

MANAGEMENT OF ARDITA (BELLS PALSY) THROUGH AYURVEDA A CASE STUDY

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ABSTRACT

In Ayurveda, Ardita (Bell's palsy) is considered as one of the eighty Vata Nanatmaja Vyadhis. It can be correlated with the disease 'Bell's palsy. Bell's palsy is a condition that developed; facial palsy the paralysis of facial nerve also impairs facial muscle movement and exhibits comparable symptoms. Bell's palsy, which affects only one side of the face. This is the most common type of unilateral lower motor neuron facial palsy that usually develops abruptly or on itself. Ayurvedic treatments like Snehana (oleation), Swedana (fomentation), Nasya (nasal medication), and the use of additional Ayurvedic medications were effective in managing Ardita. The purpose of this study was to find out the best ways to manage Bell's palsy. For present study a 31 one year old patient approached to Kayachikitsa OPD who was suffering from complaints of deviation of face and mouth towards left side, dribbling over left side, eyeballs rolling upwards, wrinkles over the forehead, and unable to whistle since a month. Bell's palsy can be managed by giving comprehensive management of Panchakarma and palliative treatment which reflects that it is good remedy for Bell's palsy.

KEYWORDS: Ardita, Vata Nanatmaja Vyadhi, Facial paralysis, Vata.

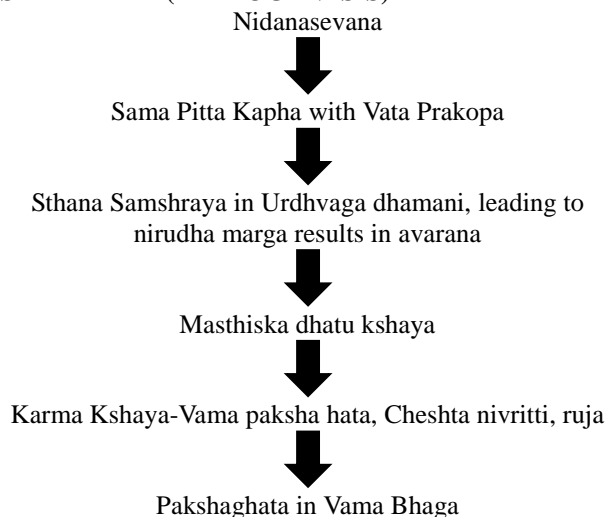
INTRODUCTION

Ardita is considered as one among the eighty Vata Nanatmaja Vyadhis in our Ayurvedic classics according to Acharya Charaka^[1] and Acharya Sushruta explained it in the Vata vyadhi Adhyaya of chikitsa sthana.^[2] It is also considered as a "Shiro Roga since Shiras is the Adhistana in this entity.^[3] Hence also considered as Shiroroga. Acharya Charaka opines that this disease is localized in half of the face with or without the involvement of the body.^[4] While Sushruta has considered as the face is only affected in Ardita. Ardita is also explained as Ekayaam by Ashtanga Hrudaya. Acharya Arunadatta has clarified that Ardita is the disease of the body mostly affecting half of the face^[5], due to excessive aggravation of Vata and causes distortion of face. It can be correlated with the disease 'Bell's palsy in modern aspects. It is a condition that developed, facial palsy the paralysis of facial nerve also affects the movement of facial muscles and shows similar symptoms due to inflammation of the facial nerve within its canal above the stylomastoid foramen.^[6] In Bell's palsy the majority of large population studies reveal a yearly incidence of 15-30 cases per 100,000 persons.^[7]

NIDANA (CASUATIVE FACTORS)

According to various Acharyas, there are Nidana (causative factors) that one should be aware of in order to prevent such illnesses.

Acharya Charaka^[8] mentioned suppressing the urge to sneeze, Shiroroga, Carrying heavy loads on one's head, sudden abrupt movement of head and neck, sleeping in an uncomfortable posture, Use of pillows that are too high or too low etc. Acharya Sushruta^[9] and Vagbhata^[10] stated excessively laughing, yawning, sneezing, churning hard food items, and speaking loudly. Acharya Sushruta added Rakta Kshaya, (depletion of blood) in specific group of patients get afflicted by Arditavata. Pregnant women, recently delivered lady, Children, Old people, Emaciated persons. Acharya Vagbhata^[11] explained Arditavata is a disease, causes due to the vitiation of Pranavata. Yogaratnakara explained Excessive tongue scrapping, Siravyadhana (if done improperly), Injury to the Marmas (Vital points in the head) Excessive rubbing of the eyes, ears and nose, by consuming alcohol and Asavas in excess etc.

SAMPRAPTI (PATHOGENESIS)**PURVAROOPA (PREMONITARY SYMPTOMS) AND ROOPA(SYMPTOMS)**

The Purva Roopa and Roopa of Ardita Vata described by Acharya Sushruta is as follows: Roma Harsha (horripilation's), Vepanam (Tremors), Avila Netrata (Blurred visions), Toda (pain), Vaktrardhavakra (complete or partial loss of voluntary functions of one side of the face), Vaikruta Netradi (Deformities in Eye), Greevachapya (Cervical pain), Vaksanga (Inability to speak), Manya Sthamba (Stiffness of the Neck), Hanugraha (Stiffness of the Jaw).

CASE STUDY

A male patient aged about 31 years visited in Kayachikitsa OPD of Ashwini Ayurvedic Medical College and Research Centre, Tumkuru, Karnataka (OPD.Reg.No.31030 and date 14/10/2024) Presenting with complaint of Deviation of mouth and face on left side, eyeballs rolling upwards, wrinkles over the forehead and dribbling over left side, since a month, air easily escapes from right side.

ASSOCIATED COMPLAINTS: General debility since a month.

HISTORY OF PRESENT ILLNESS: Patient was healthy a year ago he suddenly developed dribbling of face towards left side and deviation of mouth and face towards left side, he had consulted nearby hospital but the symptoms didn't subside so he consulted our hospital AAMC for further treatment.

HISTORY OF PAST ILLNESS: No any k/c/o of HTN / DM, he had undergone surgery before 1.5 years back stunt implantation.

FAMILY HISTORY: no any significant history, all are said to be healthy.

ON EXAMINATION

Systemic examination of respiratory system observed no any significant abnormality
 Eye balls rolls upwards
 wrinkles over forehead
 whistling not possible
 air easily escapes from right side.

GENERAL EXAMINATION

GC – fair, conscious, alert, oriented to time place and person
 Temp – A febrile
 BP – 120/80 mmHg
 Pulse – 74/min
 Built – moderate
 Nourishment – moderate
 Lymphadenopathy - Absent
 Oedema - Absent
 Icterus - Absent
 Cyanosis - Not seen
 Pallor – Absent

SYSTEMIC EXAMINATION

- Gastro intestinal system: soft and non-tender.
- Respiratory system: NVBS clear.
- Cardio vascular system: s_1 & s_2 heard, no added murmur.

CENTRAL NERVOUS SYSTEM EXAMINATION

- Higher Motor Functions intact
- Consciousness – Conscious
- Orientation to Time, place, person – Intact
- Memory – Recent, not affected, Remote – not affected
- Intelligence – Intact
- Hallucination & Delusion – Absent
- Speech – Normal

CRANIAL SYSTEM EXAMINATION

- Forehead frowning – not possible on right side
- Eyebrow raising – not possible on right side
- Eye closure – right eyeball moves upwards and inwards when the patient attempts to close it along with incomplete closure of eyelids (Bells Phenomenon)
- Teeth showing – not possible in right side denture
- Blowing of cheek – not possible in right side
- Naso labial fold – Naso labial fold loss on right side
- Taste perception – not affected
- Dribbling of saliva – dribbling of saliva on right angle of mouth
- Bells phenomenon – present on right side
- Deviation of mouth present towards left side

Deep Reflexes such as Biceps, Triceps, Supinator, Knee jerk, Ankle jerk and Plantar reflex are normal. Muscle power and Muscle tone in all limbs are also normal.

Co-ordination Upper limb • Dysdiadokinesia - absent •
 Finger to nose test - possible • Pronator Drift - Possible •
 Fine movements - No abnormality detected Lower limb •

Tandem walking - Possible • Heel shin test -Possible •
Heel walk – Possible.

SPECIFIC INVESTIGATIONS

MRI of Brain (Date-7/10/24) MRI shows hypoplastic right vertebral artery. Rest nil significant.

TREATMENT

SL.NO	Type of Panchakarma Treatment	Drugs
1	Mukha abhyanga	Balashwagandhadi taila (7 days)
2	Ksheera dhooma over face	Balamoola Kashaya + milk (7 days)
3	Nasya karma	Mahamasha taila (7 days)
4	Shirotaila dhara	Ksheerabala taila (7 days)
5	Kukkutanda sedan	Kukkutanda + lemon pieces (7 days)

BEFORE TREATMENT

15/10/2024

AFTER TREATMENT

22/10/24

FIRST FOLLOW UP

30/10/24

INTERNAL MEDICATIONS

Sr NO	TREATMENT	DRUG	ANUPANA	DURATION
1	Dhanadhanayanadi Kashaya	3tsf twice a day	Lukewarm water (after food)	15 days
2	Cap.Neuron	1 cap thrice a day	normal water (after food)	15 days
3	Cap.Vathapy	1 cap thrice a day	Normal water (after food)	15 days
4	Navashwagandha syrup	4tsf thrice a day	Normal water (after food)	15 days
5	Gandharvahastadi taila	5 caps or 25ml	Lukewarm water (empty stomach)	One time a day
6	Ekanga Veera Rasa 125mg	1 tab thrice a day	Normal water (after food)	15 days

RESULT

Assessment was done on the basis of scoring of cardinal associated signs and observed symptoms. A facial nerve

function grading by House-Brookman grading measures was used to assess outcomes.^[12]

Comparison of Subjective Parameters

Parameter	Before	After 7 days	After 14 days
Deviation of mouth towards left side	Grade-4	Grade-2 slightly deviated decreased by 10%	Decreased by 75% turning to normal symmetry of face
Unable to chew from right side and trapping of food between gums and cheeks	Grade-3	Grade-2 able to chew with difficulty	Easily chew from right side
Improper blinking of right eye	Grade-4	Grade-2 blink controlled Mild improved	Easily blink right eyelid and complete closure of eyelid
Slurred speech	Grade-3	Pronouncing with less efforts	Moderately improved Normal speech
Dribbling of saliva	Constant but mild dribbling	Intermittent dribbling	Dribbling absent and no dribbling of saliva
Nasolabial fold	Absence of Nasolabial fold	Nasolabial fold seen while attempting to smile	Nasolabial fold not presents on left side. Nasolabial fold present normally

DISCUSSION

The functions of sense organs impaired in Ardita (Bell's palsy), hence Ardita (Bell's palsy) considered as a disorder of sense organ which are governed by the Omni presence of Vata. Charaka attributed the root cause of Ardita (Bell's palsy) to highly vitiated Vata dosha whereas Ayurveda experts Shodhal classified Ardita on doshic influence of Kapha and Pitta rather than Vata. Nasya (Errhine therapy) is explained in classics like Charaka and Sushruta for treatment of Ardita. Sushruta described medications for Ardita in his Sutrasthana giving special emphasis on Nasya.

As per Vagbhata and Charaka, Ardita requires a nourishing type of therapy.^[13] Nasya karma (Errhine therapy), Moordha Taila (application of oil to the head), Tarpana (libation) with medicated oil to the eyes and ears, Nadi Sweda (tubal sudation) are included in the treatment principles of Ardita.

Keeping all these efficacious treatment modalities in mind, the comprehensive treatment was planned for the present case.

Mukha Abhyanga with Balashwagandhadi taila^[14] which contains Bala, Ashwagandha, Laksha, Mastu, Rasna, Chandana, Manjishta, Durva, Madhuka, Sariva, Usheera, Jalada, Kushta, Agar, Suradruma, Haridra, Kumada, Shatahva, Padma Kesara it balances Vata and Pitta it's

used to improve the nerve strength, muscle wasting, lack of strength in joints and bones.

Ksheera dhooma with Balamoola Kashaya^[15] which is Madhura and with Guru Guna having Madhura Vipaka has Balya, Grahi, Vrisya, Oja vardhaka and Brimhana properties balances all three doshas it has Vata shamaka properties.

Nasya Karma with Mahamasha Taila^[16] consists of Masha, Dasha Moola, Bilva, Agnimantha, Shyonaka, Gambhari, Patala, Shalaparni, Prishnaparni, Gokshura, Bruhati, Kanthakari, Chaga mamsa, Tila taila, Atmagupta, Urubaka, Shatahva, Lavana Traya, Manjishta, Chavya, Chitraka, Katphala, Trikatu, Rasna, Madhuka, Saindhava, Devadaru, Amruta, Kushta, Vajigandha, Vacha, Shati used to cure Pakshaghata, Vishwachi Shirotaila Dhara with Ksheerabala Taila^[17] consists of Bala Kashaya, Bala kalka, Ksheera, indicated in Vatarakta it is Tridosahara Dhanadhanayanadi Kashaya^[18] consists of Dhanadanayana, Shunti, Shigru, Rasna, Uragandha, Varuna, Lashuna, Krishna, Chitraka, Eranda, Surataru, Ghana, Pathya, Barbara its used in Ardita, Akshepaka, Pakshaghata and Vatahara Kashaya.

Capsule Neuron consists of Brihatvatachintami Rasa, Agnimantha, Patala, Gambhari, Brihati, Kanthakari, Gokshura, Shalaparni, Prishnaparni, Trayodashanga Guggulu, Lashuna, Bala, Eranda, Kapikachu useful in

Pakshaghata, Gridhrasi, Vishwachi Capsule Vathapy consists of Atibala, Ativisha, Sugandha, Vriddhadaruka, Vajradanthi, Devadaru, Bharangi, Dashamoola, Dusparsa, Yavani, Pushkar Moola, Sada Pushpa, Erandamoola, Bala moola, Amrita Panchanga, Nirgundi Panchanga given in Ardita, Pakshaghata, Parshwa shola, Apasmara, Manasika rogas.

Navashwagandha^[19] consists of Ashwagandha, Bala, Rasna, Triphala, Dashamoola, Musali, Erandamoola, Manjishta, Ardraka, Yashtimadhu, Punarnava, Devadaru, Chandana used in Gridhrasi, Gandharvahastadi taila^[20] mild purgative which induces Vatanulomana (downward flow of Vata). It helps to relived a Pakvashayagata Vata has laxative properties pacify Vata from the Pakvashaya consists of Gandharvahastadi moola, Yava, Nagara, Ksheera, Murchita eranda taila, Shunti.

CONCLUSION

Ardita (Bell's palsy) can be managed with comprehensive application of Kukuntanda Sweda, Ksheera Dhooma, Nasya, Mukha Abhyanga, Shirotaila dhara and palliative treatment such as Cap.Neuron, Dhanadhanayadi Kashaya, Cap.Vathapy, Navashwagandha, Gandharvahastadi taila. Combined treatment pacifies the vitiated Vata in the body and provide nourishment to the sense organs. Moreover, the drugs used internally and externally are having additional effect in relieving all the signs and symptoms.

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