A Case Study of Agnikarma with Mrutika Shalaka in Pain Management of Calcaneal Spur

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Abstract

In holistic Ayurvedic Science there are many ways to treat diseases such as Aushad, Shastra, Kshar and Agnikarma. Among these Agnikarma has its own importance. Agnikarma is done by different methods and different materials are used such as Pippali, Godanti, metals (Dhatu Shalaka), Mrutika Shalaka etc. In Samhita it is mentioned that the diseases which are not cured by Aushad, Shastra and Kshar are definitely cured by Agnikarma. Calcaneal spur is bony abnormal pointed growth of calcaneal bone which causes pain and inflammation in heel tissues. This heel pain is called as Kurch Shool. In calcaneal spur Agnikarma is not only effective in pain management but it also reduces inflammation. In this case study Mrutika Shalaka is used for Agnikarma in calcaneal spur. Agnikarma with Mrutika Shalaka is very effective in pain management as well as quite simple to do in out patient department.

Keywords

Agnikarma, Mrutika Shalaka, Calcaneal Spur, Kurch Shool
INTRODUCTION

These days calcaneal spur is a common problem in the population. It is due to calcium deposition on inferior and posterior surfaces of calcaneous bone that results into pointed growth. This pointed growth is known as calcaneal spur, which most of the time is associated with planter fasciitis. Planter fascia is bowstring like fascia which is stretched over dorsum of foot. Over stretch of this fascia during physical stress on feet cause development of tear in fascia which later develops as spur in the form of pointed bony growth. Sometimes it is believed that these spurs are extra supports of body to planter fascia. These spurs cause stabbing and thrombling pain at heel which may worsen during walking jogging. This can occur after repetitive atheletic stress or strain injury. Calcaneal spur can also be associated with reactive artheritis, ankylosing spondylitis and diffuse idiopatheic skeletal hyperostosis. Fortunately most of the cases of calcaneal spur resolves or get relived without medication and surgeries. In this Agnikarma plays major role.

Ayurveda is blessed with different modalities of treatment like Bheshajkarma, Shastrakarma, Ksharakarma, Agnikarma and Raktamokshan. Among these Agnikarma is quite superior. Diseases which are cured by Agnikarma never reoccurr. It has benefits of being sterile, less bleeding and pain relief as compare to other technique. For Agnikarma different materials are used like Pippali, Aja Shakrut, Shar shlaka, Madhu Tail, metals and Mrutika Shalaka etc. and different methods are used such as Bindu (dotted), Vilekha (linear), Pratisaran (flat designs) and Valay (circular). Agni has properties of Ushna, Tikshna, Sukshma and Aashukari gunas which are opposite to the properties of Vata and Kapha dohas. So it pacify the vitiates Vata and Kapha dosha. Hence gradually relives the symptoms of calcaneal spur.

CASE REPORT

This case study was done at M.A. Podar Hospital, Mumbai. A case of 60 year old male who came in kayachikitsa OPD of M.A. Podar hospital, Mumbai was studied. He had complains of Vam Kurch Shool (left heel pain), Gaman kashtata (difficulty in walking) and Sparsh Ashatva (tenderness) over left heel since last one year without any major medical illness. On physical examination it was revealed pain at left
calcaneal region and tenderness in surrounding tissues. The diagnosis of calcaneal spur was confirmed on the basis of signs & symptoms and x-ray of left heel which evidenced a spur on calcaneal bone. It was decided to have Agnikarma with Mrutika Shalaka as first line of treatment without any oral medications. Five sittings of Agnikarma were done at left calcaneal region on alternate days. For Agnikarma Mrutika, shalaka was choosen as material. Agnikarma was done by Bindu method and each time 10 Bindu was placed at left heel region at point of maximum tenderness. After Agnikarma go-ghrita was applied at the site of Agnikarma to relive burning sensation. Blood pressure, pulse and respiratory rate of patient was checked before and after procedure. This was done for five sittings on alternate days. Patient was observed for one week after completion of treatment.

MATERIALS & METHODS

Materials:

For Agnikarma Mrutika, Shalaka was choosen and go-ghrita was applied after procedure of Agnikarma.

Criteria of Assessment:

Visual analogue scale (VAS) was used for criteria of assessment of pain.

VISUAL ANALOG SCALE

<table>
<thead>
<tr>
<th>Grade No.</th>
<th>Pain Gradation with Signs</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Pain</td>
<td>No pain on pressing or during walking.</td>
</tr>
<tr>
<td>Mild Pain</td>
<td>Pain related to site on pressing.</td>
</tr>
<tr>
<td>Moderate Pain</td>
<td>Disturbed daily work.</td>
</tr>
<tr>
<td>Severe Pain</td>
<td>Intolerable and continuous pain, unable to walk.</td>
</tr>
</tbody>
</table>

Table 1 Pain Gradation with Signs

Procedure:

Purvakarma

1) Patient’s consent for Agnikarma was taken.
2) Site of Agnikarma was decided.
3) Confirmed site of Agnikarma was cleaned with normal saline.
4) Mrutika Shalaka was heated.

Pradhankarma

1) Agnikarma with heated Mrutika Shalaka was done at pre-decided points.
2) 10 bindu *Agnikarma* was done over left heel region.

*Paschatkarma*

Go-ghritawas applied was at the site of *Agnikarma*. This helps to reduce burning sensation at the site of *Agnikarma* and helps for healing. The site of *Agnikarma* was avoided from contact with water.

**OBSERVATION & RESULTS**

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Signs &amp; Symptoms</th>
<th>Before Agnikarma</th>
<th>After 1st Sitting</th>
<th>After 2nd Sitting</th>
<th>After 3rd Sitting</th>
<th>After 4th Sitting</th>
<th>After 5th Sitting</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td><em>Kurcha Shool</em></td>
<td>8</td>
<td>4</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td><em>Sparsh Ashatva</em></td>
<td>5</td>
<td>3</td>
<td>3</td>
<td>1</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td><em>Gaman Kashtata</em></td>
<td>7</td>
<td>5</td>
<td>5</td>
<td>4</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

When patient first came in OPD of kayachikitsa of M.A. Podar Hospital, Mumbai, he had severe *Kurch Shool*. After 1\(^{st}\) sitting of *Agnikarma* pain was reduced and till 5\(^{th}\) sitting pain was relieved gradually to no pain at all. Also other complains of *Sparsh Ashatva* and *Gaman Kashtata* was relieved gradually as shown in the above table.

**DISCUSSION**

A Calcaneal spur is bone like pointed growth formed by calcium accumulation at inferior and posterior surface of calcaneous bone. Calcaneal spur many times associated with planter fascitis and inflammation of Achilles tendon\(^1\). Planter fascitis is inflammation of planter fascia, the bowstring like tissue stretching underneath the sole that attaches at the heel\(^1\). Calcaneal spur at inferior surface causes pain as well as tenderness which become worse while walking. Planter fascia stretch with bounce of each step we take, but too much stretch results in small damage and inflammation of fascia. It is also believed that spurs are formed as the body attempts to provide some additional support to over stretched fascia. In other words calcium accumulate as a spur to the planter fascia. Instead there are many other contributing factors in formation of calcaneal spur like recurrent stress to the base of heel, overweight, improper walking or running, fitting footwear, wearing high heels, ageing, diabetics etc. treatment of calcaneal spur includes exercise, physiotherapy, NSAID and steroidal injections at site. If conservative treatment doesn’t give relief
then surgically spur is removed as the final treatment. In ayurveda Agnikarma is mentioned as one of the main method of pain management. Based on this principal the study was carried out and after completion of the study it was found that because of Agnikarma with the help of Mrutika shlaka pain of calcaneal spur are decreased drastically.

Possible Mode of Action of Agnikarma:
In Samhita Agni is described as best treatment for Shool. Agni posses Ushna, Tikshna, Sukshma and Aashukari gunas. These properties of Agni are just opposite to gunas of Vata and Kapha dosa. At the time of Agnikarma physical heat from red hot shala transferred to Twakdhatu causing Samyak Twak Dagdhavrana. From Tawka Dhatu this physical heat act in three different ways-
1) Agni in the form of physical heat of Mrutika shlaka has Ushna, Tikshna, Sukshma and Aashukari gunas. It clears the Srotavarodha of Vata and Kapha dosas, so relives the pain and inflammation by maintaing the samya awastha of Vata and Kapha dosas.
2) It increases the Rasa Rakta Samvahana(blood circulation) to the affected site. Improved blood circulation in affected site causes flushing of pain producing substances and patient ultimetaly get relief from symptoms.
3) Agnikarma increases Dhatwagni, hence improves the metabolism of Dhatu and causes pachan of Aama dosha at the affected site. Also, It promotes proper nutrition from purva dhatu. All these causes stability of Asthi and Majja Dhatu. Thus results in relief from symptoms of calcaneal spur.

CONCLUSION
Agnikarma is easy to do and is very effective in pain management in calcaneal spur. In calcaneal spur where Aushadi and Shastra chikitsa are not much effective to relief the pain, there Agnikarma gives better relief. Agnikarma has benefits of sterile technique, less chance of relapse of diseases and less bleeding from site, over other modalities of treatment.
REFERENCES