

Article on Effect of Chedana Karma Followed by Kshara Karma in Management of Kadara (Corn) a Case Study

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ABSTRACT

Kadara is one of the kshudraroga as mentioned by our acharyas like sushruta, vagbhata and others. Repeated abhighata to the padatala causes elevation at the particular part nothing but kadara. Kadara is correlated with corn in modern science which is a hard thickening and hyperkeratosis of horny layer of skin cause due to constant pressure and repeated minor trauma. Corn is a raised painless epidural thickened patch which are commonly seen in hands, feet, tips of toes and dorsal surface of the interpretation joint. Ayurveda explains chedana, kshara karma and agni karma for management of kadara. Here an attempt has been made to treat the kadara by chedana karma followed by kshara karma with sarjakshara.

Materials and method – The patient was selected from the outpatient Department of Shalya, SCJ TMAE'S Society hospital after subjecting the patient to clinical examination and lab investigation. The patient is treated with chedana karma and followed by Kshara Karma.

Results - Patient treated with chedana karma and followed by kshara karma had marked improvement

Conclusion – The treatment was found effective and economical.

INTRODUCTION

The acharyas of Ayurveda described that diseases may be of mild effective or more effective which may cause severe pain or some of them don't have pain. Kadara is one of the kshudraroga as mentioned by our acharyas. kadara is correlated with corn in modern science which is a hard thickening and hyperkeratosis of horny layer of the skin caused due to constant pressure and repeated minor trauma. These are commonly seen in hands, feet, tips of toes and dorsal surface of the interphalangeal joint.

Modern system medicine of surgery adopted several methods for treatment for corn like soft corn salicylic acid plasters or keratolytic agents. For hard corn which is removed surgically or other methods like filler injections, cryotherapy, laser, chemical cauterization. Each procedure in modern system has its own advantages. Even with these procedures people have still the problem of recurrence and suffer

from corn. Ayurveda explains chedana, kshara karma and agnikarma for the management of kadara. We are doing chedana followed by kshara karma with sarjakshara.

Sarjakshara having thikshna and ushanaguna. This acts on the reminent surface of the corn excised area causing vidirana action leading to permanent solution for kadara by preventing reoccurrence. This method makes it safe, minimal invasive, simple, inexpensive, less time consuming method at OPD level.

Case Report

A 30 year old male patient complaints of pain, swelling, hardness, tenderness at 1st met head of the planter surface or ventrum.

History of present illness

Patient was said to be apparently normal 2 months back. He gradually developed the above symptoms

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Treatment history

He was treated locally in a private hospital with no reduction in symptoms therefore patient approached our hospital

Personal history

Appetite-normal
Bowel -Full formed stools once/twice per day
Micturition- 4-5 times per day
Sleep - Disturbed
Habit - Smoking since 5 years

Occupation

Patient is labor and work for 8 to 10hours per day

General Examination

Built – Moderate
Pallor- absent
Icterus-absent
Clubbing-absent
Cyanosis- absent
Lymphadenopathy- absent
Edema-Present

Systemic examination

CVS – S₁S₂Heard no added sound
CNS – Conscious well oriented
RS - Chest bilaterally symmetrical

PLA - Soft, non-tender, non-palpable

Vitals

Pulse rate- 79 bpm
Blood pressure- 130/80mmhg
Temperature- 98°F
RR - 18 cycles /min

Local examination

Inspection –On Physical examination there is slightly pale in color when compared to normal part of sole, swelling - +

Palpation – Tenderness- Present
Temperature-Slightly raised
Hard thickening – Present (hyperkeratosis)

Investigation- HB- 13.4 mg
HIV-Negative
Hbsag- Negative

Differential Diagnosis

Wart- These are viral infections, highly contagious. These are multiple and distributed all over sole and tangential pressure on the lesion cause pain.

Corn – Thick keratin cones, painful and these are 1-3 in number over pressure points. Vertical pressure on the lesions causes pain.



Assessment Criteria**PAIN**

- 0--- nil / no pain
 1---mild pain
 2---moderate pain
 3---sever pain

SIZE OF SWELLING

- 0---No swelling
 1---Below 2 mm(mild)
 2---Below 4 mm(moderate)
 3---above 4mm(severe)

TENDERNESS

- 0---No tenderness
 1---Tenderness to palpation without grimace
 2---Tenderness with grimace
 3---Tenderness with withdraw

TREATMENT PLANNED

POORVA KARMA -- The part of lesion was washed with clean water was cleansed with the help of dry sterile cotton swab.

PRADHANAKARMA – The kadara was grasped with allies tissue forceps. The excision was done with the help of sterilized no 11 scalpel blade with BP handle. After excision sarjakshara that was collected in a glass dish with a thickness of nakha pramana (1mm) and it was retained on the lesion and bandaged for a period of 5 hours. After 5 hours the lepa was washed with sterile water and applied haridra and bandage is done.

PASCHAT KARMA--- The next bandage was placed on the 5th day again the excision done with scalpel and the sarjakshara applied and bandaged. The procedure was repeated on the subsequent days of observation the effect of treatment was observed on 10th and 15th days.

ASSEMENT CRITERIA AFTER TREATMENT

CRITERIA	BEFORE TREATMENT	AFTER TREATMENT		
		5 th DAY	10 th DAY	15 th DAY
PAIN	3	2	1	0
SWELLING	3	1	0	0
TENDERNESS	3	1	1	0

RESULTS

The corn healed completely after 15 days of treatment. Patient got relief from pain and tenderness and swelling.

DISCUSSION

The results show the effectiveness in chedhana along with sarjakshara lepa. The removal of corn in first sitting and application of kshara is maintained every 5th, 10th, 15th day which reduce to chance of recurrence. According to reference sarjakshara is considered to be a potential drug in the management of diseases of morbid growth when it is used in the form of pratisaarniya kshara. As kshara has strong ksharana andusna guna based on these factors sarjakshara was taken up as main drug in management of kadara which is a morbid growth on the external parts of the body involving twacha.

Above results prove the authenticity of the ayurvedic reference that kashara karma and chedana karma in curing the kadara.

CONCLUSION

Management of kadara by chedhana and followed by kshara application effective in the total removal of kadara without recurrence. It was simple, economical and could be conducted in outpatient department or minor OT.

There will be temporary disadvantage like mild pain and scar formation in chedana followed by kshara application has been encountered.

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