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Ayurvedic Management of Warts W.R.T Charmakila: A Case Report

¹DR SUVENDU ROUT, ²DR PRADEEP KUMAR MOHARANA, ³DR APITHA K

¹PROFESSOR, ²PROFESSOR, ³Ist YEAR P.G SCHOLAR

^{1, 2, 3}DPT. OF KAYACHIKITSA,

^{1,2,3SRI} JAYENDRA SARASWATHI AYURVEDA COLLEGE& HOSPITAL, SCSVMV, ENATHUR,

KANCHIPURAM, TAMIL NADU, INDIA

Abstract

Background: Warts are widespread in worldwide .The estimated current rate of wart among the general population is 1-13%. They are more common in young people. An increased frequency also seen among immunosupressed patient and meat handles and it is common in both male and female. Charmakila is common skin condition mentioned under kshudraroga according to Ayurveda. Case: A 20 year old male had common warts on the left dorsal foot since 8 months. Intervention: Ayurvedic internal medicine were prescribed for a period of 1 month, which effectively healed the wart without scar. Result and outcome: There was marked improvement and the outcome of this case report shows that the common wart may be successfully managed with Ayurvedic internal medicines.

Key words: Ayurveda, Common Warts, Human Papilloma Virus, Panchatiktha Nimbadhi Kashayam, SameerapannagaRas.

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I. INTRODUCTION

Warts are the benign epidermal proliferative lesions occur on skin and the adjacent mucosal membrane, caused by the Human Papilloma Virus(HPV) infection. In general population, the incidence is around 10% and is found to be higher in childrens and young adults. The transmission occur through direct contact including autoinoculation and indirectly throughinanimate objects. The warts may disappear sometime after a few months without any treatment and recur, sometimes may even last for many years¹.

There are over 90 subtypes, based on DNA sequence analysis, causing different clinical presentations. HPV-16 and 18 appear to inactivate tumor suppressor gene pathways and lead to squamous cell carcinoma of the cervix or intra-epithelial carcinoma of the genital ^[2]. The common warts are patches of overgrown skin with hyperkeratosis. In the first weeks these swellings grow upto their full sizes. The growth seems to be stimulated by the virus. The main symptoms is disfiguring. Sometimes the warts becomes painful when they are repeatedly rubbed or become infected. ^[3]Plantar warts (verrucae) have a slightly protruding rough surface and horny rim and are often painful on walking. Paring reveals capillary loops that distinguish plantar warts from corns. Other varieties of wart includes mosaic warts (mosaic like sheets of warts), plane warts(smooth flat topped papules usually on face and back of hands), facial warts (often filliform), genital warts (papillomatous and exuberant).most viral warts resolve spontaneously, although may take years however viral warts are particularly problematic and treated with immunosuppressants. Usually salicyclicacid, cryotherapy is usually the repeated 2-4 weeks. Imiquimol and PDT may also be beneficial in multiple warts in immunosuppressed patients. However the chances of reoccurring are higher ^[4].

According to Ayurveda Acharya sushrutha has mentioned charmakila under kshudraroga and the explanation in nidanasthana under arshas. While anyasthana of arshas, he says due to aggravation of vyanavata associating withkapha give rise to sprout like eruptions in the exterior skin which is immovable is called as charmakila or arsha of twak(skin)^[5]. Acharya vagbhata also explained charmakila under arshas^[6]. Ayurvedic internal medications withpanchatikthanimbadhikashayam, lohasawam, saribadhyasawam, sameerapannagaras, chopchinichoornam were administered for 30 days which provided good results in the management of common warts.

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II. CASE REPORT

A 20 year old male patient visited Sri Jayendrasaraswathi Ayurveda college and hospital , Chennai presented with complaints of overgrown skin patches on dorsal aspect of the left foot since 8 months. Due to which he was feeling discomfort to do routine work.

PURVA VYADHI VRUTTANTA

No known case of diabetes mellitus, hypertension, thyroid dysfunction and bronchial asthma/ other systemic disorder

KOUTUMBIKA VRUTTANTA

All family members are said to be healthy.

VAYAKTIKA VRUTTANTA

Diet – atimadhura, seethaahaara

Appetite- good

Sleep- 6-7 hours at night, sound

Micturition – 4-5 times during a day and 1 time at night

Bowel - regular, once in a day Habits- milk twice a day

ROGI PARIKSHA

General Examination

Table 1: general examination

Built And Nourishment	Moderate	
Temeprature	98.6 F	
Pulse	76bpm	
Heart Rate	76 bpm	
Respiration	16 cycles/ min	
Height	163 cm	
Gait	Normal	
Tongue	Slightly coated	

SYSTEMIC EXAMINATION

Cardiovascular system examination – S1, S2 hears no added sounds.

Respiratory system examination – normal vesicular breathing sound heard, no added sounds.

Abdomen examination - Soft, non-tender.

Central nervous system examination - Higher mental functions, Sensory, Motor, reflexes and Coordination intact.

LOCAL EXAMINATION

On Inspection

- Size: ~1.5cm in length,~1.5cm in breadth, 0.5cm in depth
- Shape: Spherical
- Number: 1
- Position: Lateral aspect of Left thumb
- Discharge: Absent
- Surrounding area: Redness absent
- Color: Reddish pale
- Distribution: Localized
- Morphology: Monomorphic On Palpation
- Tenderness: Slightly present
- Sensation: Intact
- Reducibility: Irreducible
- Compressibility: Non compressible
- Bleed on touch: AbsentConsistency: HardSurface: Rough
- Temperature: Not raised

TREATMENT PLAN

Table 2: internal medication

S.NO	INTERNAL MEDICATION	DOSAGE		ANUPANA	DURATION				
1.	Panchatikthanimbadhikashayam	15ml twice daily before food		60ml warm water					
2.	Lohasawam	20ml	Twice daily after	40ml water					

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	Saribadhyasayam	20ml	food		1 month
3.	Tab. Sameerapannagaras	60mg	Twice daily after	buttermilk	
	Copachini powder	4 grams	food		

III. DISCUSSION

In the management of warts the above prescribed medication showed marked benefits. Panchatikthanimbadhikashayam indicated in kushta, vissarpaetc have pitta kapha shaman property. It does rasaraktaamapachana by enhancing the dhathwagniabnd act as rasa raktaprasadana. It possesstiktakashaya rasa and it act as anti-inflammatory, anti-infective^[7] against papilloma virus.

Lohasawam indicated in pandu, kushta diseases has tridoshahara property. It is medohara and raktavardhana and prasadana. It does dipana at dhathu level and does lekhana karma. It enhances proper function of liver and spleen [8] and increase the circulation and the constituents of the plasma interacts with the infectious agents of Human papilloma virus and thus helps to remove the dead cells from the skin.

Saribadhyasawam indicated in saravikapidaka has pitta kaphaharaproperty, raktaprasadana, rasayana and are shrotoshodhanaaushadhi..It is daharprasamana, and does ropana karma due to its madhura, tiktha, kashaya rasa. Hence acts on skin ailments and removes toxins through urine. It also act as immune modulator and has anti-infective [9] activity against warts.

Samirapannagaraspossesstridoshahara property. Along with chopchinichoornam, provide kaphavatashamana property and does ropana helps in removal of warts [10].

IV. CONCLUSION

After continuation of the above medicines for 1 month this case showed improvement in the common wart with noticeable improvement through disappearance of skin patches. The patient got relieved from the discomfort. Hence based on clinical features, Ayurvedic medicines were found effective and safe in the management of common warts.

REFERENCE

- [1]. khopar.u. illustrated hand book of skin disease and sexually transmitted infection, 6th edition ed.india, bhalani publisher, 2009 p 63-9.
- [2]. Brain .R. walker, Nicki R.Colldge, Staurt H. Ralston, Ian.D.penman, skin diseases, viral infection, warts, 21st edition, Davidson principle and practice of medicine ,british:library cataloguing publication 2014, p-1278
- [3]. somen das, examination of lump or a swelling, wart, 11th edition, a manual on clinical surgery, Kolkata, Dr.S.Das 13 old mayors publication 2015 p-58
- [4]. Brain .R. walker, Nicki R.Colldge, Staurt H. Ralston, Ian.D.penman, skin diseases, viral infection, warts, 21 st edition, Davidson principle and practice of medicine, british:library cataloguing publication 2014, p-1278
- [5]. Prof.K.R.Srikanthamurthy, kshudrarogaadhyaya, chapter 26, verse 314, sushruthasamhitha, chikitsasathanam, vol1, Varanasi, chowkhambaoreientalia edition 2016; p-275
- [6]. Ashtangahrdayam with English translation and coomentary of T.Sreekumar, M.D(Ayu), Ph.D, 3rd updates edition academic & Editorial supported by Dr.K.kavitha, B.A.M.S Sutra sthanama volume 1 chapter 13 verse 31,pp 332.
- [7]. Dr.muhammedshaffeer.v. Samhitha of Ayurveda medical speciality edition 3rd ,volume 1 disease under kushta ,panchatikthanimbadhikashayam,kochi, cherrys printers , 2014 , pg-343.
 [8]. Dr.muhammedshaffeer.v. Samhitha of Ayurveda medical speciality edition 3rd ,volume 1 disease under pandu,lohasawam,kochi,
- [8]. Dr.muhammedshaffeer.v. Samhitha of Ayurveda medical speciality edition 3rd ,volume 1 disease under pandu,lohasawam,kochi. cherrys printers , 2014 , pg- 270.
- [9]. Dr.muhammedshaffeer.v. Samhitha of Ayurveda medical speciality edition 3rd ,volume 1 disease under prameha,psarivadhyasawam,kochi, cherrys printers , 2014 , pg 404.
- [10]. Dr.muhammedshaffeer.v. Samhitha of Ayurveda medical speciality edition 3rd ,volume 1 disease under upadamsa,phiranga, chopchinichoornam,kochi, cherrys printers , 2014 , pg-541

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