

**DAHAN EFFECT OF AGNIKARMA FOR MANAGEMENT OF CHARMAKEEL
- A CASE REPORT****Krutika N. Kamerkar¹, Shubhangi P. Badole²**¹M.S. Scholar Shalyatantra, Dr G D Pol Foundation's Y.M.T Medical Ayurvedic College and Hospital, Kharghar, Navi Mumbai, Maharashtra, India²Associate Professor, Shalyatantra Department, Dr G D Pol Foundation's Y.M.T Medical Ayurvedic College and Hospital, Kharghar, Navi Mumbai, Maharashtra, India**Corresponding Author:** krutikakamerkar@gmail.com<https://doi.org/10.46607/iamj4010052022>**(Published Online: May 2022)****Open Access**

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Article Received: 13/04/2022 - **Peer Reviewed:** 27/04/2022 - **Accepted for Publication:** 28/04/2022**ABSTRACT**

The reported case acts as a remark of an important therapeutic lesson and proves the effectiveness of Agnikarma i.e., heat therapy of Ayurvedic science. Agnikarma is one of the Anushastrakarma procedures explained in Sushrut Samhita, which is the minimal invasive para-surgical procedure. Dahan karma by Agnikarma is the thermal cauterization and is used for the excision of some surgical pathology. Charmakeel is one of the diseases of skin where overgrowth of the skin occurs, this can be correlated with Acrochordon which requires excision. To prove the effectiveness of Agnikarma the case is studied. **Materials and Method:** The current case was selected from the OPD of Dr. G. D. Pol Foundation YMT AMC Kharghar. After preoperative preparation, Charmakeel is excised with the red-hot Tamra Shalaka, and the postoperative wound is pasted with Aloe vera pulp, on weekly follow-up symptoms like pain in VRS score, scar as POSAS score is observed which are highly promising. **Conclusion:** Agnikarma therapy proves its Dahan effect by complete excision of Charmakeel with less pain and scar without the requirement of local Anesthesia.

Keywords: Acrochordon, Agnikarma, Charmakeel, Dahan Karma

INTRODUCTION

KshudraRoga¹ is explained in Ayurvedic classics are a group of diseases which mostly related to skin and disfigure the sufferer and Charmakeel² is one of them. The word Charmakeel is made up of two words Charma(skin) and Keel (wall nail). The condition of Acrochordon can be correlated with Charmakeel. Acrochordon³ also known as skin tags or soft fibroma are common soft small usually pedunculated and benign tumors that are most often found on the neck, axilla, or groin region with a Prevalence rate around 46%⁴. Acrochordon occurs when the body produces extra cells in the skin's top layer. Although this is not a fatal condition, or it causes severe symptoms but cosmetically it bothers the patients. It can be excised by simple cutting with blunt scissors, Cryoprobe, and Electric cautery or by application of chemical as per its site and size: Agnikarma is the thermal cauterization and is used for excision of some surgical pathologies where complete excision is required. Agnikarma is one of the Anushastrakarma⁵ procedures explained in Sushruta Samhita, which is a minimally invasive parasurgical procedure, which is broadly used for two purposes i.e., local pain management and disease management. Its cauterization effect is used for thermal excision⁶ of Arsha, Arbuda, Charmakeel, etc. so also called Dahan karma as per Acharya Wagabhata⁷. Further, the Recurrence of disease treated with Agnikarma is very less thus it proves its importance. As Charmakeel is mentioned in chedya⁸ as well as Agnikarma sadhya vyadhi, it can be effectively excised by Agnikarma with its Dahan effect, Acharya mentioned the Twaka dagdha for excision of Charmakeel. In Twaka dagdha the depth of the procedure is up to the skin surface where the following signs are expected for the perfect procedure, the local skin changes during the procedure should be twakasankoch (contracture of skin), dur-gandhata (bad odour), shabdhapradurbhava (production of sound). The reported case acts as a remark of an important therapeutic lesson and proves the effectiveness of Agnikarma i.e Dahan effect i.e., heat therapy from Ayurveda science. On observation

during the procedure pain score is 0 measured with VRS scale and also pain after procedure within 21 days, a patient need not required any analgesic. The scar assessment score which is measured with POSAS is 12 on the 7th, 15th, and 21st day.

NRS Scale⁹- (Numeric Rating Scale): It was noted by the patient and standardized by including a numerical rating scale which was a segmental numeric version of the visual analogue scale to give objectivity to the subjective experience of pain. It is an 11-point numerical scale with 0 representing one pain extreme (i.e., no pain) and 10 representing the other pain extreme (i.e., worst pain).

POSAS Scale¹⁰- (Patient Observer Scar Assessment Scale): It is designed to evaluate various types of scars subjectively. It is developed by Draaijeres et al in 2004, the observer component is composed of six parameters of the scar; Vascularity, Pigmentation, Thickness, Relief, Pliability, Surface area, and a patient score composed of another six parameters i. e. Pain, Itch, Colour change, Thickness, Stiffness, Irregularity.

Case Details: In the present case a 48-year female patient approached Shalyatantra OPD of Dr. G.D. Pol Foundation YMT Ayurved Medical College, Kharghar in July 2019, with complaints of three fleshy masses over the neck region for 20 years with a history of discomfort from last 4 months and wanted to remove the same. She was a housewife and did not have any associated diseases. After confirming her blood sugar level and taking her written consent for the procedure, three Charmakeel on the neck is excised with Red hot Tamra Shalaka, one by one till the pedunculated mass is excised completely, and the post-burn mark is pasted with raw Aloe vera gel. The procedure was done a single time. She was called for follow-up for examination of the wound every 7th day for 3 weeks. It is observed that the Pedunculated mass of Charmakeel has been excised completely with Agnikarma. In 21 days follow up no complaints of burning, or pain is reported. Burn Mark is almost negligible on a 3rd-week visit. Anaesthesia is not required for the procedure and post-procedure anal-

gesics are also not needed in this case.

Procedure of Agnikarma –Dahanakarma:

Material required: Gas stove as a heat source, Tamra Shalaka, Forceps, Row Aloe Vera pulp

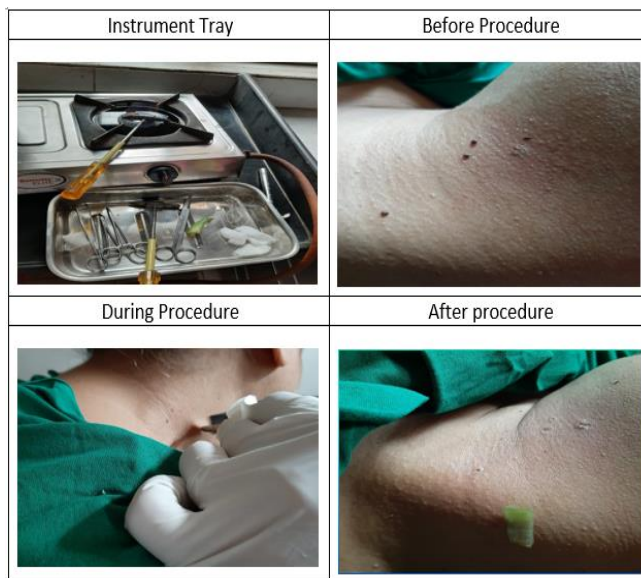
Pre-procedure–The written concept of the subject with Charmakeel taken, local cleaning of the affected area by Betadine Solution done, the patient is asked to lie down with exposing area affected. Heating of Tamra Shalaka at its tip with the help of Gas Stove flame till red hot. **Procedure**- Charmakeel is held with forceps, and the tip of the red-hot heated Tamra Shalaka is placed on the pedicle of Charmakeel till the whole mass of Charmakeel is get excised completely. Precaution is taken that Shalaka should not touch the normal skin surface. **Post-procedure**–Aloe vera pulp is applied at post-Agnikarma Dhagdha - burn point of skin immediately.

DISCUSSION

Charmakeel is a skin pathology under Kshudraroga. It requires Chedan – excision. Agnikarma as Twaka dagdha can be useful for its excisional cauterization as Dahan kama. Charmakeel can be correlated with Acrochordon for which the most likely used procedure is electrocauterization which requires local anesthesia. Agnikarma can do excision of Charmakeel without local anesthesia and less requirement of postoperative analgesics, Scar is also negligible. As other surgical procedures have Complications, it can happen with Agnikarma also, but it can be avoided with proper precautions.

CONCLUSION

Agnikarma therapy proves its Dahan effect by complete excision of Charmakeel with less pain and scar without the requirement of local Anesthesia. So, it should be used for the excision of Charmakeel. Age-old scientific techniques of Indian origin are still proved effectively with better results. A study on more samples should be done to prove it statistically.



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