

Review Article

Haemorrhoid (*Bawasir*) - A Classical Literature Review in Greco-Arabic Medicine

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A B S T R A C T

Haemorrhoids are one of the ancient ailments experienced by humankind as mentioned in the earliest medical literature of the Greeks (Unani). According to ancient researchers, it is a *Sawdawi* (melancholic) disease caused by derangement, imbalance, increase viscosity and infiltration of blood in the distal anal veins. Haemorrhoids are classified on the basis of the shape, location, and presence/absence of bleed. Its treatment, as mentioned in the classical textbooks, is on the basis of *Tanqiya* (evacuation), *Ta'dil* (restoration) and *Taqwiyat* (potentiation) of the involved organ.

Keywords: Haemorrhoid, Piles, *Bawasir*, Unani Medicine

Introduction

Haemorrhoids are the result of a dilated plexus of superior haemorrhoidal veins in the anal canal.¹ These dilated veins are created by the radicles of the superior, middle, and inferior rectal veins and are located in the anal canal in the subepithelial region.² The Greek words *haema* (meaning blood) and *rhoos* (meaning flowing) were combined to create the English word haemorrhoid.³⁻⁵ The word "piles" is frequently used by the general population and is derived from the Latin word *pila* (meaning a ball).

Historical Background

Haemorrhoids are one of the ancient ailments experienced by humankind as mentioned in the earliest medical text of Greeks (Unani), Egyptians, Hindus, and Bible literature.⁶ The first recorded incidence of haemorrhoids occurred

in Egypt in 1700BC. Edwin Smith Papyrus emphasised on the usage of a topical wound ointment for protection. Hippocratic treatises (460-375 BC) provided some of the early information on its clinical description and surgical procedure.^{3,7}

Statement of Greco-Arabic Physicians regarding Haemorrhoids

- *Ahmad Tabri*: It is a *Sawdawi* (melancholic) disease caused by derangement, imbalance, increase viscosity and infiltration of blood in the last portion of anal veins.⁷
- *Ali Abbas Majusi*: It is the extra growth which develops on the veins of the anus.⁸
- Hippocrates: It is a condition in which veins of the anus and lower part of the rectum are swollen, similar to varicosities.⁹

- *IbnulQaf Al-Mas̄hī*: In his famous book *KitābulUmdahfī'Ujarāḥat*, he stated that the formation of extra flesh (*lahm*) around or in the inner portion of the anus is termed *bawasīr* which is formed by infiltration of morbid *sawdāwi* matter.¹⁰
- *Ibne Zohar*: In this disease, bleeding occurs from the end part of the intestine which oozes from the anus if the condition persists. It is termed *bawāsīr* and may be present either in small or big polyp-like growths.¹¹
- *Sharfuddin Ismail Jurjani*: It is the extra growth that occurs around the anus which points upwards, inwards, or outwards.¹²
- *Hakīm Akbar Arzāni*: It is the extra growth which arises on the top of anal veins due to the accumulation of viscous *Sawdawi* blood.¹³
- *Hakīm Mohammad Azam Khan*: *Bawāsīr* is a protrusion which occurs at the anal veins due to viscous *sawdāwi* blood.¹⁴
- *Samarqandi*: *Bawāsīr* is a type of extra growth which occurs at the anal veins and is similar to the flesh (*lahm*).⁹

Etymology

The English equivalent of *Bawāsīr* is haemorrhoid/ piles.¹⁵ *Bawāsīr* is the plural of *Buthūr* and the meaning of *Buthūr* is polyp-like growth. According to a Unani scholar, *Bawāsīr* implies a polyp-like growth of the anus.¹⁴ The Greek words *haema* (blood) and *rhoos* (flowing) are from which the name haemorrhoid originates,^{3,4} and it was probably Hippocrates (460BC) who was the first to apply this name to the flow of blood from the veins of the anus.³ The word "piles" comes from the Latin "*pila*" (a ball),^{3,4} and was widely used by the public; common people called them piles, the aristocracy called them haemorrhoids.³

Aetiology as per the Greco-Arabic Concept

It is a melancholic disease, in which putrid blood (*FāsīdKhūn*) or viscid blood (*GhalīzKhūn*) infiltrates the last portion of the anal veins and produces swelling.^{7,10} *DawūdAntāki*, in his famous book *TazkiraUlil al-Bab*, stated that a loss in the ability of spleen to absorb *sawda*, and a reduction in the capacity of liver to distinguish between various substances, can also cause *Bawāsīr*.¹⁶ Greco-Arabic physicians described that *Khūn* (sanguine) having the following features are also responsible for haemorrhoids: *Kathrat-i-Dam*, *Ghilzat-i-Dam*, *Ḥiddat-i-Dam*, *Khūnka Josh waGhilyan*, increased viscosity of *Siyah Dam*, *FasādDamwī*, *Dam-i-Sawdāwī*, *Ghalba-i-Dam* (predominance of blood), *Dam-i-Sokhta*,^{7,11,12,16-18} and viscid and precipitated nature of abnormal humour.¹⁹ Some other factors mentioned by Unani scholars are as follows:

1. Discontinuation of *Faşd* in people who are habituated to it¹¹

2. Excessive use of castor oil¹²
3. Excessive intake of *Muwallid-i-Sawdadiet*^{17,20}
4. Excessive intake of sweets¹⁷

Prevalence

- Climatically, more prevalent in areas where the air is *Ratab* (moist) and *Mut'affin* (putrefied)²⁰
- Most common in the southern zone due to continuous blowing of southern winds²⁰
- Persons having *sawdāwi* temperament¹⁴
- Persons living in fear and grief¹⁴
- Persons having any *sawdāwī* (melancholic) disease related to brain¹⁴

Pathogenesis

The blood becomes putrid/morbid in the liver because of excessive hotness and dryness, excess of blood, prolonged retention of blood in the liver or weakness of spleen to absorption and excretion of *Sawdāwī madda*.⁷ The liver diverts this type of putrid, viscous and melancholic sanguine towards the anus resulting in congestion of anal vessels.¹⁷ Matter descending towards the anus is sometimes so hot that it causes erosion at the verge of the anal canal and that morbid matter gets deposited layer by layer in the rectum leading to abnormal growth of flesh.²¹

Classification of Haemorrhoids

They can be classified on the following basis:^{9,12-14,17-20}

Shape of Polyp: On this basis, it can be divided into seven types:

1. *Thūlūlī*: This is in the shape of small warts resembling *Adasiya* (lentil) or *Himmāsiya* (gram).
2. *'Inabiyya*: The shape of the polyp resembles that of grapes. They are *arghwāni* (purple) in colour.
3. *Tūtī*: This polyp resembles a mulberry in shape. It is soft and red in colour.
4. *Naffākhi*: This polyp resembles a small bubble in shape. It is painless, white in colour and similar to *ulsenaffākha*, which is obtained from a fish's abdomen.
5. *Nakhīlī*: Vessels of this polyp extend like the branches and roots of a date tree.
6. *Tīnī*: The shape of this polyp is flat and round, similar to the shape of *teen* (fig).
7. *Tamarī*: It is a long and slightly hard polyp similar to a date.

Out of these seven varieties, the first three are more frequent and hence most of the Unani physicians have basically described these three types.

Location of Haemorrhoids: On this basis, they can be divided into two types:

1. *Nābita*: They are situated outside the anal orifice and can be termed external haemorrhoids.

2. *Ghāira*: These are found within the anal canal and internal to the anal orifice. They can be termed internal haemorrhoids.

The above two varieties may coexist at the same time.

Presence or Absence of Bleeding: On this basis, they can be divided into two types:

1. *BawāsīrDāmiya* or *Munfatīha* (bleeding haemorrhoids): Bleeding occurs in these types, hence they are also known as *Bawaseer-e-khooni*.
2. *BawāsīrUmīyya* (non-bleeding haemorrhoids): In these, there is no bleeding and they are also known as *BawāsīrRīhī*.

Clinical Features

Most patients presenting with anorectal symptoms often assume that they are due to haemorrhoids; keeping this in mind, it is always important to determine whether the patient's symptoms are due to haemorrhoids or due to ulcer of the rectum.²⁰

The clinical features of haemorrhoids are as follows:

- Until the occurrence of bleeding, the disease is unnoticeable but a feeling of rectal discomfort, heaviness and congestion are present.⁹
- Per rectal bleeding is present which oozes out from the anus.¹¹
- Bleeding occurs before or after defecation; the nature of bleeding is characteristically independent of the motion.¹⁴
- The formation of extra growth of flesh is seen on the rectum.¹⁰
- Swelling of the rectum and formation of polyp-like growth is seen due to the heat generated at the terminal portion of rectal vessels.¹²
- In *BawāsīrUmīyya* (non-bleeding piles), there is no pain on the rectal vessels consequently there is no bleeding but severe pain is experienced. In the case of presence of pores on the rectal vessels, bleeding and mucous discharge are seen with mild or no pain. When bleeding doesn't occur, it causes congestion of rectal vessels and pain, and when bleeding starts, the pain subsides.¹²
- Itching is experienced around the anal region.¹⁴

Usūl-i-'Ilāj (Principles of Treatment)

The treatment is done as per the basic principles in the Unani system of medicine such as *Tanqiya* (evacuation), *Ta'dīl* (restoration), and *Taqwiyat* (potentiation) of the involved organ.

'Ilāj(Treatment)

Initially, correction of body function, mainly improvement of liver and spleen, should be done.^{13,20}

TanqiyaSawdā (evacuation of black bile) is performed through *Faşd* (venesection), *Hijāmat* (cupping), and *Irsāl-i-'Alaq* (leeching) or by *Mushil* (purgative) drugs.²²

IstafrahwaTanqiya(Evacuation)

- *Mushil-i-sawda* or decoction of *HalelaSiyah* and *Aftimūn* followed by *ItrīfalSaghīr* and *Habb-i-Muqīl*^{14,17}
- *Mushil* with *Halelajat* and *Ma-uljubn*¹⁴
- Decoction of *Hindba* (*Chicorium intybus*), *HalelaMurabba*, *AmlaMurabba*, and *ItrīfalMuqīl* are used as laxatives.^{13,14}
- *Tanqiya* is carried out by *Halela(Terminaliachebula)*, *Balela(Terminaliabelerica)*, *Amla*, *Sapistan(Cordia myxa)*, *Alu Bukhara* and *KhiyarShambar(Cassia fistula)*.¹⁴

'IlājBit Tadbīr

Faşd: It is recommended in the following sites:

- *FaşdWarīd-iŞafīn* (saphenous vein)^{13,19,20}
- *FaşdWarīd-iMabīd* (popliteal vein)^{13,14,20}
- *Faşd-i-Bāsaliq* (basilic vein)^{7,13,17}
- *FaşdWarīd-ilbtī* (axillary vein)^{10,14}

Hijāma: It is applied in the following sites:

- Over the abdomen: It helps in obstructing bleeding piles.¹⁷
- Between buttocks¹³

Irsāl-i-'Alaq (Leeching): It is applied in the following condition:

When bleeding from the haemorrhoids is obstructed, there will be pain and sign of congestion, for which, application of leech, either over the coccyx, edge of pile mass or on the pile mass is recommended.¹⁴

Kaiyy (Cauterisation): *AbulQasimZohrawi* recommended cauterisation after haemorrhoidectomy.²²

Ilaj Bid Dawa: Drugs having the proprieties of *Mufattiḥāt* (deobstruent), *Ḥabisāt* (haemostyptic), *Mudammilāt* (cicatrizant or healing agent), *Musakkināt* (analgesic) and *Qatī'āt* (escharotic) are used according to the condition of the disease.^{13,14,20}

1. *Mufattiḥāt* (deobstruent): *Ab-i-Piyāz*, *ZehraGao* and *Artanisan* are placed in cotton gauze and are kept on the anus in order to open the orifice to initiate bleeding.^{13,14,20}
2. *Ḥabisāt* (haemostyptic): In case of heavy blood loss from piles and if the blood becomes red and thin in nature leading to weakness of the body, haemostyptic medicines such as *Qurş-i-Kuharba*, *Habb-i-Muqīl*, *Ma'junKhabsulḤadīd* are given orally. Sitz bath is given with the decoction of *Mazu* (*Quercusinfectoria*), *Post Anār(Punicagranatumrind)*, *Morad(Lentice)*, *Tukm-i-Guland AqāqīyaorḌimad* (paste) is applied with *PostAnār*, *Kundur*, *Juft-i-BalūtandJawzusSaru*.^{13,14,20}

3. *Qati'āt*(escharotic): Drugs which destroy or remove the pile mass through their corrosive property are *DegBardeg*, *Fildfiyun*, *Zarnikh*,^{13,14,20}*HadtaSurkh*, *Nawshdar*, *HadtaZard*, *TelniMakhiand Nura*.¹⁸
4. *Mudammilāt* (cicatrizantor healing agent): Drugs which help in the progression of wound healing and scar creation are recommended followed by the use of *Qati'āt* drugs or after the excision of pile mass.^{13,14,20}
5. *Musakkinat* (analgesic): These are the drugs which relieve the pain of haemorrhoids. *Roghan-i-Zard* or *MarhamSafedabKāfūri* is applied locally. A *Ḍimādis* made by boiling *Barg-i-Karanbisandit* is mixed with *Roghan-i-Gul*, *SafedaBaiza Murgh*, and opium for local application.^{13,14,20}
6. Some of the special compound formulations which may also be used as required in the above condition are *ItrifalMuqilMulayyin*, *ItrifalMuqilQabiḍ*, *Habb-i-Sundrūs*, *Habb-i-MuqilAlwi Khan*, *Habb-i-Jadwar*, *Habb-i-MuqilDarashikohi*, *Habb-i-BawāsīrWalidAlwi Khan*, *JawarishTiwajAlwi Khan*, *Mā'junTiwajAlwi Khan*, *MajunKhabsulHadīdKuhna*, *SafufTiwaj*, *Habb-i-Sandaland Marham-i-Sarb*.¹⁴

Ghidha (Diet): The following dietary measures are advised:

- Consumption of light and easily digestible food^{14,20,21}
- Consumption of ghee to relieve the pain¹⁷
- A healthy diet such as *Murgfarba*, *AsfidBajat*, *BiazaNimBarisht*, and *Khagina* which produces pure blood^{13,14}
- *Halwankagosht*(lamb meat) with bread¹⁴
- *Yolk*, *Akhni*, sweet sesame, walnut, pomegranate, *Zabīb* (large raisin), walnut oil, coconut oil, and almond oil are recommended. Fig, almond, pistachio nut, coconut, and *Fundaq (hazelnut)*, are also beneficial.^{18,20}

Parhez(Abstention):^{13,14,18,20}

- Diet which produces melancholic sanguine
- Diet which produces black and viscid sanguine
- Viscid, salty and spicy food
- *Ghalīz*, *Thaqīl* and dry salty meat
- Milk and dairy products
- Garlic, onion, black mustard, wine, aloe, castor oil, dry dates, dry fish, water bird meat, beef, deer meat, horse meat, brinjal, lentil and jaggery

'Ilājbi'l Yad (Surgery): Surgical techniques mentioned by physicians for haemorrhoids are:^{10,22}

1. *Amal-i-Khazm* (ligation of piles): In this process, a needle is inserted at the base of the pile mass, and then it is ligated at the peduncle lightly with a silk thread.
2. *Amal-i-Shadd* (ligation): It is a surgical technique for piles in which the pile mass is tightly fixed with a thread

for three days and the knot is tightened gradually.

3. *Amal-i-Qat* (haemorrhoidectomy): It is an operative procedure of excision in which the pile mass is completely excised from the pedicle.

Conclusion

This review presents complete literature on haemorrhoids available in classical Greco-Arabic textbooks. A further clinical validation study is needed for the establishment and validation of data to ensure that patients are benefitted globally.

Conflict of Interest: None

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