



Kshara Karma In Diseases Of Shalaky Tantra- Case Series.

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Abstract

Kshara Karma is one of the *Anushastra Karmas* popularly understood as Para surgical procedures. It's an outstanding contribution of *Acharya Sushruta*. The surgical disorders which are mentioned in the *Shalakyatantra* are also can be managed with the *Kshara Karma* with ease and comfort for both surgeon and patients. In the clinical practice of *Shalaky Tantra*, there is a need of adopting this procedure for effective management of disorders such as *Jalarbuda*, *Upajihwa*, *Adhijihwa*, *Upakusha*, *Dantavaidharbha*, *Rohini*, *Nasarsha*, *Karnarsha*, and *Pakshmakopa*. This procedure is simple, safe, effective with minimal or no complications, and easily acceptable to the patients. Long-term follow-up is essential to know its results. The patients get clinically meaningful improvement by *Kshara Karma* along with internal medicines and dietary restrictions. Adopting the *Kshara Karma* followed by internal medicines will prevent recurrence/relapse with a high cure rate with no adverse effects.

Keywords: Kshara Karma, Shalaky Tantra, Anushastra Karmas, Ayurveda.

INTRODUCTION

Kshara^[1] is a caustic, alkaline in nature obtained from the ashes of medicinal plants. It is a milder procedure compared to surgery and thermal cautery.^[2] It is superior among the sharp and subsidiary instruments because of performing excision, incision, and scraping. It is versatile because even such places that are difficult to approach by ordinary measures can be treated by Kshara Karma. Kshara Karma is useful as a substitute for surgical instruments because it can be used safely on patients who are afraid of surgery. Many diseases are mentioned in Shalakyatantra where Kshara Karma is the first line of management such as Jalarbuda, Upajihwa, Adhijihwa, Upakusha, Dantavaidharbha, Rohini, Nasarsha, Karnarsha, and Pakshmakopa. Using Apamarga ksharathe following cases like Jalarbuda (Mucocoele) Nasarsha (nasal polyp) Auralkeloid, and Gingival hyperplasia have been treated, and patients got a high rate of cure with no reoccurrence.

METHODOLOGY

Literary review method of preparation and clinical use of Pratisaraniya Ksharain clinical practice are described in the present article.

Classification^[3]

▪Based on administration;

- Pratisaaraneeya kshara-external application
- Paneeyakshara-internal administration

▪Based on concentration –

- Mild
- Moderate
- High

❖ Preparation^[4]

1. The Panchanga(whole plant) of Apamarga (achyranthes aspera) 5 kgs should be collected, dried up, and burnt.
2. The whole ash of 500 gms was collected and mixed with 6 times (approx 3 liters) of water and supernatant water is filtered 21 times.
3. The filtrate is clean and clear like the color of cow's urine and it is kept on mild fire and the liquid evaporates to 1/3rd of its original quantity.
4. This is known as Mridu or mild concentrate Kshara.
5. Then add 50 gms of red hot shukti(limestone) to the filtrate solution and continuously stirred well until it evaporates to 1/3rd of its original quantity.
6. This is known as Madhyamaor moderate Kshara.▪This should be further heated up by adding 5 gms of Chitraka Kalka(plumbago zeylanica).
7. This thick solution is obtained which is known as Pratisaraneeya Teekshanaor highly concentrated Kshara.
8. It will be collected and stored in an airtight container.

Indications

1.Paneeya Kshara-Mild concentrate Kshara is used internally in worms, indigestion, urinary calculus, skin diseases,obesity, etc.

2.Pratisaraneeya Kshara-Highly concentrated Kshara is used for external applications in Urdhwa Jatrugatha Vikaras.

Application of Pratisaraneeya Teekshana Kshara^[5]

▪First, explain the procedure to the patient and patient attendees.

▪Obtain consent to perform the procedure.

▪The area where Ksharahas to be applied is anesthetized with ack (Pakwa Jambu Phala Varna).

▪After this process, the mass must be washed with lemon juice to neutralize the Kshara.

▪After attaining the SamyakDagda Lakshana Jathyadi Tail or Ghritais appliedlocal or topical spray.

▪Kshara is applied over the mass and waited for 2 minutes or until the mass turns to the color of Reddish black (Pakwa Jambu Phala Varna).

- After this process, the mass must be washed with lemon juice to neutralize the Kshara.
- After attaining the Samyak Dagda Lakshana Jathyadi Tail or Ghrita is applied.

CASE -1

A 49-year-old female patient came to the Shalakya out patient department with complaints of swelling in the upper gingiva above the incisor tooth for three months and which is not painful. The patient was diagnosed as having a “gingival hyperplasia”. On examination, the lesion is expanding in nature. There was no vesiculation or oozing. There was no history of discharge from the mass. The patient was not having any addictions and she was nondiabetic. Her vital signs were stable, and on systemic examination, there was nothing abnormal. The mass was superficial firm and hard in consistency, elevated with regular borders, shiny, non-tender while pressing, non-mobile and there was no bleeding on touch the size of the lesion was 3mm × 3 mm × 2 mm in size. Three sittings of Apamarga Kshara were applied and Tab Nimbadi Guggulu 1 TID was given orally for seven days, after three sittings of application, there was complete regression of the lesion.

Before



After



CASE -2

A 24-year-old female patient came to the Shalakya out patient department with complaints of a progressive lesion located on the right pinna which is not painful and which is recurrent after the first excision. The patient has been suffering for 1 Year. She noticed slight elevation at the sight of ear piercing. The patient was diagnosed as having a “recurrent infected aural keloid”. On examination, the lesion is expanding in nature. There was no vesiculation or oozing. There was no history of discharge from the mass. The patient was not having any addictions and she was non diabetic. Her vital signs were stable, and on systemic examination, there was nothing abnormal. The mass was superficial firm and hard in consistency, tender while pressing, mobile, and 4mm × 5 mm × 4 mm in size. Initially, the keloid was removed surgically and Apamarga Kshara was applied over the lesion it was repeated 4 times and Tab

Kanchnar Guggulu 1 TID was given orally for 15 days and there was no reoccurrence noted even after four months of follow-up.

BEFORE-



AFTER-



DISCUSSION

Pratisaraneeeya Teekshna Kshara was applied to the masses on different cases of Urdhwajatrugatha Vikharasas mentioned in the above case reports. It was observed that the mass color changed to Pakwa Jambu Phala Varna as described in the Sushruta Samhita and later Lemon juice (citric acid) was used to neutralize the Kshara after proper burning of mass. Due to the properties^[6] of Kshara like Katu Rasa Ushnaveerya, Teekshna, and Agneyaguna and Tridosahara properties will yields to actions like Dahana, Pachana, Darana, Vilayana, Shodhana, Ropana, and Shoshana so by these Karmas the mass/ growth undergoes Shoshana, in turn, it will lead to regression of the mass. Pratisaraneeeya teekshna kshara causes coagulation of mass due to the effect of cauterization, necrosis of tissue followed by fibrosis, adhesion of mucosal, submucosal coat helps in prevention as well regression of size of the mass. In present-day practice, the application of Kshara is found to be a safe, efficacious, and cost-effective method for the management of surgical cases where there is an indication of Kshara.

Compilation of case reports and clinical studies is needed to standardize the treatment protocol and define outcome measures. In this way, comprehensive treatment guidelines can be formulated.

CONCLUSION-

Pratisaraneeya Teekshna Kshara was found effective in all the above-treated cases. Even after three follow up there was no reoccurrence, there was a decrease in the size of the polyp these results themselves show the positive effect of the Kshara and the effect of Kshara depends on its Ph. These case studies show that a combination of Kshara Karma, conservative treatment (Shamana Aushadhis), diet restrictions, and lifestyle modifications administered over a period of time effectively in the treatment of different mass as well as preventing recurrence on a long-term basis due to its high rate of cure.

REFERENCES

- 1.Acharya Sushruta, Sushruta Samhita, by; Prof. K R Shrikanthamurthy, Choukambaorientalia, Reprint edition; 2012, chap 11, shloka 3; p.63.
- 2.Acharya Sushruta, Sushruta Samhita, by; Prof. K R Shrikanthamurthy, Choukambaorientalia, Reprint edition; 2012, chap 11, shloka 4; p.63.
- 3.Acharya Sushruta, Sushruta Samhita, by; Prof. K R Shrikanthamurthy, Choukambaorientalia, Reprint edition; 2012, chap 11, shloka 11; p.63
- 4.Acharya Sushruta, Sushruta Samhita, by; Prof. K R Shrikanthamurthy, Choukambaorientalia, Reprint edition; 2012, chap 11, shloka 11; p.63.
- 5.Acharya Sushruta, Sushruta Samhita, by; Prof. K R Shrikanthamurthy, Choukambaorientalia, ~~Reprint edition; 2012, chap 11, shloka 11; p.65~~
- 6.Acharya Sushruta, Sushruta Samhita, by; Prof. K R Shrikanthamurthy, Choukambaorientalia, Reprint edition; 2012, chap 11, shloka 5;