



## PREVENTION OF ARSHAS WITH REFERENCE TO LIFESTYLE CHANGES: SCOPE IN AYURVEDA

Dhanya P.V<sup>1\*</sup>, Anjali Bharadwaj<sup>2</sup>, Baidyanath Mishra<sup>3</sup>

<sup>1</sup>P.G.Scholar, <sup>2</sup>Professor, Dept. of P.G. Studies in Shalyatantra, SKAMCH & RC, Bangalore, Karnataka, India.

<sup>3</sup>Professor and HOD, Dept. of Rachana shareera, SKAMCH & RC, Bangalore, Karnataka, India.

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### ABSTRACT

*Arshas* or hemorrhoid is quite a common problem observed both in men and women. It can be a recurrent and painful intrusion in life. Even young people who are in good shape can get *Arshas*. The incidence of *Arshas* is increasing day by day due to the influence of western food habits, diet which contains very less amount of soluble fibre, inappropriate diet regimen and *Vegadharana* (suppression of natural urge to defecate) which causes constipation. Other factors which trigger *Arshas* are improper toilet habits, sedentary work style or strenuous work, prolonged periods of standing or sitting, prolonged travelling on two wheelers and overweight. Its incidence increases as age advances, and at least 50% of people over the age of 50 years have some degree of hemorrhoidal symptoms. Therefore, simple lifestyle changes can effectively reduce the recurrence of this common and painful condition.

There is a wide spread description of etiological factors and pathogenesis of *Arshas* in Ayurvedic literatures as well as surgical textbooks. The measures of prevention such as implementing various *Pathyapathyas* with respect to *Ahara* and *Vihara* (diet regimen and simple life style changes) have great importance in the present day scenario. By understanding the *Nidana* and *samprapti* the various preventive measures can be interpreted rightly and implemented so that it will prevent the disease *Arshas*. Therefore the need for the understanding of the *Pathyapathya* of *Arshas* along with certain life style changes becomes valuable for the common man as well as the physicians in the preventive and the curative aspects of the disease. There by, we can prevent occurrence and recurrence of *Arshas*.

**KEYWORDS:** *Arshas*, Hemorrhoids, *Pathyapathya*, Lifestyle changes.

### INTRODUCTION

*Arshas* or hemorrhoids have been included among the *Mahagadas* as it disturbs the day today activities of the person like an enemy [1]. *Acharya Vagbhata* has described that *Arshas* are fleshy nail like projections that obstructs the anal canal and which destroys the person just like an enemy does [2]. *Acharya Caraka* added that such fleshy growths when they appear at different sites of the body are named based on their sites of occurrences.

Hemorrhoids (*Arshas*) are dilated veins within the anal canal in the sub epithelial region formed by the radicals of the superior, middle and inferior veins. The prevalence of

hemorrhoids, when patients are assessed proctoscopically, far overweighs the prevalence of symptoms [3]. Its incidence increases as age advances, and at least 50% of people over the age of 50 years have some degree of hemorrhoidal symptoms [4]. Among Gastrointestinal diseases, hemorrhoid is the most common and troublesome disease. This disease is not life threatening but often makes the life of the sufferer more miserable. Piles may occur at all ages, but are uncommon below the age of 20 years barring piles secondary to vascular malformations which may occur even in children. Even young people in good shape can get *Arshas* and it is often

embarrassing for the patient to discuss about it, even with a health care specialist.

### Classification

#### On the basis of position

##### ➤ Internal Haemorrhoids

Internal Hemorrhoids are varicosities of the internal hemorrhoidal plexuses. These could be divided into two main types: a) Vascular hemorrhoids in which there is extensive dilatation of the terminal superior hemorrhoidal venous plexus- commonly found in younger individuals particularly men. b) Mucosal hemorrhoids in which there is sliding down of the thickened mucous membrane which conceals the underlying veins.

For practical purposes internal Hemorrhoids can be divided into three degrees

- **First Degree** Hemorrhoids are those in which hypertrophy of the internal hemorrhoidal plexus remains entirely within the anal canal as the mucosal suspensory ligaments remain intact. Patients in this stage usually present with rectal bleeding and discomfort or irritation. Bleeding is bright red and occurs during defecation as splash in the pan. It may continue for months or years or months.
- **Second Degree** Hemorrhoids occur when with further hypertrophy, the mucosal suspensory ligaments become lax and piles will descend so that they prolapse during defecation but spontaneous reduction takes place afterwards. There may be small skin tag, some mucous discharge, soreness and irritation.
- **Third Degree** Haemorrhoids, they remain prolapsed after defecation and require replacement. These often descend spontaneously or on exercise. the mucosa overlying such hemorrhoids undergoes squamous metaplasia. Mucous discharge and pruritis ani become troublesome and anemia becomes obvious.<sup>[5]</sup>

##### ➤ External Haemorrhoids

An external hemorrhoid, lies between the dentate line and anal canal margin. It is covered by skin through which blue veins can be seen unless fibrosis occurs.

### Causes

The exact causes of symptomatic hemorrhoids are unknown. A number of factors are believed to play important role in causing the disease. Some of them are as follows.

- **Irregular bowel habits** (constipation or diarrhea). Shearing forces acting on the anus due to hard stools lead to caudal displacement of the anal cushions and mucosal trauma <sup>[6]</sup>. Repeated use of laxatives or purgatives can also lead to varicosities in the hemorrhoidal vessels.
- **Lack of exercise:** Proper venous drainage does not take place from the perineal region in patients who do not do proper exercise.
- **Low-fiber diet:** A fibre (soluble fibre)-deficient diet results in a prolonged gut transit time, which is associated with the passage of smaller, harder stools that require more straining to expel. The presence of a hard fecal mass in the rectum could obstruct venous return, resulting in engorgement of the anal veins with the act of straining at stool.
- **Hereditary:** Hemorrhoids is frequently seen in members of the same family.
- **Increased intra-abdominal pressure** caused due to prolonged straining, ascitis, an intra-abdominal mass, or pregnancy is responsible for haemorrhoids. Pregnancy not only causes pressure on the superior rectal veins but also excess progesterone during this period relaxes the smooth muscles on the walls of the above said veins.
- **Aging:** In contrast to the anal cushion of early life, with age, the supporting structures show a higher proportion of collagen than muscle fibres and are fragmented and disorganized.
- **Morphological:** Veins in the lower rectum are in loose sub mucosal plane, but the veins above enter the muscular layer, which on contraction increases the venous congestion below (more prevalent in patients with constipation). Superior rectal veins have no valves (as they are tributaries of portal vein) and so more congestion.<sup>[7]</sup>

Other factors that are believed to increase the risk include

- \* Excess weight in the abdomen and pelvic region may have difficulty in bowel movement and cause strain to the normal hemorrhoids in the anal region.
- \* In chronic diarrhea engorgement of internal hemorrhoidal plexus occurs. In instances, descent & swelling of anal cushion is a prominent feature.
- \* Prolonged sitting: it can cause local congestion in the perineal region and improper vascular flow.
- \* Chronic cough: causes increase in the abdominal pressure.
- \* Stress may cause disruption of the functions of the gastrointestinal tract. This makes the food to digest slowly which results in the slow movement of bowels through the large intestine. The bowels are driven out of their moisture in the large intestine leading to hard bowels and constipation. The conditions become favorable for the hemorrhoids to occur.

By reviewing the causative factors mentioned in the classical texts the etiological factors can be classified into the following groups for convenience.

### 1. Hereditary or Genetic factors

*Sahaja arsha* (Hereditary) are caused by *Beejopaghatakara bhavas* (genetic factors) which may result from

- Bad deeds of the past life.
- Defects in *Beejabhaga* and *Beejabhaga Avayava*. *Acharya Sushruta* has classified such diseases under *Adibala Pravritta Vyadhi*.

### 2. Digestive factors (*Agnimandyakara*)

Majority of the acquired diseases occur due to *Mandagni*. Among the *Nidanas* of *arsha*, *agnimandyakara Aharavihara* can be enlisted as

- *Adhyashana* (intake of food even before the previously in taken food is not properly digested),
- *Pramitashana* (improper intake of food)
- *Shoka* (sorrow) decreases the digestive function.
- *Avyayama* (lack of exercise), *Divaswapna* (day sleep) *Shayyasukha* (inactivity). These cause decrease in appetite and disrupts the

digestive function of the gastro intestinal system.

In the present day, *Shoka* as a *Nidana* for *Agnimandya* has great relevance as the work pressure and stress experienced by the present generation is much higher compared to the previous generation.

### 3. Constipation (*Vibandha*)

- *Vegadharana* or suppression of urge to pass stools is one of the *Nidanas* for *Arshas* which leads to constipation.
- *Alpashana* (intake of very less quantity of food) leads to formation of pellet like stools thereby causing constipation
- *Langhana* (emaciation) In emaciated individuals often there is impairment of digestion.
- *Katu, tikta, kashaya rasa Pradhana ahara* (intake of food items which are pungent, bitter and astringent to taste) excessive intake of such foods can cause disturb the digestion.
- *Ruksha ahara* (food items like salted food and deep dried items) causes loss of moisture from the feces and leads to formation of hard stools.
- *Atapasevana* (excessive exposure to sunlight) is one of the main causes of dehydration in the body leading to formation of hard stools.

### 4. Factors causing local congestion

This group of *Nidana* includes *Vihara* like

- *Prishtayana* (riding on the back of animals) : In olden days when vehicles were not there animals were the means of transport. Riding on animals for long time can cause local congestion in the perineal region.
- *Vegodeerana: straining and evacuating the stools forcefully causes displacement of the anal cushions and trauma to the anal mucosa.*
- *Sthree sanga* (indulgence in coitus): excessive indulgence in sex can cause local congestion and improper vascular drainage.
- *Sheetodaka sparsha* (excessive exposure of the area to cold water) cold water can cause the further cause contraction of the anal sphincter causing difficulty in expulsion of stools.
- *Utkatukasana* (sitting in the squatting position) is responsible for local congestion

of anorectal region causing disturbance of vascular flow.

Among the factors causing local congestion, too much of sitting in the same position as the present generation does in offices, along with riding on two wheelers for long distances are common.

### Role of present day life style on the increased incidence of Arshas

Keeping in view of the different causative factors which are relevant in the present day, simple changes in the life style can bring drastic changes in the incidence and symptoms of Arshas. Some of the simple life style changes that can be done are listed below.

#### 1. Prevention of constipation

Constipation is one of the main causes of Arshas. So preventing constipation itself will control the disease to a certain extent. Constipation can be prevented by

- \* Including fruits, vegetables, beans, and whole grains in the diet on each day. These foods are rich in fiber. Soluble fibres present in the food helps create bulkier and softer stool that is that is easier to pass, thus reducing the risk of constipation. This in turn will prevent the recurrence of hemorrhoids and cause less irritation to existing hemorrhoids.
- \* Drinking eight to ten glasses of water will keep the body hydrated. This will soften the stool and increase the bulk thereby preventing the occurrence of hemorrhoids.
- \* Doing exercise every day. Moderate exercise should be done at least 2½ hours a week otherwise vigorous activity at least 1¼ hours a week. It's fine to be active in blocks of 10 minutes or more throughout the day and week.
- \* Schedule time each day for a bowel movement. Having a daily routine may help. The person should take his/ her own time and should not strain when having a bowel movement.
- \* Intake of fibre supplement daily if necessary starting with small dose and slowly increasing the dose over a month or more.

#### 2. Practice healthy bowel habits

- \* Avoid the suppression of the urge to defecate.

- \* Avoid straining to pass stools. Relax and give yourself time to let things happen naturally.
- \* Avoid holding your breath while passing stools because it will again increase the intra abdominal pressure thereby causing pressure on the hemorrhoidal veins.
- \* Avoid reading while sitting on the toilet. Get off the toilet as soon as you have finished. Prolonged sitting on the lavatory causes relaxation of the perineum, thereby causing a disturbance of vascular flow.

#### 3. Modify your daily activities

- \* Avoid prolonged sitting or standing. Take frequent short walks.
- \* If possible, avoid lifting heavy objects frequently. If you must lift heavy objects, always exhale as you lift the object. Don't hold your breath when you lift.
- \* In case of pregnant ladies, sleeping on the sides will lower pressure on the blood vessels in the pelvis. This can help keep hemorrhoids from becoming bigger.

Different regimen mentioned in Ayurvedic classics [8]

*Pathya aharas* are those food items, which if included in the daily diet can prevent Arshas. *Pathya aharas* (wholesome food) can be summarized as follows

- **Anna varga:** *Yava* (Barley), *Godhuma* (Wheat), *Raktha Shali* (Red rice), *Kulatha* (Horse gram). *Yava* has *madhura* (sweet) *rasa* and forms bulk in stools. *Godhuma* is *snigdha* (unctuous) and *madhura* (sweet) and prevents loss of moisture in the stools. *Raktha shali* is rich in soluble fibre which helps in easy evacuation of the feces.
- **Shaka varga:** *Surana* (Amorphophalus), *punarnava* (Spreading hogweed), *Patola* (Pointed gourd), *Vastuka* (Chenopodium album). *Surana* is rich soluble fibres and thus helps in bowel evacuation.
- **Ksheera varga:** *Ajaksheera* (goat's milk), *Takra* (butter milk), *Navaneetam* (butter). Goat's milk is *laghu* by nature and is easy to digest. Butter milk helps in digestion and is considered as one of the best medicines for Arshas by our Acharyas.



- **Phala varga:** Dhatri (amla), Kapithakam. Dhatri phala is very rich in antioxidants therefore it reduces the inflammation in the hemorrhoids.
- **Mamsa :** Mrigamamsa (meat of deer) is a janghala mamsa (animals dwelling in dry lands) and is easy to digest.

#### **Apathya ahara (Unwholesome food)**

Apathya ahara are those food items, the intake of which can predispose the occurrence of Arshas. Some of the apathya ahara mentioned in Ayurvedic literature are the following.

Viruddha ahara (unwholesome food), Vishtambika ahara (those food which causes indigestion), Guru ahara (food which is difficult to digest), Anupa Mamsa (meat of water animals), Dushta udaka (contaminated water). Intake of these food leads to disruption of the digestive function and prevents proper formation of feces.

#### **Apathya Vihara (Regimens to be avoided)**

- \* Apathya vihara are those food items, which should be avoided by a person in order to prevent haemorrhoids.
- \* Vega avarodha - suppression of the urge for defecation
- \* Ati streegamana - excessive indulgence in sexual intercourse,
- \* Utkatakasana - prolonged sitting in squatting position,
- \* Prushta yaana - prolonged riding on back of animals like horse
- \* Shoka - sorrow, depression.

In the present day regimens like travelling on the back of animals are not there but instead, travelling on two wheelers also does the same effect.

#### **DISCUSSION**

Dietary habit is the key link for a number of diseases, and diet therapy for hemorrhoids is a widely accepted modality. The importance of fibre rich diet has been highlighted earlier. Fibre is needed to prevent constipation. High-fibre foods increase intestinal peristalsis, promotes the expulsion of stools, which at the same time becomes much softer so it does not damage the walls of anus of this area. Moreover, by means of facilitating evacuation, fibre can avoid exerting excessive force to expel faeces, so anal veins do not get stressed.

Foods rich in fibre include whole grains (brown rice, corn, oat, wheat) legumes (beans, broad beans, peas, soya beans) fruits (oranges, apple, strawberry, banana, grapes, papaya, watermelon) nuts (walnut, almond) vegetables (carrot, spinach and other green leafy vegetables)

Foods that should be avoided include Refined cereals i.e. white rice, white bread, refined pasta, products made with white flour such as biscuits and cakes, refined sugar, spicy food, salted food or food containing too much salt, alcohol and coffee.

Sitting for long hours should be avoided because it facilitates the accumulation of blood in the vessels of the perineal region, consequently developing hemorrhoids. Proper cleanliness of the anal area should be maintained to prevent infection.

Obesity should be avoided because of the increased pressure in the lower body which affects onset or worsening of the problem.

Stress, depression and anxiety are contributing factor for loss of appetite and constipation and hence hemorrhoids, Pranayama and other Yogic exercises are of great help in relieving the stress.

#### **CONCLUSION**

Acharya Vagbhata has told that *Roga sarve api mande agnou* ie, all the disease are primarily are caused due to improper digestion. The nature of the food intake, the frequency of meals, and the consumption of fluid plays an important role. Arshas is also caused by *Mandagni*. Hence proper diet should be followed. Irregular and improper diet should be avoided. Apart from this the nature of work, i.e., sedentary work and lifestyle should be avoided. Exercises in the daily routine and also mental status should be given utmost importance. Tight fitting rough attires like jeans, which are more popular in the present day, should be avoided. Thus we can conclude that the need for understanding the *Pathya Apathya* of Arshas along with certain life style changes becomes valuable for the common man as well as the Physicians in the preventive and the curative aspects of the disease. There by, we can prevent occurrence and recurrence of Arshas.

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### \*Address for correspondence

**Dr. Dhanya P V**

P. G. Scholar

Department of PG studies in Shalyatantra, Sri Kalabyraveswara Swamy Ayurvedic Medical College Hospital and Research Centre

RPC Layout, Pipe Line Road

Vijayanagar, Bangalore, Karnataka India.

Email: [dhanya.pv.b@gmail.com](mailto:dhanya.pv.b@gmail.com)

Ph: +91 8277003064