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INTERNATIONAL JOURNAL OF ADVANCED RESEARCH (IJAR)

Article DOI:10.21474/IJAR01/20337
DOI URL: <http://dx.doi.org/10.21474/IJAR01/20337>



RESEARCH ARTICLE

EVALUATING THE ROLE OF MOOLABANADHA IN TREATING HAEMORRHOIDS AND ASSOCIATED GASTROENTEROLOGICAL CONDITIONS: A NARRATIVE REVIEW

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Manuscript Info

Manuscript History

Received: 27 November 2024
Final Accepted: 30 December 2024
Published: January 2025

Key words:-

Haemorrhoids, Moola Bandha, Piles, Pelvic Floor Muscles

Abstract

Objective:The primary objective of this narrative review was to evaluate the efficacy of yoga therapy in managing symptoms in individuals with haemorrhoids.

Introduction:Haemorrhoids are defined as the symptomatic engorgement or downward displacement of the anal cushion. It develops in the anus and is present in the mucosa of the anal canal and Internal splinter, the anal cushion is supported by smooth muscle and connective tissue encircles the internal and external sphincter.

Methodology:An electronic search of published research articles was conducted using Google Scholar, PubMed, ScienceDirect, and other databases. The results were analysed to evaluate the effectiveness of yoga in the treatment of patients with haemorrhoids.

Conclusion:This review suggests that yoga can effectively reduce symptoms in haemorrhoid patients. It should be practised by individuals with haemorrhoids to alleviate symptoms, strengthen pelvic floor muscles, and promote overall well-being. Additionally, it has no associated adverse effects.

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Introduction:-

Yoga is derived from the Sanskrit word "Yuj" which means to join, it works on all aspects of the person the physical, vital, mental, emotional, psychic and spiritual [1]. Yoga is a methodical technique for speeding a man's overall growth. As a result of this progress, man learns to live at a higher level of consciousness [2].

Bandha is a part of yoga in Sanskrit Bandha means "to hold" or "lock" [3]. Moola bandha {Root Lock} It helps to awaken the Muladhara chakra. Moola is the region between the anus and genital [Perineum][4]. Moola bandha strengthens the pelvic muscle and stimulates the pelvic nerves activating the sympathetic and parasympathetic systems, increasing the blood circulation to the pelvis [5]. It is very helpful in other gastroenterology diseases like Haemorrhoids, constipation etc. [6].

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Haemorrhoids are defined as the symptomatic engorgement or downward displacement of the anal cushion [7]. It develops in the anus and is present in the mucosa of the anal canal and Internal splinter, anal cushion is supported by smooth muscle and connective tissue in encircles the internal and external sphincter [8].

Failure of these mechanisms causes two types of downward displacement: anal closure and contraction. Haemorrhoids, both internal and external. Internal plexuses give rise to internal plexuses, while exterior plexuses give rise to external plexuses [9]. Moola bandha is attempted in retention after inhalation. Breathing should be normally all over the procedure [10].

Moola Bandha

The bandha is a yoga character that is worn during pranayama and Nadi arousal. Bandha means "to hold or lock" in Sanskrit. The word Moola means "root" or "foundation." The gap between the anus and perineum is known as moola [11].

Mudras, bandhas, and pranayama are used to execute moola bandha, which is recommended to be done after the asanas and pranayama before taking medicine. In Antara kumbhaka, this is meant to be tried first [12].

To do this moola bandha, sit in a comfortable mediative asana, ideally Siddha/Siddha yoni asana, and apply pressure to the perineal area. Continue to breathe normally, without holding your breath, and slowly contract the perineal area, holding it in place. Concentrate on the physical feeling and tighten a little tighter while keeping the rest of your body relaxed [13].

This will strengthen the perineum and pelvic floor muscles, as well as improve circulation in the area. useful in numerous reproductive and gastroenterology diseases [14].

It is not recommended for patients with persistent spinal problems or diarrhoea, and it should not be done after a heavy meal[15].

Contraindications are:

Hypertension, Fistula -in-ano, During menstrual bleeding, any injury to hamstring or groin region [16].

Physiological Changes during andafter Moola Bandha

Moola bandha is the contraction of certain pelvic floor muscles (most notably the Pubococcygeus), not the whole perineum. The region of contraction in the male body lies between the anus and the tests. The site of contraction in a female's body lies behind the cervix, where the uterus extends into the vagina. The Puboperinealis muscle is the one that contracts and strengthens the most during moola bandha exercise. The puboperinealis are the fibres that connect the pubic bone to the perineal body [17]. The Moola Bandha enhances the contraction time and strength of the pelvic floor muscles. By permanently elevating the muscle plate to a higher position in the pelvis, strength training of pelvic muscles will build muscle bulk and thus provide structural support to the pelvic floor. The organs of the pelvis and lower abdomen are lifted and toned. This improves pelvic stability and tones, as well as supports the internal organs of the lower abdominal cavity. It stimulates the intestine's peristaltic motions [18]. When the pubococcygeus muscle was engaged, the coccyx began to migrate anteriorly. The Sacroiliac joint moves rearward, and the spine falls backward above the Sacroiliac joint, causing the lumbar spine to straighten. This aids in the stabilization of the pelvic bowl and the balance of the spine. The stability of the pelvis is improved by paying attention to the supporting musculature. Because the pelvis is the seat of the spine, its stability ensures that spinal movement is safe [19].

The lumbosacral nerve trunk, the sacral and coccygeus plexus, and pelvic sympathetic and parasympathetic system parts are all found in the pelvis. These nerves collectively innervate the perineum, the majority of pelvic visceral organs, the pelvic floor, and the gluteus region with somatic and autonomic innervations [20]. The major nerve of the perineum and external genitalia is the pudendal nerve. Perineal contraction activates the parasympathetic fibres that emerge from the spinal cord, stimulating both the sensory-motor and autonomic nervous systems in the pelvic region [21].

Perineal muscles are contracted in the same way they are in moola bandha. This temporarily halts blood flow in the internal pudendal artery and its branches. When the bandha is released and the muscles are relaxed, the flow of new

blood increases, flushing out old, dead cells. All pelvic organs are strengthened, revitalized, and circulation is enhanced in this manner [22].

Proven Benefits of Moola Bandha

1. Moola bandha strengthens and tones the whole pelvic area, including the urinary, genitals, excretory organs, and perineum and pelvic floor muscles.
2. The prolapse of pelvic organs is avoided [23].
3. It stimulates nerves, triggering the sympathetic and parasympathetic nervous systems.
4. It aids in the reduction of anxiety and depression [24].
5. Blood circulation in the pelvis and lower abdomen is improved. As a result, the efficiency of pelvic and abdominal organs improves, as does the efficacy of endocrine glands [25].
6. Increase peristaltic mobility, which is beneficial in the reproductive, excretory, gastroenterology, and digestive systems. Constipation, indigestion, haemorrhoids, and pelvic organ prolapse are just a few examples [26].
7. Moola bandha awakens the mooladhara chakra, restoring vitality to the body [27].

Moola Bandha Combating The Gastroenterology Disease

Gastroenterology is a broad field of medicine that encompasses all illnesses of the digestive system. Common conditions include colorectal cancer, constipation, acid reflux, diarrhoea, liver cirrhosis, hepatitis, haemorrhoids, irritable bowel syndrome, stomach cancer, pancreatitis, gas, Crohn's disease, coeliac disease, and other disorders. In haemorrhoid disease, symptoms such as pain, swelling, and inflammation in the anal region are observed [28].

Yoga therapy is highly beneficial in preventing and controlling the progression of haemorrhoids. The practice of Kshatriya, or yogic cleansing techniques, helps keep the body purified and prevents digestive and intestinal problems. In the case of haemorrhoids, individuals may experience constipation or difficulty passing stool. Basti kriya aids in smooth peristalsis movement for quick elimination [29]. Regular practice of kriya, asana, and pranayama can relieve symptoms by reducing pressure on veins, which can occur with prolonged periods of standing or sitting [30].

Moola bandha is believed to cut through Brahma granthi, the energy knot that binds our reluctance to change, and is located in the Muladhara chakra. Moola bandha generates awareness in the supporting musculature of the pelvis on a physical level, improving pelvic stability. This is crucial since the pelvis is the seat of the spine and provides a secure environment for spinal movement. Moola bandha enhances and emphasises the value of a firm base that should underpin every movement. It also lifts and compresses the bowel and lower abdominal region, creating a solid foundation and a platform under the breath that allows for increased or decreased pressure inside the torso, facilitating movement [31].

The bandha creates lightness and fluidity; when properly applied, the body becomes less earth-bound and more mobile. As moola bandha is refined, it becomes less muscular and more delicate, energetic, and etheric. The journey of transcendental yogic awakening moves from the outside to the inside, from the ordinary to the rarefied, and from unconsciousness to enlightenment. Moola bandha allows us to experience, restrict, and focus our energy toward enlightenment on an active level. Ultimately, when practising moola bandha at its highest degree, the yogi perceives the Divine in everything with serenity and detachment [32].

Moola bandha is a physical contraction that involves a muscular lifting-up of the pelvic floor. The pelvic floor consists of muscle fibres and fascia, although the pelvis is predominantly a bony structure supported by ligaments (connective tissue). These tissues connect and overlap in intricate ways; for our purposes, the pelvic floor can be divided into three muscular levels, each of which can be felt and manipulated independently [33]. To feel the perineum, press a finger into the gap between the anus and the scrotum or labia. Alternatively, sit in the gap between the anus and genitals for a few minutes with a ball or the heel of your foot. Alternate between anal and perineal contractions until the difference is noticeable. With practice, you will discover that you can enhance your moola bandha sensation by isolating the perineum and moving further into the pelvis. The contraction of the bandha is carried inside and upward with this refinement, giving you a physical sense of the yogic process of transitioning from outward to interior consciousness [34].

On the deepest physical level, moola bandha contractions are similar to pubococcygeus exercises, which are performed to treat urinary incontinence and strengthen the vaginal walls after childbirth. To achieve this level of

moola bandha, practice starting to urinate and then stopping the flow. Women can also insert a finger into the vaginal canal and tense the muscles that prevent urination; if the inserted finger feels tight, the correct muscles are being engaged. Vajroli or sahajoli mudra involves the solitary contraction of the muscles that control the flow of urine [35].

For complete moola bandha, it is necessary to elevate the pelvic diaphragm, primarily by engaging the levator ani muscles. The pelvic diaphragm is a sling of muscles that extends from the pubis to the coccyx and supports the upper part of the vagina, uterus, bladder, prostate, and rectum, which form the innermost layer of the pelvic floor. The pelvic diaphragm not only supports these organs but also aids in bowel control. As you learn to use moola bandha and engage in this deep internal contraction, you will notice a lift under the bladder, vagina and uterus (or prostate), and rectum. Relax the surface muscles and feel the contraction deep inside at the base of the abdomen. To isolate this contraction of the pelvic diaphragm, avoid using any additional muscles. With practice, you will find that you can elevate the pelvic floor deep inside without constricting the anus or the external layers of the perineum [36].

Moola Bandha, when practiced consistently, transcends physical benefits and begins to integrate the mind and body. Over time, its influence extends beyond the physical realm, permeating the practitioner's psyche and daily life. Similar to asana practice, Moola Bandha aims to purify the pranamaya kosha, one of the five subtle sheaths of the energy body. On a pranic level, Moola Bandha works by redirecting Apana, the aspect of prana that naturally flows downward from the navel. By channeling Apana energy upward, it merges with the ascending flow of prana, facilitating higher states of consciousness and contributing to the journey toward enlightenment [37].

However, a notable limitation is the lack of standardized guidelines regarding the duration of practice required to observe tangible results. To fully assess its efficacy, Moola Bandha exercises may need to be practiced over extended periods, necessitating further research to establish optimal practice durations and protocols.

Methodology:-

This study utilises a narrative review approach, integrating findings from existing scientific literature to examine the therapeutic potential of Moola Bandha in addressing haemorrhoids and associated gastroenterological conditions. A thorough search of online databases, such as PubMed, Medline, and Google Scholar, was carried out to identify pertinent studies. The search strategy employed keywords including "Moola Bandha," "haemorrhoids," "Moola Bandha and piles," "healthy individuals," and "haemorrhoid patients." The search was restricted to articles published up to January 2022.

Studies were carefully screened for relevance, and data were systematically extracted to assess the effectiveness of Moola Bandha in alleviating haemorrhoid symptoms and its potential advantages for individuals with coexisting gastrointestinal conditions. The narrative review methodology facilitated a qualitative synthesis of the existing evidence, identifying gaps in the current literature and suggesting avenues for future research.

Inclusion Criteria:

The studies were included in the narrative review if they were:

1. The human population is the subject of this research.
2. This research includes both male and female participants.
3. The studies include Patients who have been diagnosed with haemorrhoid illness symptoms.
4. Studies that include mechanisms between yoga and haemorrhoid.

Exclusion Criteria:

The studies were excluded in the narrative review if they were:

- Not based on a study.
- Abstract and unpublished articles.
- Non-English full-text format.

Discussion:-

The findings from this narrative review highlight the potential therapeutic role of Moola Bandha in managing haemorrhoids and coexisting gastroenterological conditions. These are particularly relevant for individuals with concurrent gastrointestinal disorders, such as chronic constipation or irritable bowel syndrome, which often

exacerbate haemorrhoid symptoms. The potential to regulate bowel movements and reduce straining during defecation could further contribute to symptom relief and prevent the progression of haemorrhoidal disease.

However, the current body of evidence is limited, with a scarcity of high-quality clinical studies specifically investigating Moola Bandha's efficacy for haemorrhoids. Most available studies focus on healthy individuals or explore broader yogic practices, making it challenging to draw definitive conclusions about its therapeutic potential for haemorrhoid patients. Furthermore, the lack of standardised protocols for practicing Moola Bandha and variations in technique among practitioners may influence outcomes, underscoring the need for rigorous scientific investigation.

To address these gaps, future research should prioritize well-designed clinical trials involving larger cohorts of haemorrhoid patients, particularly those with coexisting gastroenterological conditions. Such studies should employ standardized protocols, objective outcome measures, and long-term follow-ups to evaluate the safety, efficacy, and sustainability of Moola Bandha as a therapeutic intervention. Additionally, exploring the synergistic effects of Moola Bandha with other yogic practices, such as asanas and pranayama, could provide a more comprehensive understanding of its role in managing haemorrhoids and improving gastrointestinal health.

Conclusion:-

Moola Bandha has demonstrated efficacy in addressing and alleviating symptoms of gastrointestinal diseases. Given that haemorrhoids and gastroenterological disorders share common pathogenic pathways, it is plausible to explore whether Moola Bandha could also mitigate haemorrhoid symptoms.

In conclusion, while preliminary evidence suggests that Moola Bandha holds promise as a non-invasive, cost-effective intervention for haemorrhoids, further research is essential to validate its benefits and optimize its application. By integrating evidence-based insights into therapeutic practices, Moola Bandha could emerge as a valuable adjunct to conventional treatments, offering holistic relief for haemorrhoid patients and enhancing their quality of life.

Conflict of interests

There are no conflicts of interest stated by any of the Authors.

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