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## Case Study

### ROLE OF AGNIKARMA WITH ELECTRIC CAUTERY IN CHARMAKILA W. S. R. TO WART- A CASE DISCUSSION

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#### ABSTRACT

*Agnikarma Chikitsa* was at peak level in *Sushruta* period but its use was declined gradually in modern era due to lack of availability of instruments and also the therapy was not easily acceptable by patient so in the present case study discussion we have made attempt on the disease *Charmakila* with the help of electric cauterization which is nothing but advanced version of ancient *Agnikarma* therapy. In present case study observation, efficacy of electric cauterization therapy shows minimum invasive parasurgical method in *Charmakila* (wart). One patient was treated on OPD basis in a minor OT of Ayurved college hospital Rahuri. Treatment was well tolerated by patient without complication during the therapy and post operative period. Hence, use of electric cautery as an *Agnikarma's Dahanaupakarana* in *Charmakila* is a best option with minimum trauma, easily acceptable by patient and surgeon in their fast day-to-day life.

**KEYWORDS:** *Agnikarma, Charmakila, Wart, Electric Cauterization.*

#### INTRODUCTION

In ancient era *Agnikarma* practice was very peak because it shows negligible recurrence <sup>[1]</sup>, *Agnikarma* therapy cures those diseases which are incurable, chronic disease are made easily curable and also *Tridoshaja vyadhi* can be cured by *Agnikarma Chikitsa* <sup>[2]</sup>. But due to undeveloped *Dahanaupakarana* this therapy has been not easily acceptable by patient and *Shalya Chikitsaka*. Hence to decrease the distance between *Dahanaupakarana* and patient we had tried to use electric cautery as an advanced version of *Agnikarma's Dahanaupakarana*.

*Acharya Sushruta* had given *Agnikarma Chikitsa* in the disease *Charmakila*<sup>[3]</sup> which can be correlated with wart in modern science on the basis of visual appearance. As it gives rise to peg like immovable sprouts in the exterior skin.

*Sushruta* gives pathology of *Charmakila* that *Vyana vata* getting aggravated and associating with *Shleshma* and gives rise above appearance known as *Charmakila* <sup>[4]</sup>. But *Acharya Charaka* explained *Charmakila* as *Adhimansa* and they also advocated *Agnikarma Chikitsa* for *Adhimansa* <sup>[5]</sup>. According to *Charaka* *Agnikarma* should be performed only by expert surgeon as it may leads to unwanted hazards due to negligence of inexperienced person <sup>[6]</sup>.

Wart is a skin growth caused by some types of virus called human papiloma virus<sup>[7]</sup>, most wart go away on their own within months or years. Wart can grow anywhere on the body and the spread of the wart by sharing towels, razors or other personal items<sup>[8]</sup>. Wart comes in a wide range of shapes and sizes. They are usually painless

but can be painful after pressure or infection and also it gives ugly appearance to the skin surface of patient. The choices of treatment for wart includes chemical cauterization, cryosurgery, surgical excision and laser surgery<sup>[9]</sup> but above treatment modalities are time consumer and expensive which is not affordable by common people and not available in rural area and hence present case study of *Agnikarma* with electric cautery in *Charmakila* was selected.

A case of 38 years old patient working as farmer who visited to OPD of *Shalyatantra* department of *Ayurved Mahavidhalaya Rahuri* on 10 March 2014 with complaints of wart in a left axilla which causes disturbance during the axilla shaving, irritation, maximum concentration towards it. There was a history of home remedies treatment with caustic but patient was unsatisfied with that. Local, general and systemic examination of patient was carried out and patient was diagnosed as a wart (*Charmakila*) and advised *Agnikarma* with electric cautery. Before *Agnikarma* therapy routine blood and blood sugar level was investigated which observed normal. Thereafter *Agnikarma* therapy with electric cautery was carried out for removal of wart. No adverse effects were being observed throughout the entire procedure, to observed any recurrence of wart at the same site patient was followed upto 3 months but recurrence of wart not observed. Patient was fully satisfied by *Agnikarma* therapy with electric cautery.

#### **Procedure of *Agnikarma* with electric cautery**

After taking informed written consent the affected part was shaved and cleaned with betadine. It was then wiped with dry sterile cotton gauze. Red hot probe of electric cautery with electric supply was used for removal of wart. Removal was done from the base of wart. Mild burning sensation was observed but it was tolerable by patient. After

completion of procedure *Jatyadi Ghrut* was applied locally to get relief from burning sensation and healing of the wound. Patient was advised to apply *Jatyadi Ghrut* locally upto normal appearance of the skin.

#### **DISCUSSION**

During this therapy we observed that removal time was very short i, e 10 second and without blood loss and wound healing time was observed within 7 days and normal skin color was observed within 21days.

#### **CONCLUSION**

*Agnikarma* with electric cautery is a simple, safe, easily tolerable, uncomplicated and economical. Removal with *Agnikarma* therapy in wart is better than surgical excision. *Agnikarma* therapy is an OPD procedure. Hence this case study shows that *Agnikarma* therapy with electric cautery is helpful in management of wart.

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**PHOTOGRAPHS**



**Figure 1: Instruments for Agnikarma**



**Figure 2: Wart in Axilla**



**Figure 3: Painting of affected part**



**Figure 4: Holding of wart in artery forceps**



**Figure 5: Red hot probe of electric cautery**



**Figure 6: Application of probe at base of wart**



**Figure 7: Removed wart**



**Figure 8: Wound after removal of wart**