



# KSHARASUTRA LIGATION IN THE MANAGEMENT OF PROLAPSED PILES MASS – A CASE REPORT

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## ABSTRACT

Haemorrhoids also known as piles are inflamed or swollen anal cushions. They are classified in four categories. A fourth-degree piles mass refers to severely prolapsed internal hemorrhoids that are permanently outside the anus and cannot be pushed back in. Ksharasutra ligation treatment is in practise for Arsha(piles), Bhagandara(Fistula), Nadvirana(sinus) etc. Due to its potential healing, sclerosing and antibacterial property it is found very effective in the treatment of piles. In this study, a 56-year-old patient with the complains of protrusion of mass per ano having pile mass at 7 & 11 o' clock position. Ksharasutra (medicated thread) ligation on all pile mass was done under local anaesthesia. Complete sloughing of pile mass was noted in 6<sup>th</sup> day and healing of ulcer was achieved by 30 days along with resolution of all symptoms. The patient was relieved from all symptoms within two weeks. No complications were reported after the procedure.

**KEY WORDS:** Arsha, Interno-External Piles, Ksharasutra, Haemorrhoids.

## INTRODUCTION

Haemorrhoids occurs frequently in adult general population. Peak incidence is reported by both sexes between the ages of 45 and 65. In anal canals, haemorrhoids are dilated veins that are arranged in three columns: left lateral, right posterior, and right anterior. In Ayurveda haemorrhoids are correlated with arsha. Acharya Sushruta classifies Arsha under the eight severe ailments (Ashtamahagada). Cryosurgery, haemorrhoidectomy, coagulation therapy, infrared coagulation, rubber band ligation, stapled haemorrhoidectomy, sclerosing injection therapy, and other techniques are available in current practice for the treatment of haemorrhoids, each with pros and cons of their own. Anal stricture, haemorrhage, and incontinence are possible complications. Though there are various treatment available for the treatment but the options are narrowed down due to the effectiveness of treatment. An ayurvedic method for treating ailments like Arsha (piles), Bhagandara (fistula), Nadvirana (sinus) is ksharasutra ligation. Because of its chemical cauterisation action and mechanical pressure, the Ksharasutra treatment is deemed appropriate and acceptable when compared to common contemporary treatments.

### Ayurvedic view of Arsha and Kshara Sutra

In Ayurveda, Arsha considered a disease arising from vitiation of Tridosha (mainly Vata, Kapha) along with impaired Agni, leading to congestion in the anorectal veins. Symptoms include pain, bleeding, and protrusion of mass. Management involves Shodhana (purification), Shamana (palliation), diet regulation, and lifestyle modification.

Ksharasutra therapy is a unique Ayurvedic para-surgical procedure, where a medicated thread coated with herbal alkaline drugs is tied around the pile mass or fistulous tract. It gradually cuts, cures, and heals the tissue with minimal recurrence, promoting drainage and fibrosis. This approach is safe, cost-effective, and widely accepted in cases like piles, fistula, pilonidal sinus etc .

## Case Report

Age - 56 years

Gender- male

Occupation- Shopkeeper

Date of admission - 19/06/2025

Date of recovery - 19/07/2025

## Chief Complaints and Duration

The patient has been experiencing protrusion of mass per rectum since last 5 months along with bleeding P/R after defecation in a sporadic manner for 4 months. He was also having pain in ano after defecation since 15 days.

**Family History:** No H/O HTN, DM or any other major illness

## General Examination

Pulse - 78/min

BP - 130/76 mm Hg

RR - 16/min

## Digestive System

Appetite - low

Bowel - constipated.

Uro-genital System - NAD

## Laboratory Investigations

Haemoglobin - 10gm%

TLC - 10800/cumm

BT - 1:10

CT - 3:02

F.B.S. - 105mg/dl

**Local Examination:** In lithotomy position of patient, these findings were observed : patient had fourth degree piles mass at at 7 & 11 o' clock position, and no active bleeding.

After complete examination the diagnosis was confirmed as Piles in Ano i.e., Arsha.

### Materials and Methods

Standardised Apamarga Ksharasutra  
Open haemorrhoidectomy with ksharasutra ligation

### Pre-Operative Preparation

Local part preparation i.e., shaving was done. Sodium Phosphate enema was given at early morning on day of operation. After proper bowel evacuation, patient was taken to recovery room and injection T.T. 0.5ml IM was given and plain xylocaine 2% was given subcutaneously for sensitivity test.

### Operative Procedure

Patient was taken in lithotomy position on operation theatre table. After proper painting and draping, local anaesthesia with 2% xylocaine was infiltrated around anal verge & base of the piles mass. Four finger anal dilatation was done. Proctoscopy examination was done to confirm the diagnosis. At first 11 o'clock pile mass was held with pile holding forceps followed by a V-shape incision under the skin of external haemorrhoids.

Bleeders were checked by the use of electro-cautery. Using a round body curved needle and Ksharasutra, pile mass was transfix and ligated at the base of its pedicle. Along the separated part of the external component from the skin the thread was placed and reef knot was tied. In similar way 7 o'clock pile mass was transfix and ligated. Complete haemostasis was maintained.

### Postoperative Procedure

Ayurvedic medicines and sitz bath was advised. Patient was admitted to the Hospital for 7 days till the mass sloughs off.

### Medications

- Arshakuthar Rasa 1tab.BD
- Soorana vataka 1tab. BD
- Panchasakar Churna 5grams at night with warm water
- Jatyadi Taila L/A
- Sitz bath

Patient was advised to take fruits & non spicy foods during hospital stay. He was also advised to resume his normal day to day activities.

### Pre & post-operative photos of this case



Figure 1 : Pre Operative



Figure 2 : Post-Operative



*Figure 3 : Post-Operative 3rd Day*



*Figure 4 : Post Operative 30th Day*

### Follow-up

Dressing was done daily, along with 10 ml Jatyadi taila matrabasti. From the third post-operative day twisting of thread was done during dressing as the necrosis of pile mass has started. Necrosed pile mass at 7 and 11 o'clock got sloughed out on fifth & sixth post-operative day respectively. Fresh wounds were observed at the respective place of pile masses. Daily dressing, anal dialation and matrabasti was continued for 7 days. On 30th post-operative day wounds were completely healed without any complication like spasm or stricture.

### RESULT & DISCUSSION

Acharaya Sushrta has foretold Aushadha, Kshara, Agnikarma, and Shastra karma for the treatment of Arshas. Kshara has potential cauterization and antimicrobial property. Ksharasutra by its action as chemical cauterization and mechanical strangulation of the blood vessel causes local gangrene of the pile mass tissue and ultimately resulting in falling out of the mass within 5-7 days. According to Ayurveda, Kshara performs the functions of Chhedya (excision), Bhedya (incision), and Lekhya (scraping). It also chemically cauterises tissue, making tissue cutting easier. It has an antimicrobial effect at the site of ligation because of its alkaline pH. Haridra reduces chances of

further development of infections & promotes wound healing. No complications such as anal stricture or post-operative haemorrhage were noted in this instance.

### CONCLUSION

By reducing post-operative complications, this study demonstrates that Ksharasutra ligation in fourth degree multiple piles in a single sitting is not only effective in addressing the anatomical defect but also somewhat superior to contemporary medical techniques. Compared with open or closed haemorrhoidectomy, it is straightforward, safe, and free of recurrences.

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