

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*



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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 foot¹. 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 reoccur.^{2,3} It has benefits of being sterile, less bleeding and pain relief as compare to other technique¹. For *Agnikarma* different materials are used like *Pippali*, *Aja Shakrut*, *Shar shlaka*, *Madhu Tail*, metals^{2,3} and *Mrutika Shalaka*⁴ etc. and different methods are used such as *Bindu* (dotted), *Vilekha* (linear), *Pratisaran* (flat designs) and *Valay*(circular)^{2,3}. 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, shaklaka* was chosen 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 relieve burning

sensation². 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 chosen 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

0 1 2 3 4 5 6 7 8 9 10

Table 1 Pain Gradation with Signs

Grade	Grade No.	Signs
No Pain	0	No pain on pressing or during walking.
Mild Pain	1-3	Pain related to site on pressing.
Moderate Pain	4-7	Disturbed daily work.
Severe Pain	8-10	Intolerable and continuous pain, unable to walk.

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 2 Improvement in the Signs & Symptoms

Sr. No.	Signs & Symptoms	Before Agnikarma	After 1st Sitting	After 2nd Sitting	After 3rd Sitting	After 4th Sitting	After 5th Sitting
1.	<i>Kurcha Shool</i>	8	6	4	2	1	0
2.	<i>Sparsh Ashatva</i>	5	4	3	3	1	0
3.	<i>Gaman Kashtata</i>	7	6	5	5	4	1

When patient first came in OPD of kayachikitsa of M.A. Podar Hospital, Mumbai, he had severe *Kurch Shool*. After 1st sitting of *Agnikarma* pain was reduced and till 5th 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.

DISSCUSSION

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 fasciitis and inflammation of Achilles tendon¹. Planter fasciitis is inflammation of planter fascia, the bowstring like tissue stretching underneath the sole that attaches at

the heel¹. 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 shalaka* 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 shalaka 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 shalaka* 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 *Shashtra* 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.

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