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THE MANEGMENT OF KELOID BY KSHARSUTRA - A CASE STUDY.

Ayurveda

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ABSTRACT

Keloid is persistent excessive growth of scar beyond its margin into the adjacent skin. It is a result of an overgrowth of granulation tissue at the site of healed skill injury. It is brownish black in colour, painful, tender and causes itching. Steroid injection, Laser therapy, excision and skin grafting are the treatment options.

Ear pinna keloids mostly occur in human from manual trauma and blunt perichondria trauma. Incidence rate is higher in women due to wearing of ornaments as a result patient developed keloid.

The present study summarized clinical efficacy of role of *ksharsutra* in the management of keloid.

KEYWORDS

Keloid, Ear Pinna, Ksharsutra.

INTRODUCTION:

Keloid is type of scar. The term keloid means 'crab claw' was first coined by Alibert in 1817. [1,2] Keloid is persistent excessive growth of scar beyond its margin into the adjacent skin. [3] It is a result of an overgrowth of granulation tissue (collagen type 3) at the site of healed skill injury. Keloids are known to occur more frequently in black skin individuals. They show strong positive familial association and are seen more often in young age group patients. The incidence of keloids is about 15 times greater in dark skin individuals than in white skin. [1,2]

In keloid there is defect in maturation and stabilization of collagen fibrils. Normal collagen bundles are absent. Pathologically keloid contains proliferating immature fibroblasts, proliferating immature blood vessels and type 3 collagen stroma. Keloid may be associated with Ehlers-Danlos syndrome or scleroderma. Common site of keloid is sternum, earlobes, arms, pelvic region, and over collar bone. [3]

Ear pinna keloid is a rare benign, dermal, fibro-proliferative growth characterized by excessive formation of collagen, without any malignant potential. [1,2] It occurs in about 5-15% of human from manual trauma and blunt perichondrial trauma. Rate is higher in women due to wearing of ornaments, ear piercing over different area of pinna. As a result of such trauma patient develops swelling which is painless, circular or irregular, hard in consistency. [3]

Many treatment modalities have been tried worldwide for this condition which includes surgical excision, steroid, application of silicone gel, radiation, pressure therapy, LASER treatment. However, none of them are fool proof with regards to complete cure and prevention of relapse.

According to *Ayurveda* ear pinna keloid can be correlated with *Arbuda* of *Karnapali*. It is described under *Mansadhatu pradoshaj Vyadhi* (Diseases of the Muscular or Soft tissue). As per *Ayurveda* Arbuda is to be treated with *Ksharsutra* due to frequent relapse patient seek alternative methods that would preferable free of relapse. [4,5]

AIMS AND OBJECTIVE:

To evaluate the effect of *Ksharsutra* ligation for the removal of ear pinna keloid instead of surgical excision.

CASE REPORT:

A 40 years old female patient came to OPD with chief complaint of swelling over left ear lobe since one years. Patient gave history of ear piercing before one year and result into hard swelling. On examination that tender swelling over pinna diagnosed as Keloid. So she came to hospital for further management and *Ksharsutra* ligation over Keloid is treatment decided.

Type of Study: single case study

Preparation of *Ksharsutra*:

1)The barber thread no 20 is spread through lengthwise in hanger is 11 times smeared with Snuhi latex with the help of gauze piece soaked in the latex.

2)This wet hanger is transferred in Ksharsutra cabinet for drying.

3)This is followed by 7 coating of *Apamarg kshar* with Snuhi ksheer.

4)The final 3 coating are complete with *Snuhi ksheer* and fine powder of Haridra.

5)The hangers are placed inside the Ksharsutra cabinet and get dried by hot air blast followed by ultraviolet radiation to make it sterile. In this way twenty-one coating over thread are completed.

Surgical Protocol:

Under all aseptic precaution local anaesthetic drug, lignocaine 2% was filtrated in superficial skin around the base of keloid. A superficial skin incision was taken around the base of keloid. A sterile *ksharsutra* was applied and ligated tightly on incision site. After ligation dressing done with povidone iodine. The same Ksharsutra kept for five days. On the sixth day after removal of first Ksharsutra a fresh sterile Ksharsutra was ligated. The new Ksharsutra was kept for next five days, this cycle was continued till the keloid fell off completely. Dressing with povidone -iodine was done after ligation of every Ksharsutra.

DISCUSSION:

According to Ayurvedic literature, keloid of ear pinna can be correlated with *Arbuda*. *Arbuda* is the mansa or growth that occur at the pinna or lobule. *Arbuda* is Mansa Dhatu *Pradoshaja* Vyadhi. Application of *Ksharsutra* is best in such disease. Action of drug *Apamarga kshara* is strong alkaline in nature which causes chemical cauterization. Its action on tissue begins with sever irritation and subsequent inflammation of local tissue necrosis. This debris of necrotic tissue is cleared out giving way for fresh budding granulation tissue over the wound. *Haridra* is anti -inflammatory, antiseptic and antibacterial having wound healing activity which prevents infection. *Ksharsutra* has simultaneous combination of incision, excision, debridement, scrapping along with haemostatic, antiseptic and healing action. This lead to removal of keloid mass without producing any other injury.

RESULT:

The study shows that the ear pinna keloid can be successfully removed by *Kasharsutra* and there is significance risk reduction in recurrence of ear pinna keloid.

CONCLUSION:

Since the even after surgery of ear pinna keloid there is chance of recurrence, *Ksharsutra* found very effective Para surgical procedure in the management of ear pinna keloid along with its recurrence.

IMAGES:

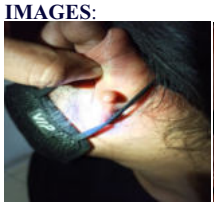

Image1: Keloid at ear pinna

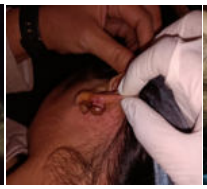

Image 2: K. S. ligation

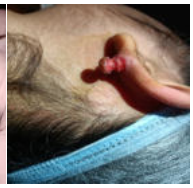

Image 3: Ear pinna keloid successfully excised by K.S.

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