

## Cha. Chi. 14. Arsha Chikitsitam

### Cha. Chi. 14. Arśa Cikitsitam — Management of Hemorrhoids (Arśa)

**Orientation for you:** In *Charaka Saṃhitā* Cikitsāsthāna 14, Arśa (hemorrhoids) is treated systematically—from causes and *pūrvārūpa* to doṣa-based features, prognosis, and comprehensive management. You'll meet classical formulations (Ariṣṭa, Ghr̥ta, Basti), procedures (raktamokṣaṇa, svedana, avagāha), and detailed *pathya*. Keep linking clinical features back to doṣa and stage (śuṣka—non-bleeding vs. srāvin—bleeding).

## 1) Paribhāṣā, Bheda, Adhiṣṭhāna-Saṃsthāna-Sthāna, and Pūrvārūpa

**Arśa—what is it?** Charaka calls arśa an *adhimāmsa-vikāra*—a morbid overgrowth (*granthi/saṃhati*) arising chiefly at **guda** and sometimes at extra-anal sites. The principal **adhiṣṭhāna** (morbid tissues) are **māmsa, medas, tvak** (muscle, fat, skin/mucosa).

### Bheda (Types)

- **Jāti-bheda:** *Sahaja* (congenital) and *Jātasya-uttarakālaja* (acquired). The text explicitly opens with this division and asks for causation, signs, treatment, and *sādhya-asādhya* criteria. “इह खल्वग्निवेश! द्विविधान्यशांसि—कानिचित् सहजाणि, कानिचिज्जातस्योत्तरकालजानि...” (*Cha. Chi. 14/5*).
- **Doṣa-bheda:** Vātaja, Pittaja, Kaphaja; *Dvandvaja* and *Sannipātaja* occur when two or all three doṣa etiologies & signs combine: “हेतु-लक्षण-संसर्गाद्विद्याद्वन्द्वोल्बणानि... त्रिदोषाणां... सहजैर्लक्षणैः समम्” (*Cha. Chi. 14/20*).
- **Avasthā-bheda:** **Śuṣka** (non-bleeding) vs. **Srāvin** (bleeding) arśa; lines of management differ accordingly.

### Sthāna (locations)

Primary site is **guda**; extra-anal swellings (hands, feet, face/mouth, umbilicus, scrotum) are flagged as grave:

“हस्ते पादे मुखे नाभ्यां गुदे वृषणयोस्तथा। ... असाध्योऽर्शसः” (*Cha. Chi. 14/26-27*).

### Saṃsthāna (forms/shapes)

Varied sizes and forms are described, governed by the predominating doṣa. In practice you correlate color, consistency, pain/itch, discharge, and associated bowel features with doṣa dominance.

### Pūrvārūpa (premonitory signs)

Charaka lists early digestive and bowel clues—*viṣṭambha*, *manda-agni*, eructations, emaciation, scant stool, *grahaṇī-doṣa* tendencies:

“विष्टम्भोऽन्नस्य... अल्पविट्कता... ग्रहाणीदोष... उदर आशङ्का...” (*Cha. Chi. 14/21-22*).

## 2) Nidāna, Sāmānya Saṃprāpti, Sāmānya Lakṣaṇa, and Sādhyāsādhyatā

**Nidāna (etiology in brief):** Apathyāhāra-vihāra causing *manda-agni*, chronic constipation, straining, and vitiation of **apāna-vāyu** with kapha/stasis. In Charaka's pathogenesis, the **arśa-mass obstructs apāna**, driving *apāna* upwards and disturbing **sāmāna, vyāna, prāṇa, udāna**, and also **pitta** and **kapha**—thus the broad symptom-complex:

“अपान वायु gets obstructed... aggravates the five vāta, pitta and kapha; these together generate arśa morbidities.” (paraphrased from *Cha. Chi. 14—Tattva-Vimarśa*).



### Doṣānusāra Sāmānya-Lakṣaṇa (core pointers)

- **Vātaja:** pain, hardness, dryness, difficult flatus/stool; in **raktārśa** (bleeding type with vāta anubandha): śyāva, frothy thin blood, cramps/low back pain, marked debility. “विट् श्यावं कटिं रुक्षं... फेनिलं... कट्यूरु-गुदशूलं... दैर्बल्यं—वातानुबन्ध” (Cha. Chi. 14/171-172).
- **Pittaja:** tenderness, heat, profuse sweating/ooze, offensive smell, yellow-red discharge, burning/itching; stools yellow/green; thirst, fever, aversion to food, yellow tinge of nails/eyes/urine. Long verse enumerating pittaja features (Cha. Chi. 14/14).
- **Kaphaja:** soft/loose swellings, heaviness, coldness, slimy mucus, pallor; in **raktārśa** with kapha anubandha: pale, thick, stringy bleeding, slimy anus with sluggishness. “शिथिलं श्वेतपीतं... विट् स्निग्धं गुरु शीतलम्... तन्तुमत् पाण्डु पिच्छिलम्... श्लेष्मानुबन्ध” (Cha. Chi. 14/173-174).

### Sādhyaśādhyaṭā (prognosis)

- **Asādhyā:** congenital tri-doṣaja, extra-anal sites, severe systemic features (cardiac/pleuritic pain, delirium, fever), deep suppuration.
- **Yāpya:** those with residual life & strong digestive power may be maintained with regimen.
- **Kṛcchra-sādhyā:** dvandva in the internal folds (second ring).
- **Sukha-sādhyā:** external (bahyāvālī), single-doṣa, early stage—treat promptly to prevent obstruction. Verses: Cha. Chi. 14/26-32 (“...सहजानि त्रिदोषाणि... असाध्यानि... द्वन्द्वजानि... कृच्छ्रसाध्यानि... बाह्यायां वलौ... सुखसाध्यानि”).

## 3) Cikitsā-Sūtra (General Plan)

Charaka’s summary śloka is an exam favourite—learn the cluster:

“अर्शासां द्विविधं जन्म... स्थान-संस्थान-लिङ्गानि... अभ्यङ्गाः स्वेदनं धूमाः सावगाहाः प्रलेपनाः... पानान्निविधिरय्यश्च वातवर्चोऽनुलोमनः... बस्तयस्तक्रयोगाश्च वरारिष्टाः सशर्कराः...” (Cha. Chi. 14/249-252).

### Key pillars you should be able to articulate:

1. **Nidāna-parivarjana + Dīpana-Pācana** to restore *agni*.
2. **Anulomana/Vātānulomana** (haritākī, trivrt with triphalā-rasa, etc.) in śuṣka arśa to break the constipation-pain cycle. “गुडामभयां... त्रिवृच्चूर्णं त्रिफला-रस...” (Cha. Chi. 14/65-66).
3. **Takra-prayoga (buttermilk)**—the **best drug** for Vāta-Kaphaja arśa, given with or without sneha per doṣa, titrated over a week to a month. “वातश्लेष्माशंसां तक्रात् परं नास्ति भेषजम्... नास्ति तक्रात् परं किञ्चिदौषधं कफवातजे” (Cha. Chi. 14/77-88).
4. **Local measures (Śuṣka arśa):** snehana, svedana, dhūma, lepa, pariseka, avagāha; *raktamokṣaṇa* when *rakta/pitta* are prominent.
5. **Basti:** Anuvāsana (pippalyādi-taila), appropriately timed; Niruha with kṣīra-daśamūla etc. for śuṣka arśa. *Anuvāsana/Nirūha* recipes, Cha. Chi. 14/131-137.
6. **Diet (Pathya):** roasted śāka, yavāgū, yūṣa, māṃsa-rasa, and **kṣīra** & **takra** preparations as per strength and doṣa; this is explicitly lauded: “भृष्टैः शाकैः... क्षीर-तक्र-प्रयोगैश्च...” (Cha. Chi. 14/246).

## 4) Ardra (Raktārśa) — Bleeding Type: Lakṣaṇa & Chikitsā

After managing śuṣka arśa, Charaka turns to **srāvin** arśa and cautions about its *anubandha* (kapha or vāta):

“चिकित्सितमिदं सिद्धं स्राविणां... तत्रानुबन्धो द्विविधः—श्लेष्मणो मारुतस्य च” (Cha. Chi. 14/170).

**Lakṣaṇa pointers you can quote:**

- **Vāta-anubandha raktārśa:** thin, frothy, dusky blood; marked pain in waist/thigh/anus; debility. (*Cha. Chi.* 14/171-172).
- **Kapha-anubandha raktārśa:** thick, pale, stringy blood; slimy, heavy, cold anal region. (*Cha. Chi.* 14/173-174).

**Line of care you'll write in exams:**

- **Early phase:** do **not** suddenly arrest bleeding if vitiated blood needs to exit; once appropriate, adopt **hemostatic** measures (*raktasaṅgrahaṇa kvātha*, cooling therapies, sitz-baths, sprinklings).
- **Doṣa-wise:** bitter dravyas for pitta, **sneha** when bleeding coexists with vāta depletion: “यत्तु... रक्तं वातोत्वणस्य... स्नेहसाध्यं—पान-abhyaṅga-anuvāsanaḥ” (*Cha. Chi.* 14/183).
- **Kutajādi-rasakriyā** is singled out for hemostasis in raktārśa.
- **Piccha-Basti:** a mucilaginous basti (with madhu, gṛṭa, śarkarā) indicated for **bleeding, pravāhika, gudabhramśa**, and fever when Vāta-Kapha aggravation persists. (*Cha. Chi.* 14/225-228).
- **Gṛṭa for śūla with bleeding:** e.g., *Hriverādi gṛṭa*, *Nilotpālādi-lodhrādi siddha gṛṭa* (verses around 196-198).

**5) Śamana-Yoga (exam-oriented formulations)**

**Remember:** Charaka actually details **Takrāriṣṭa, Abhayāriṣṭa, Dantāriṣṭa/Phalāriṣṭa (two variants), Kanakāriṣṭa, Peyā/Yavāgū sets, Gṛṭa sets, Basti**, and topical regimens within this very chapter.

**5.1 Takrāriṣṭa (for vāta-kapha arśa; dīpana, anulomana)**

Key spices—ajamodā/ajwain group, *pippalī/mūla*, *citraka*, *yavānī*, *karavī*, *śaṭī*, *hasta-pippalī*—powdered and fermented in **takra** until *amla-kaṭu* manifests; dose **beginning-middle-end of meals** as per strength:

“तक्रारिष्टं... दीपानं रोचनं... कफवातानुलोमनम्, गुद-श्वयथु-कण्डू-वर्ति-nāśanam” (*Cha. Chi.* 14/72-75).

**5.2 Abhayāriṣṭa (anulomana, grahaṇī-pandu-arśa hara)**

A classical ferment with **Haritakī + Āmalakī + Kapittha + Indravāruṇī + Vidanga + Pippalī + Lodhra + Marica + Elāvaluka**, jaggery, matured fortnight:

Regular intake “**gudajā yānti saṅkṣayam**; improves bala-varṇa-agni” (*Cha. Chi.* 14/138-143).

**5.3 Phalāriṣṭa (two recipes)**

- **Phalāriṣṭa-1:** Haritakī-Āmalakī-Viśālā, Dadhittha, Pāṭhā, Citraka-mūla; jaggery; for **grahaṇī, arśa, udāvarta, agnimārdava, hṛd-pāṇḍu** etc. (*Cha. Chi.* 14/148-152).
- **Phalāriṣṭa-2 / “Dantāriṣṭa” theme:** Duralabhā, Citraka, Vṛṣa, Pathyā, Āmalakī, Pāṭhā, Nāgara, **Dantī** etc., matured with sugar; **arśa, grahaṇī, udāvarta, vibandha** etc. (*Cha. Chi.* 14/153-157).

**5.4 Kanakāriṣṭa (broad-spectrum)**

A rich composite based on fresh **Āmalakī** with *pippalī-mūla*, *vidanga*, *marica*, *pāṭhā*, *kramuka*, *cavyā*, *citraka*, *mañjiṣṭhā*, *elāvaluka*, *lodhra*, *kuṣṭha*, *dāruharidrā*, *sarivā-dvaya*, *indrāhva*, *bhadramuṣṭa*, *nāgapuṣpa*, etc., sweetened and spiced—**rocāniya, arśa, grahaṇī, ānāha, udara, jvara, hṛdroga, pāṇḍu, śoṭha, gulma**, stool-retention, **kāsa**, and even hair/skin ageing traits. (*Cha. Chi.* 14/158-168).



## 5.5 Kutajādi-Rasakriyā (hemostatic)

Indicated in **raktārśa** for stopping bleeding (*raktasaṅgrahaṇa*), used with cooling regimens, sprinklings, sitz baths. (*Cha. Chi.* 14—section 2.64).

## 5.6 Basti highlights

- **Anuvāsana** with **Pippalyādi-taila** when vāta is prominent—relieves *guda-niḥsaraṇa*, *śūla*, *pravāhika*, *vāta-varcho-vinigraha*. (*Cha. Chi.* 14/131-134).
- **Nirūha** with **kṣīra + daśamūla + sneha + lavaṇa + kalkas** for śuṣka arśa. (*Cha. Chi.* 14/137).
- **Piccha-Basti** in bleeding/prolapsing contexts—*madhu-ghṛta-śarkarā* with picchila dravya; *raktārśa*, *pravāhika*, *gudabhramśa*, *jvara*. (*Cha. Chi.* 14/225-228).

## 5.7 Other advisable measures (dosha-wise hints)

- **Pitta-raktapradhāna**: tikta-dravyas, śīta-sekā, cold-leaf coverings (*kadalī*, *padma/utpala*) and **hemostatic douches** per text.
- **Vātānubandha with bleeding**: add **snehapāna/abhyanga/anuvāsana** (verse 183).
- **Śuṣka arśa**: fomentation, lepa, fumigation; then appropriate *anulomana*, *pippalyādi/chavyādi/nāgarādi-ghṛta*, and dietetic gruels.

## 6) Pathya-Apathya and the Central Role of Takra

**Takra** is singled out again and again—*best for vāta-kapha arśa*; prescribe **with sneha** for vāta and **rūkṣa** for kapha; clinicians titrate **7-30 days** while guarding **agni** and strength:

“वातश्लेष्माशंसां तक्रात् परं नास्ति... तक्रप्रयोगो मासान्तः क्रमेणोपरमः हितः... रसः सम्यगुपैति... पुष्टिः बलं वर्णः... नास्ति तक्रात् परं किञ्चिदौषधं कफवातजे” (*Cha. Chi.* 14/77-88).

**Diet list you should jot for answers**: roasted greens, *yavāgū/peyā*, *yūṣa*, *māṃsa-rasa*, **kṣīra** and **takra-kalpanā** adjusted to doṣa and strength; these are explicitly said to “conquer gudajā” when used correctly. (*Cha. Chi.* 14/246).

## 7) Raktaja (Bleeding) Arśa — Doṣa Association & Specialties

- **Initial bleeding** may be *upaśaya* (beneficial evacuation) and should not be abruptly stopped; later **raktasaṅgrahaṇa** (stambhana) is instituted with **kutajādi-rasakriyā**, cooling *sekas*, sitz baths, *śītala-lepa*, and **piccha-basti**.
- **Pitta-raktapradhāna**: bitter/ḍrāvaṇa of pitta with śīta upakrama plus **ghṛta** if there is **śūla** along with bleeding (e.g., *Hriverādi ghṛta*).

## 8) High-Yield Table (Doṣa-Lakṣaṇa-Management Pointers)

Type	Hallmark Lakṣaṇa	Key Upakrama
<b>Vātaja (incl. vāta-anubandha raktārśa)</b>	Hard, dry, painful masses; scant/frothy/dusky bleed; constipation, cramps, debility ( <i>14/171-172</i> )	<b>Anulomana, Sneha, Anuvāsana</b> with pippalyādi-taila; <b>Takra with sneha</b> ; <i>yavāgū</i> , <i>yūṣa</i> ; warm sitz/lepa.

Type	Hallmark Lakṣaṇa	Key Upakrama
<b>Pittaja</b>	Heat, tenderness, sweating/ooze, yellow-red discharge, burning/itch; yellow/green stools; thirst/fever (14/14)	<b>Śītala upakrama</b> , tikta dravya, cooling sprinklings/sitz; <b>hemostatic</b> kvātha when indicated; <b>ghṛta</b> for <i>sūla</i> .
<b>Kaphaja (incl. kapha-anubandha raktārśa)</b>	Soft/loose, heavy, cold; slimy mucus; thick, stringy pale bleed; sluggish anus (14/173-174)	<b>Rūkṣa-dīpana-pācana</b> , <b>Takra (rūkṣa)</b> , warm avagāha/dhūma; stambhana later if needed.
<b>Śuṣka (non-bleeding)</b>	No bleeding; protruding mucosal folds	Local snehana-svedana, lepa/dhūma; <b>nirūha</b> (kṣīra-daśamūla), <b>anulomana</b> , ghṛtas; dietetic gruels.
<b>Srāvin (bleeding)</b>	Vāta/kapha-linked bleeding patterns	Early: do not over-arrest; Later: <b>kutajādi-rasakriyā</b> , cooling <i>sekas</i> , sitz; <b>piccha-basti</b> ; <b>hemostatic douches</b> .

## 9) “Ariṣṭa-Pañcaka” you must recall for Arśa answers

Ariṣṭa	Core idea	Classical claim
<b>Takrāriṣṭa</b>	Fermented spiced <b>takra</b>	<i>Dīpana-rocanā, vāta-kapha anulomana; kandu-śoṭha-vārtināśana</i> (14/72-75).
<b>Abhayāriṣṭa</b>	Harītakī-Āmalakī-kapittha mix with spices & jaggery	“ <b>Gudajā yānti saṅkṣayam</b> ; bala-varṇa-agni vardhana” (14/138-143).
<b>Phalāriṣṭa-1</b>	Harītakī-Āmalakī-Viśālā etc.	<i>Arśa, grahaṇī, udāvarta... agni-sandīpana</i> (14/148-152).
<b>Phalāriṣṭa-2 / Dantyāriṣṭa</b>	Duralabhā, Citraka, <b>Dantī</b> etc.	<i>Arśa, grahaṇī, vibandha, hṛd-roga, pāṇḍu</i> (14/153-157).
<b>Kanakāriṣṭa</b>	Fresh Āmalakī base + long spice/herb list	Broad utility— <i>arśa, grahaṇī, ānāha, jvara...</i> even <i>valī-palita</i> traits (14/158-168).

## 10) One-glance clinical workflow (per Charaka)

- Assess type & stage:** śuṣka vs. srāvin; doṣa dominance; site/prognosis. Quote 14/26-32 criteria when justifying prognosis.
- Restore agni + anulomana:** harītakī/trivṛt/triphalā-rasa regimens as per 14/65-69.
- Takra-kalpanā** customized—rūkṣa vs. snigdha—and consider **Takrāriṣṭa** if indicated (14/72-88).
- Local therapies:** svedana, avagāha, lepa, dhūma, pariseka; **raktamokṣaṇa** in pitta-rakta-pradhāna cases.
- Basti:** anuvāsana (pippalyādi-taila), nirūha (kṣīra-daśamūla) in śuṣka arśa; **piccha-basti** for bleeding/prolapse contexts.
- Ariṣṭa/ghṛta add-ons** per doṣa & avasthā (Abhayāriṣṭa/Phalāriṣṭa/Kanakāriṣṭa; Hriverādi-ghṛta etc.).
- Pathya regimen** throughout—roasted greens, *yavāgū/yūṣa/māṃsa-rasa*, **kṣīra-takra** variants (14/246).

## Quick self-check (answer mentally)

- Which single dietary-drug is extolled as the **best** for vāta-kapha arśa? Which verses prove it?
- How do 14/26-32 guide prognosis in exam vignettes of extra-anal swellings?
- In raktārśa with kapha-anubandha, what qualities of blood and anus help you differentiate? Quote 14/173-174.

## Essential Saṃskṛta Quotations (with references)

- Pūrvārūpa:**  
“विष्टम्भोऽन्नस्य... अल्पविदकता...” (Cha. Chi. 14/21-22).



2. **Asādhyā markers & prognosis flow:**  
“हस्ते पादे मुखे नाभ्यां... असाध्योऽर्शाः...” to “...सुखसाध्यानि...” (Cha. Chi. 14/26-32).
3. **Takra mahattva:**  
“वातश्लेष्माशंसां तक्रात् परं नास्ति भेषजम् ... नास्ति तक्रात् परं किञ्चिदौषधं कफवातजे” (Cha. Chi. 14/77-88).
4. **Raktārśa—vātānubandha & kaphānubandha signs:**  
“विट् श्यावं... फेनिलं...” (14/171-172) and “शिथिलं... तन्तुमत् पाण्डु पिच्छिलम्...” (14/173-174).
5. **Chapter colophon (for citation):**  
“इत्यग्निवेशकृते तन्त्रे... अर्शाश्चिकित्सितं... चतुर्दशोऽध्यायः” (Cha. Chi. 14/colophon).

## Assessment

### A) SAQs (4-5 lines each)

1. Enumerate **types of arśa** per Charaka and add one line each on *sādhyā-asādhyā* pointers.
2. Write the **pūrvārūpa** of arśa with reference.
3. Explain the **pathogenetic role of apāna-vāyu** in arśa according to Charaka.
4. List **local therapies** in śuśka arśa and mention the purpose of each.
5. Indicate **when bleeding should not be arrested immediately** in raktārśa and justify.

### B) LAQs

1. **Discuss Takra-prayoga in arśa**—forms, timing, doṣa-wise customization, and supporting verses. Add clinical reasoning for why buttermilk works in vāta-kapha contexts.
2. **Detail the arīṣṭa formulations** used in arśa—Takra-āriṣṭa, Abhayāriṣṭa, Phalāriṣṭa (both), and Kanakāriṣṭa—with indications and one key ingredient rationale each.

### C) MCQs (Single best answer)

1. In Charaka, **the best drug for vāta-kapha arśa** is:  
a) Ghṛta b) Taila c) **Takra** d) Dadhi
2. Which verse group summarizes the **chapter's therapeutic cluster** (basti, takra, varāriṣṭa, etc.)?  
a) 14/14 b) **14/249-252** c) 14/26-27 d) 14/72-75
3. **Vātānubandha raktārśa** shows:  
a) Thick, stringy, pale blood b) **Thin, frothy, dusky blood** c) Pure bright red blood d) No pain
4. **Piccha-basti** is indicated in:  
a) Udara śoṭha only b) **Raktārśa/pravāhika/gudabhramśa** c) Hṛdroga d) Śvāsa
5. **Abhayāriṣṭa** primarily acts as:  
a) Raukṣa-kara b) Śītala only c) **Anulomana + agni-dīpana** d) Dāha-varadhana
6. Which is **not** a Charaka-listed arīṣṭa in arśa chapter?  
a) Abhayāriṣṭa b) Phalāriṣṭa c) **Arjunāriṣṭa** d) Kanakāriṣṭa
7. **Asādhyā** category includes:  
a) External, single-doṣa, early cases b) **Congenital tri-doṣaja, extra-anal sites** c) Dvandvaja in second ring d) Śuśka arśa
8. In **kapha-anubandha raktārśa**, blood is typically:  
a) Bright red, profuse b) **Pale, thick, stringy, slimy** c) Black, tarry d) Watery only
9. For **śuśka arśa with vibandha**, first line is:  
a) Sudden stambhana b) **Anulomana + dīpana/pācana** c) Only dhūma d) Only raktamokṣaṇa
10. **Pippalyādi-taila anuvāsana** is specially praised for:  
a) Pittaja raktārśa b) **Vātapradāna (guda-niḥsaraṇa, vāta-varcho-vinigraha)** c) Pure kapha-ja d) Śīta jāvara

### Mini-review (1 minute)

- **Mnemonic for Arīṣṭa set (in Charaka's Arśa): T-A-P-P-K = Takra, Abhayā, Phalā-1, Phalā-2 (Dantya),**



**Kanakā.**

- **Takra mantra:** “No drug better for Vāta-Kapha arśa”—quote **14/77-88**.
- **Prognosis lens:** Always run through **14/26-32** before declaring *sādhya-asādhya*.

**Practice prompt:** Take a short case (constipation, painful external tags, no bleeding) and map doṣa, avasthā, and *Cikitsā-sūtra* steps (anulomana → local measures → basti → diet/arīṣṭa). If you can narrate it coherently with 2-3 verses, you’re exam-ready.

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**References (primary):** *Charaka Saṃhitā*, Cikitsāsthāna 14 (Arśa Cikitsitam). Open-access critical English render with Saṃskṛta text (Charak Samhita Online). Key verses cited above.

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