

MANAGEMENT OF KADARA (CORN) BY EXCISION FOLLOWED BY AGNIKARMA -
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ABSTRACT

Agnikarma refers to application of heat on the affected part and Kadar (Corn) is the hard thickening, hyperkeratosis of skin in sole, palm due to constant pressure and repeated minor trauma. Acharya Sushrut has described Kadar as Kshudra Roga in Sushrut Samhita Nidana Sthana addhyaya -13 and in Chikitsa Sthana addhyaya -20 which can be related to Corn as per modern science. Agnikarma was done by Panchadhatu shalaka, partisan followed by bindu pattern with the tip of shalaka. By the application of Agnikarma patient got relieved only on 1 week. Due to its no reoccurrence chance, it is the best treatment for the Kadara (Corn).

KEYWORDS: Agnikarma was done by Panchadhatu shalaka, partisan followed by bindu pattern with the tip of shalaka.

INTRODUCTION

क्षारादग्निर्गश्यान् क्रियासु व्याख्यातः, तद्वधानां रगिणाम्-
पुनर्भावाद् भेषजशस्त्रक्षारैरसाध्यानां तत्साध्यत्वाच्च । सु.सू.12/3

CAUSES

1. Improper walking motion.
2. Ill fitting shoes.
3. Heeled high shoes. High heel shoes put pressure of the toes and make women four times as likely as men to have foot problems
4. Foot deformities and wearing shoes without socks which leads to friction on the feet.
5. Corns may be harmful by causing abscess. Bacteria enters corns through breaks in the skin and cause the infected skin to discharge fluid or pus.

Risk Factor

1. All age people exception weight wearing infants.
2. Patients with certain medical conditions such as diabetes or connective tissue disease.

Self Care Guidelines

1. Were proper footwear that protect your foot and also allow equal distribution of your weight.
2. Maintain a good posture that doesn't put undue pressure on side of your foot.

3. Weight should be maintained overweight will over pressurize your feet.

4. Take care of your feet regularly by cleaning, rubbing and massaging.

CASE REPORT

A 17-year-old male patient, came to Shalya Tantra, OPD of R.D. Memorial P.G. Ayurveda College & Hospital with the complaints of pain in sole since 2 month. Patient complaint about the difficulty in walking and working and other house hold procedures patient suffer with mild pain too. Patient complaint about the pain about 6 month before coming here in hospital. He had no history any past illness. Also no history of family members with diabetes hypertension or cardiac related disorder.

Examination

On examination, various corns are seen at left sole of patient.

AIMS AND OBJECTIVE

To evaluate the effect of excision and Agni-karma under local-anesthesia.

Investigation

1. Laboratory Investigation: Blood tests including bleeding time, clotting time, complete blood count, blood urea, fasting blood glucose, HIV, HbsAg.

2. Instruments: Instruments such as mosquito forceps, Allies forceps, shalaka, burner, blade(11 no.) , artery forceps and scissors should be placed ready on a trolley.

Written informed consent was obtained prior to the procedure from patients and Attendants

MATERIALS

Surgical blade no.15, BP handles, Gloves, Sterile gauze piece, Forceps, tooth forceps, Artery forceps Flame source, Triphala kwath, Agnikarma shalaka,. Tila Taila, Madhhu (honey), Sarpi (ghee), Yastimadhu.

Pre-operative procedure

The patient was maintained nil orally from 6 hours before surgery.

- Injection xylocaine sensitivity 2% 0.1 ml ID was performed.
- Injection of T.T. 0.5 ml intramuscularly given Stat.
- Painting and Drapping of the surgical area.
- The patient lies in the supine position.

Painting is done with a sterile and antiseptic solution, followed by aseptic draping.

2. Operative procedure

- Kadar (corn) part clean with Triphala kwath.

- Drape it with sterile cut drape sheet.
- Infiltration of 3 to 5 ml of 2% Xylocaine in surrounding of corn.
- Surgical blade put into BP handle and complete corn has excised in shape of a conical hard tissue.
- Cauterized it with very hot Agnikarma shalaka which dipped in Tila Taila, till then Samyak dagdha lakshan are not appear (eg. Shabda pradurbhava, Sira sankoch, Krishna vranta etc.)
- Appropriate precautions have taken to avoid production of Asamyak dagdha (neither superficial nor deep burn), because too deep wound get delay in healing and too shallow has create recurrence of corn.

Post operative procedure

- Dagdha vrana should be anointed with mixture of Madhu and Sarpi
- Patient has advised to alternate day dressing till wound get completely heal. Wound get heal within 7 to 10 days

The patient was discharged with the following internal medications.

- Triphala guggulu 2 BD
- Yastimadhughrut lep L/A
- Gandhak Rasayan 2 BD



DISCUSSION

Meda & Rakta are mainly responsible Dosha in the pathogenesis of Kadar.

Salyatantra is one of the important branch of Ayurveda based on six major methods of management such as

Bhesajkarma, Ksarakarma, Agnikarma, sastrakarma, Yantrakarma, Raktamoksana.

Agnikarma is superior among them and boon for local Vata & Kaphaja Vyadhi and diseases treated by Agnikarma do not recur. It gives instant relief to the patients. There is no fear of complication such as purification and bleeding due to contact with Agni. According to Acharya Sushruta when Bhesajkarma Chikitsa, Kshar Chikitsa and Shastra Chikitsa are unable to cure the disease only then Agnikarma can be used.

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). Agnikarma due to its Usna Sukshma, Asukri guna pacifies the Vata Kapha Dosa and removes Srotavarodha. Patient is effectively relieved from stiffness, pain and other associated symptoms. Modern science has also mentioned that central core of corn reaches in the deeper layers of dermis. Agnikarma with Sneha dagdha 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.

CONCLUSION

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 pain 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 Taila.

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