

A CASE STUDY ON KADARA BY AGNIKARMA WITH THE USE OF PANCHADHATU SHALAKA

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ABSTRACT

As a science of Life and Health, the different branches of Ayurveda have evolved over the long period as health being mainly concerned with preventing as well as curing the diseases. There are few diseases which have simple pathology but difficult to cure that called as Kshudra-roga. Kadara is one of them. Kadara (corn) is initially painless in condition but with its progress, it may become painful. In modern science, corn is being treated by using anti-inflammatory drugs, corn cap, salicylic acid and excision. Even today there is no satisfactory and permanent treatment available for corn because of its high recurrence tendency. In Ayurveda procedure used in this disease is Agnikarma. Therefore to keep all these things in mind Agnikarma with Panchadhatu Shalaka (instrument made of 5 metals) in a systematic manner for duration of 15 days with intervals of 5 days in 3 sittings was selected for the treatment of corn (Kadara).

Keywords: *Kadara, Corn, Agnikarma, Panchadhatu Shalaka.*

INTRODUCTION

A Corn is a specially-shaped callus of dead skin that occurs on thin or glabrous surface of toe. Repeated injuries and friction to sole cause the corn. It is a localized hyperkeratosis of the skin⁽¹⁾. usually occurs at pressure sites such as on the soles and toes, occurring due to defective foot wear, thorn prick, etc². There is usually a horny induration of the cuticle with a hard centre. Corn has tendency to recur after excision. It has a deep central core which reaches to the deeper layers of dermis³. In Ayurveda corn can be correlated with Kadar which is described under “Kshudra-roga”. It is said that repeated injuries & friction to the sole with thorns, stones etc. leads to this condition⁴. *Acharya Sushruta is described its clinical features as. Keelavat (lesion have a central core) kathin (hard), granthi (knotted), Madhyo Nimna (depressed in the central) or Unnat (elevated*

in the central) Kolamatra (seed of plum) in size, painful and sometimes with Srava (discharge).⁵ Modern science has provided some preventive measures such as soft shoes or soft pads at pressure point of the sole, application of salicylic acid on corn, use of central local application such as cornac or carnation cap and lastly excision of corn⁶. As per Ayurvedic concept, Kadara may develop as the vitiation of Vata with Kapha Dosha. Vata and Kapha Dosha have been considered as the important factors for causation of Shotha (inflammation) and Shoola (pain)⁷. Agnikarma (cauterization) introduces heat in the affected area. This heat is Ushna, Tikshna, Laghu, Sukshma, Vyavayi and Vikashi in properties, which is helpful to break the Kapha thus reducing Shotha and ultimately Vata do Vata Dosha gets pacify so that Shool (pain) is relieved⁸.

In reference to *Chikitsa* of *Kudara*, *Acharya Sushruta* and *Dalhana* mentioned the seat of the affected lesion should be excised and *Agnikarma* should be carried out with oil⁹. But for further evaluation in *Agnikarma* we carried out *Pratisaran* and *Bindu* in combination with the help of *Panchadhatu Shalaka* in the oil medium¹⁰. This combined therapy seems to be more effective to provide instant relief. If done perfectly, the disease does not reoccur. A single case study of corn is reported here which was treated by combination or fusion *Agnikarma* in 3 sittings at an interval of 5 days. After 15 days, the patient got relief from elevation of swelling and pain.

CASE REPORT

A 17 year old male name Dinesh Bisnoi visited OPD of *Shalya Tantra* in associated hospital of Dr.Sarvepalli Radhakrishnan Rajasthan.Ayurved University in 13 August 2015 with REGISTRATION NO.36192.Complaints of the patient pain and elevated cystic swelling present on dorsal aspect of right sole due to rough and hard foot wear. There was no history of direct trauma except that the patient was used to walk bare footed on rough roads. There was a history of excision of elevated layers of corn done repeatedly by the patient herself, before visiting us. On the basis of clinical examinations the patient was diagnosed as a case of corn at the right sole. We admit him in I.P.D. with I.P.D. NO.1394. After careful assessment and examination, patient was selected for *Agnikarma* by *Panchadhatu shalaka*.

MATERIALS & METHODS

Materials: The materials used are *Panchadhatu shalaka*, *Tila tailam*, *Kumari svarasa*, *Haridra churna* *Gritham*, Gas Stove, *Triphala* decoction, Gauze pieces, Sponge holding forceps, Artery forceps.

Methods *Purvakarma*

Before *Agnikarma* informed written informed consent were taken. CBC, CT, BT, HbsAg, HIV, Blood sugar etc routine blood investigation done before procedure. Injec-

tion tetanus toxoid should be given. The sole of the right foot was applied with *Triphala* decoction and wiped up with sterilized gauze piece¹¹.

Pradhankarma

Then *Tila tailam* was applied with gauze. The red hot *Panchadhatu shalaka* is then applied to corn. Firstly, *Agnikarma* on corn was done for *Pratisaran* (flat type of cauterization) with the base of *Panchadhatu shalaka* and followed by *Bindu* (dotted type of cauterization) with the tip of *Shalaka*. Every *Shalaka* is applied within the area of corn for 25 seconds. During entire procedure, a *Kumari Svaras* (fresh pulp of Aloe vera) was applied after application of red hot *Shalaka* to get relief from burning sensation. Appropriate precautions were taken to avoid production of *Asamyak dagdha* (neither superficial nor deep burn).

Paschatkarma

After completion of procedure, *Dagdha vrana* should be covered with mixture of *Gritham* and *Haridra* powder. Patient was advised to apply the paste of *Haridra* powder mixed with *Gritham* at bed time upto normal appearance of skin. The entire procedure was repeated 3 times at the interval of 5 days for desirable results.

DISCUSSION

Vata & Kapha are mainly responsible *Dosha* and *Dushya Meda* and *Rakta* in the pathogenesis of *Kadar*. *Agnikarma* is for local *Vata & Kaphaja Vyadhi* and diseases treated by *Agnikarma* do not reoccur. It gives instant relief to the patients. There is no fear of complication such as purification and bleeding due to contact with *Agni*.

As only *Agnikarma* therapy has a property to destroy the pathology in the deeper structure. Even modern science has also mentioned that central core of corn reaches in the deeper layers of dermis and hence *Agnikarma* is the only therapy which can destroy the hyperkeratosis of skin with the properties of *Ushna*, *Tiksha*, *Sukshma*,

Vyavai, Vikasi and Pachana Gunas of Agni & Tila Taila¹².

CONCLUSION

Kadar (corn) can be re-occur if its only surgical excision done.

1) Agnikarma therapy is more suitable in the management of corn. Agnikarma is superior for local Vata & Kaphaja Vyadhi because it gives instant relief to the patients and diseases treated by Agnikarma do not reoccur.

2) Instead of surgical excision, Agnikarma therapy is more satisfactory in the management of corn. It has no side effects, complications & recurrence.

3) It enables the patient to do his or her daily routine activities within a few minutes of Agnikarma procedure.

4) The therapy is cost effective as compared to surgical excision with respect to, number of post excision dressing, Antibiotic, Analgesic and Anti inflammatory and wound healing promoting drugs.

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