



## A Controlled Clinical Evaluation of the Efficacy of Gunja Kushmanda Lepam in the Management of Arshas (II & III Degree Haemorrhoids)

Dr. K. Kavya<sup>1</sup>, Dr. K. Srinivasa Kumar<sup>2</sup>

<sup>1</sup>P.G.Scholar ,Department of Shalya Tantra, S.V. Ayurvedic College, Tirupati, Dr. NTR University of Health Sciences, Vijayawada, Andhra Pradesh, India

<sup>2</sup>Vice Principal, Reader (PG), Department of Shalya tantra, S.V. Ayurvedic College, Tirupati , A.P, India

### ABSTRACT

**Background:** Arshas (hemorrhoids) are a prevalent anorectal disorder characterized by painful defecation, bleeding, and mass prolapse. Ayurveda recognizes Arshas as one of the *Ashta Mahagadas* requiring a multi-modal approach. This study evaluates the efficacy of *Gunja Kushmanda Lepam*, a traditional Ayurvedic topical formulation, in comparison with *Kaseesadi Tailam* for managing II and III degree hemorrhoids. **Methods:** A randomized controlled clinical trial was conducted with 40 patients divided into two groups. Group A (trial group) received *Gunja Kushmanda Lepam*, while Group B (control group) was treated with *Kaseesadi Tailam*. Treatment involved local application on every 3<sup>rd</sup> day for five sittings followed by a 15-day observation. Outcomes were assessed based on clinical parameters such as bleeding per rectum, pain, constipation, itching, and size of pile mass. **Results:** Group A showed statistically significant improvements in all measured parameters, notably constipation (92.50%), bleeding (88.33%), pain (86.66%), and pile mass size reduction (76.66%). Group B also showed improvement but to a slightly lesser degree. The p-value (<0.0001) confirmed high statistical significance in Group A. **Conclusion:** *Gunja Kushmanda Lepam* demonstrated superior efficacy over *Kaseesadi Tailam* in reducing symptoms of II and III degree hemorrhoids. This topical Ayurvedic formulation offers a safe, non-invasive alternative with promising results. Further large-scale studies are recommended.

**Keywords:** Arshas, Hemorrhoids, Gunja Kushmanda Lepam, Lepa Chikitsa, Kaseesadi Tailam, Anorectal disorders.

### ARTICLE INFO

#### \*Corresponding Author:

Dr. K. Srinivasa Kumar

Vice Principal

Department of Shalya tantra,

S.V. Ayurvedic College, Tirupati, A.P, India.

#### Article History:

Received : 19 March 2025

Revised : 31 March 2025

Accepted : 14 May 2025

Published : 26 June 2025

**Copyright© 2025** The Contribution will be made Open Access under the terms of the Creative Commons Attribution-NonCommercial License (CC BY-NC) (<http://creativecommons.org/licenses/by-nc/4.0>) which permits use, distribution and reproduction in any medium, provided that the Contribution is properly cited and is not used for commercial purposes.

**Citation:** K. Kavya, et al. *A Controlled Clinical Evaluation of the Efficacy of Gunja Kushmanda Lepam in the Management of Arshas (II & III Degree Haemorrhoids)*. *A. J. Med. Pharm, Sci.*, 2025, 13(1):51-55

### Contents

1. Introduction. . . . .	51
2. Methodology. . . . .	51
3. Results and Discussion. . . . .	52
4. Conclusion . . . . .	55
5. References. . . . .	55

### 1. Introduction

Arshas, classified among the *Ashta Mahagada*[1] (eight major diseases) in Ayurveda[2], represent a chronic and distressing proctologic condition. Modern medicine defines hemorrhoids [3,4] as pathological enlargement and distal displacement of the anal cushions. Lifestyle factors like low-fiber diets, prolonged sitting, and chronic constipation contribute to increasing incidence[5]. While modern interventions such as sclerotherapy and hemorrhoidectomy are effective, they often involve complications[6] and high

costs. Ayurvedic texts propose several non-invasive treatments for Arshas[7], including lepa karma (external application)[8,9]. Among these, *Gunja Kushmanda Lepam*[10] is cited in Vaidya Chintamani as a potent formulation. This study investigates its clinical efficacy in comparison with the commonly use *Kaseesadi Tailam*.

### 2. Materials and Methods

**Study Design:** Open-label, randomized controlled trial.

Participants: 40 patients diagnosed with II or III degree internal hemorrhoids based on clinical and proctoscopic examination.

**Inclusion Criteria:**

Age 20–60 years  
Confirmed cases of II & III degree Arshas  
Consent to participate

**Exclusion Criteria:**

Other anorectal conditions (e.g., Fissure-in-ano, Fistula-in-ano)- Chronic systemic illnesses like Ulcerative colitis, Crohn’s disease,tuberculosis,syphilis,hiv etc.,  
Pregnant and lactating women

**Intervention:**

Group A: Application of *Gunja Kushmanda Lepam* (equal parts of *Shodita Gunja*[11], *Kushmanda Beeja*, and *Surana Kanda churnas* mixed with distilled water)

Group B: Application of *Kaseesadi Tailam*

**Drug Preparation:**

*Gunja Kushmanda lepam* was prepared by *Dolayantra sweda* of 6 hours with *godughdha* as per reference of *rasa tarangi* in S.V. Ayurvedic Medical College, Tirupathi.



Shodhitha Gunja Bheeja Churna



Kushmanda Bheeja Churna



Surana Kandha Churna



Gunja Kushmanda Lepa Churna

**3. Results and Discussion**



Ashodhita Gunja Bheeja



Dolayantra Swedhana



Shodhitha Gunja Bheeja

**Drug Administration:**

Applications were done in lithotomy position under aseptic conditions every third day for five sessions.

**Assessment Parameters:**

- Bleeding per rectum
- Pain
- Constipation
- Itching
- Size of pile mass

### Bleeding Per Rectum

In Group-A, the percentage of magnitude of bleeding per rectum has reduced to 88.33%. Similarly in Group-B this percentage has come down to 86.66%.

This decrease in the magnitude of bleeding per rectum after the treatment in the patients of Arshas is suggestive of the efficacy of treatment. Further, the comparison of the effect in two groups indicates that better response is obtained in the Group-A.

**PAIN** -The percentage of severity of pain in Group-A showed a reduction by 86.66% against 80.00% in Group-B. Further, the reduction in the pain score in both the groups statistically significant assessed by unpaired t test.

This observation proves that both the treatment are highly effective in relieving pain.

The comparison of the therapeutic effects in these two groups reveal that, the effect in relation to severity of pain is better in Group-A rather than Group-B.

### Constipation

In Group-A, the percentage of skal of constipation has reduced to 92.50%. Similarly in Group-B this percentage has come down to 72.50%.

The comparison of the effect response in two groups indicates that better were obtained in group A.

### Itching

The percentage of severity of Itching in Group-A showed a reduction by 88.33% where as in Group-B it was 85.00% in patients of *Arshas*.

Data showed that patients of both the groups had reduction in severity of itching. This affirms that Group-A and Group-B are effective in reducing the severity of Itching. Further comparison of two group denotes that Group-A is superior than Group-B.

### Size of the Pile Mass

The circumference of size of the pile mass showed marked improvement in both the groups. In Group-A, the percentage of size of the pile mass has reduced to 76.66%. Similarly in Group-B this percentage down to 70.00%. This decrease in the size of the pile mass after the treatment patients of *Arshas* is suggestive of the efficacy of treatment. Further, the comparison of the effect in two groups indicates that better response is obtained in the Group-A.

### Overall effect

Both the methods of treatment proved to be effective in the management of *Arshas*. But comparatively GUNJA KUSHMANDA lepam (76.66%) had slight better results with *Kaseesadhi Tailam* (70%).



Before Treatment



During Treatment



After Treatment

### Discussion

Probable mode of action of Gunja Kushmanda Lepam Based on this, the probable Rasa panchaka of *Gunjakushmanda lepam* is

Rasa- Kashaya, Tikta

Guna- Laghu, Ruksha, Tikshna

Virya- Ushna

Vipaka- Katu

Karma -vata-pitta hara, kandughna, vrana ropana, sulahara

Tikta rasa pacifies Pitta and promotes Rakta prasadana. It

also acts as Kandughna

and Doshashamana property.

Kashaya rasa is lekhana, ropana pitta kaphahara and also acts as raktha stambhan( which stops bleeding)[12]

Laghu guna acts as the shrothosodhana and ropana[13].

Ruksha and Tikshna guna are Kapha shamaka.

Ushna virya is laghu and Vata-Kapha shamaka.

Katu Vipaka is laghu and Vata-Kapha shamaka[14].

Gunjakushmanda lepa works by its, Hetu prathyanikatva i.e. by the specific vata-kapha shamaka, vata pitta hara properties of ingredients all the ingredients, *Gunjakushmanda lepa* might be acting against the hetu of the *Arshas*.

Vyadhi pratyanikatva i.e. by the Arshoghna, vranaropana, Kanduhara.. Varnya, properties of the ingredients, it may be acting against *Arshas*. Absorption of drugs through body surface deserves special care for its optimum delivery and this can be achieved by *Lepa Kalpana*[15].

Lepa preparations are applied to skin to prevent the metabolism of drugs in the liver and to increase the bioavailability of the drugs and also to provide the effect of drugs directly on the affected site.

*Gunjakushmanda lepa* has ushna virya and tikshna guna which may help the drug to reach deeper layers of skin, stimulates Bhrajaka pitta and facilitates absorption of the drug. Due to its Arshoghna, Kandughna prasadana properties it helps to regress the size of arshas and to reduce the itching. Thereafter, it is subjected for pachana by

bhrajaka pitta. In due course of the above transformation, the drugs shows synergetic action which pacifies the provoked dosha locally and thus breaks the pathogenesis cycle leadingto the alleviation in the symptoms.

According to modern science, the rectum has a rich blood and lymph supply,drugs can readily cross the rectal mucosa. Due to more vascularity in this area, absorption rate very high. The drugs absorbed through the haemorrhoidal veins remove the obstruction present in the vein and by that the haemorrhoidal mass will be reduced.

**Table.1:** Clinical scoring was done at baseline, on day 15 (post-treatment), and on day 30 (follow-up).

Subjective Parameters		Gradings			
		0	1	2	3
1	Bleeding per Rectum	No Bleeding	Drop by drop	Streaming	Profuse Bleeding
2	Constipation	No Constipation	Regular + Constipation	Irregular + Constipation	-----
3	Pain	No Pain	Mild Pain	Moderate Pain	Severe Pain
4	Itching	No Itching	Mild Itching	Moderate Itching	Severe Itching
Objective Parameters					
5	Size of pile mass (circumference)	Almost none	Tip of the little finger (approx.- 2cm)	Tip of the index finger (approx.- 3cm)	Tip of the thumb (approx.- 4cm)

**Statistical Analysis and Results:**

**Table.2:** Paired t-tests and were used. A p-value <0.05 was considered statistically significant. Showing statistical analysis on both parameters in group a:

Parameters	MEAN		M.D.	% of Relief	S.D.		S.E.M		‘t’	‘p’
	B.T.	A.T			B.T.	A.T.	B.T.	A.T.		
B.P.R	2.10	0.30	1.80	88.33%	0.55	0.47	0.12	0.11	11.0959	<0.0001
Constipation	1.30	0.10	1.20	92.50%	0.73	0.31	0.16	0.07	6.7800	<0.0001
Pain	2.20	0.40	1.80	86.66%	0.52	0.50	0.12	0.11	6.7528	<0.0001
Itching	2.20	0.30	1.90	88.33%	0.41	0.49	0.09	0.01	11.5727	<0.0001
Size of the Pile mass	2.10	0.60	1.50	76.66%	0.79	0.60	0.18	0.13	5.5759	<0.0001
Overall result	9.60	1.70	7.90	86.49%	1.85	1.22	0.41	0.27	15.9690	<0.0001

**Table.3:** Showing statistical analysis on both parameters in group b:

Parameters	MEAN		M.D.	% of Relief	S.D.		S.E.M		‘t’	‘p’
	B.T.	A.T			B.T.	A.T.	B.T.	A.T.		
B.P.R	2.00	0.30	1.70	86.66%	0.46	0.47	0.10	0.11	11.5727	<0.0001
Constipation	0.95	0.05	0.90	72.50%	0.69	0.22	0.15	0.05	5.5759	<0.0001
Pain	2.00	0.45	1.55	80.00%	0.46	0.60	0.10	0.14	9.1310	<0.0001

Itching	1.95	0.35	1.60	85.00%	0.60	0.49	0.14	0.11	9.1974	<0.0001
Size of the Pile mass	2.05	0.65	1.40	70.00%	0.39	0.59	0.09	0.13	8.8544	<0.0001
Overall result	8.95	1.80	7.15	78.83%	1.79	1.47	0.40	0.33	13.7905	<0.0001

**Table.4:** Showing comparison statistical analysis on both parameters in group a and group b :

Parameters	MEAN		M.D	S.D		S.E.M		% of Relief		‘t’	‘p’
	G.A	G.B		G.A	G.B	G.A	G.B	G.A	G.B		
<b>B.P.R</b>	1.80	1.70	0.10	5.36	0.04	1.20	0.01	88.33%	86.66%	0.0833	0.9340
<b>Constipation</b>	1.20	1.10	0.10	0.40	0.44	0.09	0.09	92.50%	72.50%	0.7521	0.4566
<b>Pain</b>	1.80	1.55	0.25	0.49	0.17	0.11	0.04	86.66%	80.00%	2.1359	0.0392
<b>Itching</b>	1.90	1.60	0.30	0.08	0.13	0.02	0.03	88.33%	85.00%	8.3205	0.0001
<b>Size of the Pile mass</b>	1.50	1.40	0.10	0.22	0.17	0.05	0.04	76.66%	70.00%	1.5617	0.1266
<b>Overall result</b>	7.90	7.15	0.75	0.63	0.32	0.14	0.07	86.49%	78.83%	4.7916	0.0001

#### 4. Conclusion

Both the methods of treatment proved to be effective in the management of *Arshas*. But comparatively *Gunja Kushmanda Lepa* (86.49%) shown slight better results with *Kaseesadhi Taila* (78.83%). The study of *Gunjakushmanda lepa Karma* has illuminated its significant role within the Ayurvedic therapeutic framework, showcasing its efficacy non invasive treatment modality. The findings underscore that *Gunjakushmanda lepa* has gunja seed, kushmanda beej and surana kandha exhibits remarkable properties such as pitta vata hara, ushna virya, shrotosodhana, shulahara, vranaropana effects. Through meticulous clinical observations and statistical analyses, it has been demonstrated that this ancient Ayurvedic procedure offers significant relief and other therapeutic benefits like pain, decreased bleeding, and with no side effects.

#### 5. References

- [1] Manoj kumar saini and Prashant singh Bhadauria.(2023) Classical Ayurvedic Review of Arshas. World Journal Pharmacy and Pharmaceutical Sciences, 12(3): 364-372.
- [2] Dr.Nikhi.S,Dr.Geetha B.Markande,Dr.Prashanth Jain.(2020).Understanding the ethiology of arshas-An observational study.J Ayurveda Integr Med Sci 2020;4:107-111.
- [3] Ali SA,Shoeb MFR,(2017). Study of risk factors &clinical features of haemorrhoids.Int Surg J, 2017, 4:1936-9.
- [4] Saurabh Gupta,et al.(2020).Recent management of haemorrhoids:A pharmacological and surgical perspective.volume 20 suppl 1,3828-3837.
- [5] Harial Poya et al.(2017).Life style causes of arshas 9Piles):An ayurvedic review.Int.J.Res.Ayurveda Pharm.2017;8(suppl 2):29-31.
- [6] Masoumeh Ebrahimi Tavani et al.(2025).The complications of hemorrhoidectomy from patients'perspective:A qualitative study.Health Science Reports,2025;8e70724.
- [7] Ajai Kumar, Gupta Ajay Kumar.(2016).A Classical review on arshas (Haemorrhoids/Piles):Current treatment strategies and future prospects. International Journal of Ayurveda and Pharma Research.2016;4(8):69-73.
- [8] Suraj Rathod et al.(2021) Effectiveness of pippalyadi and suranadi ointment in management of arshas(Haemorrhoids).Indian Journal of Forensic Medicine and Toxicology, 15(1): 341.
- [9] Sneha P K et al. (2022). Aclinical study on combined effect of gunja lepa and laghu utasekara vati in nasa arshas (Nasal polyp).Bull Env.Pharmacol.Life Sci, 11(4):199-202.
- [10] Sri madhindrakanta Vallabha charyulu,Vaidya chintamani, volume 2,arsharoga prakaranam, Vavilla Rama swamy and sons publication 1952, page no 219.
- [11] K.Dahikar et al.(2020) Exploring the therapeutic potential of gunja (Abrus precatorius linn):Aclassical semi-poisonous herbal drug gunja. International Journal of Botony Studies. Volume-5(6): 87-94.
- [12] Dr.Rishabh Rathore, Dr. Shalini Varshney.(2023) Acritical review of kashaya skandha in charak samhita, International Journal Of Novel Research and Development (IJNRD) volume 8, pg96-106.
- [13] Gupta Monika, Gudipudi V.S, S.N Sarvabhoma et al. (2019). Clinical aspect of guna siddhanta with special reference to trisutra ayurveda. Ayushdhara, 6(5):2407-2414.
- [14] Dr.Priyanka Namdeo et al. Literary review on vipakahkarmanishthaya (2023) World Journal pf Pharmaceutical and Medical Research, 9: 54-56.
- [15] Dr.Vijay kumar Jatoliya et al.(2023). A critical review study on lepa kalpana:An ayurvedic formulation.International Journal of Creative Research Thoughts(IJCRT)volume 11: 566-572.