



A COMPARATIVE CLINICAL STUDY ON EFFICACY OF AGNIKARMA WITH LOUHA SHALAKA AND KSHARA KARMA WITH PALASA KSHARA IN CHARMAKEELA W.S.R. TO WARTS

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ABSTRACT

Charmakeela is one among the Kshudra rogas. Excited Vyanavayu unites with the aggravated Kapha, producing a kind of hard black coloured growth on the skin which is called Charmakeela (Twagarsha). According to Acharya Vagbhata, painless, sprouts on the skin with finger like projections either white or black in colour are called as Charmakeela. This can be correlated to Warts. Warts are multiple hyperkeratotic skin lesions characterized by rough surface surrounded by horny collar appearance caused by the Papilloma virus.

Acharya Sushruta and Acharya Vagbhata explained Agnikarma and Kshara karma, for the management of Charmakeela. Agnikarma prevents recurrence. Louha shalaka is mentioned for Twakgatha Rogas. Louha which is easily available metal and it gets heated easily on exposure to fire So it's used more commonly in Agnikarma when compared with other shalakas. Kshara is very important among Anushastras, and it does Chedana, Bhedhana, Lekhana Karmas and Tridosha hara. Palasa kshara can also be advocated in arsas. Palasa kshara is abundantly available and it is having more teekshna property. This study is mainly meant to evaluate the efficacy of Kshara karma with Palasa kshara and Agnikarma with Louha shalaka in the management of Charmakeela.

INTRODUCTION

Ayurveda deals with the science of life and its prime aim is to maintain the health of the healthy people and to cure the diseases of the diseased. Skin disease, due to its unnatural nature draws the attention of others, which may cause embarrassment for the person suffering from it.

Charmakeela is one among the *Kshudra rogas*. Excited *Vyanavayu* unites with the

“चर्माणि गुह्यस्य चर्मपि कील इवेति वा”

Binding or *keela* (nail) formed on *charma* or in the *charma* of private parts

like Anus (*guda*) is called *Charmakeela*

“चर्म कीलतीथि”

That which forms like *keela* or binding on *charma* (skin) is called *Charmakeela*.

CHIKITSA OF CHARMAKEELA :

There are different types of treatments for *Charma keela*.

- (1) *Agni Karma*
- (2) *Kshara Karma*
- (3) *Chedana Karma*

In different chapters of *Sushruta Samhitha* under different diseases there are detailed descriptions about the procedures of doing these treatments. i.e. the expansion of *Agnikarma*, *Ksharakarma* and *Chedanakarma* in the respective context. *Charmakeela* has to be excised by *Shastra* and it has to be cauterized by *Suryakantha*, *Kshara* And *Agni*.

Charma Keela (*Jathumani*, *Tilakalaka* And *Mashaka*) should be treated by *Chedana* with a *Shastra* and later treated with *Kshara* Or *Agni*.

चर्म कील जातुमनि मषकान तिलकालकान उत्कृत्य

aggravated *Kapha*, producing a kind of hard black coloured growth on the skin which is called *Charmakeela* (*Twagarsha*). According to *Acharya Vagbhata*, painless, sprouts on the skin with finger like projections either white or black in colour are called as *Charmakeela*. This can be correlated to Warts. Warts are multiple hyperkeratotic skin lesions characterized

शस्त्राण धायत क्षारग्निभ्य अशेषाथः”इति भावप्रकाश

Bhavaprakasha opines that *Charma Keela* should be either excised with a *Shastra* then it should be treated with *Kshara* or *Agni*. Along with *Bhavaprakasha* other authors like *Astanga Sangraha*, *Gadanigraha*, and *Yogarathnakara* followed the line of treatment adopted by *Acharya Sushruta*.

Figure No-01- Warts:



C) MODERN DISEASE REVIEW:

WARTS

Warts or Verrucas are benign proliferation of the skin and mucosa that result from infection with the papilloma virus. Verruca or Condyloma is common contagious, epithelial tumour caused by human papillomavirus (HPV).

AETIO PATHOGENESIS

Papilloma virus

Human papillomaviruses (HPV) are very widespread-to-ubiquitous in humans, causing subclinical infection or a wide variety of benign clinical lesions on skin and mucous membranes. They also have a role in the oncogenesis of cutaneous and mucosal pre-malignancies and malignancies. More than 150 types of HPV have been identified and are associated with various clinical lesions and diseases.

HPV are small, non enveloped icosahedral viruses containing double-stranded DNA genome of the papovavirus class, which infect most vertebrate species with exclusive host and tissue specificity. They infect squamous epithelia of skin and mucous membranes. Clinical lesions induced by HPV and its natural history are largely determined by HPV type. HPV are normally grouped according to their pathologic associations and tissue specificity either cutaneous or mucosal.

DISCUSSION

Charmakeela has been described as one of the *Kshudra Roga* in *Sushruta Samhita*. Similar description regarding the disease is available in *Astanga Hrudaya*, *Astanga Sangraha*, *Madhava Nidana*, *Bhavaprakasha Samhita*, *Yogratnakara*, *Gada Nigraha* and *Vangsen Samhita*. Even though the description of *Charmakeela* in all these texts is limited, but it is very precise and devoid of any controversy.

Acharya Sushruta explained that the excited *Vyanavayu* united with the aggravated *Kapha*, producing a kind of hard growth on the skin which is called *Charmakeela* or *Twagarsha*. According to

Acharya Vagbhata, painless, sprouts on the skin with projections are *Charmakeela* which may be either white or black in colour.

As per modern surgical texts Warts are multiple hyperkeratotic skin lesion with finger like projections, characterized by rough surface, surrounded by horny collar that is caused by the Papilloma virus. Warts resemble with the symptoms of *Charmakeela*

Acharya Susruta and *Acharya Vagbhata* have explained *Agnikarma* and *Ksharakarma* are the main treatments for *Charmakeela*. *Agnikarma* and *Ksharakarma* are the special techniques of *Ayurveda*, explained by our *Acharyas*, are used to prevent the recurrence and to give cosmetically accepted scar.

After thorough review of literature about *Charmakeela* the following observation are made:

1. *Charmakeela* can be correlated to Warts which are multiple hyperkeratotic skin lesions with finger like projections, characterized by rough surface, surrounded by horny collar that is caused by the Papilloma virus as described in Modern medical science.
2. Aggravation of *Vata* and *Kapha Dosh* is mainly responsible for the manifestation of *Charmakeela*. *Agnikarma* is considered as best therapy for *Vata* and *Kapha Dosh* because *Agni* possesses *Ushna*, *Sukshma*, *Tikshna* and *Aashukari Guna* which are opposite to *Vata* and *Kapha*.
3. *Kshara* is very important in all *Shastras* and *Anushastras* because, it does *Chedana*, *Bhedana* & *Lekhana Kriya* and *Tridoshahara*. *Acharya Charka* defines *Kshara* as that which scrapes away the abnormal tissues from its deep rooted location, or drags it down after dissolving by its corrosive nature.

CONCLUSION

1. *Charmakeela* has been mentioned in the *Ayurvedic* classical literature as one of the *Kshudra Rogas* in which small peg like growths are seen on the skin, which gives ugly appearance to the body.
2. An attempt is made to correlate Warts to *Charmakeela* as the symptoms of Warts has similar *lakshanas* described in *Ayurvedic* literature.
3. Warts are benign proliferations of skin with dome shaped papilliferous surface, which consists of an acanthotic epidermis with hyperkeratosis which is caused by the Papilloma virus.
4. *Agnikarma* and *Kshara karma* were taken for the management of Warts in order to evaluate the effectiveness on the lesion, as explained under *Kshudraroga adhikaras*.

5. Both the methods were simple, economical and could be conducted in outpatient department and minor O.T. Hospitalization was not required for the patients.
6. Management of *Charmakeela* by *Agnikarma* with *LouhaShalaka* and *Palasa prathisaraniya Kshara Karma* were effective in the total removal of the lesion of *Charmakeela*.
7. *Agnikarma* with *Louha Shalaka* gave better results with respect to clearance of the lesion, cosmetic considerations and faster healing.
8. Among the two methods of management, *Agni Karma* was proved to be more advantageous, since Normal texture of skin was regained in 66.7% of cases in Group-B without any deformity.

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