Management of second degree hemorrhoids with the application of *Achyrenthus aspera* Alkali powder: a case report

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Abstract

Hemorrhoid, which is a condition defined as the symptomatic enlargement and distal displacement of the normal anal cushions, affects millions of people around the world, and represent a major medical and socioeconomic problem. Multiple factors have been claimed to be the etiologies of hemorrhoidal development, including constipation and prolonged straining. Abnormal dilatation and distortion of the vascular channel, together with destructive, changes in the supporting connective tissue within the anal cushion, are paramount findings of hemorrhoidal disease. Application of alkali (*kshara karma*) is a para surgical procedure indicated in the management of hemorrhoids, which has been extensively described in *Susrutasamhita* under the category of eight major diseases (*Ashtamahagada*). It is mentioned that alkali (*kshara*) can exert the properties of incision (*chedana*), excision (*bhedana*) and scraping (*lekhana*) without using surgical instruments. It destroys unhealthy tissues and removes debris while promoting the growth of new granulations. *Achyrenthus aspera* alkali powder (AAAP) is a water soluble caustic extract derived from the ash of *Achyrenthus aspera* plant. Because of its numerous medicinal properties, it is used in a wide range of diseases both externally and internally. In this case report, the effect of the application of AAAP on haemorrhoids is discussed. A 30 year old male patient visited surgical clinic of Gampaha Wickramarachchi Ayurveda Teaching Hospital with complaints of severe pain, bleeding per rectum, protrusion of a mass from anus on defecation. After systematic clinical examination the case was diagnosed as a second degree hemorrhoid at 3, 7, and 11 O’clock positions. This case was managed with the application of AAAP. AAAP was applied on the oedematous mass in the anal canal with the help of proctoscope and after one minute it was neutralized with the application of lime (*Citrus aurantifolia*) juice. This procedure was performed for 14 days without administration of any other medicine. After 14 days of treatment it was noted that the oedematous mass became shrink on proctoscopy and per rectal bleeding resolved. Further, the patient relieved from all symptoms gradually within the period of treatment. On this ground, it could be postulated that the application of AAAP would be effective in the management of second degree haemorrhoids.

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