

RESEARCH ARTICLE

EFFECT OF AGNIKARMA IN CHRONIC DERMATITIS.

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..... Abstract Manuscript Info Acharya Sushruta, father of surgery, has described various surgical Manuscript History procedures along with various para-surgical measures. Agnikarma is a Received: 16 October 2017 therapeutic measure in Ayurvedic system of medicine, which has got Final Accepted: 18 November 2017 worldwide popularity because of its simple administration and efficacy Published: December 2017 in variety of disorders. It is a unique form of therapy performed with the help of agni which has been described to be superior to kshar Kev words:karma, as the disease treated by agnikarma do not relapse and Agni, Agnikarma, dadrukustha, moreover those incurable by medicines (bheshaja), operations Ksharkarma. (shastra), and kshara are also cured by Agni. According to Sushruta samhita, in kapha dominant dadru kustha there are patches like atasi flower, blackish-purple or copper with spreading tendency with eruptions and itching are present. Agnikarma cures all the vata-kaphaja disorders as the ushna guna of agnikarma is opposite to that of vata and kapha doshas. According to the Hippocratic Text of Aphorism -" what the drug will not cure, the knife will cure, what the knife will not cure, the cautery will cure, what the cautery will not cure, must be

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Introduction:-

Acharya Sushruta and Acharya Vagbhata have both given superior place to Agnikarma as compared to Ksharakarma as cases treated with Agnikarma chances of recurrences are rare. It causes coagulation and closure of bleeding vessels and thus helps in homeostasis. It also eradicates disease from its root and so considered to be superior.

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considered incurable".

Classification of Agnikarma¹

- A. According to Dhatus
- 1. Twakdagdha:
- 2. Mansadagdha:
- 3. Siradagdha:
- 4. Sandhi-asthidagdha:
- Black discoloration, elevation of the site, suppression of discharge. Dryness, red discoloration, roughness and hardness.

Production of crackling sound, bad odor and contraction of skin.

Color like that of pigeon, mild swelling, mild pain, dry contracted wound.

- B. According to Akriti 1. Valaya: Circular shaped 2. Bindu: Dot shaped Straight line
 - 3. Vilekha:

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- 4. *Pratisarana*: Rubbing/ spreading at the indicated site
- 5. *Ardhachakra*: Crescent shaped²
- 6. *Swastika*: Specific shape of swastika $yantra^2$
- 7. *Astapada*: Specific shape containing eight limbs in different directions²

C. According to *dravya* used³

- 1. *SnigdhAgnikarma:* Performed by means of honey, ghee and oil to treat diseases situated in *sira*, *snayu*, *asthi* and *sandhi*.
- 2. *RukshaAgnikarma:* Performed by means of *pippali, aja-sakrit, danta, shara, shalaka, godanta, jambostha,* and other metals to treat diseases situated in *twak* and *mansadhatu.*

D. According to the site

- 1. Local: As inkadara, vicharchika, arsha.
- 2. Distal to the site of the disease: As in vishuchika, antra-vridi, apachi, gridhasi etc.

Dahanupakarana⁴

- 1. Plant origin: Pippali, Yasthimadhu, haridra, guda, sneha, taila, sarjarasa.
- 2. Animal origin: *Aja-sakrit, godanta, madhuchchista.*
- 3. Other metals : Panchdhatushalakais made ,up of Tamra (copper) 40%, Loha(Iron) 30%, Yashada (Zinc) 10%, Rajat(Silver) 10% and Vanga (Tin) 10% .

Pichuu-varti, suryakanta and wax is also used as dahanupakarana⁵.

Indications⁶: *Agnikarma* should be done in conditions such as presence of very severe pain in the skin, muscles, veins, ligaments, bony joints, and bones, caused by vata aggravation, muscles which are grown upwards (new growths), hard and without sensation; ulcers/ wounds, tumors, hemorrhoids, malignant tumors, fistula-in-ano, glands in the neck region, filariasis, warts on the skin, moles, hernia, tearing of the joints, and veins, sinus ulcer and profuse hemorrhage.

Contraindications⁷

This has been mentioned under two sub-headings

- 1. *Nishedhakala:* Agnikarma can be done in all seasons except *Sharad* and *Grishma ritu*. But in case of emergency; it can be done in any season, by providing favorable temperature artificially and counters measures.
- 2. *Roginishedha: Pitta-prakriti, raktapitta rogi, atisari,* childern, old aged, coward, lean and thin patients, pregnancy, and retained foreign body.

Material and Method:-

- A 36 years old female factory worker of lower middle class was admitted in female IPD, Department of *Shalya Tantra*, *Uttarakhand Ayurved* University, Harawala, Dehradun with chief complaint of severe itching with spreading skin lesion over the dorsum aspect of the right foot since last 2 years. She has gone through various medical treatments to cure the problem, but her itching and spreading tendency of the lesion was persistent. Then she approached *Harawala* hospital in *shalya* department for better management.
- Past history:

No H/O DM, HTN, Thyroid, TB, syphilis.
Widow

• Personal history :

Systemic examination:		
CNS:	Well oriented	
CVS:	Both S1, S2 clear with no added sound	
Respiratory:	B/L clear with no added sound	
Abdomen:	NAD	

Physical examination:

BP:	128/82 mm/ hg			
P/R:	84/ min, regular			
Respiration rate:	18/min			
Temperature:	Afebrile			
Body weight:	56kg			

Local examination: (dorsum aspect of right foot)

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Shape:	Irregular with asymmetrical outline
Size:	5*4 cm
Surface:	Black colored, rough with elevated margin
Temperature:	Normal
Tenderness:	Non-tender
Discharge:	Absent
Itching grade:	Severe
Dosalis pedis:	Palpable
Lymphadenopathy:	Absent
Blood investigations:	Normal

SampraptiGhataka:

Doshas:	Kapha
Dushya:	Twaka, Rakta, Mansa, Lasika,
Agni:	Jatharagni, Dhatwagni
Srotas:	Rasavaha, Raktavaha, Swedavaha, Mamsavaha, Manovaha
Marga:	Bahya
Udhbhava:	Amashaya
Sanchara:	Triyaggamisira
Adhishtana:	Twacha

After careful analysis of the disease (*Dadrumandala* or Chronic dermatitis) and its *kapha* predominance, a*gnikarma* was planned for the patient. Patient was counseled and given explanation about the procedure. Written consent was taken.

Poorva Karma: Patient was advised to have *picchila anna* (lubricated food) prior to the procedure as described by Acharya Sushruta. Because of its *jivaniya*, *balya*, *sandhaniya* and *guru* properties, it provides adequate strength to the patient to smoothly undergo the procedure. All the materials and instruments required for the procedure were collected. Injection T.T. 0.5 ml I/M stat was given to the patient for prophylaxis.

Pradhan Karma: The affected part was cleaned up properly with *triphla kwatth*. The red hot *panch-dhatushalaka* was applied over the affected area encircling the entire circumference of the affected part. During the procedure, aloevera pulp was also applied simultaneously over the burnt area.

Paschat karma: Ghee and honey was applied over the *samyak dagdha* part for proper wound healing and the patient was advised to have proper diet. The patient was advised not to wet the area for the next 24 hours. The procedure was repeated after seven days up to one month.

Result:-

After the one month of the *Agnikarma*, the patient has got marked improvement in her symptoms. Severe itching was reduced to a mild grade. The lesion remained only one third within one month, and black color and uneven surface changed to skin colored- even surface.



(A) Cleaning with *triphala* decoction



(B) During the procedure



(C) After the procedure

Discussion:-

Possible mode of action: Agnikarma cures all the vata-kaphaja disorders as the ushna guna of agnikarma is opposite to that of vata and kapha doshas. According to Ayurveda, every dhatu has its own dhatwagni and when it becomes low, disease begins to manifest⁸. In this condition, agnikarma works by giving external heat, thereby increasing the dhatwagni which helps to digest the aggravated doshas and hence cures the disease. The local thermo therapy may increase tissue metabolism which may lead to excretion of the unwanted metabolites and toxins.

The use of thermotherapy may provide relief of pain and painful muscle spasm by acceleration of metabolic processes whereby the concentration of pain inducing toxic metabolites is reduced. This is accomplished primarily by an increase in local circulation. Acceleration of the inflammatory response to resolution may initially exacerbate discomfort, but will shorten the time course to resolution of inflammation⁹. The gate control theory of pain asserts that non-painful input closes the "gates" to painful input, which prevents pain sensation from travelling to the central nervous system. Therefore, stimulation by non-noxious input is able to suppress pain. This explains why pain perception is not felt by the patient during the procedure¹⁰.

Conclusion:-

Agnikarma has been explained as one among the *anusastra*. Almost all the *ayurvedic* classics have described the use of *agnikarma* in curing various disorders as *pradhankarma* and in some disorders as *paschat karma*, to cure complications. Its importance lies in its action, because of its ability to cure those diseases which cannot be cured by the *bheshaja*, *shastra* and *kshara-karma*. Its result oriented for local involvement of *vata* in *vata-kaphaja* disorders. The number of sittings depends upon chronicity and severity of the disease.

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