

JALAUKAVACHARANA (*HIRUDO MEDICINALIS*) IN THE MANAGEMENT OF SHOPHA YUKTA BAHYA ARSHAS (EXTERNAL THROMBOSED HAEMORRHOIDS) - A CASE STUDYDr. Naveen*¹, Dr. Mahesh Kumar E. S.² and Dr. Vishal Krishnamurthy³¹PG Scholar, ²Associate Professor, ³PG Scholar

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ABSTRACT

Arshas or haemorrhoids is included under the category of *Mahagadas* as it significantly disturbs the normal activities of the body like an enemy, affects all economical groups of population. A thrombosed haemorrhoids is a variety of external haemorrhoid in which there is a painful swelling in the anal tissues caused by a clot in one or more of the small veins in the anal skin. It becomes worse after strangulation of the pile mass. Venous return of strangulated pile mass decreases and severe oedema takes place along with severe pain. *Acharya Sushruta* had advocated to carryout *Raktamokshana* in *shopha chikitsa* (inflammatory swelling), so here *Shopha Yukta Shushkarshas* is taken for *Jalaukavacharana*. *Jalaukavacharana* is known to be effective in thrombosed haemorrhoids as it relieves venous pooling of blood in that area by dissolving the clotted blood (thrombolytic action) which contributes in re-establishment of circulation. In present case study, a patient aged 30 years of external thrombosed haemorrhoids was successfully treated with *Jalaukavacharana* with no recurrence or any complication.

KEYWORDS: *Arshas*, haemorrhoids, *Jalaukavacharana*, thrombosed piles.**INTRODUCTION**

Haemorrhoids (*Arshas*) is considered as *Mahagada* in *Ayurveda*.^[1] It is a one of the most common disease of anal canal. *Acharya Charaka* believes that vitiated *doshas* follow *bahya* and *abhyantara rogamarga* to produce *Arshas*.^[2] *Sushruta* has described *Arshas* as *Rakta-Mamsa pradoshaj Vyadhi*.^[3]

Bleeding and mass coming out per-anum are common complaints of haemorrhoids. In *Ayurveda*, *Kshara Karma* and *kshar sutra* ligation is a preferred surgical treatment in advanced stage of *Arshas*. But in some condition, parasurgical procedure *Raktamokshana* in *Shopha Yukta Bahya Arshas* is a good alternative treatment available.

It has been explained that, in prolapsed (*Nirgatani*) and thrombosed (*Doshapurnani*) piles; *Raktamokshana* is the choice of treatment, which relieves pain and swelling.^[4]

Acharya Charak has mentioned *Jalaukavacharana* in *Raktarshas* (Bleeding pile mass).^[5] *Vagbhata* has also advised bloodletting in *sanchit dushta rudhira* (Thombosed), *shotha* (swelling) and *kathin* (hard) *Arshas* (pile mass).^[6] Surgery is immediately contraindicated if

the haemorrhoids are associated with secondary complications like thrombosis.^[7]

In this case of thrombosed haemorrhoids, *Jalaukavacharana* followed by *Awagahana sweda* for 3 days (3 sitting consecutive days) was done. In this case, *Jalaukavacharana* shows effective resolution of the pile mass.

CASE REPORT

A 30 years male patient came with complaints of:

- Severe pain and burning sensation at anal verge
- Mass per rectum
- Difficulty in passing stools from 5 days at Shalya Tantra OPD.

History of present Illness

Patient was apparently healthy 5 days back, then suddenly developed with pain and burning sensation at the anal verge and gradually developed mass at the anal verge. He consulted nearby allopathic physician & was given medication for the same. But patient did not get relief from the medication. Later he came to our hospital for further management

Past History

No history of Hypertension, Diabetes Mellitus, Bronchial Asthma or any surgical intervention.

Family History

No relevant family history found.

Personal History

Appetite – Good
Urine – 4 to 5 times per day
Stool – Constipated bowel once in 2 days
Sleep – Disturbed due to pain

Drug History

No drug history found.

General Examination

GC - Fair, afebrile
P.R – 72/min
B.P – 130/90 mmHg
No pallor, No icterus, No cyanosis.
CVS – S1 s2 heard, no murmur present
R.S – Chest clear, B/L air entry adequate.
CNS – Conscious & oriented.
P/A – Soft, no organomegaly, bowel sounds present, no tenderness

Per Rectal Examination**On Inspection**

- a) Perianal area:- Dry
b) Perianal skin:-
- External thrombosed haemorrhoids present at 3,7 & 11'o clock position.
 - Oedema in perianal skin- Present.
 - No pus discharge seen.
 - No external opening seen.

Palpation

Moderate to severe tenderness present on palpation of all three mass

Digital Rectal Examination

- Sphincter Tone – Hypertonic
- No any thickening of wall of anal canal
- Rectal mucosa – smooth, regular & mobile.
- No scybalous stools

Examination of Prostate

- Consistency – Rubbery.
- Medial sulcus – felt, not obliterated
- Rectal mucosa – sliding over the gland

Proctoscopy: Not done due to severe pain.

Blood Investigations

- Hb: 13 gm/dl
- TLC: 7,600/cumm
- RBC count : 3.33 millions/cmm
- PCV: 39%
- MCV : 80fL
- MCHC : 32.5 gm/dl
- MCH : 25.8 picogram
- Platelet Count : 2 Lakh/cmm
- Bleeding Time 01 min 30 sec
- Clotting Time 04 min 10 sec
- Blood Sugar Random : 102 mg/dl
- Hepatitis B Surface Antigen (HbsAg) Non-Reactive
- HIV 1 (Antibodies) Non-Reactive
- HIV 2 (Antibodies) Non-Reactive

Treatment Executed

After proper investigation, leech therapy was planned as a first line treatment in this case.

On first day after taking written consent of patient, he was kept in lithotomy position. Two leeches were applied at anal verge on each side of prolapsed mass.

Consecutive second sitting of leech application was done on next day and third sitting on 3rd day. Patient was discharged after 3 days with complete recovery.

Leech application

1. *Purva Karma:* The application site was cleaned and dried.
2. *Pradhana Karma:* Leech was made to catch on the place of pile mass.
3. *Paschat Karma:* The part was cleaned with cold water followed by application of haridra with dressing.

OBSERVATIONS AND RESULTS

Variables	Before Treatment	After 1 st sitting	After 2 nd sitting	After 3 rd sitting
Pain	VAS 6	VAS 3	VAS 0	VAS 0
Burning sensation	++++	+++	++	-
Condition of pile mass	Severely oedematous and engorged	Mild reduction in oedema	Marked reduction on oedema	>90% reduction in oedema
Difficulty in defecation	+++	++	-	-



Figure 1: Day of Admission

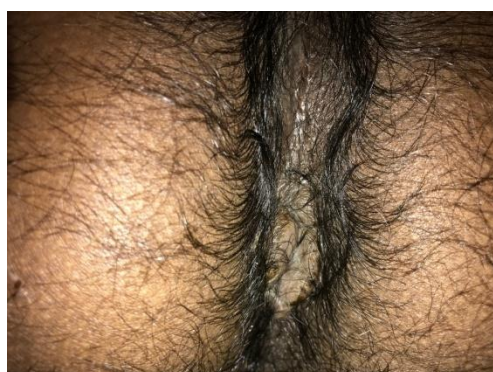
Figure 2: 1st sitting of JalaukavacharanaFigure 3: 2nd sittingFigure 4: 3rd sitting

Figure 5: On the day of discharge



Figure 6: Follow up after 3 days

As soon as the leech application was started, patient got relieved of pain. His agony and discomfort level was also reduced. After 2nd sitting, size of prolapsed haemorrhoids was also reduced. After 3rd sitting, he was completely relieved of the pain and burning sensation. Difficulty in defecation was also resolved at the end of 3rd sitting. So, he was discharged after giving proper diet instructions.

DISCUSSION

Thrombosed external haemorrhoids imply a thrombosis of blood in the veins of external or subcutaneous haemorrhoidal plexus.

Raktamokshana (Blood letting) is an unique procedure mentioned in *Ayurveda* which especially addresses the abnormality of *rakta dhatu*.^[8]

In thrombosed haemorrhoids, *Jalaukavacharana* shows thrombolytic action which contributes in re-establishment of circulation and finally resolution of pain and swelling.

In this case application of leeches results in the reduction of inflammation & pain due to anti inflammatory substances present in its saliva like hyaluronidase,

hirudin. So there was significant reduction in size of swelling.^[9]

CONCLUSION

Hence, *Jalaukavacharana (Hirudo medicinalis)* can be a promising alternative in the management of thrombosed haemorrhoids without surgical intervention.

REFERENCES

1. Kaviraja Ambika Datta Shastri, Sushruta Samhita Sutra Sthana 33/4, Part I, By Sushrutha with Ayurveda Tantvasandipika commentary, Varanasi, Choukhamba Sanskrit Sansthan, 2003; 126.
2. Pandit Kashinath Shasrti, Charaka Samhita Sutra Sthana 11/49, By Charak with Vidyotani Hindi Commentary, Varanasi, Choukhamba Sanskrit Sansthan, 2007.
3. Kaviraja Ambika Datta Shastri, Sushruta Samhita Sutra Sthana 24/9, Part I, By Sushrutha with Ayurveda Tantvasandipika commentary, Varanasi, Choukhamba Sanskrit Sansthan, 2003; 101.
4. Pandit Kashinath Shasrti, Charaka Samhita Chikitsa Sthana 14/61, By Charak with Vidyotani Hindi Commentary, Varanasi, Choukhamba Sanskrit Sansthan, 2007.
5. Dr. Brahmanand Tripathi, Ashtang Hridaya chikitsa Sthana, 8/28, By Vagbhatta, Varanasi, Choukhamba Sanskrit Sansthan, 2009.
6. Andreas Michalsen, Manfred Roth, Gustav Dobos; Medicinal Leech Therapy, New York, 2007; 132.
7. Bhat SM. SRB's Manual of Surgery. 3rd ed. Panama: Jaypee Brothers Medical Publishers (P) Ltd, 2009.
8. Sushruta. Sushrutasamhita, Sutrasthana, Jalaukawacharaniya Adhyaya, 13/19-21. 3rd ed. Kaviraj Ambikadatta Shastri., editor. Varanasi: Chaukhamba Sanskrit Sansthan, 1972.
9. Bhagat PJ, Raut SY, Lakhapati AM. Clinical efficacy of Jalaukawacharana (leech application) in Thrombosed piles. *Ayu.*, 2012; 33(2): 261–263. doi:10.4103/0974-8520.105248 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3611649/> (Accessed on 8-9-2019).