

## Agnikarma treatment in the management of Corn (Kadar): A case report

Shyamsundar Sampat Jagtap <sup>1, \*</sup> and Yogita Hiralal Thite <sup>2</sup>

<sup>1</sup> Saarth Ayurved Chikistalay and Panchakarm center, Rahatani, Pimpri Chinchwad, Pune, Maharashtra, India.

<sup>2</sup> Department of Rognidan and Vikruti vidyagn, Dr. Vijay Ayurved Medical College, Kaithi, Varanasi, UP, India.

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### Abstract

**Background:** *Agnikarma* is regarded as the best of the *Anushastras* because of its quick results and long lasting effects. It is said that there is no recurrence of disease when treated with *Agnikarma* and also diseases which are not treated with medicine, shastras and kshar are best treated with *agnikarma*. For (*apunarbhav*) non recurrence of disease *Agnikarma* is advised. Ayurvedic classics stated the use of *agnikarma* in the management of various *kshudraroga*, *Kadar* (corn) is one among them. The pathophysiology of *kadar* is caused by vitiated *meda* and *rakta* by injury to foot which in turn leads to gland like hard skin texture at foot known as *Kadar* (corn). In present case study efficacy of *agnikarma* in the management of *Kadar* as stated in ayurvedic texts is evaluated.

**Methodology:** *Agnikarma* was done with *loh shalaka* with exision of *Kadar* followed by application of oil with 3 settings in which each setting is for 3 days. Proper follow up was taken for about six months in order to observe for any recurrence.

**Observation:** It was observed that within a month the complete skin of foot healed without leaving any sign of slough discharge. The patient observed after 1 year there is no recurrence of corn again at that particular site.

**Conclusion:** It can be concluded that *Agnikarma* is not only a successful tratment in treating corn (*kadar*) but also there is no recurrence again.

**Keywords:** Agnikarma; Kshudraroga; Kadar; Corn; Loh shalaka; Dahan.

### 1 Introduction

Corn (*kadar*) is mentioned under *kshudraroga* by Acharya Sushruta (1). The employment of numerous treatments to treat *kshudrarogas* has been supported in Aurveda text & *Agnikarma* has been emphasized for its effective management (2, 3). *Agnikarama* is a minimally invasive therapy that leaves no scars, has no recurrence & has been reported to be more effective in the treatment of *kadar* (corn). (4, 5) *Agni* was said to be superior to the other *Anushastras* because of its quick results & long -lasting treatment. So *Agnikarma* is mentioned best for corn (*kadar*). (6)

Symptoms of *kadar* which are mentioned in classical ayurvedic texts resembles with Corn in modern science. *Kadar* (corn) is mentioned by *Sushartacharya* in *Nidan Sthan* (7). They further mentioned its causes as (8)

- Due to : walking with bare foot causing direct contact with ground may cause injury by stone repeatedly.
- Or there may be injury to foot by thorn etc .
- Wearing shoes having nails on its surface causes injury to foot.

\* Corresponding author: Shyamsundar Sampat Jagtap

Pathophysiology of *kadar*(corn) - Due to causes mentioned above there is *Doshprakop* (vitiating of *dosha* ) which leads to *Rakta, meda dhatu dushti* . These vitiated *doshas* causes very hard skin structure over the foot the like *granthi* (glands) known as *kadar* (corn).(9) Further more *Acharyas* have stated that it is small, round, raised bump of hardened skin surrounded by irritated skin. It is painful which worsen while walking. It may be *sravi* (having collection of fluids), and pain increases after touching. (10)

*Acharya Shushruta* have mentioned *Chikitsa* in classical text as *dahan karma* by *shalaka* (stick of iron). It should be done for 3days repeatedly 3-4 settings, also advised further treatment according to *vrana* i.e. application of oil if all part of *kadar* removed carefully then recurrence can be avoided. (11, 12, 13)

As mentioned by Modern science, (14) CORN is localized hyperkeratosis of skin.

- It usually occurs at site of pressure e.g. On the sole & toes.
- There is usually a horny in-duration of the cuticle with a hard centre.
- Corn may be painful when it is rubbed.
- Corn has tendency to recur after excision.
- A corn has a deep central core which reaches the deeper layers of dermis.

## Treatment

Preventive only-

- Using soft shoes /soft pads at pressure points of the sole.
- Salicylic acid in collodion on successive night may be applied.
- Central local application have been effective such as Corn-ac or Carnation cap .
- If these measures fail & the corn is painful it should be excised with particular care to take off the deep root of the central core which prevents recurrence.

As there is no specific treatment for corn by modern science so present case study of agnikarma in mangment of *kadar* was chosen.

### 1.1 Patient information

Patient name: XYZ, Age/Gender- 45 yr /female.

Residence: Pune

Attended OPD at Saarth Ayurved Chikitsalay and Panchakarma Center at Rahatani on 15 /1/ 2022.

- Chief complaints: ubhay padshool , padtal shool( foot pain) while walking.
- Present history: patient took treatment for the same but not got any relief therefore he came to OPD for further treatment
- Past history: patient had injury to foot by stone 1 year back taken treatment for same then he developed corn at particular site and having pain at that site, so came for treatment.
- No history of hypertension, diabetes mellitus, asthma or any systemic disorder.
- No any family history.
- No any psychological history.

### 1.2 Clinical findings

Physical examination: Patient was normal built with all vital signs normal. No any other deformity.

#### 1.2.1 Local Examination

- Inspection :
  - Shape - irregular
  - colour - yellow
  - Numbers - 1 size - 0.5cm
  - Position - on right foot lateral side.
  - No any discharge.

- Palpation :  
Tender on touch, irregular, painful on touch.
- Patient started the complaint of having pain on walking since 1 month so she came for further treatment.

**Diagnostic assessment:** not done as not needed.

### 1.3 Treatment

- Internal: *Raktapachak, medopachak* medicine for 3 months.
- External: *Agnikarma* - by *Loh Shalaka* for 3 days repeatedly followed by application of seasmum oil.

3-4 settings done for 3 weeks.

**Table 1** Details of lakshanas(symptoms) in patient after the agnikarma procedure

1 st week	3 days	Pain decreased after 1 settings. And size of corn reduced.	Oil applied
2 nd	3 days	Pain totally reduced after 2nd setting.	Seasum oil
3 rd	3 days	After 3rd setting corn burnt .	Seasum oil
4 th	3 days	All root of corn burnt for non recurrence	Seasum oil

There is no any wound at the site of *agnikarma*.

Follow up -

- After 3 months - no any recurrence.
- After 6 months - no any recurrence.

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## 2 Discussion

Patient was suffering from foot corn since 6 months , but last 1 month pain is worsened during walking , as she has taken specific treatment by modern science other than prevention ,but no relief, patient came to Ayurveda for treatment so as to have non recurrence of disease. As knowing disease pathophysiology we planed for agnikarma treatment and under all aseptic precautions, agnikarma done. It is with help of loh shalaka, which was heated till it becomes red hot and placed over site of corn till tissues of site burnt (15). Shalaka was reheated whenever required and applied over site until samyak dagdha lakshanas i.e. appropriate agnikarma symptoms i.e. it will appear like taal tree fruit, black, wound will not be much deeper and pain reduction is there. (16) . Agnikarma will not cause any bleeding and controls infection(17). With all these precaution corn removed completely with its roots so that there no recurrence observed in that patient.

Therefore, it can be noted from above case that *Agnikarma* is a good treatment management to treat corn.

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## 3 Conclusion

*Agnikarma* is easy, safe and cost effective to the patient and tolerable. There is no any complication like recurrence. Therefore, it can be concluded from the study that *Agnikarma* is not only effective for treating corn but also prevents the recurrence.

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## Compliance with ethical standards

### Acknowledgments

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*Disclosure of conflict of interest*

There is no conflict of interest of author in present study.

*Statement of informed consent*

A Written Informed consent was obtained from patient before starting of the treatment.

*Patient perspective*

Patient got relief completely from all symptoms and also not having any recurrence.

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