

## Management of *Mashaka* (mole) with local application of *Apamarga Kshara*- A Case Report

Hooda Mamta<sup>1\*</sup> Vaghela DB<sup>2</sup>

<sup>1</sup> M.S. (Ayu) Scholar, <sup>2</sup> I/C HOD & Associate Professor, Department of Shalaky Tantra, Institute of Teaching and Research in Ayurveda (INI), Jamnagar, Gujarat, India

### ABSTRACT:

Ayurveda is a science where a medical and surgical procedure are described many years back. *Ksharakarma* is the one of minor surgical procedure in Ayurveda which is done by the application of *Kshara*. *Mashaka* is painless, hard black eruption on the skin. It can be compared with mole in modern science. In the case, patient of 20 years female came with complaint of mass on upper lip. It was diagnosed with *Mashaka* (mole) on clinical basis. *Apamarga Kshara karma* was done for the *mashaka*. After 2 weeks lesion was healed up with no any complaint of bleeding, infection of wound, pain and scar. Since there is no chance of recurrence, *Ksharakarma* is the best methods of the treatment of *Mashaka* (mole).

**KEYWORDS:** *Apamarga*, *Kshara karma*, *Mashaka*, Mole.

Received: 29.04.2023 Revised: 13.05.2023 Accepted: 21.05.2023 Published: 16.06.2023

### Quick Response code



### \*Corresponding Author:

**Dr. Mamta Hooda**

M.S. (Ayu) Scholar, Dept. of Shalaky Tantra, Institute of Teaching and Research in Ayurveda (INI), Jamnagar, Gujarat, India

Email: [mamtahooda7977@gmail.com](mailto:mamtahooda7977@gmail.com)

### INTRODUCTION:

*Ksharakarma* is the procedure where there the disease is treated by the application of *Kshara*. There is no chance of recurrence of disease which is treated with *Ksharakarma* and it cures the disease which are not treated with medicine, surgery and *Agnikarma*. [1] There is different *Kramas* in Ayurveda but among them *Ksharakarma* is called as best *karma* for the treatment of disease because of less pain. It is described in various *Samhita* in Ayurveda and can be done for various disease. [2] Among *Kshudra roga Mashaka* is one. In *Sushruta Mashaka* is described as hard, painless, black and elevated eruption on the body (skin) resembling the *masha* (pulse) in shape, caused. [3] by the aggravation of *Vayu*.

Similarly, according to Acharya *Vagbhata* black, painless, sprouts on the skin, resembling *tila* (sesameseed) are known as *Tilakalaka*. Those only are elevated from skin is known as *Mashaka*[4]. *Mashaka* can be compared with mole in modern science.

### Contraindication Of *Apamarga Kshara*:-

- *Raktapitta* (bleeding disorders)
- *Timira* (eye disease)
- *Moorchha* (unconscious)
- *Sira* (head),
- *Snayu* (tendons),
- *Sandhi* (joints),
- *Tarunasthi* (ligament bones),
- *Dhamani*.

Mole are common type of skin growth often appears as small, dark brown spots and are caused by cluster of pigmented cells

(melanocytes).<sup>[5]</sup> The medical term for the moles is nevi. Naevus means a lesion which is present since birth. Although many of these may be present since birth, but it can be<sup>[6]</sup> appear later in life. Melanocytes migrate from the neural crest to the basal epidermis during embryogenesis. When Melanocytes aggregates in the dermis or at the dermoepidermal junction, they are called naevus cells.<sup>[7]</sup> *Kshara Karma* is one indicated in both types.

#### CASE REPORT:

A 20 years female came in OPD with complain of mass on upper lip since birth. It was gradually increasing in size. There was no history of swelling, fever, pain. There was no any aggravating factors. Patient was not diabetic, hypertensive and no history of any chronic disease. On examination mass was non tender, soft in consistency, immobile, regular margin, was of about 0.5 mm in size and black in color. General condition was fair, B.P- 110/70 mmHg, P.R- 82/Min and Temperature was afebrile. On the basis of clinical examination it was diagnosed as *Mashaka* (mole).

**Investigations:** Complete blood count, Erythrocyte Sedimentation Rate, Human

Immunodeficiency Virus, Hepatitis B surface Antigen, Hepatitis C Virus. Routine examination has been done before procedure only, all investigation were within normal limit. HIV, HBsAg, HCV were negative.

#### THERAPEUTIC INTERVENTION:

*Ksharakarma* with *Apamargakshara* was planned for the patient and total two sitting has been done for mole removal. First day it got elevated and color changed and on second day same procedure has done and mole was completely removed on second day.

#### Procedure of Ksharakarma -

First of all patient was kept in sitting position. *Apamargakshara* was applied over the surface of the mole, by using the cotton rolled over probe. Applied *kshara* was kept for 1hr. After sometime, the color changed to dark brown. then same procedure was repeated second day. Patient was advised not to wet the lesion till 24 hours.

Regular follow up was done weekly for 2 week. On follow up patient was satisfied with the treatment. There were no complaints of recurrence.

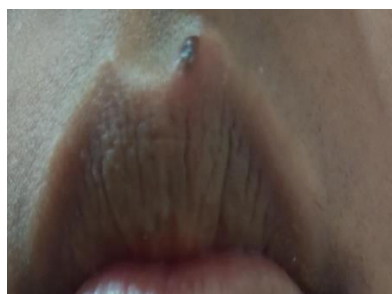


Fig-1: Before Treatment



Fig-2: During Treatment

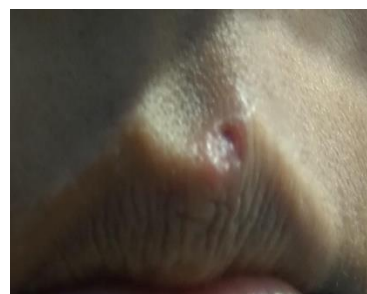


Fig-3: After Treatment

#### RESULT AND DISCUSSION:

Significant improvement was observed in treatment of elevated mole. No burning pain and scar was seen. No any side effect or complication was observed during

treatment and follow up periods.

*Ksharakarma* is the process in which heat is used so it is specially done in the *vataja kaphaja vyadhi* as it has action of *Ushna, Tikshna, Sukshma, Vyavayi, Vikasi* and

*Pachana*. In *Mashaka*, *Vataja dosha* is viated so *Ksharakarma* is applicable in it. It gives additional heat to the *Dhatwagni* and removes the *Shrotav avrodha*. So there is less chance of recurrence as well. Activation of *Dhatwagni* will improve metabolism and circulation will heal in new tissue formation and there is less chance of scar formation.

*Kshara* is an alkaline Ayurvedic preparation. *Kshara*, being a caustic chemical and alkaline in nature, is useful as the substitute of surgical instruments. It is milder procedure than surgery. It is the superior most among the sharp and subsidiary instrument because it can perform activities like excision, incision and scraping. [8]

In the case, Complaint of the patient was completely resolved and the lesion was also healed up within 2 weeks.

#### **CONCLUSION:**

With this case it can be concluded that *Ksharakarma* can be done for the *Mashaka* a mole. It is effective procedure. There is no need of anesthesia. There is no chance of bleeding and reoccurrence as well. In the case, as there is no any scar left, it can be developed for cosmetic purposes also.

#### **Limitation of study:**

As I have done this treatment in a single patient so for standardization of treatment we need to evaluate this treatment in more number of patient.

#### **Consent of patient:**

Consent was taken before the procedure and the patient was fully understood about the procedure to be done.

#### **Acknowledgement:**

I Would like to thanks to Dr. D.B. Vaghela sir for allowing me to do this procedure under his observation and also thanks to patient who give consent for taking photograph.

#### **REFERENCES**

1. Sharma A., Sushrut Samhita, Sutrasthana 12/3, Chaukhamba Surbharati Prakasan, Vanarasi: 2017. Pp 85
2. Jadhav DK, Jangid S. Agnikarma in Ayurved": an overview. International Journal of Science & Healthcare Research. 2018; 3(1): 39-44.
3. Sharma A., Sushrut Samhita, Chikitsasthana 20/23, Chaukhamba Surbharati Prakasan, Vanarasi: 2017. Pp 331
4. Shrikanta Murthy K.R., Vagbhata's Astanga Hrdayam, English Traslation Vol III Uttarstyana 31/25b-25a, Chowkhamba Krishnadasa Academy, Vanarasi, 6th Edition 2012 (reprint), Pp 295
5. <https://www.mayoclinic.org/diseases-conditions/moles/symptoms-causes/syc-20375200> [Last accessed on 20. Jan-2023]
6. Somen Das, A manual on clinical Surgery, Examination of lump or swelling, Dr. S. Das, Calcutta. 4th edition 2006, Pp-122
7. Bailey and love, Bailey and love's Short practice of surgery, Skin and subcutaneous tissue, CRC Press Tayor and Francis Group, 2018. Pp599
8. Sushruta, Sushruta Samhita with Nibandha Sangraha commentary of Dalhana acharya edited by Vaidya Yadavji Trikamji Acharya, 1<sup>st</sup> Ed. Varanasi: Chaukhambha Surabharti Prakashan; 2017. p. 45, 724.

**Conflict of interest:** Author declares that there is no conflict of interest.

**Guarantor:** Corresponding author is guarantor of this article and its contents.

**Source of support:** None

#### **How to cite this article:**

Hooda M, Vaghela DB. Management of *Mashaka* (mole) with *Apamarga Kshara*: A Case Report. Int. J. AYUSH CaRe. 2023;7(2):118-120.