

**EFFECT OF INDIGENOUS DRUG RECIPES
KOHILĀDĪ KASĀYA AND MŪLA ARŚAS LEKHANA
THAILAYA IN PARISRĀVĪ ARŚAS**

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SUMMARY AND CONCLUSION

SUMMARY

- 1) The present study is entitled 'Effect of indigenous drug recipes *Kohilādi Kaṣāya* and *Mūla Arśas Lekhana Thailaya* in *Parisrāvi Arśas*' has been launched with the aim of undertaking a critical conceptual study on *Arśas roga*, with special reference to *Raktasrāvi Arśas*, which is clinically correlated with bleeding piles.
- 2) The aetiological factors of *Parisrāvi Arśas*, clinical trial of *Kohilādi Kaṣāya* and *Mūla Arśas Lekhana Thailaya*, experimental study on *Kohilādi Kaṣāya* and the ethnomedical survey on *Arśas* was also undertaken.
- 3) The literature and conceptual study reveals that *Arśas* is the term used, for an abnormal fleshy growth in ano rectal region and also protruded fleshy masses growing out in other sites.
- 4) According to *Āyurveda* aetiological factors are *Āhara viharana* (diet and regimen), *Sahaja* (hereditary), *Mandāgni* (weakness of digestive fire), emaciation due to prolong illnesses and pressure or irritation in the anal canal.
- 5) Due to verifying of aetiological factors, vitiation of one or two or combination of all three *Doṣās*, with or without involvement of *Rakta*, will spread downwards through *Pradāna Dhamani* (main blood vessels) to reach *Guda*. This will afflict *Guda vali* and produce fleshy excrescences which are described as *Arśas* in *Guda* region.
- 6) *Arśas* is categorized in various ways by different *Ācāryās*. *Caraka* divided this as *Śuṣka* and *Srāvi Arśas* and again divided to *Sahaja* and *Janmottara*. He and *Suśruta* further described *Arśas* such as *Vātaja*, *Pittaja*, *Kaphaja*, *Sannipātaja*, *Raktaja* and

Sahaja. Suśruta again divided *Arśas* into two groups, *Bāhya* and *Abhyantara* and *Bheṣaja sādya*, *Kṣāra sādya*, *Agni sādya* and *Śāstra sādya*. Again *Caraka* classified according to prognosis such as *Sādya*, *Kaṣṭa sādya*, *Yāpya* and *Asādya*. *Pittaja Arśas* and *Raktaja Arśas* are considered as *Srāvi Arśas* by *Ācārya Caraka*.

7) As mentioned above, the present study concentrates only on *Parisrāvi Arśas* and its treatment classically. *Parisrāvi Arśas* is a disease characterized by following main clinical features.

- i) *Rakta srāva* (bleeding)
- ii) *Arśas ankura* (Pile masses)

8) The parameters of assessment were essentially based on symptomatic relief. The effect of treatment as assessed in this study indicated that the treatment given to these patients brought about a notable clinical relief. The group of patients treated with *Kaṣāya* and the group of patients treated with *Kaṣāya* and *Thaila* (combined) therapy were completely relieved of symptoms of bleeding, bleeding frequency, bleeding quantity, constipation, pain in anal region, tenderness in anal region, burning sensation in anal region, degree of prolapse, anorexia and thirst.

Other group of patients treated with *Thaila* were completely relieved the symptoms of bleeding, bleeding frequency and burning sensation in anal region.

9) An experimental study of *Kohilādi Kaṣāya* on rats was also carried out. The rats treated with 380mg/ kg showed statistically significant reduction on clotting time in the day two post treatment but not in the day one. It was observed that clotting mechanism is activated may be through extrinsic pathway. Further, it also has statistically significant vaso constrictive action.

Summary and conclusion

The rats treated with dose 380mg/ kg and 570mg/ kg showed statistically significant analgesic effect on the day one during the first hour.

This decoction also had shown anti oxidant properties in vitro.

Long term treatment of *Kohilādi Kaṣāya* on rats showed triglyceride lowering properties and no overt signs of toxicity and no renal and hepato toxicity was shown.

Since *Kohilādi Kaṣāya* has analgesic and vaso constricting action along with blood clotting enhancing preparation and anti oxidant properties without any noticeable toxic effects, it could be concluded that it is suitable in treatment of *Parisrāvi Arśas*.

But it is better in future, if research can be carried out of each ingredient separately to ascertain the efficacy vividly.

CONCLUSION

1) The main causes for *Arśas* as noted in this study were heredity, straining during defaecation due to constipation and been seated in one place for long period.

2) In this study, *Kohilādi Kaṣāya* was more effective in the treatment of *Parisrāvi Arśas*. There was statistically significant reduction of bleeding, bleeding frequency, bleeding quantity, constipation, pain in anal region, tenderness in anal region, burning sensation in anal region, degree of prolapse, anorexia and thirst.

3) The group of patients suffering from *Parisrāvi Arśas* treated with *Mūla Arśas Lekhana Thailaya* also showed a reduction in severity of symptoms such as bleeding, bleeding frequency and burning sensation in anal region, but to a less degree than those patients treated with *Kohilādi Kaṣāya*.

4) The group treated with combined therapy of *Kohilādi Kaṣāya* and *Mūla Arśas Lekhana Thailaya* showed a reduction of severity in symptoms such as bleeding, bleeding frequency, bleeding quantity, constipation, pain in anal region, tenderness in

anal region, burning sensation in anal region, anorexia and thirst which occurs in *Parisrāvi Arśas* patients. In a statistical comparison of reduction of clinical symptoms with the with the group that was treated with *Kohilādi Kaṣāya* alone against the combined therapy of *Kohilādi Kaṣāya* and *Mūla Arśas Lekhana Thailaya*, the combined therapy did not show any statistically significant difference.

5) Except in a case where a patient may not show tolerance to *Kohilādi Kaṣāya*, *Mūla Arśas Lekhana Thailaya* is comparatively less effective in giving symptomatic relief to *Parisrāvi Arśas* (bleeding piles).

6) *Kohilādi Kaṣāya* showed experimentally, that it possesses blood clotting enhancing property in vivo which acts through may be an extrinsic pathway when treated with a dosage of 380mg/kg. This action takes place from second day post treatment. *Kohilādi Kaṣāya* shows experimentally that it possesses vaso constrictive properties.

7) *Kohilādi Kaṣāya* has an analgesics effect on experimental rats during the second hour at dosages of 380mg/ and 570mg/kg.

8) In vitro testing of *Kohilādi Kaṣāya* showed it to possess anti oxidant properties.

9) *Kohilādi Kaṣāya* has triglyceride lowering properties on long term treatment.

10) No toxicity was observed in *Kohilādi Kaṣāya* during long term treatment (thirty days).

11) In view of the observations and results obtained in this study, it is concluded that *Kohilādi Kaṣāya* is a very effective traditional preparation that could be used in treatment of *Parisrāvi Arśas* providing speedy and positive effects with a powerful action in controlling bleeding.