśa. But available literature reveals that these Kṣāra being more Tīkṣna in nature are more corrosive and cause severe burning pain which may cause postoperative complications in patient.

Aim- To Prepare Kadali pratisaraniya kshar and explain the procedure of its application on Arsha.

Objectives-

1. To explain the standered method of Preparation of Kadali pratisaraniya kshar as per Sushrut Samhita .
2. To explain the ideal procedure of its application on Arsha.
3. To observe the adverse effects if any.

Materials and Methodology –

Preparation of Kadali teekshna pratisaraneeya kshara

Panchanga of Kadali -40 kg (Musa sapientum linn) reduced to small pieces was burnt into ash 4kg (bhasma) and the ash was allowed to cool. Water was added to the ash in the ratio 6:1, i.e. 24 Lt mixed well and kept overnight. The solution was filtered for 21times with a thick cloth to obtain a clear solution (Rakta varna). The solution was boiled till it was reduced to 1/3rd. From the Ksharodaka some part (12pala from 2 drona) was taken out. 4 prativapa dravyas (32 palas), Kataka sharkara(Adgdha sudha pashana 8palas), Bhasma sharkara(Dagdha sudha pashana 8palas) , Kshirapaka(Jala shukti 8palas) and shankha nabhi(8palas) were heated in Loha patra till agni varna , at which the

ksharodaka (12 palas)is added. The rest of Ksharodaka is heated further and prativapa dravya's like Danti, Chitraka, Vacha, Langali, Pravala bhasma, Bida lavana, yavakshara, suvarchala lavana, Hingu, are added in a fine powder form 4 Gms each till **darviparlepa paka.** Kshara is taken out from the vessel and stored in a tight container.

Sidhi Lakshana:-Darvi pralepa,Mrudu,Pichila(Soapy touch),
Guna: -Teekshna, Ushna,
Matra (Dosage): -As required.

Properties of Kshara:
- Rasa - Katu
- Veerya - Ushna
- Varna - Shukla
- Guna - Sowmya, Thiksna, Agneya
- Doshagna - Tridoshagna
- Karma - Dahana, Pachana, Darana, Vilayana, Shodana, Ropana, Shoshana.

Indications Of Kshara In Arshas :
- Soft, Spread out, Deep rooted & Elevated type of Arshas
- Pittaja & Raktaja Arshas

Symptomatology:
- P/R Bleeding
- Prolapse
- Pain
- Mucous discharge
- Pruritus ani
- Anaemia
- Constipation
- Anal Stenosis

Selection of Cases:
- History of patient- Onset, Duration and Progress of Arsha should be asked.
- Systemic examination-CVS, RS,ES and CNS, should be examined thoroughly.
- Local examination
  - Inspection/ Palpation- To rule out any other secondary infection, warts, tag or secondary infection.
  - Instrumentation – Proctoscopy- Size and position should be examined.
  -Sigmoidoscop and Colonoscopy can be done as per requirement.

1. INCLUSION CRITERIA:
- Diagnosed Patients of Abhyantara Arsha with I, II degree.
- I^0 Haemorrhoid does not come out of the anus.
- II^0 Haemorrhoids come out only during defecation & is reduced spontaneously after defecation
- Patients in age group of 18-70 years.
- Patients with controlled systemic diseases like Diabetes and Hypertension.

2. Exclusion Criteria:
- Abhyantara Arsha of secondary origin and /or associated pathology of colon and anal canal like Ulcerative colitis, Crohn's diseases, condyloma, Parikartika i.e. Fissure in Ano and Bhagandara i.e. Fistula in Ano, Malignancy of rectum and anal canal.
- Patients having Hb% less than 8 gm%.
- Patients associated with uncontrolled systemic diseases like Diabetes and Hypertension.
- Pregnant women.
- Patients with infective conditions like H.I.V. and Hbs.Ag.

Investigations:
Blood
- Complete haemogram with E. S.R.
- **B**lood sugar fasting and P.P.
- BT.CT And PT INR
- HIV I and II
- Hbs. Ag.

Urine
- **ROUTINE**
- **MICROSCOPIC EXAMINATIONS.**

Application of Kshara:
Pre-operative
- **Required instruments** - Proctoscopes, Prepared Kshara, Lemon juice, Allis tissue forceps, Artery forceps etc.
- Night prior to procedure, the patient is advised to have light diet afterwards nil orally.
- Part preparation and soap water enema 2 to 4 hours prior to procedure.

Operative
Dose As per required for Kshar lepa on each haemorrhoid.

Application procedure for Kshara Pratisaraneeya
- Lithotomy position to be given, anal canal and peri anal area should be painted with antiseptic solution, draping should be done.
- Haemorrhoid should be located with Proctoscopic examination.
- Haemorrhoid should be made to protrude in to the slit proctoscope.
- Protruded mass should be encircled by cotton to avoid spillage of kshar on normal mucosa.
- Kshara should be applied over haemorrhoid with the help of applicator for Vaakshatamatra pramana i.e. approximately 90 seconds.
- When colour of mass becomes pakwajambu phala samana i.e. Reddish black in colour, Kshara should be washed with Kanji for neutralization.
- Same procedure should be repeated over other mass, after one week if present.
- Patient should be observed for any adverse effects.

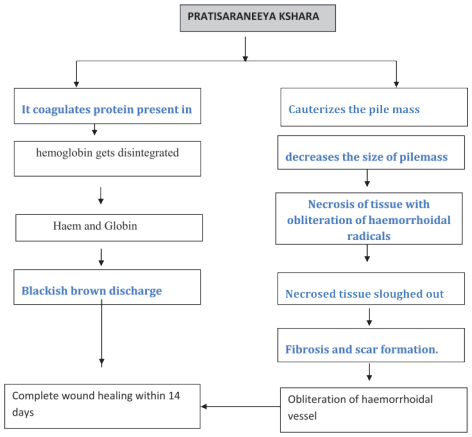
Post procedure medication
Gandharva Haritaki 1gm HS for 14 days with Koshana Jala.
Triphala Guggulu 500mg Twice in a day, for 7 Days with Koshana Jala.
Avagaha Sweda with Lukewarm water twice in a day for 7 Days

Follow up –
Assessment needs to be done every day up to 7^{th} day and on 14^{th} day and on 21^{st} day.

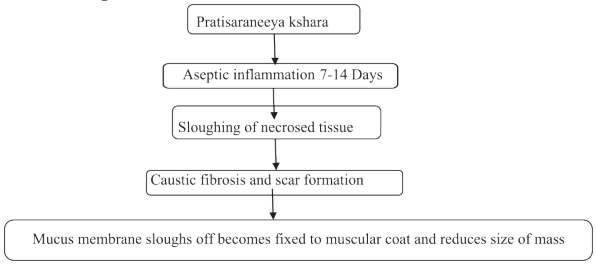
Post-operative
- Orally liquid diet after 4 to 6 hours
- Packing removed after 6 hours
- Sitz bath –Lukewarm decoction sitz bath
- Triphala Guggulu – 2 TDS
- Gandharvaharitaki – 1gram HS

Complications:
- Bleeding- P/R Bleeding can be observed in sometimes in a mild form, which reduces and disappears itself in due course without any other invasive procedure.
- Pain- Mild burning type of pain can be seen, which reduces in next 2 to 3 days by itself.
- Discharge- De-sloughing results in discharge sometimes.

DISCUSSION –
Probable mode of action of Kadali Kshara --As Charakacharya has described that the Kshara is the one which scrapes the abnormal tissue from its location and destroys it after dissolving it, because of its corrosive nature. Kshara scrapes and dissolves the pile mass.



Schematic presentation of Action of kshara on Arsha ankura



Triphala Guggulu- It acts as Shothahara, Vednasthapan, Vranashodhan, Vranaropan , Srotoshodhan, Bibhitaki (Terminalia bellerica) is Vedanasthapaka by Madhura, Ruksha and Ushna Gunas. acts as Raktastambhan, Krishikaran (reduction of size). Pippali acts as Rechana and Guggulu Commiphoa mukul is Ushna hence pacifies vitiated Vata thereby acting as Vedanasthapaka. Ruksha Guna helps in Lekhana by which Vrana Shodhana is performed.It acts as Shothahara, Vednasthapan, Vranashodhan, Vranaropan, Jantughna.

Gandharva Haritaki - It acts through Pacifying tridosha, Improving appetite & digestion, Prevents constipation. Reduces congestion in haemorrhoidal vessels. Stabilizes endothelial lining, and prevents bleeding. It is a vyadhi hara combination that cures and prevents Arsha.

The above medicines act in support to the action of Kadali Kshara which helps to counter the possible adverse effects/ complications in due course.

Conclusion and Advantages:

This procedure accounts for a reduction in postoperative pain and no bleeding is observed and hence minimum hospitalization is required. There is no scope for recurrence and no stricture formation occurs (if correct procedure is followed).

The peculiar utility of Kshara Karma is that it treats all the pile mass in one sitting and thus reduces the total duration of treatment.

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