Clinical efficacy of Jaloukavacharana (Leech Therapy) in Thrombosed External Haemorrhoids – A Case Study

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Abstract

Jaloukavacharana or Leech therapy is medicinal leech therapy which is used in a variety of inflammatory conditions. It is indicated in Raktaja and Pittaja Vikaras. Its mode of action depends on the injection of leech saliva into patient’s tissues during the process of blood sucking. Leech’s saliva contains numerous bioactive constituent which possess anti-inflammatory, analgesic, thrombolytic, anti-coagulant and blood circulation enhancing properties. Thrombosed hemorrhoid is an emergency condition that occurs due to high venous pressure associated with severe pain in the anus. In the present study a thrombosed external haemorrhoids is managed with Jaloukavacharana and its efficacy was observed.

Key words: Jaloukavacharana, Thrombosed External Haemorrhoids, Thrombolytic.

Introduction

A thrombosed hemorrhoid is a variety of external haemorrhoid where a clot is formed in one or more veins situated in the anal skin resulting in painful swelling in the anal tissues. Venous return in such cases will be very low and severe edema takes place along with serious pain. The swollen tissues often have a characteristic bluish color, because of the underlying clot. It becomes an emergency condition when the pile mass gets strangulated. Urgent surgical intervention is required in all such cases. Jaloukavacharana is known to be effective in thrombosed hemorrhoid as it relieves venous pooling of blood in that area by dissolving the clotted blood.

Jaloukavacharana is comparatively safe and economical OPD procedure, hence in this study leech has been applied in thrombosed external pile mass and efficacy was evaluated.

Case Study

Presenting complaint

A female patient of 65 years old came to our OPD with complaints of pain and mass per rectum since 2 weeks.

History of presenting complaint

Patient was apparently normal before 2 weeks, then she developed pain over anal region with an associated mass per rectum. Pain gets aggravated while sitting and lying down in supine position. Pain is of excruciating nature while defecation. She is having habitual constipation. For the same she got admitted in our hospital for further management.

Past history

No H/O - HTN, DM

Personal history

Appetite - Good
Sleep - Disturbed
Bowel - Constipated
Micturition - Normal
Habits
Non smoker
Non alcoholic

Examinations
BP - 130/80 mm of Hg on supine position
Pulse - 78/min regular
Temp - 98.6°F

Systemic
CNS - conscious oriented GCS 15/15
RS - NVBS
CVS - S1, S2 normal, No added sounds
P/A - Soft & normal

Local examination
Ano rectal examination
Inspection: reddish black globular mass at 7 ‘o’ clock.
Sentinel tag present at anterior midline.
Palpation: mass is tender
Digital rectal examination: hyper tonicity
Proctoscopy: not done due to pain

Blood investigations
Hb - 13.8gm/dl
TLC - 7100/cumm
RBC count - 4.43 millions/cmm
PCV/Hematocrit - 34.7%
MCV - 79.8FL
MCHC - 33.6 gm/dl
MCH - 26.9 picogram
Platelet Count - 2.91 Lakh/cmm
Bleeding Time - 02 min 05 sec
Clotting Time - 05 min 20 sec
Blood Sugar Random - 98 mg/dl
HbsAg - Non reactive

HIV 1 (Antibodies) - Non Reactive
HIV 2 (Antibodies) - Non Reactive
Covid 19 - (RT-PCR) report -ve

Methodology
After proper investigation, leech therapy was planned as a first line treatment.
Written consent was taken.

Preparation of the leech
An unused leech of medium size was taken and activated using turmeric water.
Activated leech is made to bite over the thrombosed external haemorrhoid at 7 ‘o’ clock After 45 minutes leeches were removed using turmeric powder.
Bite site was applied with turmeric and tightly covered with gauze piece to prevent further bleeding.
Total 6 sittings done on consecutive days.

Observations

Before treatment
![Image of ano rectal examination before treatment]

Treatment day 1
![Image of ano rectal examination after treatment]
After third sitting almost 70% reduction in the reddish discolouration, pain and oedema was noted

After 6th sitting 90% reduction in the reddish discolouration, pain and oedema was noted

On the 7th day, reddish discolouration, pain and oedema resolved completely.

<table>
<thead>
<tr>
<th>Variables</th>
<th>BT</th>
<th>Day 1</th>
<th>Day 3</th>
<th>Day 6</th>
<th>Day 7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reddish discolouration</td>
<td>+++</td>
<td>++</td>
<td>++</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>Pain</td>
<td>+++</td>
<td>++</td>
<td>+</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>Oedema</td>
<td>+++</td>
<td>++</td>
<td>+++</td>
<td>+</td>
<td>-</td>
</tr>
</tbody>
</table>

Before treatment: BT, Mild: +, Moderate: ++, Severe: +++ No symptom: -

RESULT

As soon as the leech application was commenced patient got relieved of pain over the thrombosed haemorrhoids.

- Her discomfort level got reduced.
- After second sitting, marked reduction in redness was also reduced.
- After sixth sitting of Jaloukavacharana, patient got 90% relief of all symptoms.
- On 7th day, patient was completely relieved of all symptoms and is fully satisfied with the treatment.

DISCUSSION

Due to the qualities of its anticoagulant, vasodilator, thrombolytic, anti-inflammatory substances, leeches has been proved as medically effective.[1]

Through their sucking effect, leeches stimulate circulation of cells at risk of necrosis and maintain oxygenation of the tissue.[2]

They therefore promote restoration of capillary anastomosis.[3]

They accelerate the thrombolytic activity in the thrombosed haemorrhoids and thereby decongestion occurs.
CONCLUSION

The present study proves the effectiveness of Jaloukavacharana in the treatment of thrombosed external haemorrhoids.

REFERENCES


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