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Dr. Geetanjali Hiremath*¹ and Dr. Rajashekhar H.²

¹Assistant Professor, Dept of Shalya Tantra, KPSVS Ayurveda Medical College Manvi, Karnataka, India. ²Reader, Dept of Shareera Rachana, KPSVS Ayurveda Medical College Manvi, Karnataka, India.

*Corresponding Author: Dr. Geetanjali Hiremath

Assistant Professor, Dept of Shalya Tantra, KPSVS Ayurveda Medical College Manvi, Karnataka, India.

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ABSTRACT

Charmakeela is one of the common clinical entities encountered in general practise. Over all general incidence of *charmakeela* varies from patient to patient. The earliest reference about *charmakeela* is found in *Sushruta Samhita*. *Acharya Sushruta* has described in detail about *samprapti, lakshana* and chikitsa of *charmakeela*. Reference of *Charmakeela* is not available in either Vedic or pre-vedic literature. Later description about *Charmakeela* is available in some Bruhatrayees and in Laghutrayees. All the clinical features of *Charmakeela* can be compared to warts. The appearance of Charmakeela can differ based on the type of wart and where it is located on the body, In Ayurveda diagnosis is based on clinical examination and usually straight forward by visual inspection. *Charmakeela* occur at any age, but are unusual in infancy and early childhood. The incidence increases during the school years. It is estimated that 3 to 20% of school age children have *Charmakeela*. Surveillance in U.K demonstrated 1000 children under 16years had 70% of common warts. In Ayurveda Specific treatment has been elucited for this clinical entity without its recurrence and without causing scar formation.

KEYWORDS: Samprapti, lakshana and chikitsa of charmakeela, Bruhatrayees, Laghutrayees.

INTRODUCTION

Utpatti (Derivation)

Charmakeela is derived from the union of words '*charma*' and '*keela*'. The word *charma* is derived from '*Char* + *sarvadhathubyo manin*'. Here '*char*' means *dathu*, '*ma*' is *pratyaya*. The word '*keela*' means ''*keelyatha rudyathe sou anentra vaa*'' That which pricks like nail.

Nirukti:- 'Charmani guhyasya charmapi keela ivethi vaa'.

Binding or *keela* (nail) formed on the *charma* or in the *charma* of *guhya prdesha* like 'Anus' (*guda*) is known as *charmakeela*.^[1]

'Charmakeelatheethi'

That which takes the form of *keela* (nail) or binding on *charma* (skin) is called *charmakeela*.^[2]

Charmakeela is a condition which was prevalent from ancient times which needs treatment more in correspondence as a cosmatical reasons. *Charmakeela* is one of the *kshudraroga* mentioned by *acharya Sushrutha*. The pathogenesis of this disease due to vitiation of vyana vata along with kapha over the skin causes development of hard hard nail like structure called *Charmakeela*.^[3] The incidence of warts is highest in children and young adults.^[4] The Greeks and Romans were the first to use terms describing warts.^[4]

Bheda

In Ayurveda according to dosha 4 types such as:

- *Vata* dominated *Charmakeela* patient feels pricking type of pain.
- *Kapha* dominated it appears like nodule without changing color of skin.
- *Pitta* dominating *Charmakeela* due to vitiation of *Rakta*, it appears blackish in color, dry, oily and hard in nature.^[3]

According to modern science different types of warts have been identified, which are differing in shape and site, as well as the human papilloma virus involved. These include:

- Common warts (Verrucae vulgaris): These warts typically develop on the hand, especially around the nail. Common warts are gray to flesh colored, raised from the skin surface, and covered with rough, horn like projections.
- Flat warts (Verrucae plana): These warts are see most commonly on face and back of the hands. They usually appear as small individual bumps about ¹/₄



inch across. Flat warts may spread rapidly on the face from activities such as shaving.

- Plantar warts (Verrucae plantaris): Plantar warts by definition occur on the plantar surface or bottom of the foot. They usually occur in high pressure areas such as the heel and metatarsal heads (just behind the toes). Plantar arts usually grow into the skin, not outward like common warts.
- Veneral warts: These are often seen in the sulcus of penis, in the anal region, scrotum and in the penis.
- Senile warts: These warts should differentiated from the squamous cell carcinoma, contagiosum,epidermo dysplasia, verruciformis, callus, arsenic keratosis and syphilis.

These warts should be differentiated from squamous cell carcinoma, molluscum contagiosum, epidermodysplasia verruciformis, callus, arsenic keratosis and syphilis. Diagnosis of these warts is made by visual examination.

Management

The management of warts is likely to require an individualized approach and usually require more than one therapeutic modality to achieve complete resolution. The management of warts depends on the age of the patient, the site of infection, the size, number and types of warts involved, the patient's immunological status, treatment availability and cost, and the patient's desire for therapy and ability to adhere to the treatment regimen.

According to contemporary science, the management is devided into two aspects such as Home therapy (patient initiated) and office therapy (physician initiated).

Home Therapies

- Application of salicylic acid, caustic agents like monchloroacetic acid (MCAA), dichloroacetic acid (DCAA), trichloroacetic acid (TCAA), silver nitrate. Method of application: Mechanical debridement of excess keratotic material is done by a sand paper or an emery board, pumis stone or nail file, done to destroy deeper layers of wart by medicine. Then the desired Keratolytic agents is applied and left for a stipulated time advised. These keratolytic agents disrupts intracellular cohesiveness, causing desquamation of HVP infected epidermal cells.
- Cytotoxics: Podophyllins are crude extract of cytotoxic chemicals obtained from the common plant podophyllumpeltatum, a lipid soluble compound that causes tissue necrosis. It is known to arrest cell division and cause cell death. Podophyllin is applied in the form of gel.
- Heat therapy: Heat therapy acts by injuring the tissue occupied by wart.

Office based therapies

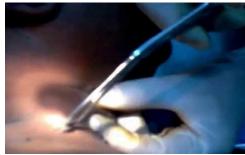
• Cryosurgery: Cryotherapy is the standard therapy for viral warts and that are resistant to over the counter topical agents. Cryotherapy produces minimal

scarring using liquid nitrogen. Liquid nitrogen does not kill HPV, it disrupts the skin cell. The most sensitive to cryoinjury is melanocytes, hypo and hyper pigmentation changes are common after liquid nitrogen therapy.

- Carbon di-oxide laser surgery
- Bleomicin: Its a fermentation product from soil fungus strepyomycesverticellus used as an antitumor anti-microbial. A water soluble polypeptide mixture with antineoplastic, antibiotic and antiviral properties.
- Electrosurgery
- Surgical excision

Ayurveda Management^[5,6]

- *Lekhana karma* Stalks of the betel leaf, mixture of lime and copper sulphate in equal quantity.
- Pratisaraniya kshara- Apply after srapping with yantra.
- Paste of *changeri* leaves.
- Agnikarma- Using pancha loha shalaka or with thermal cautery.
- Ligation with Horse hair or *Ksharasutra*.



Picture No. 1: Agnikarma for warts.



Picture No. 2: Agnikarma for plantar warts by using Shalaka.



Picture No. 3: Ksharasutra ligation for Warts.

DISCUSSION

Warts are benign proliferations of skin and these are the diseases in the human community since ancient times; several therapeutic procedures were performed to get rid of them. In Ayurveda main aim of treatment is to break the *samprapti* and to stop the recurrence. Main management of *Charmakeela* in Ayurveda includes *lekhana karma, kshara karma* and *agnikarma*. These procedures may destroy the colonies of the virus and prevents the recurrence.

The management of *Charmakeela* considering the fact that the patients approach for the treatment as a cosmetic problems. The above procedures are benefiscial in specific type of warts. Topical management like *kshara* and salicylic acid applications are usually dependent on patient compliance and require long application periods. But after removal of warts application of *pratisaraniya kshara* is good for destroying the viruses colonies and also prevents reoccurrence. If warts are smaller and present on the face or other cosmetic parts of the body then *changeri* leaves paste is the best method as it will not cause the scar.

CONCLUSION

Warts are the diseases which mainly causes cosmetic disability. Disfigurement by occurring on the areas, which cause loss of beauty like on face, on hand etc. Disablement can be caused by a wart on hand, impairing the skill of an artist, musician, surgeon and etc. Discomfort can occur by its location. Aggressive therapies are usually to be avoided because the natural history of cutaneous HPV infections is for spontaneous resolution in months or a few years. Plantar warts that are painful because of their location thus require more aggressive therapies. Treatment modalities for warts described in Ayurveda are very effective, cheap and easily available and easy to perform.

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