



Case Report

ROLE OF AGNIKARMA THERAPY IN THE MANAGEMENT OF KADARA (CORN): A CASE REPORT

Kanchan M. Borkar^{1*}, Anantkumar V. Shekokar²

^{1*}Lecturer, ²Reader and HOD Dept of Shalya Tantra, S.V.N.H.T'S Ayurved Mahavidyalaya, Rahuri Factory, Rahuri, Maharashtra, India.

Received on: 28/11/2013

Revised on: 13/12/2013

Accepted on: 20/12/2013

ABSTRACT

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. According to *Ayurveda*, '*Kadara*' can be correlated with the condition of 'corn'. *Acharya Sushrut* has advised *Agnikarma* (cauterization) for *Kadara*. Hence, in this study corn (*Kadara*) was treated by *Agnikarma* with *Panchadhatu* Shalaka (instrument made of 5 metals) in a systematic manner for a duration of 15 days with intervals of 5 days in 3 sittings. Here, we have applied two types of *Agnikarma*. i.e. *Pratisaran* (flat type of cauterization) and *Bindu* (dotted type of cauterization) which were used in combination with application of *Tilatailam* (sesame oil) for better results. This combination therapy provided cured management, which is observed in the present case study. The patient was followed upto 6 months for observation of recurrence.

KEY WORDS: *Kadara*, Corn, *Agnikarma*, *Panchadhatu Shalaka*.

INTRODUCTION

The disease corn is a localized hyperkeratosis of the skin⁽¹⁾. It usually occurs at the site of pressure E.g. On the soles and toes, occurring due to defective foot wear, thorn prick, etc⁽²⁾. There is usually a horny induration of the cuticle with a hard centre. Corn is initially painless but it may be painful particularly when it is rubbed. Corn has tendency to recur after excision. It has a deep central core which reaches to the deeper layers of dermis⁽³⁾.

The disease '*Kadara*' is explained in '*Kshudra-roga*'. It is said that repeated injuries & friction to the sole with thorns, stones etc. leads to this condition⁽⁴⁾.

According to *Ayurveda* corn can be correlated with the disease '*Kadara*'. On the basis of symptoms given by *Acharya Sushruta*⁽⁵⁾ i.e. *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).

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 corn⁽⁶⁾.

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 dosha* gets pacify so that *Shool* (pain) is relieved⁽⁸⁾.

In reference to Chikitsa of *Kadara*, *Acharya Sushruta* and *Dalhana* mentioned the seat of the affected lesion should be excised and *Agnikarma* should be carried out with oil⁽⁹⁾. But for further evaluation in *Agnikarma* we carried out *Pratisaran* and *Bindu* in combination with the help of *Panchadhathu Shalaka* in the oil medium⁽¹⁰⁾. 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 45 year old female patient of *Kadara* (corn) visited OPD of *Shalyatantra* Department on 10th April 2012 with complaints of pain and elevated cystic swelling present on dorsal aspect of right sole due to rough and hard foot wear and barefooted. 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. After careful assessment and examination, patient was treated with *Agnikarma*.

MATERIALS & METHODS

Materials

For present study, the materials used are *Panchadhathu shalaka*, Gas Stove, *Triphala* decoction, Gauze pieces, Sponge holding forceps, *Tilatailam*, *Kumari svarasa*, *Haridra churna*.

Methods

After taking written informed consent, *Agnikarma* was done. The affected part was applied with *Triphala* decoction and wiped up with sterilized gauze piece⁽¹¹⁾. Then *Tilatailam* was applied with gauze. The red hot *Panchadhathu shalaka* is then applied to corn. Firstly, *Agnikarma* on corn was done for *Pratisaran* (flat type of cauterization) with the base of *Panchadhathu shalaka* and followed by *Bindu* (dotted type of cauterization) with the tip of *Shalaka*. Every *Shalaka* is applied within the area of corn for 30

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). After completion of procedure, the wound was covered with *Haridra* dusting powder. The entire procedure was repeated 3 times at the interval of 5 days for desirable results. Patient was advised to apply the paste of *Haridra* powder mixed with coconut oil at bed time upto normal appearance of skin.

DISCUSSION

The disease '*Kadar*' is explained in "*Kshudra-roga*" by *Acharya Shushruta*. According to him, "*Kshudra Roga*" is a disease having simple pathology but very difficult to be cured. *Meda* & *Rakta* are mainly responsible *Dosha* in the pathogenesis of *Kadara*. According to *Acharya Sushruta* when *Bheshaja Chikitsa*, *Kshar Chikitsa* and *Shastra Chikitsa* are unable to cure the disease only then *Agnikarma* can be used. 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 Taila*⁽¹²⁾.

CONCLUSION

- 1) Instead of surgical excision, *Agnikarma* therapy is more satisfactory in the management of corn.
- 2) 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.

ACKNOWLEDGEMENTS

- The Author expresses his sincere gratitude to Prof.P.R.Adhav. (Dean, Ayurved Mahavidlaya, Rahuri, Maharashtra).
- Our sincere thank you to our beloved student Pandurang J. Jadhav.

REFERENCES

1. S.Das; A concise textbook of surgery; S. Das publication, Calcutta, 4th edition, 1999, pg.no. 122.
2. Dr. Anant kumar Shekokar & Dr. kanchan Shekokar, Shalya tantra 2, Shantanu prakashan, Ahmednagar, 2nd edition 20, pg.no. 83.
3. Bailey & Love, Short Practice of Surgery, Oxford University Press Publication, New York, 23rd Edition, 2000, Pg.no. 173.
4. Ayurvedacharya shreeyadunandanaopadhyaya, Madhavanidanam Part-1, Chokhamba Sanskruta Sansthana, Varanasi, 31st Edition, 2002, Adhyaya no.55, Kshudraroganidan, Sutra no.26, Page.no. 203.
5. Dr.Anantram Sharma, Sushruta Samhita Part-1, Chokhamba Surbharati Prakashan, Varanasi, 1st Edition, 2001, Nidan Sthan, Adhyaya no.13, Kshudraroganidan, Sutra no.31, Page.no. 558.
6. S.Das; A concise textbook of surgery; S. Das publication, Calcutta, 4th edition, 1999, pg.no. 122.
7. Ayurvedacharya shreeyadunandanaopadhyaya, Madhavanidanam Part-1, Commentry of Bhoja, Chokhamba Sanskruta Sansthana, Varanasi, 31st Edition, 2002, Adhyaya no.55, Kshudraroganidan, Sutra no.26, Page.no. 203.
8. Dr.Anantram Sharma, Sushruta Samhita Part-1, Chokhamba Surbharati Prakashan, Varanasi, 1st Edition, 2001, Sutra Sthan, Adhyaya no.12, Agnikarmavidhiadhyaya, Sutra no.10, Page.no. 87.
9. Vd. Yadavji Trikamji Acharya; Sushrut Samhita of Sushruta with commentary of Dalhanacharya, chaukhamba surbharati prakashana, Varanasi, 2003, Chikitsa Sthan, Adhyaya no.20, Kshudrarogachikitsa, Sutra no.23 pg.no. 479.
10. Dr.Anantkumar Shekokar & Dr.Kanchan Shekokar, Principles & Practices of Agnikarma, Vol.1, Edition 2nd, Shantanu Publication, 2007, Pune, Page no.49.
11. Dr.Devendranatha pande, Anushtra karma parasurgical therapy at a glance, Vol.1, Edition 1st, Chaukhambha Publication, 2009, Varansi, Page no.75.
12. Dr.P.D.Gupta, Agnikarma Technological Innovation (Treatment by therapeutic Burning), Vol.1, Edition 1st, Prabha Publication, 1992, Nagpur, Page no.35.

Cite this article as:

Kanchan M. Borkar, Anantkumar V. Shekokar. Role of Agnikarma Therapy in the Management of Kadara (Corn): A Case Report. Int. J. Ayur. Pharma Research 2013; 1 (3): 67-72
Source of support: Nil, Conflict of interest: None Declared

***Address for correspondence**

Dr. Kanchan M Borkar
 Lecturer, Dept of Shalya Tantra
 S.V.N.H.T'S Ayurved Mahavidyalaya, Rahuri
 Factory, Ahmednagar, Maharashtra, India.
 Cell: +919960299603
 Email: drkanchanborkar@gmail.com

PHOTOGRAPHS



Fig.1. Corn before Agnikarma



Fig.2. Instruments for Agnikarma Therapy



Fig.3. Painting with Triphala Kasaya



Fig.4. Heating of Panchadhatu Shalaka



Fig.5. Red Hot Panchadhatu Shalaka



Fig.6. Pratisarana Agnikarma with Base of Shalaka



Fig.7. After Pratisarana Agnikarma



Fig.8. Application of Kumari Patra Svarasa



Fig.9. Bindu Agnikarma with Tip of Shalaka



Fig.10. After Bindu Agnikarma



Fig.11. Haridra Application after Agnikarma



Fig.12. 3rd Day after Agnikarma



Fig.13. After 2nd Sitting of Agnikarma



Fig.14. After treatment