



Review Article

REVIEW ARTICLE ON ARSHA W.S.R. TO HAEMORRHOIDS

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ABSTRACT

Hemorrhoids is one of the commonest anorectal disorders and most common cause of lower gastrointestinal tract bleeding which affects the quality of life also. *Acharya Sushruta* has placed *Arsha* in *Astamahagada* which indicates its severity and difficulty to cure. Ayurveda texts provide a detailed understanding of *Arsha*. In spite of recent advancement in the management of haemorrhoids, prevention as well as successful management of haemorrhoid is still a challenge. This review article aims to describe the Ayurvedic perspective of *Arsha*, its etiology, classification, symptoms and management. This review article tries to elaborate the causative factors of *Arsha* along with sign and symptoms various treatment modalities which may be helpful in finding solutions for the prevention as well as treatment of disease more successfully.

INTRODUCTION

Term haemorrhoid is derived from Greek adjective 'haemorrhoids', meaning bleeding (haema-blood, rhoos-flowing). Haemorrhoids are dilated superior haemorrhoidal venous plexus in relation to anal canal. According to *Acharya Sushruta*, sprouts of muscles inside *Gudavali* (folds of the rectum) are called *Arsha* (pile mass) [1]. According to *Acharya Vagbhata*, just as foes give agony to the person, in the same way, the sprouts of muscles anguish the person by causing obstruction to the passage rectum, hence this disease is called as *Arshas*[2]. All Ayurveda *Samhita* mentioned *Nidana*, symptomatology, classification and pathogenesis, treatment and prognosis of *Arsha* in detail. Haemorrhoid is most common anorectal disorder and difficult to cure that's why *Acharya Sushruta* has placed it among *Astamahagada*[3]. In contemporary science, various treatment methods like topical drugs, rubber band ligation, sclerotherapy, infrared coagulation, etc., and surgical procedures like haemorrhoidectomy, stapled haemorrhoidopexy, doppler-guided haemorrhoidal artery ligation, etc. are used to treat haemorrhoids. None of the above method is definite to successfully cure and permanently

prevent haemorrhoid formation without any complication or recurrence. In *Sushruta Samhita* four type of treatment are mentioned to treat haemorrhoids which includes *Bheshaja, Shashtra, Kshara* and *Agni*[4]. Here this review aims to consolidate Ayurvedic prospective of *Arsha* along with contemporary science to enhance the knowledge regarding etiology, sign, symptoms and treatment of haemorrhoids for improving patient wellbeing.

Etiology and risk factor for Arsha

Lack of valves in the superior haemorrhoidal veins, loose submucous connective tissue of the rectum, prolonged standing condition, hereditary, low fibrous diet, chronic constipation, difficulty in micturition etc. are precipitating factors for haemorrhoids[5]. According to *Acharya Sushruta*, in persons who are not self-disciplined with regard to foods and life style who give way to things which aggravates the *Doshas* such as use of incompatible foods, over-eating, more of copulations, sitting on ones heels, riding on animals, suppression of the urge etc. produce sprout in *Gudavali* called as *Arsha*. specially in persons who have *Mandagni* (weakness of digestive power). These sprouts grow in size due to contact (friction) by grass, sticks, stone pebbles and lumps of cloth etc. or by touch of cold water[6]. According to *Acharya Charaka, Vyayama, Diwaswapna, Sukhashayana, Asana, Sthana, Vyavaya, Utkatavishamakatinasana, Vibrantayana, Ushtrayana*[7] etc., are common causative factors for haemorrhoids.

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Classification

Internal Haemorrhoids: They lie inside the anal canal, generally start off from the anorectal ring and ends at the dentate line.

External Haemorrhoids: They are present outside the anal orifice and covered by skin.^[8]

Internal hemorrhoids are classified on the basis of their appearance and degree of prolapse under the name as Goligher's classification which states that first degree hemorrhoids do not prolapse, second degree hemorrhoids prolapse on straining but get relieved spontaneously, third degree hemorrhoids prolapse on straining but relieved only manually and fourth degree hemorrhoids remains outside.

According to *Acharya Sushruta Arsha* are classified into

- 6 types which includes- *Vataja, Pittaja, Kaphaja, Sannipataja, Raktaja* and *Sahaja*^[9]
- 2 types- *Bahya* and *Abhyantara*.

While *Acharya Charaka* also described *Sahaja, Janmottarakalaja* and *Aardra, Shushka*^[10] type of *Arsha*.

Clinical features

The primary and initial symptom of haemorrhoid is bleeding. Bleeding is of bright red in colour and appears with defecation. Patient usually complains of splash in the pan. Pain occurs when there is associated thrombosis, fissure in ano or strangulation. Mucus discharge, anemia and prolapse are others features of haemorrhoids. Haemorrhoids are diagnosed by inspection, digital rectal examination and proctoscopy etc. According to *Acharya Sushruta, Vataja Arsha* are *Shushka* and *Kadambapuspa* like. In case of *Pittaja Arsha*, the shape is compared with parrot beak, liver and the mouth of leech. *Kaphaja Arsha* are similar with the seeds of jackfruit, *Karira* etc. *Raktaja Arsha* is compared with pearl^[11] etc. In case of *Raktaja Arsha*, it is stated that the hot blood will be expelled quickly due to pressure imposed by hard faecal matter towards the vessels in anal canal.

Management

Modern management of haemorrhoids includes conservative, non-operative and operative methods.

Conservative treatment includes

- Lifestyle modification like high fiber diet intake, intake of more liquid, avoiding prolonged straining during defecation etc.
- Oral flavonoids e.g., Micronized purified flavonoid fraction (MPFF), containing 90% diosmin and 10% hesperidin, are venotonic drug. Oral calcium dobesilate are also venotonic agents.
- Topical medicines like nitrates and calcium channel blockers might help by relaxing the sphincter.

Non-operative treatment includes

- Sclerotherapy- The solutions used for sclerotherapy are 5% phenol in oil, vegetable oil, quinine, and urea hydrochloride or hypertonic salt solution.
- Rubber band ligation- When a rubber band is tied around the hemorrhoidal tissue, it leads to the tissue necrosis and scarring.
- Infrared coagulation (IRC) uses infrared radiation that coagulates the tissue.
- Cryotherapy uses a freezing probe to freeze the hemorrhoidal tissue.
- Radiofrequency ablation (RFA) is recent method to treat haemorrhoids.
- Lord's procedure- not in so much use.

Operative procedures include

- Hemorrhoidectomy- Most effective with least recurrence rate. It is of 2 types-
(1) Open hemorrhoidectomy -Milligan-Morgan method
(2) Closed hemorrhoidectomy -Ferguson's technique
- Submucosal hemorrhoidectomy (Parks procedure), Whitehead's circumferential hemorrhoidectomy, Doppler-guided hemorrhoidal artery ligation (DGHAL), Stapled hemorrhoidectomy (PPH), radiofrequency ablation and suture fixation of hemorrhoids, diathermy hemorrhoidectomy, laser hemorrhoidectomy etc^[12].

According to *Acharya Sushruta*, treatment of *Arsha* can be one of the following-

- 1) *Bhesaja Chikitsa*
- 2) *Kshara Chikitsa*
- 3) *Agni Chikitsa*
- 4) *Shastra Chikitsa*

- 1) ***Bhesaja Chikitsa***- *Arsha* which are new in origin, with least vitiated *Doshas* and insignificant symptoms and complications are cured by medicinal treatment.

Acharya Sushruta has clearly specified medicinal treatment for *Arsha* according to its *Doshanubandh*, which are as follows-

1. *Vataja Arsha*: *Snehan, Swedan, Vaman, Virechan, Anuvasan* and *Asthapan Basti*
2. *Pittaja Arsha*: *Virechan*
3. *Kaphaja Arsha*: *Shringber* and *Kultha* preparation.
4. *Raktaja Arsha*: *Sanshaman*
5. *Tridoshaja Arsha*: Medicated milk according to vitiation of specific *Dosha*.

Acharya Charaka has given following treatment for *Arsha*

1. *Shushka Arsha*: -*Snehan- Swedan, Avagahan, Lepa, Deepan - Pachana, Vatanuloman, Asava, Arista, Ghrita, Basti, Takra*.

2. *Sravi Arsha: Rakta Sangrahan, Vaman, Virechan, Langhan, Parishechan, Avagahan, Anuvasan Basti, Pichchha Basti, Ghrita Prayoga and Vyatyasa Karma.*^[13]

Kshara Karma

According to *Acharya Sushruta*, *Arsha* which are soft, extensive, deeply seated and projecting in nature are corrected by *Kshara* treatment. It is a delicate surgical method as compared to *Shastrakarma* and *Agnikarma*. It is superior to all sharp and subsidiary instruments due to having *Chhedana*, *Bhedana* and *Lekhana*^[14] properties and treating disorders of *Tridoshaja*. Diseases part which are hard to approach by ordinary methods, can be treated easily by *Kshara Karma* thus showing its unique quality.

Agnikarma: *Agnikarma* is used in rough, fixed, broad and hard variety of *Arsha* ^[15]. *Vataja* and *Kaphaja Arsha* are treated by *Agni* and *Kshara Karma*. When *Arsha* are prolapsed, the *Kshara Karma*, *Agni Karma* or surgery should to be employed without help of *Arshoyantra*. *Agnikarma* is considered superior to all other surgical and parasurgical procedures due to its ability to destroy entire diseased tissues and due to its vast applicability even after the lesions is not curable by other procedures.

Shashtra Karma

Arsha which are with narrow pedicle, projecting and moist, should be managed by *Shashtra Karma*^[16]. The *Chhedana Karma* of the *Arsha* should be performed by using sharp instruments like *Mandalgra*, *Karapatra*, *Nakhashstra*, *Mudrika*, *Utpalapatra* and *Ardhadhara* etc. by giving semilunar incision. According to need, after *Chhedana Karma*, the *Agnikarma* can be instantly used in case of any remnant or to check active bleeding or secondary oozing from tissue. This whole procedure appears like conventional open haemorrhoidectomy or to say the ligation and excision procedure performed in recent times.

Apathya: The meat of animals of *Anupa Desha*, fishes, oilcakes and the food made of rice, *Bilva*, heavy food, fibrous root of Lotus, *Vishtambhi*, taking sun bath, excessive intake of water, improperly given *Vamana* and *Basti*, *Viruddhahara*, eastern wind, retention of natural urges, over indulgence in sex etc. are *Apathya* for the *Arsha* patients. *Viruddha Ahara*, *Vishtambhi Ahara*, *Guru Ahara*, *Anupa Mansa*, *Dushta Udaka* etc. etiological factors, *Vegavarodha* (suppression of natural urges), *Ati Streesanga* (excessive coitus), *Utkatasana* (defective sitting posture), *Prishtha Yana* ^[17] riding etc. are also *Apathya* for *Arsha*.

DISCUSSION

Although *Arsha* is a disease which is known since ancient times but still today its management is challenging. In Ayurveda, etiology, sign and symptoms

of *Arsha* are present in detail. In modern science, conservative treatment is limited to only dietary modification and lifestyle changes while other conservative treatment is ineffective. Ayurveda provide various conservative treatment including in *Bhesaja Chikitsa* e.g. *Lepa*, *Asava*, *Arista*, *Sanshaman*, *Shodhan* etc along with *Pathya* and *Apatya* which are not only effective in treating the disease but also effective in prevention of disease. In current scenario many non-operative procedures are being used e.g. Rubber band ligation, Infrared coagulation (IRC), Radiofrequency ablation (RFA) etc. and also operative procedures like Open hemorrhoidectomy, Closed hemorrhoidectomy, Doppler-guided hemorrhoidal artery ligation (DGHAL), Stapled hemorrhoidectomy (PPH), LASER hemorrhoidectomy etc. being used. Not only these procedures have their own limitations and complications in treating haemorrhoids but also are cost effective and needs expertise and recurrence chance still persists. Ayurveda provide various ways to classified haemorrhoids treatment according to their clinical presentation and also provide specialized procedures like *Kshara Karma*, *Agni Karma* and *Shashtra Karma* to treat haemorrhoids and also causes prevention of it. So, in this review article we find some gap in the management of *Arsha* in spite of advancement of technology in the field of anorectal disease. It is noteworthy to suggest that more resources should be allocated for research in the haemorrhoids to find out effective management strategies to cure the disease as well as prevent it.

CONCLUSION

Hemorrhoids is one of the commonest anorectal disorders and has been placed in *Astmahagada*. In spite of recent advancement in the management of haemorrhoids, prevention as well as successful management of haemorrhoid is still a challenge.

Ayurveda provide various way to classified haemorrhoids treatment according to their clinical presentation. Ayurveda provides a holistic approach involving diet regulation, lifestyle modification, local medication, systematic medication, *Shodhan Chikitsa* and specialized procedures like *Kshara Karma*, *Agni Karma* and *Shashtra Karma* etc. These traditional treatments attaining popularity due to their effectiveness and minimal invasive nature and least recurrence rate. Integrating the knowledge of Ayurvedic and modern science regarding etiology, clinical features, management of *Arsha* can enhance patient outcomes, provide safe and cost-effective treatment.

REFERENCES

1. Shastri A. *Sushruta Samhita with Ayurved tatva Sandipika Hindi commentary, volume1, nidansthan- Arshasaamnidan.* 2nd ed. Varanasi.

- Chaukhambha Sanskrit Sansthan publisher; 2009. p.306
2. Gupta A. Astangahrdayam of Vagbhata with vidyotini Hindi commentary. Upadhyaya Y editor. nidansthana- Arshasamnidanam 5th ed. Varanasi: Chaukhambha Sanskrit Sansthan; 1975. p. 243
 3. Shastri A. Sushruta samhita with Ayurved tatva sandipika Hindi commentary- volume 1, sutra sthan-avarniyamadhyaya 2nd ed. Varanasi Chaukhambha Sanskrit Sansthan publisher; 2015 p.163
 4. Shastri A. Sushruta samhita with Ayurved tatva sandipika Hindi commentary- volume 1, chikitsa sthan-Arsha chikitsa. 2nd ed. Varanasi Chaukhambha Sanskrit Sansthan publisher; 2012.p.46
 5. Das. S. A Concise Textbook of surgery, The rectum and anal canal. 8th ed. Kolkata. Das S. publishers, 2014. p.1077
 6. Shastri A. Sushruta samhita with Ayurved tatva Sandipika Hindi commentary -volume 1, Nidansthan- Arshasaamnidan. 2nd ed. Varanasi. Chaukhambha Sanskrit Sansthan publisher; 2009. p.306
 7. Chaturvedi G, Shastri K. Charak samhita of Agnivesh with Vidyotini Hindi commentary- volume 2, Sastri R, Upadhyaya Y, Pandeya GS, Gupta B editors. Chikitsasthan Arsha chikitsitam adhyay. 2nd ed. Varanasi: Chaukhambha Bharati Academy publisher; 2020. p.378-379
 8. Das. S. A Concise Textbook of surgery, The rectum and anal canal. 8th ed. Kolkata. Das S. publishers, 2014. p.n.1075.
 9. Shastri A. Sushruta samhita with Ayurved tatva Sandipika Hindi commentary -volume 1, nidansthan - Arshasaamnidan. 2nd ed. Varanasi. Chaukhambha Sanskrit Sansthan publisher; 2012. p.306 and 310
 10. Chaturvedi G, Shastri K. Charak samhita of Agnivesh with Vidyotini Hindi commentary- volume2, Sastri R, Upadhyaya Y, Pandeya GS, Gupta B editors. Chikitsasthan Arshachikitsitam adhyay. 2nd ed. Varanasi: Chaukhambha Bharati Academy publisher; 2009. p.416.
 11. Shastri A. Sushruta samhita with Ayurved tatva Sandipika Hindi commentary -volume 1, nidansthan- Arshasaamnidan. 2nd ed. Varanasi. Chaukhambha Sanskrit Sansthan publisher; 2009. p.307-308
 12. Mann CV, Russell RC, Williams NS. Bailey and Love's Short Practice of Surgery. 22nd ed. London: Chapman and Hall; 1995. p. 873-874.
 13. Chaturvedi G, Shastri K. Charak samhita of Agnivesh with vidyotini Hindi commentary-volume 2, Sastri R, Upadhyaya Y, Pandeya GS, Gupta B editors. Chikitsasthan Arsha chikitsitam adhyay. 2nd ed. Varanasi: Chaukhambha Bharati Academy publisher; 2020. p.384-406
 14. Shastri A. Sushruta samhita with Ayurved tatva Sandipika Hindi commentary -volume 1, sutra sthan- ksharapakvidhimadhyay. 2nd ed. Varanasi. Chaukhambha Sanskrit Sansthan publisher; 2009. p.45
 15. Shastri A. Sushruta samhita with Ayurved tatva sandipika Hindi commentary-volume 1, chikitsa sthan-Arsha chikitsa. 2nd ed. Varanasi Chaukhambha Sanskrit Sansthan publisher; 2012. p.46
 16. Shastri A. Sushruta samhita with Ayurved tatva sandipika Hindi commentary- volume 1, chikitsa sthan-Arsha chikitsa. 2nd ed. Varanasi Chaukhambha Sanskrit Sansthan publisher; 2012. p.46
 17. Shastri A. Sushruta samhita with Ayurved tatva Sandipika Hindi commentary -volume 1, chikitsasthaan- Arshasaam chikitsitam. 2nd ed. Varanasi. Chaukhambha Sanskrit Sansthan publisher; 2012. p.52

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