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A CLINICAL STUDY OF KELOID THROUGH AGNIKARMA

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ABSTRACT

Keloids are abnormal scars that cause significant emotional and physical distress in patients. Keloid formation is theorized to occur as a result of an imbalance between an increased synthesis of collagen and extracellular matrix and decreased degradation of these products. Inflammatory mediators— namely, transforming growth factor beta have been proposed to influence the dysregulation of collagen remodeling in the scar healing process. Though limited, current knowledge of keloid pathophysiology has guided clinicians to explore novel therapies for keloid prevention and treatment. In addition to conducting research refining the use of common therapies, such as steroids and radiation, clinicians have evaluated the potential of anti-inflammatory and chemotherapeutic molecules to suppress keloid recurrence. Management includes agnikarma procedure which is one of the oldest healing system in alternative medicine dating back thousands of years to ancient India. Among its numerous therapeutic methods, Agnikarma stands out as a distinct and effective technique. Agnikarma is derived from the Sanskrit words "agni" meaning fire and "karma" meaning action. As per Acharya Sushrut basically anginkarm is used in two manner i.e. one for रोग उन्मूलन (diseases cure) and other for pain management.

A 28years old male presented with keloid scar on shoulder and complaints with itching. Ayurvedic examination and diagnostic procedures led to the decision to administer Agnikarm therapy through Louha Shalaka. This therapy demonstrated significant improvement in symptoms and healing procedures over three sessions conducted at 15-day intervals. It works by stimulating the body's natural healing mechanisms and promoting the circulation of vital energy.

KEY WORDS : *Agnikarma, Keloid, management, healing*

INTRODUCTION

Keloids, also called keloid scars, are a type of scar tissue that usually grows at the site of an injury. They can also result from infection, inflammation, surgery, blisters, acne, and body piercings. It is not clear why keloids form, but they are harmless — they do not turn into cancer. They eventually stop growing and do not change after that point.

Most types of skin injury can contribute to keloid scarring, including:

- Acne Scars
- Burns
- Chickenpox Scars
- Ear Piercing
- Scratches
- Surgical Incision Sites
- Vaccination Sites

Keloids can occur anywhere — but, they are less common on the eyelids, genitals, soles of the feet, or palms of the hands.
They frequently develop on the following parts of the body.

- Ears
- Neck
- Shoulders
- Chest
- Back

Keloids can continue to grow for months or even years. They eventually stop growing but they do not disappear without treatment.

CASE REPORT

A 28years old male named Biswa Ranjan residing at Satapada, Dist – Puri , Odisha presented at the Out patient Department of Shalya Tantra at Gopabandhu Ayurveda Mahavidyalaya, Puri with complaints of mild itching and swelling on his left shoulder persisting for 6 months. He has no history of any injury.

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The patient underwent a thorough assessment incorporating both Ayurvedic and modern diagnostic principles to as certain the underlying pathology. Essential investigations were performed to corroborate the clinical findings and guide the treatment approach. Based on the diagnosis, it was decided to initiate therapeutic intervention employing Agnikarma therapy through the method by using Louha shalaka.

Agnikarma is a superior para surgical procedure & the procedure aims at management of various afflictions by inflicting burns on the tissue surface directly by using different materials known as Dahanopakrama.

Agnikarma, a form of cauterization therapy, applied by the part preparation & by local anesthesia. This patient is followed by 3 sessions, after the Agnikarma thepary. After this therapy using of Satadhouta Ghrita for healing the wound.

Agnikarma is a procedure in which there is the application of heat in the affected part. The therapeutic use of agni is described as Agnikarma in Sushrut Sahmita Sutra Sthana Chapter 12. There is no chance of recurrence of disease which is treated with agnikarma.

It is also included in Anushastra. Anusashtra means Parasurgical Procedure.

Agnikarma can be co- related to Thermal Cauterization.

MATERIAL AND METHODOLOGY

Spirit, Cotton, Xylocaine Injection ,Panchadhauta Shalaka,Gas stove, Aloe vera, Satadhouta Ghrita, Gauze Piece

METHODS OF PURVA KARMA

Before Agnikarma informed written consent were taken.
CBC, BT, CT, HbsAg, HIV, Blood sugaretc routine blood investigation done before procedure. On right lateral position the shoulder of the left hand was fixed & sterilization was done by spirit cotton. Next was application of local anesthesia.

PRADHANA KARMA

After the part preparation was done, the red hot panchadhauta shalaka was applied on the affected area. Firstly, agnikarma on keloid was by Bindu with the tip of Shalaka. Every Shalaka was applied within the area of keloid for 10-15 seconds. During entire procedure, a kumari swaras was applied after application of red hot Shalaka to get relief from Daha (burning sensation).

PASCHAT KARMA

After completion of procedure, Dagdha vrana was covered with Satadhauta Ghrita. The patient was advised to apply this Ghrita daily after the dressing. The entire procedure was followed up 3 times at the interval of 15 days.



Figure 1 Day 1 **Figure 2 Day 1**

Figure 1- Before Treatment

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Figure 2- After Treatment



Day 15 **Day 30** **Day 45**

OBSERVATIONS

Session 1: Initial improvement was seen in terms of reduced itching and mild flattening of the keloid. The patient reported less pain.

Session 3: Significant reduction in the size and thickness of the keloid. The keloid was softening, and the itching had completely subsidedThe keloid had flattened substantially, with no pain or itching. The cosmetic appearance had improved, and the patient reported satisfaction with the outcome.

Follow-Up
At a follow-up 1 months after the last Agnikarma session, the keloid showed no signs of recurrence. The skin over the treated area was flat with minimal scarring. The patient remained symptom-free, with no discomfort or itching.

DISCUSSION

Agnikarma is described in Ayurveda as a therapeutic procedure that not only resolves abnormal tissue growth but also prevents recurrence. The heat applied through Agnikarma helps in breaking down excess collagen, reduces local inflammation, and promotes the formation of healthy tissue. Moreover, Ayurvedic texts mention that conditions treated by Agnikarma have a lower chance of recurrence compared to other treatment modalities.

In this case, Agnikarma proved effective in managing keloid with no recurrence in a 1month follow-up period. The patient tolerated the procedure well, with minimal discomfort and a positive outcome in both functional and cosmetic terms.

CONCLUSION

Agnikarma is an effective and safe modality for the management of keloids. It offers a promising alternative to conventional treatments, particularly for patients who have not responded to other interventions or have experienced recurrences. Further research with larger sample sizes and longer follow-up periods is recommended to establish the long-term efficacy of Agnikarma in keloid management.

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