



MANAGEMENT OF KADARA (CORN) BY AGNIKARMA FOLLOWED BY EXCISION - A CASE REPORT

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ABSTRACT

As a science of Life and Health, the different branches of Ayurveda have evolved over a long period as health is mainly concerned with preventing as well as curing diseases. There are a few diseases that have simple pathology but are difficult to cure called Kshudra-roga. Kadar 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 caps, salicylic acid, and excision. Even today there is no satisfactory and permanent treatment available for corn because of its high recurrence tendency. So we can use this integrated procedure that firstly we excise the corn under local anesthesia after that we apply Agni karma with panchdhatu shalaka. In Ayurveda procedure used for this disease is Agnikarma. Therefore, to keep all these things in mind Agnikarma with Panchdhatu Shalaka (instrument made of 5 metals).

INTRODUCTION

The disease Kadara is explained by Acharyas under the heading of Kshudra rogas.[1] Kshudra roga's are considered a disease having simple pathology but still very difficult to be cured. Sushruta has described the clinical features of Kadar. [2] Kadara can be correlat-

ed to disorders due to hyperkeratosis of the skin over certain parts predisposed to mechanical stress. Corn is a localized hyperkeratosis lesion of the foot or hand with a hard central core.[3] It is initially painless but may be very painful when gets rubbed. Wear-

ing improper footwear and negligence of foot care leads to the formation of corn in the feet which is present as a source of constant concern for the affected individual. Modern medical science has provided some preventive measures such as soft shoes or soft pads at the pressure point of the sole, application of salicylic acid on corn, use of corn caps, and lastly excision of corn. These procedures do not yield good results and are not devoid of recurrences as corn recurs again after excision. Bleeding, pain and post-excision infections are frequently observed. Thus, the modern method of treatment is not efficient to treat corn. Ayurvedic treatises have advocated the use of various procedures to treat the Kshudra rogas. Agnikarma has been mentioned as the appropriate treatment for Kadara. Sushruta described Agnikarma as a para-surgical procedure and mentioned it, as superior among all parasurgical procedures. It has been attributed to the property of curing diseases that cannot be cured by Shastra, Kshara, and Bheshja.[4] The treatment of Kadara by Agnikarma is aimed to stop the recurrence of corn after excision. Agnikarma followed by excision is the only procedure that has the property to destroy the pathology in the deeper structure. Agnikarma introduces heat in the affected area. This heat because of the specific properties(guna), is helpful to break the Kapha thus reducing Shotha, and ultimately Vata dosha gets pacified thus Shool (pain) is relieved.

Case Report

A 32-year lady with complain of one painful lesion on her left sole for 1 year came to OPD of the Shalya Tantra department of Seth Sakharam Nemchand Jain Ayurved Hospital, solapur in March 2021. She had a history of wearing hard sole footwear. She complained of extreme pain in her soles while walking and longtime standing. There was no history of trauma, diabetes mellitus, hypertension, or any systemic disease. She had used a corn cap along with analgesics as advised only excision but didn't get any relief. Then she searched for the options for the best and complete treatment for her disease. She got information through a newspaper about the treatment of corn, wart, mole, and callosity by Agnikarma proce-

dure done in our hospital, then she came to our hospital for better management of her disease. On the basis of clinical examination, she was diagnosed with Kadara (Corn).

Materials and Methods

Materials – The materials used are betadine solution, inj xylocaine 2% for Local anesthesia,

Shatdhuaat grut, haridra churn, gas stove, gauze pieces, sponge holding forceps, surgical blade No.11, artery forceps panchdhatu shalaka.

Methods Purvakarma: Before Excision in Minor OT written informed consent was taken. CBC, CT, BT, HbsAg, HIV, Blood sugar, and Sr. create, etc routine blood investigation done before the procedure. Injection of tetanus toxoid should be given. The sole of the right foot was cleaned with betadine solution and draping was done. Local Anesthesia is given.

Pradhankarma

Corn is excised with the help of surgical blade No. 11. After proper excision the red hot Panchdhatu shalaka is then applied to the corn. Firstly, Agnikarma on corn was done for Pratisaran (a 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 excised corn for 25 seconds. During the entire procedure, a shatdhuaat graut was applied after the application of red-hot Shalaka to get relief from the burning sensation. Appropriate precautions were taken to avoid the production of Asamyak dagdha (neither superficial nor deep burn).

Paschatkarma

After completion of the procedure, Dagdha vana should be covered with a mixture of Gritham and Haridra powder. The patient was advised to apply the paste of Haridra powder mixed with Gritham at bedtime upto normal appearance of the skin. The dressing is done on the 3rd, 5th, and 7th day.

DISCUSSION

Vata & Kapha are mainly responsible for Dosha and Dushya Meda and Rakta in the pathogenesis of Kadara. 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 complications such as purification and bleeding due to contact with Agni. As only Agnikarma therapy has the property to destroy the pathology in the deeper structure. Even modern science has also mentioned that the central core of corn reaches the deeper layers of the dermis and hence Agnikarma is the only therapy that can destroy the hyperkeratosis of skin with the properties of Ushna, Tiksha, Sukshma, Vyavai, Vikasi, and Pachana Gunas of Agni.

CONCLUSION

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

1. Agnikarma therapy is more suitable for the management after the excision 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. Only for surgical excision of corn, we can combine both the procedure, excision followed by 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 the Agnikarma procedure.

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