



Case Study

AN AYURVEDIC MANAGEMENT OF KADAR W.S.R. TO CORN – A CASE STUDY

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Abstract

As a science of Life and Health, the different branches of *Ayurveda* have evolved over the long period as health being mainly concerned with preventing as well as curing the diseases. With change in time and life style of people, increased pace of life the symptoms of some disease become violent. There are few diseases which have simple pathology but difficult to cure that called as *Kshudra-roga*. *Kadar* is one of such kind of disease, which give more trouble for patient & intervenes with routine work. *Acharya Shushruta* describes '*Kadar*' under "*Kshudra-roga*". *Acharya Bhoj* also describes this disease. In modern sciences it can be compare with corn.

A Corn is a specially-shaped callus of dead skin that occurs on thin or glabrous surface of toe. Repeated injuries and friction to sole cause the corn. Wearing defective wear, thorn prick, etc can also cause the corn. Corn is being treated by using anti NSAID drugs, salicylic acid, corn cap, and at end surgery. There is no satisfactory and permanent treatment available for corn and have its high recurrence tendency. Shalyatantra has been hailed as the most important branch of Ayurveda. The uniqueness of Shalyatantra is due to the availability of dual treatment procedure i.e., *shlya karma* (surgical procedure) & *Anushastra karma* (para surgical procedure like *Agnikarma, Raktamokshana* etc.) *Acharya Shushruta* has advices *Utkartan* (excision) followed by '*Agnikarma*'. it is best treatment for prevent recurrences of *Kadar*.

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INTRODUCTION

Ayurveda is the science, which is still in the practice having the unbroken continuity. It represents the totality of life and gives the total knowledge required to maintain the holistic balance of the functioning of mind and body.

Shushrut samhita is the main pillar of Ayurvedic surgery. According to *Acharya Shushruta* '*Kadar*' is one of the "*Kshudra-roga*". Too much pressure or repeated friction, injury on some part of body give rise to *Kadar* (corn). due to these cause the *Doshas* becoming aggravated together with fat and blood, it give rise to a tumour, hard like bolt¹. The disease corn is a localized hyperkeratosis of the².*kadar* (corn) generally occurs on the top and sides of toe³.wearing defective wear, thorn prick, etc also cause of *Kadara*. A corn tend to be small and round with painful spot in the middle and yellowish skin surrounded it.

Corn is initially painless but it may be painful particularly when it is rubbed. Corn has tendency to recur after excision.

Shalyatantra is one of the important branches of *Ayurveda* based on six major methods of management. 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* the seat of the affected lesion should be *Utkartan* (excised) and *Agnikarma*.⁴ This therapy is more effective than other.

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*

METHODS

1. *Purvakarma*⁵

- Written informed consent to be taken.
- Pre-operative investigation done (CBC, CT, BT, HbsAg, HIV, Blood sugar etc).
- Injection tetanus toxoid should be given before procedure.
- Xylocaine sensitivity (test dose) to be checked.

2. *Pradhankarma*

- *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.

3. *Paschatkarma*

- *Dagdha vrana* should be anointed with mixture of *Madhu* and *Sarpi*⁶.
- Patient has advised to alternate day dressing till wound get completely heal. Wound get heal within 7 to 10 days.

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 *Bheshaja Chikitsa*, *Kshar Chikitsa* and *Shastra Chikitsa* are unable to cure the disease only then *Agnikarma* can be used⁷.
- *Agni* burns the body residing in substances which are unctuous (fatty, oily) and dry. Fatty substance (*sneha dravya*) getting heated by fire, by their action of travelling through minute vein, pore (*sukshmasiranusari twagadinamanupravishyasho*) enter quickly into the skin etc. and cause burning, hence there will be severe pain when burnt by fatty substances⁸.
- 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).⁹
- *Agnikarma* due to its *Usna Suksma*, *Asukri guna* pacifies the *Vata Kapha Dosa* and removes *Srotavarodha*. Patient is effectively relived from stiffness, pain and other associated symptoms¹⁰.
- 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*¹¹.

CONCLUSION

Kadar (corn) can be re-occur if its only surgical excision done. *Agnikarma* with *Sneha Dagdha* therapy is more suitable in the management of corn. *Agnikarma* is superior 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*. It enables the patient to do his or her daily routine activities within a few minutes of procedure. In modern surgery number of post excision dressing, Antibiotic, Analgesic and Anti inflammatory and wound healing promoting drugs. This *Ayurvedic* therapy is best as compared to surgical excision of modern science.

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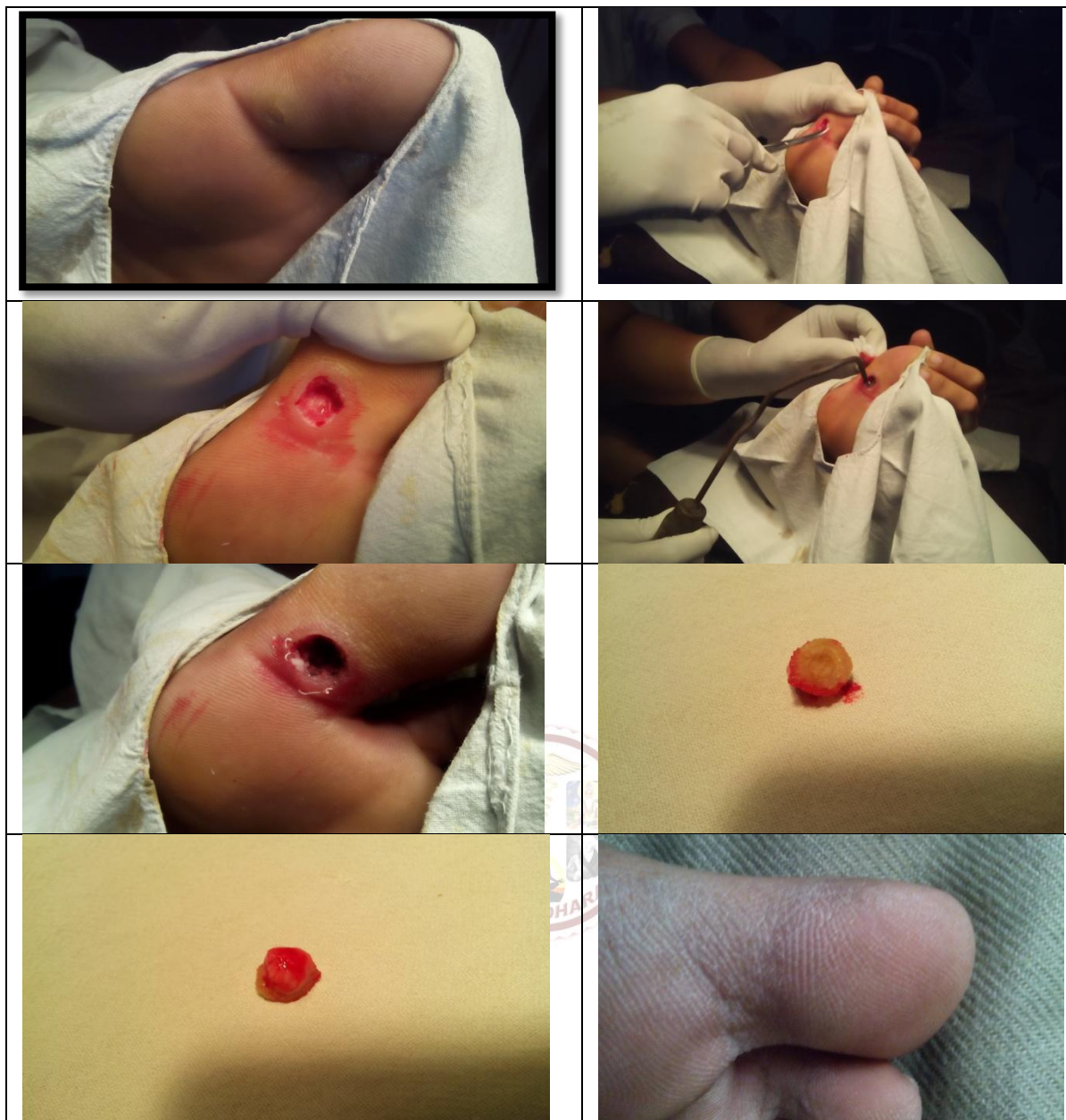


Figure: An Ayurvedic Management of Kadar WSR Corn – A case study