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A Case Of External Thrombsed Haemorroids Treated With Jaloukavacharana

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Abstract -Haemorrhoids is an ailment that affects all economical groups of population. Though the disease is within the limits of management, it has its own complications like severe haemorrhage, inflammation, and thrombosis, by which a patient gets severe pain and is unable to continue his routine work. Prior to surgical treatment of haemorrhoids, associated conditions like inflammation, strangulation, thrombosis, etc. need to be managed. A thrombosed external haemorrhoid is commonly termed a perianal haematoma. It is a small clot occurring in the perianal sub- cutaneous connective tissue, usually superficial to the corrugator cutis ani muscle. Rakthamokshana can be carried out with the help of Jalaukavacharana as it is a tool to be employed in pitta predominant condition. Hirudin, calin and factor X which are present enzymes in saliva of leech act as anti-coagulant and prevent clot formation.

Keywords –Arsha, Haemorrhoids, Jalaukavacharana, Thrombosed piles

Introduction

Ayurveda the Indian system of medicine comprises of eight different specialties in which Shalyatantra, has got prime importance. Acharya Sushruta, father of surgery has considered Arsha (haemorrhoids) in Ashtaumahagada (eight major diseases). The incidence of haemorrhoids is common among all economical classes of population. Haemorrhoids are dilated veins within the anal canal in the sub epithelial region formed by radicals of superior, middle and inferior rectal veins. Haemorrhoids may be ‘internal' or 'external', based on their position above or below the dentate line respectively [1.] Unlike internal haemorrhoids, external haemorrhoids consist of conglomerate group of distinct clinical entities. A thrombosed external haemorrhoid is commonly termed a perianal haematoma. It is a small clot occurring in the perianal sub- cutaneous connective tissue, usually superficial to the corrugator cutis ani muscle. The condition is due to back-pressure on an anal venule consequent upon straining at stool, coughing or lifting a heavy weight.

The condition appears suddenly and is very painful, and on examination a tense, tender swelling that resembles a semi ripe blackcurrant is seen. The haematoma is usually situated in a lateral region of the anal margin. Untreated, it may resolve, suppurate, fibrose and give rise to a cutaneous tag, or burst and extrude the clot, or continue bleeding[2]. Hence its management in initial stages will become mandatory.

Acharya Sushruta has considered four curative measures for the treatment of Arsha(haemorrhoids)[3]

1. Bheshaja Karma

2. Kshara Karma

3. Agni Karma

4. Shastra Karma

Sushruta has indicated Visravana or Raktamokshana (bloodletting) in the management of haemorrhoids [4]. It has been explained that, in prolapsed (Nirgatani) and thrombosed (Doshapurnani) piles, Raktamokshana is the choice of treatment, which relieves pain[5]. Rakthamokshana can be carried out with the help of Jalaukavacharana as it is a tool to be employed in pitta predominant conditions. Hirudin, calin and factor X which are present enzymes in saliva of leech act as anti-coagulant and prevent clot formation, Bdellin acts as anti-inflammatory agent there by maintaining normal circulation[6]. So the effect of Jalaukavacharana in thrombosed external haemorrhoid has been studied in this attempt.

CASE REPORT

Age - 45 year

Gender- Male

Chief complaints and duration

Patient complains of mass at anal verge with severe pain and burning sensation from last 3 days.

H/o present illness

Patient was apparently normal before 4 days. Gradually he developed mass anal verge along with above symptoms. Therefore, for further treatment he came to OPD of Shalya Tantra, Karnataka Ayurveda Medical College, Ashok Nagar, Mangalore.

Past history

No any known comorbidities.

Personal history

Appetite-Good

Bowel-Constipated

Sleep-Disturbed

Micturition-4-5times/day

General examination

CVS – S1 S2 Normal.

CNS – Conscious and oriented to time, place and person

RS – B/L NVBS heard.

Per abdomen – Soft, non-tender, no organomegaly

Pulse - 78/min

BP - 130/80 mm Hg

Local Examination

Per Rectal Examination

On Inspection

Thrombosed external haemorrhoids at 3,7 and 11’0 clock position.

On palpation:

Tenderness - Present

Consistency-Firm

Digital examination

Sphincter tone – Hypertonic

Proctoscopic examination

Not done due to pain

Haematological Investigation

Hb – 14gm%

HIV and HBsAg – Negative

As per complaints, clinical examination and reports he was diagnosed as external Thrombosed Haemorrhoids and Jaloukavacharana (leech therapy) was planned as line of treatment.

METHODOLOGY:

Poorva karma

- Patient was explained about the procedure and informed written consent taken.
- Nirvisha Jaloukas of medium size were selected for the procedure.
- Jaloukas were activated by letting them in Haridra Jala.

Pradhana karma

- After checking the vitals, patient was made to lie in lithotomy position and the activated 2 Jaloukas were applied over the thrombosed mass.
- A cotton gauze soaked in water was used to cover Jaloukas to create suitable environment.
- After 35 minutes of application of Jaloukas, they detached from the mass by themselves.

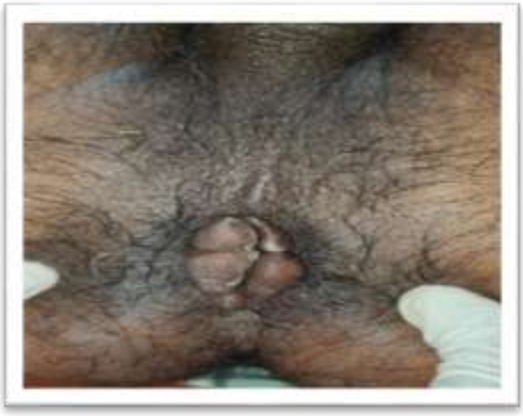
Pashchatkarma

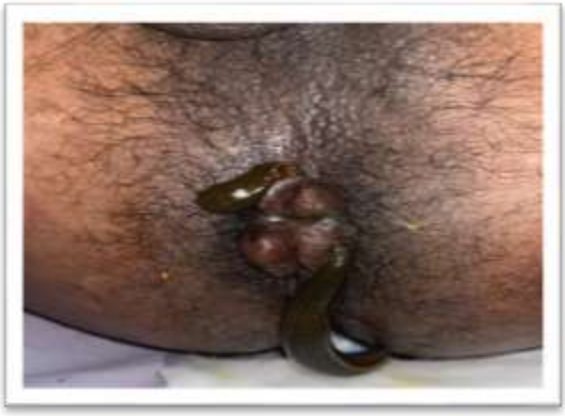
- Haemostasis was attained by application of Haridra to bite site followed by bandaging.
- Vamana of Jalouka done using Haridra, once the leech vomited the blood and attained its normal movements, it was replaced in fresh water.

Patient was advised to take Tab. Triphala guggulu 2BD B/F, Tab. Gandhaka rasayana 2BD A/F

Total 4 sittings done on consecutive days

Observations





BEFORE TREATMENT

Discussion

Engorgement of a hemorrhoidal vessel with acute swelling may allow blood to pool and, subsequently, clot; this leads to the acutely thrombosed external haemorrhoid, a bluish-purplish discoloration often accompanied by severe pain. Raktamokshana is practiced in India since thousands of years, which has been included under the five bio-purificatory procedures. Leech application is one type of bloodletting in Ayurveda. Hirudin present in the saliva of leech helps in oppressing the process of blood clotting. One leech exhaust from 5 to 10 ml of blood. Bleeding lasts for some hours (about 12–24 hours) and patient loses about 20–30 ml of blood. Thus, due to influence of 5 leeches simultaneously a patient loses 100–250 ml of blood. Biologically active substances containing in saliva glands of medicinal leeches can restore blood circulation in the nidus of inflammation, removes ischemia of organs, and provide capillary tissue exchange and, due to it, can carry out the transport of chemical drugs into the nidus of inflammation, improve immune protection, and regeneration of tissues. Probably, due to the action of hirudin and hyaluronidase (the factor of penetration) it improves not only the blood circulation in organs, but also in other organs and tissues due to the best capacity of capillary-tissues exchanging and so on. It promotes reduction of swelling, dissolution of the organized blood-clots, and cosmetic effect. Using of leeches promotes the increasing of local immunity as well. The leech application is effective in reducing the pain; this supports the analgesic action of leech component. In thrombosed piles, the leech application has thrombolytic action. The pus and mucous discharge also get subsided due to leech application; this effect is due to antimicrobial and mucolytic properties of leech[7].

Conclusion

Thrombosis of external haemorrhoid is a common acute complication of haemorrhoids. There will be tense and tender swelling in perianal region. In this condition application of leech help to improve circulation by sucking the blood and interstitial fluid from inflammatory swelling and there will be an immediate reduction in the size of swelling, pain and tenderness. Leech therapy is an effective, safe, simple and non-invasive and is cost effective too.

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