Clinical Study Of Lohashalaka For Agnikarma In Kadar

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Introduction

The disease ‘Kadar’ is explained in “Kshudra-roga”. It is said that repeated injuries & friction to the sole with thorns, stones etc., or by the doshas becoming aggravated together with fat and blood, hard like bolt, in the middle or at the end of feet of the size of a kola (jujube fruit) having a pain & exudation this known as kadara.

The disease corn is a localized hyperkeratosis of the skin. It usually occurs at the site of pressure e.g. on the soles and toes, occurring due to defective wear, thorn prick etc. There are usually horny indurations 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. The chikitsa of Kadara, according to Acharya the site of the affected lesion should be burn with metal rod. Therapy seems to be more effective to provide instant relief done perfectly, the disease never reoccurs.

Materials

For present study, the materials used are as follows:
Gloves, Sterile gauze piece, forceps, tooth forceps, Artery forceps, flame source, lohashalaka, betadine solution, spirit, shatdhutgrhita.

Methods

1. Purvakarma – Written informed consent to be taken, Light snigdh diet given to patient. Preoperative investigation (CBC, CT, BT etc.) should be normal in range; injection tetanus toxoid should be given before procedure, Xylocaine sensitivity to be checked.

2. Pradhankarma – After cleaning the diseased part with Betadine solution, spirit, drape it with sterile cut drape sheet, infiltration of 2% xylocaine in surrounding of corn & cauterize with very hot lohashalaka, till then samyakdaghda lakshan are not appear (e.g. shabapradurbhava, sirafromch, Krishna vranta etc.). Appropriate precautions have taken to avoid production of Asamyakdaghda (neither superficial nor deep burn), because too deep wound get delay in healing and too shallow has create recurrence of corn.

3. Paschatkarma – Dagdha vrana should be anointed with shatdhutgrhita of patient has advised to alternate day dressing till wound get completely heal. Wound get heal within 7 to 10 days.

Discussion

‘Kadar’ is explained under the “Kshudra-roga” by Acharya Shushruta. According to him, “Kshudra-roga” is an ailment having simple pathology but very difficult to be cure. Meda & Rakta are mainly responsible Dosha in the pathogenesis of Kadara. According to Acharya Shushruta when
Bheshaja Chikitsa, Kshar Chikitsa and Shastra Chikitsa are unable to cure the disease only then Agnikarma can be used. Agni burns the body residing in substances. Agnikarma with metal road cause burn of skin hence there will be severe pain a as per Ayurvedic concept, Kadara may develop as the vitiation of Vata with Kaphadosha. Vata and Kapha dosha have been considered as the important factors for causation of Shotha (inflammation) and Shoola (pain). Agnikarma (cauterization) introduces heat in the affected area. This heat is Ushna, Tikshna, Laghu, Sukshama, Vyavayi and Vikash in properties, which is helpful to break the Kapha thus reducing Shotha and ultimately Vatadhosha gets pacify so that Shool (pain) is relieved. 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 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.

Conclusion
1. No antibiotics & Anti-inflammatory are administrated to the patients.
2. Dagdha with lohashalaka therapy is more suitable in the management of corn instead of surgical excision with surgical excision patient has to abstain his routine activities. Whereas by Agnikarma patient can do his all activities. It has no side effects, complications & recurrence. Thereare no significant changes occurs in healing of corn when suvarnashalaka, lohashalaka was be used. It enables the patient to do his or her daily routine activities within a few minutes of procedure. This therapy is less costly as compared to surgical excision in respect to number of post excision dressing, Antibiltic of lohashalaka easily available it’s very cheap so it is very useful in Kadara.

Reference
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