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NARRATIVE REVIEW OF AYURVEDIC SCLEROTHERAPY: ROLE OF SNUHIKSHEERA AND HARIDRA CHURNA LEPA FOR ARSHA (HEMORRHOIDS)

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ABSTRACT

Hemorrhoids (Arsha), one of the most prevalent anorectal disorders, has been extensively described in Ayurvedic classics, particularly in *Sushruta Samhita*. The term *Arsha* literally translates to "as fatal as an enemy," reflecting its chronicity and impact on quality of life. Contemporary science understands hemorrhoid pathogenesis as multifactorial, involving venous congestion, connective tissue degradation, and increased intra-abdominal pressure. Management options range from conservative measures to minimally invasive procedures and surgery. Sclerotherapy, a common modern intervention for grade II and III hemorrhoids, involves injection of chemical sclerosants to induce fibrosis and shrinkage of the hemorrhoidal mass. However, complications such as pain, ulceration, necrosis, thrombosis, and systemic adverse reactions remain concerns. In Ayurveda, Acharyas have advocated multiple treatment modalities for Arsha, including *Bhaishajya Chikitsa*, *Kshara Karma*, *Agni Karma*, and *Shastra Karma*. Among local applications, the combination of *Snuhiksheera* (latex of *Euphorbia nerifolia Linn.*) and *Haridra Churna* (powder of *Curcuma longa Linn.*) is described with potential therapeutic value. This narrative review critically explores their possible role as a natural sclerosant alternative, analyzing their *Rasa*, *Guna*, *Veerya*, *Vipaka*, and *Karma* along with pharmacological evidence from modern biomedical sciences. *Snuhiksheera* possesses corrosive, anti-inflammatory, and wound-healing properties, while Haridra exhibits proven anti-inflammatory, antioxidant, and antimicrobial effects through curcumin-mediated pathways. Together, they may exert sclerosing, hemostatic, and wound-healing actions comparable to contemporary sclerosants, but with potentially fewer side effects. This review highlights the scope of *Snuhiksheera* and *Haridra Churna Lepa* as an integrative, minimally invasive alternative in hemorrhoid management, warranting further clinical validation through well-designed studies.

KEYWORDS: *Snuhiksheera*, *Arsha*, Sclerotherapy, Hemorrhoid, Ayurveda, *Haridra*.

INTRODUCTION

Hemorrhoids (Arsha) remain the most prevalent anorectal condition, with global prevalence estimated at ~4.4% in the general population. Epidemiological data suggest that nearly half of all adults will experience hemorrhoidal symptoms during their lifetime. Risk factors include chronic constipation, prolonged straining, low-fiber diet, sedentary lifestyle, pregnancy, obesity, aging, and genetic predisposition. Pathological changes include venous dilatation, thrombosis, connective tissue degeneration, and inflammatory changes in the anal cushions.

In Ayurveda, Arsha has been extensively described by Acharya Sushruta and others, detailing its etiology, pathology, classification, and management. Unwholesome diet (*Apathya*) and lifestyle factors are emphasized as primary causatives, leading to *Agni dushti*, constipation, and *Dosha* vitiation, culminating in the manifestation of Arsha. Sushruta describes four modalities: *Bhaishajya Chikitsa* (conservative measures), *Kshara Karma* (chemical cauterization), *Agni Karma* (thermal cauterization), and *Shastra Karma* (surgical excision).

Contemporary sclerotherapy, often used for grade II and III hemorrhoids, involves submucosal injection of sclerosants, which induce fibrosis, obliterate hemorrhoidal vasculature, and cause shrinkage of the mass. However, its limitations include post-injection pain, bleeding, ulceration, deep tissue fibrosis, allergic reactions, and rare but severe complications such as abscess, strictures, thrombosis, and pulmonary embolism.

This provides a rationale to explore safer, effective alternatives. Ayurvedic literature describes the use of Snuhiksheera with Haridra Churna as a topical application with cauterizing, hemostatic, and wound-healing properties. This review re-examines its potential as a natural sclerosant.

METHODOLOGY

This is a narrative review synthesizing classical Ayurvedic references and contemporary biomedical literature. Sources include.

- Ayurvedic texts: *Charaka Samhita*, *Sushruta Samhita*, *Ashtanga Hridaya*, *Ashtanga Sangraha*, and commentaries by Dalhana and Chakrapani.
- Modern surgical texts: *Bailey & Love's Short Practice of Surgery*, *Surgery of the Anus, Rectum, and Colon*, and *Atlas of General Surgery* (Jaypee Brothers).
- Indexed articles retrieved from PubMed and Scopus on Ayurvedic interventions for hemorrhoids and pharmacological studies of Snuhiksheera and Haridra.

Therapeutic Modalities in Arsha

1. **Bhaishajya Chikitsa (Conservative management):** Includes *Deepana*, *Pachana*, *Vatanulomana*, and *Srotoshodhana* therapies with dietary and lifestyle modifications.
2. **Kshara Karma (Chemical cauterization):** Application of plant-derived alkaline preparations with *Chedana*, *Bhedana*, and *Lekhana* properties. Kshara Sutra ligation is widely practiced for hemorrhoids and fistula.
3. **Agni Karma (Thermal cauterization):** Thermal cautery for resistant or recurrent Arsha, with parallels to electrocautery and cryotherapy in modern surgery.
4. **Shastra Karma (Surgical management):** Reserved for advanced disease; includes hemorrhoidectomy and stapled procedures, often associated with pain, recurrence, or complications.

5. **Lepa (Topical formulations):** Classical texts describe several Lepas. Snuhiksheera and Haridra Churna combination is highlighted for its local sclerosing and wound-healing potential.

Pharmacological Review of Ingredients

Snuhi (Euphorbia nerifolia linn)

Snuhi, is a well-known medicinal plant belongs to Euphorbiaceae family. *Charaka* described two varieties, *Alpakantaka* (~few thorns) and *Bahukantaka* (~Multiple thorns). *Bahukantaka Snuhi* is considered as better because of its strong purgative action. *Snuhi* latex is the part used in the preparation of *Ksharsutra* (Ayurvedic Seton). Purification of *Snuhi* latex with *Chincha-Patra Swarasa* (~Juice of tamarind leaves) using *Raudra Yantra* (~Instrument/pot kept under sunlight for drying) has been recommended in Ayurvedic texts.[1] Major chemical constituents of *Snuhi* latex are Euphorol, nerifolene, nerifoliol, taraxerol, flavonoids, terpenoids among which terpenoid is considered as the main responsible constituent for its toxic effect.

Mechanism of Action: *Snuhi* has *Guru* (~Heavy), *Tikshna* (~Sharp), *Snigdha* (~Soft) *Guna*. Snuhi has *Katu*(~Spicy) *Rasa* (~Taste) along with *Ushna* (~hot) *Virya* (~Potency) and *Katu* (~Spicy) *Vipaka*(~ Post digestive effect). *Snuhi* having *Kapha-vatahara* (~Antiphlegmatic and eliminative of wind), *Dipana*(~Metabolism Stimulant), *Tikshna virechana* (~Sharp purgative), *Shodhana* (~Rectification), *Shoolahar*(~ Pain relieving), *Vishahara* (~Alexipharmic) , *Vrana shodhana* (~ Wound Purification), *Raktotkleshkar* (~Blood flow aggrevation) properties.[2]

Chemical cauterization and corrosive nature of *Snuhi Ksheera* (~Latex) with a pH of 5.6 will help in reduction in the size of the mass of hemorrhoids. Acidic nature of *Snuhi Ksheera* (~Latex) can cause inflammation of rectal veins due to which it will result in occlusion of rectal veins along with vesication when applied to pile mass.

Due to occlusion, blood flow to pile mass is hampered and it gets shrink with stoppage of bleeding in 1st and 2nd degree hemorrhoids *(Raktotkleshkar* property of *Snuhi Ksheera*).

After some time pile mass shed off due to ischemia and scarring caused by *Snuhi Ksheera* (~Latex). The latex of E. nerifolia facilitates healing process as evidenced by increase in tensile strength, epithelization and angiogenesis.[3] This indicates wound healing property of E. Nerifolia. In regarding to ayurvedic context, purified *Snuhi Ksheera*(~Latex) mitigates *Vata dosa* which will aid in analgesic action[3]

Haridra (Curcuma longa linn)

Haridra which is commonly known as turmeric belongs to Zingiberaceae family. It is extensively used as anti-inflammatory, antibacterial, antidiabetic, anthelminthic, hepatoprotective, hypolipidemic, antihistaminic, antifungal agent. Due to its pharmacological activity, turmeric is traditionally Varnya (~Skin complexion enhancer), Medaghna (~Antilipidemic), Vranaropak (~Wound healer), Visodhani (~Purifier), Stanya sodhak (~Breast milk purifier), etc. Turmeric's main polyphenolic components are curcumin, demethoxycurcumin, and bisdemethoxycurcumin, usually referred to as curcuminoids (3-6%). Its primary active component, curcumin, and antioxidant as vitamins C, E, and beta carotene. Haridra has *Ruksha* (~Dry) and *Ushna* (~Hot) *Guna* (~Quality). It also have *Tikta* (~Bitter) and *Katu* (~Spicy) *Rasa* (~Taste) along with *Ushna* (~Hot) *Virya*(~Potency) and *Katu* (~Spicy) *Vipaka* (~Post digestion effect). Haridra (~Turmeric) acts as *Vrana Ropaka* (~Wound healer), *Vishodhani* (~Purifier), *Lekhaniya* (~Scraping). Haridra (~Turmeric) has *Kapha-Pittahara* (~Antiplegmatic - antibilious) *Karma* (~ efficacy).

Potential role of Haridra on Hemorrhoids

Because it lowers inflammatory indicators, turmeric is useful in treating inflammation (Sothahara). Because of its antibacterial qualities, it has a great effect on the healing of wounds (Vrana ropak). Chemically known as 1,7-bis(4-hydroxy-3-methoxyphenyl)-1, 6-heptadiene-3, 5-dione, curcumin has biological effects that include anti-inflammatory, antioxidant, and anti-tumor properties. By controlling inflammatory signalling pathways and preventing the synthesis of inflammatory mediators, curcumin has anti-inflammatory properties. To regulate inflammatory mediators and cure inflammatory illnesses, curcumin binds to Toll-like receptors (tlrs) and modulates downstream nuclear factor kappa-B (NF-κb), Mitogen-activated protein kinases (MAPK), Activator Protein 1 (AP-1), and other signalling pathways. Curcumin can down-regulate NF-κb through acting on Peroxisome proliferator-activated receptor gamma (pparγ). Curcumin decreased levels of pro-inflammatory mediators such as Interleukin-1 (IL-1), IL-1β, IL-6, IL-8, IL-17, IL-27, Tumor necrosis factor-α (TNF-α), Inducible nitric oxide synthase (inos), NO, regulated upon activation normal T cell.[4]

Synergistic Action in *Arsha*

Snuhiksheera acts as a sclerosant and cauterizing agent, while Haridra reduces inflammation, prevents infection, and promotes healing. Together, they may provide a balanced, minimally invasive therapy for hemorrhoids.

Method of preparation of *Snuhiksheera* and *Haridra Churna Lepa*

Haridra churna is prepared from dessicated rhizomes of *haridra*. The churna of *haridra* is mixed properly with *Snuhiksheera* to form *Lepa*.

Scope of integrative approaches for hemorrhoids

The scope of an integrative approach with *Snuhiksheera and Haridra Churna Lepa* lies in its versatile application across different stages of hemorrhoid management. It can serve as an alternative to chemical sclerosants in early-stage hemorrhoids, thereby minimizing procedure-related complications. As an adjunct therapy, it may be employed post-surgical or post-procedural to reduce recurrence and promote faster wound healing. Furthermore, as part of integrative care, it can complement modern conservative measures such as dietary fiber supplementation, NSAIDs, and topical hydrocortisone gels, ultimately enhancing therapeutic outcomes and providing a safer, holistic approach to hemorrhoid management. Majorly Hyrdocortisone and NSAIDS with or Lidocaine gel like drugs are being used to cure symptoms of hemorrhoids in contemporary science; this Lepa can be used along with these drugs to immense the efficacy of treatment regimen. Hence *Snuhiksheera* and *Haridra Churna Lepa* proves to be an excellent option for such integrative approaches and give maximum advantage to the suffering patients.

DISCUSSION

A number of studies have been published where hemorrhoids are successfully treated with ayurvedic approach. A study was published by Barode S on Application of *Snuhi Ksheer* mixed with *Haridra* powder and *Teekshna Apamarga Pratisarneeya Kshara* in the management of *Arsha* 2nd degree haemorrhoids. A pilot study was conducted to see the efficacy of *Snuhiksheera Haridra Churna Aalepa* in *Arsha* (~hemorrhoids) with special reference to 2nd and 3rd internal hemorrhoids by Rangari A.

Preliminary clinical studies, including pilot trials, have reported efficacy of Snuhiksheera-Haridra Lepa in grade II and III hemorrhoids, with symptomatic relief and regression of pile mass. Unlike chemical sclerosants, this approach carries minimal systemic side effects.

Classical references describe its use under *Pratisaraneeya Lepa*, aligning with the principles of minimally invasive care. The corrosive action of Snuhiksheera parallels modern sclerosants, while Haridra adds anti-inflammatory, antiseptic, and wound-healing benefits.

However, limitations include lack of large randomized controlled trials, variations in preparation standardization, and paucity of toxicological data.

Today's era every person wants fast treatment for any disease rather than to think upon side effects of those fast-acting drugs on their body. Instead of this herbal Lepa used in *Arsha Chikitsa* dose not cause as much side effects on patients' body locally and systematically as compared to sclerosant injection used in *Arsha Chikitsa*. It is the demand of time to explore and give better options to contemporary medication with the help of Ayurveda. Lepa might be the pillar of advancement in herbal remedies to treat the arsha with maximum benefit to human beings.

CONCLUSION

Snuhiksheera and *Haridra Churna Lepa* represents an Ayurvedic sclerotherapy with significant potential in the management of Arsha (hemorrhoids). By combining cauterizing and healing properties, it offers a natural, integrative, and minimally invasive alternative to conventional sclerosants, with fewer adverse effects. Rigorous clinical trials and pharmacological standardization are warranted to validate efficacy and safety, paving the way for its inclusion in integrative protocols for hemorrhoid management.

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