

MANAGEMENT OF ARSHAS WITH PIPPALYADI TAILA MATRA BASTI

Dr. Purushothaman PP*¹ and Dr. Amrutha Elamon²

¹Prof. and HOD, Department of Salya Tantra, Ashtamgam Ayurveda Vidyapeedom, Palakkad.

¹Assistant Professor, Department of Kriya Sareera, Vaidyaratnam Ayurveda College, Thrissur.

Article Received: 11 December 2024 || Article Revised: 02 January 2025 || Article Accepted: 24 January 2025

*Corresponding Author: Dr. Purushothaman PP.

Prof. and HOD, Department of Salya Tantra, Ashtamgam Ayurveda Vidyapeedom, Palakkad.

DOI: <https://doi.org/10.5281/zenodo.14787143>

How to cite this Article: Dr. Purushothaman PP and Dr. Amrutha Elamon (2025). MANAGEMENT OF ARSHAS WITH PIPPALYADI TAILA MATRA BASTI. World Journal of Pharmaceutical Science and Research, 4(1), 436-441. <https://doi.org/10.5281/zenodo.14787143>



Copyright © 2025 Dr. Purushothaman PP | World Journal of Pharmaceutical Science and Research.

This work is licensed under creative Commons Attribution-NonCommercial 4.0 International license (CC BY-NC 4.0)

ABSTRACT

Arshas is a common disease due to mechanical life style and unwholesome dietary habits. Among the different modalities of treatments described in the classics, Bheshaja chikitsa is recommended as the primary line of treatment and Pippalyadi thaila matra basti is prescribed by acaryas like Charaka and Vagbhata. No scientific studies were undertaken on this and hence the present study is intended to evaluate the effect of Pippalyadi thaila matra basti on Arshas.

KEYWORDS: Arshas, Pippalyadi taila, Matra Vasthi.

INTRODUCTION

Guda Arshas is one of the commonest anorectal diseases in day to day practice. Arshas comes under Mahagadas, as it is Dirghakalanubandhi, Dushchikitsya, Tridoshic origin and involves the Marma. It is well known for its chronicity and bad prognosis.^[1] There are four fold treatment modalities in Ayurveda for Arshas like Bheshajachikitsa, Agnikarma, Ksharakarma and Sastrakarma.^[2] Among these, administration of bheshaja (internal medication) is the most acceptable means of management as it has least interference with the daily activity of the patient.^[3] Sushruta has described internal medication accepting their limitations in the surgical diseases.^[4]

OBJECTIVES

1. To study the aetiopathogenesis of Arshas (Hemorrhoids).
2. To evaluate the clinical efficacy of Pippalyadi taila matrasthi in Arshas.

METHODOLOGY

MATERIALS AND METHODS

Source of data

The patients attended OPD & IPD of K.V.G. Ayurveda hospital, Sullia were chosen for the study.

Method of collection of data

60 patients with complaints of *Arshas* attended OPD and IPD of K.V.G. Ayurveda hospital, Sullia were randomly selected and subjected to clinical trial. Data regarding history, duration of illness, findings of clinical examination and other relevant information were recorded in BT/AT proforma designed especially for the study. The proforma was designed based on clinical features of the condition *Arshas* vis-à-vis haemorrhoids.

The sample size for the present study was 60 patients suffering from *Arshas* as per the selection criteria. Patients were randomly distributed to both the groups of equal size.

Procedure of administration of drug

- In group-A (30 patients) - First *snehana* is done by local application of luke-warm *Pippalyditailam* in the peri-anal region, and then *avagahasweda* with luke warm *dhanyamla*.
- In group-B (30 patients) - *Snehana* with luke warm *Pippalyditailam* in the peri-anal region, followed by *avagahasweda* with luke-warm *dhanyamla*. Then administration of 72 ml. *Pippalydi taila matrabaasthi*.

Selection Criteria

The cases were selected strictly as per the pre-set inclusion and exclusion criteria.

Inclusion criteria

- Patients between the age group of 20-70 years.
- Patients will be selected irrespective of sex, religion, occupation and socio economic status after clinical diagnosis of *Arshas*.

Exclusion Criteria

- Haemorrhoids associated with fissure or fistula.
- Haemorrhoids secondary to systemic diseases like Chron's disease, Ulcerative colitis and other anorectal lesions.
- Patients with *Rakthaarshas* and *Gudaarubada*.
- Pregnancy, Diabetes mellitus, Hypertension.
- Patients suffering from severe anaemia (less than 8 g. /100ml.).
- Suffering from bleeding disorders like prolonged bleeding time and clotting time.

Study duration

Group-A

<i>Avagaha Sweda</i> with <i>Dhanyamla</i>	-	10 days
Follow up	-	15 days
Total study duration	-	25 days

Group-B

Avagaha Sweda with Dhanyamla

<i>and PippalyaditailaMatravasti</i>	-	10 days
Follow up	-	15 days
Total study duration	-	25 days

Posology (for a single use)

Dhanyamla – 4 - 5 lites, as per the requirement.

Pippalyadi taila - 72 ml. (1½ *pala*) as a fixed dose.

Treatment schedule

In Group-A *Avagaha sweda* with luke-warm *dhanyamla* and in Group-B *avagaha sweda* with luke-warm *dhanyamla* and *Pippalyadi taila Matrabasti* is administered.

Procedure for Group-A

In this study *Avagahasweda* is done as a modified form of Sitz Bath.

Poorva karma

Clean the anal region with a cotton piece soaked in plane lukewarm water. Wipe the area with dry towel. Apply lukewarm *taila* in the anus and peri anal region.

Pradhana karma

The Patient is made to sit in Tub/ Basin which is filled with luke warm *Dhanyamla*. While sitting the patient should keep his legs apart and place outside the tub. The anal & pelvic portion should immerse completely in the liquid (Squatting position). For maintaining the temperature of *dravadravya* throughout the procedure more medicine is added. The patient is advised to maintain the position for 10 minutes.

Paschat karma

After relieving the patient from the procedure, wipe the area with dry towel.

Procedure for Group-B**Poorvakarma**

The patients were instructed to come after taking light diet (neither *atisnigdha* nor *atiruksha*) and after elimination of stool and urine. The patients were also advised not to take diet more than 3/4th of routine quantity. The patients were subjected to local application of *sneha* and then *Avagaha Sweda with dhanyamla for 10* minutes as mentioned in Group-A.

Pradhanakarma

After *Purvakarma* the patient was advised to lie down on left lateral position without pillow on the *Vasti* table with left lower extremity straight and right lower extremity flexed at knee and hip joint. The patient was asked to keep his left hand below the head. Anal region is anointed with small quantity of *Pippalyadi taila*. 72 ml of *pippalyadi taila* is filled in the *basti yantra*. The nozzle of *basti yantra* was oleted with *Pippalyadi taila*. After removing the air from the *basti yantra*, the nozzle was inserted into the anus and the medicine was administered slowly. The patient was asked to take

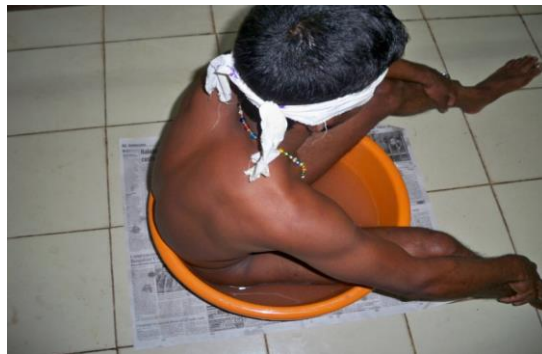
deep breath and not to shake his body while introducing the catheter and the drug. The entry of *Vayu* inside the *guda* was avoided by leaving little amount of *Taila* in *basti yantra*.

Pashchatkarma

After the administration of *basti*, the patient was advised to lie in supine position with hand and legs freely spread over the table. There after both legs were raised and slightly flexed in knee joint few times and gently tapped over the hips. After 10 minutes patient was advised to get up from the table and take rest in his bed and also not to sleep.

ASSESSMENT CRITERIA

Three point Likert scale was used to assess Subjective features like pain, itching, burning sensation; Objective features like Sthanam, Sankhya and total effect of therapy.



Avagaha sweda with Dhanyamla



Pippalyadi taila matrabaсти

OBSERVATION AND RESULT

ASSESSMENT OF TOTAL EFFECT OF THERAPY Overall effect of Group-A

Category	No. of patients	Percentage
Complete remission	0	0
Marked improvement	0	0
Moderate improvement	4	13
Mild Improvement	16	54
Unchanged	10	33

Overall effect of treatment in Group-B

Category	No. of patients	Percentage
Complete remission	0	0
Marked improvement	0	0
Moderate improvement	16	53%
Mild Improvement	14	47%
Unchanged	0	0

Comparative results of Group-A and Group-B

Characteristics Signs and Symptoms	Group-A		Percentage of relief	Group-B		Percentage of relief
	Mean score			Mean score		
	BT	FU		BT	FU	
Pain	1.8	0.867	52	2.233	0.467	79
Itching	1.333	0.933	30	1.3	0.333	74
Burning sensation	1.533	1.067	30	1.4	0.5	64
Sthanam	1.967	1.467	25	2.5	1.433	32
Sankya			0			0

DISCUSSION

The assessment of the results was made by adopting the standard methods of scoring the signs and symptoms of *Arshas*. It included assessment of pain, itching, burningsensation, *Sthana* and *Sankya*.

Effect on severity of pain

The percentage of severity of pain in Group-A showed a reduction by 52% as against 79% in Group-B. Further, the reduction in the pain score in both the groups was statistically highly significant as assessed by the paired 't' test. This observation proves that both the treatment are highly effective in relieving pain. The comparison of the therapeutic effects in these two groups reveal that, the effect in relation to severity of pain is better in Group-B rather than Group-A.

Effect on severity of Itching

The percentage of severity of Itching in Group-A showed a reduction by 30% whereas in Group-B it was 74% in patients of *Arshas*. Data showed that patients of both the groups had reduction in severity of Itching. This affirms that Group-A and Group-B are effective in reducing the severity of Itching. Further, the comparison of two group denotes that Group-B is superior than Group-A.

Effect on magnitude of burning sensation

The magnitude of burning sensation showed marked improvement in both the groups. In Group-A, the percentage of magnitude of burning sensation has reduced to 30%. Similarly in the Group-B this percentage has come down to 64%. This decrease in the magnitude of burning sensation after the treatment in the patients of *Arshas* is suggestive of the efficacy of treatment. Further, the comparison of the effect in two groups indicates that better response is obtained in the Group-B.

Effect on degree of haemorrhoid

Reduction in degree of haemorrhoids was observed in both the groups of patients of *Arshas*. The degree of haemorrhoids was reduced after the treatment in Group-A and Group-B with statistical significance. As observed, a reduction in the percentage by 25% in Group-A and 43% in Group-B. When the effect of both the treatments is compared the patients in Group-B showed better response in bringing down degree of haemorrhoids in patients of *Arshas*.

Effect on number of haemorrhoids

There is no change in the number of haemorrhoids in both the groups.

Overall Effect of Group-A and Group-B on Arshas**Overall Effect of Group-A**

Category	No. of patients	%
Complete remission	0	0
Marked improvement	0	0
Moderate improvement	4	13%
Mild Improvement	16	54%
Unchanged	10	33%

Overall Effect of Group-B

Category	No. of patients	%
Complete remission	0	0
Marked improvement	0	0
Moderate improvement	16	53%
Mild Improvement	14	47%
Unchanged	0	0

Table No. 42.

Comparative results of Group-A and Group-B

Characteristics	GROUP-A			GROUP-B		
	Mean score		Percentage of relief	Mean score		Percentage of relief
	BT	FU		BT	FU	
Pain	1.8	0.867	52%	2.233	0.467	79%
Itching	1.333	0.933	30%	1.3	0.333	74%
Burning sensation	1.533	1.067	30%	1.4	0.5	64%
Sthanam	1.967	1.467	25%	2.5	1.433	32%
Sankya			0			0

Statistical conclusion

By comparing results of Group A and Group B, it is concluded that treatment modality of Group B (Avagaha sweda and Matravasti) is more effective than Group A (Avagaha sweda) in almost all parameters except the *sankya*. The study reveals that in both groups respective therapies are effective in the criterias of *Shoola, Daha, Kandu, and Stana of Arshas*.

From this study it is very clear that *Pippalyadi taila matra basti* has significant effect in the management of Arshsa, as the *Avagaha sweda* with *Dhanyamla* alone gives minimum result even if it is done as a *poorva karma* or *pradhana karma*.

REFERENCES

1. Sushruta Samhita: Acharya Jadhavaji Trikamaji, Chaukhambha Orientalia Varanasi, Ed 7, 2002, Su.33/4, pg 144.
2. Vagbhatacharya, Ashtangahridaya, with commentaries of Arunadatta and Hemadri, Chaukamba Sanskrit Series 1982, Ni. 7/1, pg 490.
3. Agnivesha, Charakasamhita, Acharya Jadhavj Trikamji, Choukambha publications, Varanasi, ed.5, 2001, Vi. 5/4, pg 249.
4. Susrutha.samhita, Acharya Jadavji Trikamji, Choukamba Sanskrit Sansthan, Varanasi Reprint 2008, Ni.3/19. pg 279.