

Ayurvedic Perspective on the Management of Raktarsha Using Tikshna Kutaja Pratisarniya Kshara with Special Reference to First and Second Degree Hemorrhoids: A Review

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ABSTRACT

Hemorrhoids represent one of the most prevalent anorectal disorders encountered in clinical practice. In Ayurveda, this condition is described under the disease entity Arsha, which is included among the Ashta Mahagada due to its chronic nature and complex management. Raktarsha, a type of Arsha characterized primarily by bleeding per rectum, closely resembles first and second degree internal hemorrhoids described in modern medicine. Lifestyle factors such as sedentary habits, low-fiber diet, irregular food intake, increased intra - abdominal pressure and chronic constipation contribute significantly to the development of this condition. Ayurvedic classical texts describe several therapeutic approaches for Arsha including Bheshaja Chikitsa, Kshara Karma, Agni Karma, and Shastra Karma. Among these, Kshara Karma is considered a minimally invasive para-surgical procedure offering effective removal of pathological tissue with minimal complications. Tikshna Kutaja Pratisarniya Kshara, an alkaline preparation obtained from the ash of Kutaja (*Holarrhena antidysenterica*), is applied locally over the hemorrhoidal mass. The preparation possesses properties such as Ksharana (chemical cauterization), Lekhana (scraping), Shodhana (purification), and Ropana (healing), which collectively help in shrinking hemorrhoidal tissue and controlling bleeding. Ksarana or Kshanana are the two roots from which the word "Kshara" can be derived. Kshanana means to kill or demolish, whereas Ksharana means to dislodge or melt away. The word "Kshara" literally means "a substance with corrosive, caustic, pungent, saline, and acrid properties."

Acharya Susruta listed 23 medications in his description of the Kshara extraction method, with Kutaja being the most important medication. Kutaja Kshara's attributes and extraction are not directly mentioned in classics, and scouring the internet did not turn up any further compilations on the subject. The drug Kutaja possesses properties such as Kashaya and Tikta Rasa, Laghu and Ruksha Guna, Sheeta Virya, and Katu Vipaka, which contribute to its Grahi, Raktastambhaka, Krimighna, and Shothahara actions. These pharmacological attributes are beneficial in controlling bleeding, reducing inflammation, and promoting healing of the affected tissues. The present review attempts to analyze the Ayurvedic concept of Raktarsha, etiological factors, pathogenesis, and therapeutic significance of Tikshna Kutaja Pratisarniya Kshara in the management of early-stage hemorrhoids. The study suggests that this therapy is simple, economical, and minimally invasive, providing effective symptomatic relief with low recurrence rates.

Keywords: Raktarsha, Arsha, Hemorrhoids, Kutaja, Pratisarniya Kshara, Kshara Karma, Ayurveda.

INTRODUCTION

Hemorrhoids are one of the most frequently encountered disorders of the anorectal region. They occur due to abnormal enlargement and displacement of the vascular cushions present within the anal canal. These cushions normally play an important role in maintaining continence by aiding closure of the anal canal. However, pathological changes such as

increased venous pressure, chronic constipation, and weakening of supporting connective tissues lead to dilation and prolapse of these vascular structures. Although the condition is rarely life-threatening, it produces significant discomfort and reduces the quality of life of affected individuals.

The prevalence of hemorrhoids has increased considerably in recent decades due to changes in dietary patterns and lifestyle habits. Modern lifestyles characterized by prolonged sitting, consumption of low-fiber processed foods, and lack of physical activity predispose individuals to chronic constipation and straining during defecation. These factors ultimately contribute to the development of hemorrhoidal disease.

In Ayurvedic literature, hemorrhoids are described under the disease entity Arsha. The term Arsha is derived from the Sanskrit root “Rish”, which means to afflict or torment. Classical texts describe Arsha as a condition that causes persistent suffering to the patient. Acharya Sushruta described Arsha as abnormal fleshy projections arising in the anal region due to vitiation of Doshas and impairment of digestive fire. Acharya Sushruta lists Arsha, one of the most prevalent anorectal diseases, among the Ashta Mahagada. Among the different types, Raktarsha is characterized predominantly by bleeding during or after defecation. The pathology mainly involves vitiation of Pitta and Rakta Dasha, along with the involvement of Vata which leads to dilation of anal veins and formation of hemorrhoidal masses.

Modern medicine classifies hemorrhoids into four grades based on the degree of prolapse and severity of symptoms. First and second degree hemorrhoids are usually associated with bleeding during defecation and occasional prolapse that reduces spontaneously and are generally managed by conservative or minimally invasive procedures. These stages closely resemble the clinical presentation of Raktarsha described in Ayurvedic texts.

Acharya Sushruta recommends four principal therapeutic approaches for Arsha: Bhashaj (medicinal therapy), Kshara Karma (chemical cauterization), Agni Karma (thermal cauterization), and Shashtra Karma (surgical excision). Among these treatment modalities, Kshara Karma has gained considerable attention due to its effectiveness and minimal invasiveness. Tikshna Kutaja Pratisarniya Kshara is one such preparation used for the treatment of hemorrhoids. It acts locally on the hemorrhoidal mass, causing chemical cauterization and gradual sloughing of diseased tissue. The procedure is relatively simple and can be performed with minimal infrastructure.

Aim and Objectives

Aim

To review the therapeutic role of Tikshna Kutaja Pratisarniya Kshara in the management of Raktarsha with special reference to first and second degree hemorrhoids.

Objectives

To analyze the Ayurvedic concept and pathogenesis of Raktarsha.

To examine the pharmacological properties of Kutaja described in Ayurvedic texts.

To study the preparation and application of Tikshna Kutaja Pratisarniya Kshara.

To understand the probable mechanism of action of Kshara Karma in hemorrhoids.

MATERIALS AND METHODS

The present study is a literature-based conceptual review. Information was compiled from classical Ayurvedic texts and contemporary medical literature.

Sources of Data

Classical Sources :

Major Ayurvedic texts consulted for the study include:

- Charaka Samhita
- Sushruta Samhita
- Ashtanga Hridaya
- Sharangadhara Samhita
- Bhaishajya Ratnavali

These texts provide comprehensive descriptions of Arsha, its etiological factors, pathogenesis, and treatment methods.

Modern Sources :

Modern medical textbooks, peer-reviewed journals, and scientific databases were also reviewed to understand the pathology and management of hemorrhoids from a contemporary perspective.

Ayurvedic Concept of Arsha

Arsha is an illness that torments the patient's life power (Prana) as an enemy.
Acharya Sushruta defined Arsha as:

“गुदे मांसप्ररोहाः अर्शासि”

Arsha refers to fleshy projections that emerge in the anal area.

Definition: Acharya Sushruta-Sprouts of muscles inside Gudavali (rectum folds) are referred to as Arshas (pile mass). Arsha is another name for muscle sprouts found in the Medhra (penis), Yoni (vagina), Nabhi (Umbilicus), Karna (ears), Akshi (eyes), Ghrana (nose), and Vadana (mouth).⁴ Arsha is defined by Acharya Charak as an abnormal fleshy growth in the Ano-rectal area (Guda), and it is referred to as Adhimamsa when it occurs in other sites, such as Nasa, Karna, Akashi, etc.

According to Ayurveda, one of the primary causes of "Arsha" is "Mithyaaaharvihar." With today's busy lifestyle, junk food habits and overwhelming desires make it unavoidable. Constipation vitiates the doshas that affect the digestive fire (Mandagni), which is one of the major cause of haemorrhoids.

Classification of Arsha

Based on Dosha predominance, Arsha is classified into the following types:

1. Vataja Arsha
2. Pittaja Arsha
3. Kaphaja Arsha
4. Sannipataja Arsha
5. Raktaja Arsha
6. Sahaja Arsha

Raktarsha mainly results from vitiation of Pitta and Rakta, leading to bleeding from the hemorrhoidal vessels.

Etiological Factors (Nidana)

Ayurvedic Perspective :

Classical texts mention several factors responsible for the development of Arsha, including:

- Excessive intake of dry, spicy, or incompatible foods
- Irregular eating habits
- Chronic constipation
- Excessive alcohol consumption
- Prolonged sitting and sedentary lifestyle
- Suppression of natural urges

Modern Perspective :

Modern medicine recognizes similar causative factors such as:

- Low fiber diet
- Increased intra-abdominal pressure
- Obesity
- Pregnancy
- Prolonged straining during defecation

Pathogenesis (Samprapti)

The development of Raktarsha begins with impairment of digestive fire (Agni Mandya), resulting in improper digestion and formation of metabolic toxins (Ama). This leads to aggravation of Doshas which accumulate in the anorectal region. The vitiated Doshas affect the tissues such as Rakta, Mamsa, and Meda Dhatu, producing swelling and dilation of veins. Ultimately, these pathological changes give rise to hemorrhoidal masses accompanied by bleeding and discomfort.

Poorvrupa and Roop-

Sakthi Sada, Pandu Ashanka, Gudaparikartan, Anna Ashraddha, and others are Arsha's Poorvrupa.

Shushka and Kadambapuspa are similar to Vataja Arsha, according to Acharya Sushruta.

Pittaja Arsha's shape is likened to the mouth of a leech, the liver, and the beak of a parrot.

The seeds of jackfruit, karira, etc. are identical to Kaphaja Arsha.

Pearls and Raktaja Arsha are contrasted, among other things

It is said that in the case of Raktaja Arsha, the hard feces will put pressure on the vessels in the anal canal, causing the hot blood to be promptly ejected.

Kati Shula, Medhra Shula, Nasa Shula, Nabhi Shula, Parshva Shula, and others are displayed by Vataj Arsha.

Whereas Kaphaj Arsha displays Kandu as a local symptom, Pittaj Arsha displays Daha. Vishesa Roopa are described in terms of Doshic characteristics.

Hemorrhoids in Modern Medicine

Hemorrhoids are enlarged vascular structures located within the anal canal. They play an important role in maintaining continence but may become symptomatic when enlarged or inflamed.

Classification

Degree.	Description
First degree.	Bleeding without prolapse
Second degree.	Prolapse during defecation but reduces spontaneously
Third degree.	Prolapse requiring manual reduction
Fourth degree.	Permanently prolapsed hemorrhoids

The first two stages correspond closely with Raktarsha described in Ayurvedic literature.

Kshara Karma

Kshara Karma is an important para-surgical procedure described by Acharya Sushruta. Kshara refers to alkaline substances obtained from plant sources which possess the ability to remove diseased tissues through chemical cauterization.

Because it may be safely administered to individuals who are terrified of surgery, it is more successful than other therapy approaches. Because of its Tridoshaghana (power to alleviate all the three bio-elements) ability to conduct Chedana (excision), Bhedana (incision), and Lekhana (scraping) Karma, Kshara is superior to Shastra (surgery) and Anushastra (parasurgery).

Kshar is made from locally available organic materials. Kshar karma was mentioned by Sushruta as a soft, well-marked, raised, and prolonged hemorrhoid. It works by cauterizing tissue and producing a caustic effect.

Kshara

The Upanishad is where the term "Kshara" originally appeared. Kshara has been detailed for a number of ailments in the entire Ayurvedic Samhita. In a different chapter of the Sushruta Samhita, Acharya Sushruta was the first to provide specifics about Kshara. Kshara is divided into two categories by Acharya Sushruta: Pratisaraneeya Kshara, which is administered externally, and Paniya Kshara, which is consumed. According to the severity of the illness, Acharya Sushruta has recommended the use of both Paneeya and Pratisaraneeya Kshara in Arsha. Pratisaraneeya Kshara is further classified into three groups: Samvyuhima, Madhyama, and Pakya. Alkalis of mild, moderate, and strong potencies include Amvyuhima (Mridu) Kshara, Madhyama Kshara, and Pakya (Tikshna) Kshara. The employment of Kshara in the Arsha, which are soft, expansive, deeply seated, and projecting in nature, has been explicitly addressed by Acharya Sushruta.

Qualities of a high-quality Kshara

Sheeghrakari, Avishyandi, Picchila, Naatiteekshna, Naatimridu, Shukla, and Slakshna

Qualities of low-quality Kshara

Ati sandrataa, Apakvataa, Heena dravyataa, Atimridu, Atishweta, Atiushnataa, Atiteekshnataa, Atipicchila, Ativisarpitaa, and Ati tanu

Therapeutic Actions of Kshara

- Chedana (excision)
- Bhedana (incision)
- Lekhana (scraping)
- Shodhana (purification)
- Ropana (healing)

Kutaja (*Holarrhena antidysenterica*)

Botanical Classification

Botanical name: *Holarrhena antidysenterica*

Family: Apocynaceae

The Kutaja tree, also known as *Holarrhena antidysenterica* or *Wrightia tinctoria*, is found all over India but is more prevalent in forests. It is a flowering plant species that is a member of the Apocynaceae family. Indrayava is the name of its seeds.

Properties

Rasa: Katu, Tikta, Kashaya

Guna: Laghu, Ruksha

Virya: Sheeta (Raja Nighantu- Ushna)

Vipaka: Katu

Karma: Kapha- Pittahara, Grahi, Dipana.

Indications: Raktapitta, Atisara, Grahani, Kushta, Krimi, Amavata, Visarpa, Vatarakta, Jwara.

Part Used: Panchanga

Sambhita Gana

Charaka: Arshogna, Kandughna, Stanyasodhana, Asthapanopaga

Susruta: Aragvadhadi, Pippalyadi, Haridradi, Lakshadi

Astanga Hridaya: Aragvadhadi, Vatsakadi

Pharmacological Actions

Kutaja is known for its Grahi, Krimighna, anti-inflammatory, and hemostatic properties. These characteristics make it particularly useful in conditions involving bleeding and inflammation.

Preparation of Tikshna Kutaja Pratisarniya Kshara

The preparation involves the following steps:

1. **Selection and collection of drugs:** Collect and dry the Kutaja plant material
2. **Preparation of the ash:** Burning the plant material to obtain ash
3. **Preparation of solution:** Mixing the ash with water and filtering the solution
4. **Filtration & Boiling:** Boiling the filtrate until an alkaline residue remains
5. **Further addition of drugs:** Addition of specific substances to enhance potency
6. The final preparation is a strong alkaline paste suitable for topical application.

Selection and collection of drugs

Kutaja Teekshana Kshara is mostly made using three medications:

Kutaja (Antidysenterica Holarrhena)

Shukti (Edulis Ostrea)

Mula Chitraka (Plumbago zeylanica)

During the autumn season, Kutaja panchanga was gathered and left in the shade to dry.

The marine animal shell known as Shukti is one of the Shuklavarga dravyas, according to Ayurvedic literature. It comprises 85–90% calcium carbonate, calcium and magnesium phosphate and sulphate, iron oxide, silica, and aluminum. Chitraka is one of the common medications used to treat hemorrhoids, appetite loss, and other conditions; only the roots of Chitraka are used to make Kshara.

Preparation of ash

The entire collection of dried Kutaja plants was broken up into tiny bits and piled in a windless area. After then, the entire plant was permitted to burn entirely to ash. After the fire was put out, ash was gathered and weighed.

Preparation of Solution

Teekshana Kshara is made by thoroughly mixing the ash with six times the volume of clean tap water and letting it settle overnight.

A different stainless steel vessel was used to collect the supernatant fluid.

The leftover ashes were combined with four times as much water, and the process was repeated at least twice to ensure that the ash remained neutral and free of sliminess before being disposed off.

Filtration

In a large vessel, the collected fluid should now be filtered drop by drop using Whatman's filter paper (twenty-one times).

The leftover portion was discarded, and the filter (Ksharodaka) that was obtained should have a clean amber color, like cow's pee, and be devoid of any suspended impurities.

Boiling

The filtered solution was then put into a clean, wide-mouthed stainless steel tank and slowly evaporated over a moderate heat (Mandagni). It should be cooked until it reduces to half and periodically stirred with a stainless steel flat stirrer. Next, one-third of the concentrated alkaline solution (Ksharodaka) was removed and placed in a different glass bottle.

Further addition of drugs

Next, red heated Shukti (1/10 of the total weight of ash) must be blended and macerated until it dissolves fully in a separate 1/3 of Ksharodaka.

After dissolving Shukti, it was poured to boiling Ksharodaka and kept cooking.

When it reached a semisolid state after boiling, it was neither too liquid nor too solid. After adding Chitrakamoola Kalka (1/10 of Shukti weight) to the boiling Kshara, it was left to heat for a few more minutes. To prolong its shelf life and efficacy, the semisolid paste was later kept in an airtight glass jar with a thin layer of Ksharodaka on top.

The Kshara so obtained had a PH value above 10.5 (PH value of a strong alkali is 7 to 14).

Probable Mode of Action

The four hemostatic procedures are Sandhana, Skandana, Pachana, and Dahana, according to the Acharya Sushruta. Kshara has a caustic chemical composition. It is utilized in Dahan karma and has the power to cauterize damaged tissue. Some of the medications found in Kshara originate from Kashaya Rasa. Sandhankarama is what they do. Similar to Shukti, Bhasma was added to the Kshara during its preparation; its purpose is to carry out Pachana karma. Therefore, it can be claimed that Kshara acts through every hemostatic treatment. Ksarana (destruction), or chemical cauterization, is caused by Kshara. Additionally, it results in Kshanana (inflammation) on the hemorrhoidal mass's base. After fibroblast growth and the destruction of the hemorrhoidal plexus, which stops bleeding and fibrosis, the inflammatory response occurs. Lastly, the anal cushion is fixed to the underlying structure, which stops bleeding and protrusion.

So the therapeutic effect of Tikshna Kutaja Pratisarniya Kshara can be explained through several mechanisms:

1. **Chemical cauterization** causing destruction of abnormal tissue.
2. **Protein coagulation** resulting in necrosis and shrinkage of hemorrhoidal mass.
3. **Hemostatic action** controlling bleeding due to astringent properties of Kutaja.
4. **Anti-inflammatory activity** reducing swelling and pain.
5. **Fibrotic healing** preventing recurrence by obliteration of dilated veins.

Advantages of Kshara Karma

- Minimally invasive procedure
- No major surgical incision
- Less recurrence
- Cost-effective
- Minimal hospital stay
- Better patient compliance

When compared to Shalya Karma, Kshar Karma's drawbacks include its use in elderly individuals, late pregnancy, and patients who are unfit for surgery.

DISCUSSION

Raktarsha arises due to disturbance of Doshas, especially Pitta and Rakta, along with the involvement of Vata in the anorectal region. These pathological changes lead to dilation of hemorrhoidal veins and bleeding during defecation. Tikshna Kutaja Pratisarniya Kshara offers a targeted approach for managing this condition. The alkaline property facilitates chemical cauterization of the hemorrhoidal mass, while the pharmacological actions of Kutaja assist in controlling bleeding and inflammation.

Compared with conventional surgical procedures, Kshara Karma is relatively simple, economical, and associated with minimal complications. The therapy is also advantageous in terms of reduced hospital stay and improved patient compliance.

CONCLUSION

Tikshna Kutaja Pratisarniya Kshara is an effective para-surgical treatment modality for the management of Raktarsha corresponding to first and second degree hemorrhoids. Its combined actions of cauterization, hemostasis, and tissue healing contribute to significant symptomatic relief. The procedure is economical and minimally invasive, making it suitable for

clinical practice. Further clinical trials with larger sample sizes are recommended to validate its efficacy through evidence-based research.

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