

**Cosmetic use of *TikshnaKadalikanda Kshara* application in management of *Charmakeela* (Common Warts) - A Single Case Study****Ramya R \*<sup>1</sup>, Mamatha HM <sup>2</sup>**

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**Abstract:**

Warts, a Verruca, are one of the most common viral infections seen in primary care and affect approximately 7% to 10% of the population. Warts are the diseases which has troubled the humans since antiquity. Warts cause disfigurement by occurring on the areas, which cause loss of beauty like on face, neck, hand etc; depression can occur by cosmetic values. The most common treatment modality used to treat the warts include electric cautery, cryotherapy, surgical excision etc, which are invasive procedures and commonly leads to scarring, hyper pigmentation and high incidence of recurrence and disfigurement. In Ayurveda Acharya Sushruta had considered it under *Kshudra Rogadikara*. Sushruta Acharya has mentioned *Pratisaraniya Kshara* (Local application of Kshara) as one among treatment modalities in the management of *Charmakeela*. In this case report, a male patient of 25 years consulted to outpatient department, with complaints of pedunculated common warts on left side of neck. The patient was treated with local application of *TikshnaKadalikanda kshara* for 2 times in single sitting. Hence the study concluded that excision of *Charmakeela* through *kshara karma* is one of the potential treatment options to avoid recurrence.

**Key words** – Ayurveda, *Charmakeela*, *Kadalikanda kshara*, *Kshara*, warts.

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**Introduction:**

Warts are benign epidermal proliferation<sup>[1]</sup>, typically small, rough and hard growths that are similar in colour to rest of the skin. They typically do not show any symptoms except when on the sole where they may be painful. The range of types of warts have been identified varying in shape and skin effected, as well as the type of human Papilloma virus involved like common warts, flat warts, mosaic warts, periungual warts, plantar warts etc.<sup>[2]</sup> *Charmakeela* can be compared to warts based on the signs and symptoms as explained in classics.<sup>[3]</sup> Warts, the third common skin disease encountered in practice, have a higher prevalence in adults. The most common age group is 14 to 20 years (46.03%). The male to female ratio is 1.8: 1. Family history of Warts is observed in 27.7% of the cases. In children, multiple site involvement (62.9%) was more common than single site involvement. The most commonly involved site is hand. In adults, single site involvement (66.6%) was more common than multiple site involvement. In modern medicine Warts are treated by electric cautery, cryotherapy, surgical excision etc, which are invasive procedures and commonly leads to scarring, hyper pigmentation and high incidence of recurrence.<sup>[4]</sup>

*Charmakeela* is one among the *Kshudra roga*<sup>[5]</sup> mentioned by Sushruta which is common clinical entity encountered in general practice. It is a condition which was prevalent from ancient times that needs treatment more for a cosmetical reason and social stigma. Sushruta has mentioned *Pratisaraniyakshara* as one among the

treatment modalities in the management of *Charmakeela*. The *Kshara* is having *Kshanana* and *Ksharana* properties (selective destroying the abnormal tissue).<sup>[6]</sup> Even *Kshara* has quick action. Its functions are *Chedana* (excision), *Bhedana* (incision), *Lekhana karma* (scraping) and one among the *Anushastras*.<sup>[7-8]</sup> When compared to contemporary treatment there is a need to find a drug which is easily available throughout the year, less irritant, equally safe and cost effective in treatment of warts. Sushruta in *Ksharapakavidhi*<sup>[9]</sup> Adhyaya has mentioned 23 drugs, *Kadali* is one among them from which *Kshara* can be prepared<sup>[10]</sup>, which is easily available and it is cost effective. Also application of *Kshara* is a unique procedure which is easy to apply and it is less time consuming. In Sushruta Samhitha, Sushruta while describing about the indication of *Pratisaraniya Kshara*, he mentioned *Charmakeela* also. *Kshara* is made up of several drugs, in their most concentrated and subtle forms, it has *kshanana* and *shodana* property as it got *ushna* and *tikshna guna* which help in desquamation of wart when used externally. *Kshara* helps in *Ropana* (healing process) because of their cleansing and antiseptic properties.

**Case report:**

A 25 year male college student came to OPD with complaints of Pedunculated skin growth over left root of the neck since 4 years, occasionally feel mild itching and discomfort at the growth site during neck chain. Patient had history of same skin growths right side of neck 7 years back. He underwent chemical excision and got relief from the symptoms but landed up with disfigurement of the site of wart. The mass / growth were 4-6mm in length slight dark brown in colour and soft in consistency. Routine blood and urine examination were done and found within normal range. Hence based on clinical findings the case was diagnosed as Charmakeela (warts) and patient was suggested for *Pratisaraniya kshara* procedure on OPD basis.

**Procedure of *Kshara* Application:**

Informed written consent was taken. The site of wart and surrounding area was cleaned with spirit/ savlon solution. Except the warts, the other parts of the skin was covered with clean and sterile gauze. The lesion was scrapped (*Lekhana Karma*) with sterile gauze or fine sand paper (here wart lesion was soft and recent origin so scraping with gauze was sufficient) then the *Tikshna Kadalikanda Kshara* was applied Quantity sufficient (as per need) with a glass rod, left for 60 seconds or till blackening of the wart, which ever was earlier. Later site was washed with *Nimbu swarasa*. Dressing was done with *Yastimadhu* [*Glycyrrhiza glabra Linn*] choorna mixed with *gritha*. Patient was advised for regular follow up on 1<sup>st</sup>, 3<sup>rd</sup>, 5<sup>th</sup>, 7<sup>th</sup>, 15<sup>th</sup> day and every consecutive week for 4 weeks.

**Images of Kshara application:**



Fig 1 : Before application of kshara



Fig 2: During application of kshara



Fig3 : After application of kshara



Fig 4 : After 24 hrs ( 2nd day)



Fig 5 : on 4<sup>th</sup> day



Fig 6 : After one and half month (45<sup>th</sup> day)

**Results and Discussion:**

After single sitting of *Kshara* application, warts lesion was assessed on 1<sup>st</sup>, 3<sup>rd</sup>, 5<sup>th</sup>, 7<sup>th</sup>, 15<sup>th</sup> day and every consecutive week for 4 weeks. It was observed that after *kshara* application patient experienced burning sensation initially which was tolerable in intensity and later burning sensation came down gradually after neutralizing with *Nimbu swarasa*. Next on the 2<sup>nd</sup> day (i.e. after 24hrs) the warts inflamed and the patient experienced mild tenderness o touch. On 3<sup>rd</sup> day (i.e. after 48 hrs) of application the wart shrunk and turned jet black in colour and hard in consistency which felt and looked like black mustard. Gradually wart detached from its base on 4<sup>th</sup> day of application. There was *shuddha vrana* (clean and healing) created at the fallen site which got healed by 6<sup>th</sup> day leaving behind minimal scar. The scar faded gradually by one and half month leaving no mark of presence of wart at the site.

In this case there was pedunculated common wart seen over left root of the neck. *TikshnaKadali kanda kshara* was applied. If *tikshna kshara* is applied it debrides the keratinous tissue. Besides *kshara* have *Sodhana* as well *Ropana* property so it promotes wound healing if by chance formed. *Gritha* has soothing property and it form a thin film over them and that allows easily epithelisation of wound. <sup>[11]</sup> *Yastimadhu* having *varnya* and *sheeta guna* helps in reducing the scarring and reducing

the burning sensation thus gives soothing effects. <sup>[12]</sup>

**Conclusion:**

This case study concluded that *Kadali kanda Pratisaraniya kshara karma* in *Charmakeela* (pedunculated variety) is one of the potential treatment opinions to avoid recurrence.

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