

Management of *Charmakeela* with *Agnikarma* and *Kshara karma*: A case report

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Abstract

Agnikarma (therapeutic burn/cauterization) and *Kshara* are unique treatment modalities mentioned in Ayurveda under surgical methods. Acharya Susrutha has given a detailed description of *Agnikarma*. *Agnikarma* and *Kshara* show significant importance in *Shalya tantra* because of the non-occurrence of diseases that are treated by *Agnikarma*. *Charmakeela* (warts) is a disease mentioned under *Kshudra roga* in the Ayurveda system and has various treatment principles including administration of *Aushadha* internally and external procedures like *Raktamokshana*, *Ksharakarma*, and *Agnikarma*. These treatment methods are minimal invasive procedures which has minimal scar formation, non-recurrence, and are found to be more beneficial in treating warts. This single case study is carried out for a 15-year-old patient who visited to *Shalya* clinic of Ayurveda National Hospital, Sri Lanka with multiple warts presented below the dorsal surface of left elbow joint for 06 months. He was treated with *Agnikarma* followed by application of *Apamarga theekshna kshara*. Post-operative dressing was done with *Velmi churna*. His wounds healed within 15 days with minimal scar. Through this case study it can be determined that *Agnikarma* combined with *Kshara* application is an effective treatment for the management of *Charmakeela* (warts).

Keywords: *Agnikarma*, Warts, *Charmakeela*, *Ksharakarma*, Ayurveda

Introduction

Ayurveda views skin health as an indicator of overall well-being, and there are various Ayurveda remedies and treatments for all skin conditions. Ayurveda approach to skin care often involve a combination of herbal remedies, dietary changes, lifestyle modifications, and sometimes external therapies like herbal pastes, oil and also surgical procedures. Each condition is typically treated based on its specific underlying causes according to Ayurveda principles. *Charmakeela* can be identified as a common clinical entity encountered in general practice in present era. *Charma* means skin, and *Keela* refers to corn like growth or eruption¹. Ayurveda texts has been explained *Charmakeela* as a *Vata*, *Kapha dosha* predominance condition². Since ancient times, *Charmakeela* has been a common medical issue that requires additional attention due to its cosmetic effect.

Acharya Susrutha who is the greater sage and father of surgery has explained *Charmakeela* under *Kshudra roga* as well as in *Nidana sthana* also explained while explaining *Anyasthana gata arshas*¹. He has explained *Samprapthi* as aggravation of *Vyana vata* get associate with *Kapha dosha* give rise to immovable, sprouts like eruptions in the exterior skin. It is called as *Charmakeela* or *Arshas* in *twacha/skin*². This *Charmakeela* condition can be correlated with warts most of times which have similar clinical features and descriptions⁵. Wart is a small, hard, benign growth on the skin, commonly caused by human papilloma (HPV) virus⁶. According to Ayurveda medical system,

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classical method of treating *Charmakila* with *Anushastra karma* specially *Agnikarma* followed by *Kshara karma* is having respectable result³.

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According to Ashtanga Hridaya Samhitha, among the all-sharp instruments and accessory instruments (*Shatshra* and *Anushasthra*), *Kshara* (caustic alkali) is the best due to its actions such as incising, excising etc. *Kshara* can be used for treatments where difficult to access and in diseases which are very difficult to cure⁴. Warts (*Charmakeela*) also can be cured with *Ksharakarma* treatments⁵.

According to Ayurveda texts *Agni karma* (thermal cauterization) is better than even the *Kshara*, because the diseases treated by *Agni karma* do not recur. *Agnikarma* can be used for the diseases which have not been successfully treated by *Aushadha* (Drugs), *Kshara* and *Shashra* (Sharp metal surgeries)⁶. Wart is mentioned as one of the Indications *Agnikarma*⁷.

Materials and Methods

Sampling methodology and study design

After examine the patient, he was selected for the treatment after obtain a consent from the patient's parents and also from patient. Patient was treated with *Agnikarma* and *Ksharakarma* as the main procedure. The treatment period was 15 days.

Case history

A 15-year-old male patient referred to *Shalya* clinic of Ayurveda National Hospital Sri Lanka, presented with complaints of painless pale color multiple disfiguring skin lesion appeared below the left elbow joint for 06 months. Parents have noticed a lesion in the same area 01 years back which is associated with mild pain and itching and no discharge. After few months later pain has reduced. After that, the lesion was gradually increased in size and number also. And there weren't any similar lesions any other parts of the body.

Past history of illnesses

Bronchial asthma for 08 years

No history of Diabetes Mellitus, Hypertension, Thyroid dysfunction and other systemic disorders

Personal history

Diet - Irregular meals, mixed diet, non-vegetarian, daily consumption of dhal, less water intake.

Appetite – Normal.

Sleep - 6-7 hours at night. Sound sleep.

Micturition - 4-5 times during day and 1 time during night. On and off Bed wetting.

Bowel - regular, twice in a day.

Habits – Plain tea 03 times per day.

General examinations

All vital parameters are in normal levels.

Built and nourishment – Moderate

Body Temp - 99.2F

Edema – absent

Lymphadenopathy – absent

Heart rate - 80 bpm

BP - 110/70 mmHg (09.00am)

Respiration - 18 BPM

Systemic examination

Cardiovascular system examination - S1, S2 heard, no murmurs or added sounds

Respiratory system examination - Normal breathing sounds

Per Abdomen examination – Umbilicus centrally placed, inverted Soft, non-tender, Normal

Central nervous system examination - Patient fully conscious and well oriented to time placed and person Sensory, Motor, reflexes and Coordination are normal.

Local Examination before treatment

On Inspection (Figure 1)

Size of *Charmakeela*: 0.5cm in width, 14 in number cluster.

Shape: round shape and some warts are united together

Position: Posterior and below aspect left elbow joint

Discharge: Absent

Color: greyish pale

On palpation

Tenderness: absent

Sensation surrounding area: Normal

Sensation on lesions - Less

Consistency: Hard

Surface: Rough irregular

Temperature: Normal

Color: greyish pale



Fig.1: Before treatment (Cluster of warts)

Criteria for assessment

The effect of the treatment was assessed by grading scale of subjective and objective parameters mentioned Table 1, 2 and Scar evaluation scale (Table 3)

Table 1: Subjective parameters

	0	No pain
<i>Vedana</i> (Pain)	1	Mild pain on touch
	2	Mild pain even occasionally
	3	Continuous, severe pain throughout day and night
	0	No burning sensation
<i>Daaha</i> (Burning sensation)	1	Mild occasional episodes of burning
	2	Moderate continuous burning sensation
	3	Severe continuous burning disturbing sleep.
	0	No itching
<i>Kandu</i> (Local itching)	1	Mild occasional episodes of itching.
	2	Moderate continuous itching sensation
	3	Severe continuous itching disturbing sleep.

Table 2: Objective parameters

	0	No tenderness
<i>Sparsha</i> <i>asahishnutha</i> (Tenderness)	1	Tenderness on deep palpation
	2	Tenderness on moderate pressure
	3	Tenderness on touch
	0	No discharge
<i>Sraava</i> (quantity of discharge)	1	Serous discharge.
	2	Sero-purulent discharge
	3	Purulent discharge.
	0	More than 90 % and complete
Epithelialization	1	More than 50% and not complete
	2	Less than 50%
	3	No epithelialization

Table 3: Scar evaluation scale

Feature	Scar category	Grade
Width	Above 2mm	1
	Bellow 2 mm	0
Height	Elevated/depressed in relation to surrounding skin	1
	Same level to around skin	0
Color	Darker than surrounding skin	1
	Same to normal skin	0
Hatch / Suture marks	Present	1
	Absent	0
Over all appearance	Poor	1
	Good	0

It incorporates assessments of individual attributes and overall appearance to yield a score ranging from 0 (best) to 5 (worst)

Treatment protocol

After obtaining the informed consent, the patient was asked to sit comfortably on a chair. Area lesion marked and painted with betadine solution; *Agni karma* was done by using diathermy machine till presenting *Samyak twakdagdha lakshana*¹². Then applied *Apamarga theekshna kshara* on cauterized areas. After 03 minutes *Kshara* has washed out and

dressing was done with *Velmi churna*. Patient is advised to change the dressing daily.

observed on treatment day (figure 2) 2nd, 5th and 7th day, 10th day and 15th day for scar and recurrence (figures 3, 4, 5, 6 and 7 respectively).

Results and Observations

Table 4 shows before, during and after the treatment procedure on subjective and objective parameters.

Table 4: results of before, during and after treatment

Criteria	Before treatment	After 2 days	After 5 days	After 7 days	After 10 days	After 15 days
Subjective criteria						
<i>Vedana</i> (pain)	0	0	1	0	0	0
<i>Daaha</i> (burning sensation)	0	0	1	0	0	0
<i>Kandu</i> (local itching)	0	0	1	1	0	0
Objective criteria						
<i>Sparsha Asahishnutha</i> (tenderness)	0	0	1	0	0	0
<i>Sraava</i> (discharge)	0	0	0	0	0	0
Epithelialization	-	3	3	2	1	0
Scar evaluation scale	-	-	-	3	2	1
Recurrence of wart with average diameter	-	-	-	-	-	-



Fig.2: Immediately after the treatment



Fig.3: After 2 days of treatment



Fig.4: After 5 days of treatment



Fig.5: After 7 days of treatment



Fig.6: After 10 days of treatment



Fig.7: After 15 days of treatment

Discussion

Charmakeela (warts) are very common condition in present society among adults and also children. Normally they are round or oval shaped lesions with rough surfaces. Color may be skin color to grey. Commonly Warts are caused by a virus (HPV Virus) and are communicable, recurrence and multiple lesions may be occurred due to insufficient treatments.

Ayurveda ancient Acharyas have mentioned *Agni karma* and *Kshara karma* as a best treatment modality to treat *Charmakila*. According to Susrutha Samhitha, *Agnikarma* is supreme in all the para surgical procedures. When treatment is failed with medicine, *Kshara* or surgical intervention like *Agni karma* is the best for those diseases.

Surgical excision alone is not recommended in management of warts because of wound may become inoculated with the virus because warts itself arise due to viral infection. It may lead to recurrence in and around the scar.

According to the results it has been exhibited there was no any pain around or on the lesion after the treatment. Usually very deep-rooted warts cause pain because deep rooted growth are irritating nerve endings. After the treatment, pain can be occurred because of the inflammation but in this case study, with *Kshara* application the pain has been reduced. It can be reduced due to *Kshara* and it has pain releasing (*Sanjanahara*) activity. *Daaha* (Burning sensation over the treated area and around the wound) is usual due to provoke of *Vata* and *Pitta dosha* (*Kopa*) with cauterization. But after application of *Velmi churna*, the patient has not felt *Daaha* and it can be due to the reduced *Vata* and *Pitta dosha* actions of *Velmi churna*.

After 15 days of combined *Agni karma* and *Kshara karma* treatments, all subjective and objective criteria have become normal state. But considering the scar, there was mild elevation from normal skin level. It can be taking more days to become regular. There was no any recurrence around affected area. With results of above case study, there is rapid progression of wound healing with the treatment. With applying *Agni karma* and *Kshara karma*, it can

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be caused to increases metabolism, blood circulation, decreased inflammation, decreased pain, and removal of hyperkeratotic tissue. *Velmi churna* application can be help to removal of all dead cells and regenerate cells with its *Vrna shodhana* (purify wound) and *Vrna ropana* (wound healing) activity.

Conclusion

Agnikarma is a method that has been practiced in different places under different names since ancient times. With modern science this has been modified with various devices. Diathermy machine can be considered as such device. Although modern techniques and tools are more sophisticated, the fundamental ideas remain the same. There is a very poor chance to occur the recurrence of a disease following *Agnikarma*. Which is also safe, easy to tolerate, low cost, and can be performed in Out Patients Department also. This case study has been demonstrated *Charmakeela* or warts can be well managed with *Agni karma*, *Kshara karma* followed by *Velmi churna* application.

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