



Case Study

EFFECT OF SNEHADAHANA IN THE MANAGEMENT OF KADARA - A CASE REPORT

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ABSTRACT

Kadara is a *Kshudra Roga*, first mentioned by *Acharya Sushruta*. It is a condition which causes extreme pain and discomfort to the affected person. *Kadara* may be correlated to Corn based on the causative factors, site of the swelling, clinical and other features. The incidence of corn in India is more than 10 million cases per year. The treatment modalities available at present in the modern science are the usage of corn caps, salicylic acid paints, cryotherapy and surgical excision. All these modalities are associated with a high rate of recurrence. *Snehadahana* is mentioned as the line of management in *Kadara* after *Utkarthana* by all the *Acharyas*. *Acharya Bhoja* specifically mentions *Tila Thaila* as the *Sneha dravya* to be used for *Agnikarma*. In the present study, a 53 year old female patient, who visited the OPD of Sri Jayendra Saraswathi Ayurveda College and Hospital with a case of *Kadara*, was selected for *Snehadahana*. *Chedana* was done prior to *Snehadahana*. The procedure was carried out as 4 sittings, once a week, for a period of 4 weeks. Two follow ups were done at an interval of 14 days, after the fourth sitting of *Snehadahana*. There was complete healing of the wound and no recurrence seen until the follow up period.

INTRODUCTION

India is a country with a huge working class population with the majority of its population engaged in laborious work. Inadequate usage of footwear, walking barefoot are common practices seen in the labour class. Among the urban population, there is a rampant problem of the usage of improper or ill fitting footwear. Both these, will lead to the formation of various foot lesions, with foot corn being the most commonly prevalent condition which brings a person to the doctor. Corn is formed due to the hyperkeratosis in a localised area due to undo repeated pressure. It reaches the deeper layer of the dermis due to its deep central core^[1]. In a global scenario, corn accounts to 14 to 48% of the participants who visit a podiatric clinic^[2]. India reports more than 10 million cases of foot corn every year^[3]. The management of foot corn is by using corn caps which leads to the destruction of the tissues or by surgical excision under local anaesthesia.

Both these see a high rate of recurrence. Many works are available for *Agnikarma* in *Kadara* using *Panchaloha* and other *Shalakas*. *Agni karma* with *Sneha dravya* is the treatment procedure mentioned for the management of *Kadara* after *Utkarthana*^[4]. *Agnikarma* is one among the *Anushastra* or para-surgical procedure mentioned by *Acharya Sushruta*^[5]. It is considered as the most important treatment modality among *Bheshaja*, *Shashtra* and *Kshara*, due to its ability to remove the disease from its root. Also, the condition managed by *Agnikarma* does not recur^[6]. Hence this study was taken up to evaluate the effect of *Snehadahana* in *Kadara*.

CASE REPORT

Patient Information

A 53-years old female patient who is a homemaker visited the OPD of *Shalya Tantra* with the complaint of pain in the left sole of the foot while walking, since 1.5 years.

History of Present Illness

The patient was apparently well before 1.5 years. She had a thorn prick which went unnoticed for a few days. She then developed a swelling which gradually developed pain and the pain kept increasing day by day.

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Kadara on left foot



Chedana Karma



After Chedana



Thaila heated to smoking point



Thailadahana



After Treatment

History of Past Illness

Nothing specific

Surgical History

Nothing specific

Family History

No related family history

General Examination

Height - 153cm

Weight- 65kg

BMI- 27.8

BP- 120/70 mmHg

PR- 76 bpm

RR- 18/min

The patient was also assessed with *Dashavidha pariksha* [Table 1] and *Ashtavidha pariksha* [Table 2].

Table 1: Dashavidha pariksha

S. No	Dashavidha pariksha	Result Interpretation
1	Prakriti	Pitta - Kapha
2	Vikriti	Vata-pitta
3	Sara	Mamsa
4	Samhanana	Madhyama
5	Pramanam	Pravaram
6	Satmyam	Sarvarasa
7	Satvam	Madhyama
8	Vayah	Madhyama
9	Ahara Shakti	Pravaram
10	Vyayama Shakti	Avaram

Table 2: Ashtavidha pariksha

S. No	Ashtavidha pariksha	Result interpretation
1	Nadi	Vata-kapha
2	Mala	Nirama
3	Mutra	Samanyam
4	Jihwa	Nirlipta
5	Shabda	Samanyam
6	Sparsha	Anushnasheeta
7	Drik	Samanyam
8	Akruthi	Sthula

Nidana Panchaka**Hetu:** Thorn prick**Purvarupa:** Rough swelling on the sole.**Rupa:** Tender circular swelling on the left sole in the 5th metatarsal head region**Upashaya:** Rest**Samprapti:** Nidana → Vata Kapha Prakopa (Sthanika) → Kolasthi Sadrudha Granthi → Kadaram**Additions**

Nil

Clinical FindingsSite: Plantar aspect of left 5th metatarsal head region

Size: 3.8 cm in diameter

Shape: Circular

Surface: Rough

Number: Solitary

Discharge: Absent

Tenderness: ++

Consistency: Hard

Investigations Done

Hb, TC, DC, ESR, RBS – all within normal limits

HIV – Negative

Methodology

Consent for the procedure was obtained from the patient. The part was cleaned by swabbing with spirit. The swelling was felt with a tissue holding forceps and was excised from the root. Therapeutic burn was made over the excised area with *Tila thailam* that was heated up to its smoking point. *Dahana* was done until *Samyak dagdha lakshana* was observed. *Ghritakumari majja* was applied over the site of *Dahana*. Bandaging was done. The procedure was repeated once a week for further 3 consecutive weeks. The follow up was done twice, at an interval of 2 weeks after the 4th session of *Agnikarma*.

RESULT**Pain and tenderness:** Reduced considerably after the 1st session of *Agnikarma*. Complete relief was obtained after the 4th session of *Agnikarma*.**Consistency:** Became soft after the 2nd session.**Wound Healing:** Complete wound healing was observed in the 1st follow up session. There was no pain or tenderness at the site of *Dahana*.**DISCUSSION**

Snehadahana is the treatment of choice mentioned in the management of *Kadara*. *Tila thaila* was taken up as the *Sneha dravya*. According to *Bhavaprakasha*, it has the properties of *Madhura rasa*, *Kashaya anurasa* with *Ushna veerya* and *Madhura vipaka*. Due to these properties, *Tila thailam* works as *Vata kapha hara dravya*^[7]. *Agnikarma* is a procedure widely used in the management of pain. It also helps to root out diseases from its base. In the present case, patient had complete relief from pain after the procedure. Except for the burning sensation during the procedure, the patient felt no other discomfort after the completion of the procedure.

CONCLUSION

Snehadahana is an *Anusastra karma* which is indicated in pain. In the present case of *Kadara*, the patient had complete relief from pain and was able to walk without any discomfort after the completion of the procedure. No recurrence was observed until the second follow up. So *Snehadahana* gives promising results in the management of *Kadara*.

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