

A CASE REPORT OF SUCCESSFUL AYURVEDIC MANAGEMENT OF FACIAL PARALYSISDr. Sunil Kumar,^{1*} Dr. Ish Sharma² and Dr. Rakesh Narayan³¹Associate Professor, National Institute of Ayurveda, Jaipur.²Principal, Babe ke Ayurveda College, Daudhar, Moga, Punjab.³Research Officer, CCRAS, New Delhi.***Corresponding Author: Dr. Sunil Kumar**

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INTRODUCTION

Facial palsy is caused due to the damage to facial nerve either upper motor neuron (UMN) or lower motor neuron (LMN). Presentations include weakness of the muscles of facial expression and eye closure. Face deviates towards the opposite side while smiling and there will be sagging down of the face. In LMN lesions the patient can't wrinkle his forehead while in UMN lesions the upper facial muscles are partially spared and the patients can wrinkle their faces and sagging down of the face is less prominent. The various etiological factors include Herpes zoster, Cytomegallo virus, otitis media, Lyme disease (infective), Gullian Barre syndrome, and Mono neuropathy as in Diabetes Mellitus, Sarcoidosis (neurological), Parotid gland tumor, cerebro-vascular accidents, Hypertension and idiopathic causes as in Bell's palsy.^[1]

Bell's palsy is one of the most common causes of facial paralysis. It is generally idiopathic but recently Herpes Simplex Virus was detected as a cause in large number of cases. The onset is generally abrupt and maximal weakness is attained in 48 hours. The symptoms include pain behind the ears, altered taste sensation and hyperacusis. 80% patients recover within a few weeks and the treatment strategy generally include administration of glucocorticoids along with antiviral agents, massage of the weakened muscles etc.^[2] In Ayurveda, this condition is mentioned as *Ardita*, a disease caused by *Vata*^[3] and it very well respond to suitable Ayurvedic formulations and medicated sudations. Here a case of Bell's palsy is reported that failed to respond to conventional medicine and was treated successfully with Ayurvedic medicines.

CASE HISTORY

A 37-year-old male patient, a policeman by profession who had apparently been normal six months before insidiously developed unilateral facial weakness on 15-10-15. The patient was on night duty for the previous 3 days of the onset of symptoms. On the day when the symptoms started, he had returned from his duty at 3 a.m. and slept for 4 hours and on waking up, he felt heaviness, numbness of right side of the face along with pain behind the ear. He also felt loss of sensation of taste in the affected side. The patient approached an allopathic physician where he was diagnosed to have facial paralysis. He was treated with steroids and physiotherapy, but no major relief was found. After two

months, patient himself withdrew from the allopathic treatment when he found no significant improvement with the treatment. The patient presented in the OPD of National Institute of Ayurveda, Jaipur on 19-02-16 complaining of unilateral facial weakness of right side of face. There was no history of other constitutional features like vomiting, abdominal pain, skin rashes, trauma or any other major medical or surgical conditions. Personal history was taken thoroughly to find the following details. Appetite was normal and bowels were normal without any tendency of constipation/irregular frequency. Urine output was also normal but sleep was disturbed due to pain. The patient had no other significant medical history.

Examination

Vitals-Pulse: 78/min, full volume, Temperature: 98.8 F, Blood Pressure 130/80 mmHg (on sitting position), Respiratory rate 22/min, And Heart rate 76/min.

The findings of examinations of respiratory, cardiovascular, gastro intestinal systems were within normal limits. Nervous system exam: Gait: normal Orientation and memory: intact.

Nerve conduction study showed normal latency (2.74) with low amplitude (170.2 μ v) and axonal affection of right facial nerve suggestive of right lower motor neuron facial palsy. Blood investigations had the following findings: CBC: Hb% 14g/dl, TLC: 5400/microlitre,

DLC: N-57%, L-36%, E-2%, B-0%. TPLC-2.68 lac/microlitre, ESR: 20mm/hr.

On examination, drooping of corners of the mouth was observed, with affection of creases of skinfold on both cheeks and forehead of affected side which was indicative of lower motor neuron affection. The patient was unable to close the right eye lid with positive Bell's phenomenon. There was evident sagging of right lower eyelid with tear accumulation. There was loss of sensation of taste in the affected side. Other cranial nerves were found normal on examination. The patient was provisionally diagnosed as a case of right lower motor neuron facial palsy.

The patient was thoroughly analyzed as per diagnostic principles of *Ayurveda*. After having done the differential diagnosis, the patient was diagnosed as a case of *Ardita*, the symptoms of which corresponds to that of facial paralysis. Accordingly, the patient was informed and a treatment plan was decided.

Treatment

The following treatment schedule was followed. Initially for the patient was advised to take *Rasaraja Rasa* 125 mg., *Sameera Pannaga Rasa* 125 mg. after food, *Bhallataka Avaleha* 10 g., *Dashamoola Kwatha* 20 ml. twice a day orally and *Gandharvahastadi Eranda Taila* 10 ml. with milk at bed time. *Nasya Karma* (nasal instillation) of *Shadbindu Tail*, 6 drops per nostril done after *abhyang* (massage) of *Dashamoola Taila* on face followed by *vashp sweda* (steam sudation) everyday early in the morning at 7 a.m. This treatment was continued for two weeks. Thereafter, *Sameera Pannaga Rasa* was replaced with *Maha Vatavidhwamsan Rasa* and *Ekangavira Rasa* each 125 mg and all above medicines were continued for next two weeks. The patient was advised to avoid direct contact of cold air as well as cold food items.

RESULTS

After seven days of treatment, the patient was able to partially close the eyelids and the skin crease of face normalized. The skin crease of forehead partially appeared. Drooping of the corners of the mouth was still present. After twenty-one days of treatment, the patient was able to close the eyes completely and also the drooping of the corners of the mouth was reduced. Mild weakness of the affected side was still persists.

DISCUSSION

Lower motor neuron facial palsy occurs due to various reasons and presents with facial weakness, sagging down of face and disappearance of face creases. The idiopathic facial palsy is called Bell's palsy. The other important causes that include under differential diagnosis are Lyme disease, Rasmussen Hunt disease, Guillain Barre syndrome. These conditions were excluded on the absence of systemic symptoms (Lyme disease), non-involvement of

eighth nerve and absence of inflammation (Ramsay Hunt disease), absence of bilateral involvement and proximal muscle group involvement (GBS syndrome). Neoplastic causes were excluded as the condition not progressive and not associated with symptoms like cachexia etc.

Facial paralysis has been described in *Ayurveda* as the disease entity names as *Ardita*. The presenting complaints of the patient can be very well understood in line to the description of *Ardita* in classical texts. It is caused due to the vitiation of *Vata Dosha*, which results in symptoms like deformity unilateral of face, difficulty in speech and laughing, tremors of head, difficulty in movements of eyes, loosening of teeth, loss of voice, loss of hearing, loss of touch sensation of face or one half of the body. While spitting, it goes to one side, drooping of eyelid of one side of face, pain over head and neck region or one half of the body or of the face.

As the disease is caused purely by *Vata*, which is cold, dry, rough etc in property, the medicated sudations which are unctuous, hot etc. (the opposite qualities for *Vata*) are beneficial. The drugs *Rasaraja Rasa*, *Sameera Pannaga Rasa* are known to mitigate *Vata*. *Dashamoola Kwatha* decreases *Vata* and inflammatory swelling of the nerve and the preparation like *Gandharvahastadi Eranda* is known to clear the micro channels in the specific area facilitating the proper healing and restoring the physiological action. *Bhallatakavaleha* act as immunogenic and has opposite qualities of *vata* and *kaph*.

CONCLUSION

This case highlights the role of alternative systems of medicine like *Ayurveda*, in successfully treating the cases which fail to respond to the conventional treatment methods. The disease was diagnosed in *Ayurvedic* terms and the treatment was planned accordingly. As the disease was purely caused by *Vata Dosha*, the treatment mainly aimed at mitigating *Vata* with therapies which are hot, unctuous and which helps to clear the blocked micro channels involved in the pathology. Even though, it cannot be claimed that the situation is completely cured, the quality of life of the patient could be improved as the therapy helped to restore the normal functions of the facial muscles. Further clinical studies should be conducted to validate the efficacy of the treatment.

Table 1: Showing ingredients of Rasaraja Rasa (Bhaishajyaratnavali).

1	Parada	Purified and processed Mercury	48g
2	Abhrakabhasma	Purified and processed Silica	12g
3	SwarnaBhasma	Bhasma prepared from Gold	12g
4	LohaBhasma	Bhasma prepared from Iron	6g
5	RajataBhasma	Bhasma prepared from Silver	6g
6	VangaBhasma	Bhasma prepared from Tin	6g
7	Vajigandha	Withaniasomnifera	6g
8	Lavanga	Syzgiumaromaticum	6g
9	Jatikosha	Myristicafragrans	6g
10	Ksheerakakoli	Fritileriaroylei	6g
11	Kakamachirasa	Solanumnigrum	qs

Table 2: Showing ingredients of Sameerpannag Ras (Ayurveda Aushadha gunadharm Shastra).

1	ShudhaParada	Purified Mercury	1 Part
2	ShudhaGandhaka	purified Sulphur	1 Part
3	ShudhaMalla	Purified Arsenic Oxide	1 Part
4	ShudhaHaritala	Purified Arsenic tri sulphide	1 Part
5	ShudhaManashila	Purified Arsenic Di Sulphide	1 Part

Table 3: Showing ingredients of Amritabhallataka Ghrita (Ashtanga hrudayam Uttarasthana).

1	Shuddha Bhallataka	Semecarpus anacardium	3.072 Kg
2	Kshira	Milk	3.840 L
3	Sarpi	Ghee	3.840 L
4	Sharkara	sugar	Q.S

Table 4: Showing ingredients of Dashamoola Kashaya (Bhaishajya Ratnavali).

1	Bilva	Aeglemarmelos	1Part
2	Agnimantha	Premnamucronata	1Part
3	Shyonaka	Oroxylumindicum	1Part
4	Patala	Stereospermumsuaveolens	1Part
5	Gambhari	Gmelinaarborea	1Part
6	Brihati	Solanumindicum	1Part
7	Kantakari	Solanumxanthocarpum	1Part
8	Gokshura	Tribulusterrestris	1Part
9	Shalaparni	Desmodiumgangeticum	1Part
10	Prishnaparni	Urariapicta	1Part

Table 5: Showing ingredients of Gandharvahastadi Eranda Tailam (SahasraYoga).

1	ErandaTaila	Ricinuscommunis	10ml
2	Gandharvahasta	Ricinuscommunis	1.25g
3	Chiruvilwa	Holopteleaintegrifolia	1.25g
4	Hutasa	Plumbagoindica	1.25g
5	Vishwa	Zingiberofficinale	1.25g
6	Pathya	Terminaliachebula	1.25g
7	Punarnava	Boerhaviadiffusa	1.25g
8	Yavasaka	Tragiainvolucrata	1.25g
9	Bhumitala	Curculigoorchioides	1.25g

Table 6: Showing ingredients of Shadbindu Taila (Bhaishajyaratnavali).

1	TilaTaila	Sesamumindicum	768g
2	AjaKsheera	Goat milk	3.072 L
3	Bhringaja rasa	Eclipta alba	3.072 L
4	Eranda	Ricinuscommunis	19g
5	Tagara	Valerianawallichii	19g
6	Shatahva	Anethumsowa	19g
7	Jivanti	Leptadeniareticulata	19g
8	Rasna	Vanda roxburghii	19g
9	Saindhava	Rock salt	19g

Table 7: Showing ingredients of Dashamoola Tailam (Bhaishajya Ratnavali).

1	Bilva	Aeglemarmelos	240g
2	Shyonaka	Oroxylumindicum	240g
3	Gambhari	Gmelinaarborea	240g
4	Patala	Stereospermumsuaveolens	240g
5	Agnimantha	Premnacorymbosa	240g
6	Shalaparni	Desmodiumgangeticum	240g
7	Prishniparni	Urariapicta	240g
8	Brihati	Solanumindicum	240g
9	Kantakari	Solanumxanthocarpum	240g
10	Gokshura	Tribulusterrestris Linn	240g
11	Ardraka	Zingiberofficinalis	768ml
12	Nirgundi	Vitexnegundo	768ml
13	Pippali	Piper longum	12g
14	Pippalimoola	Piper longum	12g
15	Chavya	Piper chaba	12g
16	Chitraka	Plumbagozeylanica	12g
17	Shunti	Zingiberofficinalis	12g
18	Maricha	Piper longum	12g
19	Shunti	Zingiberofficinalis	12g
20	Pippali	Piper longum	12g
21	Jiraka	Cuminumcyminum	12g
22	Krishna Jiraka	Nigella sativa	12g
23	Sarshapa	Brassica juncea	12g
24	Saindhava Lavana	Rock salt	12g
25	YavaKshara	Hordeumvulgare	12g
26	Trivrit	Operculinaturpethum	12g
27	Haridra	Curcuma longa	12g
28	DaruHaridra	Berberisaristata	12g
29	Jala		384ml
30	Taila		768ml

Table 8: Showing ingredients of Maha Vatavidhvasana Rasa (Rasatantrasara Siddhaprayogasangraha).

1	ShuddhaParada	purified Mercury	12g
2	ShuddhaGandhaka	purified Sulphur	12g
3	Naga Bhasma	Lead Calx	12g
4	VangaBhasma	Tin Calx	12g
5	LohaBhasma	Bhasma prepared from Iron	12g
6	TamraBhasma	Bhasma prepared from Copper	12g
7	AbhrakaBhasma	Purified and processed Mica	12g
8	Pippali	Piper longum	12g
9	ShudhaTankana	Borax	12g
10	Maricha	Piper nigrum	12g
11	Shunti	Zingiberofficinalis	12g
12	ShuddhaVatsanabha	Aconitum ferox	48g
13	Triphala Haritaki Vibhitaki Amalaki	Terminaliachebula Terminaliabellirica Emblicaofficinalis	Q. S. for bhavana 3 times
14	Trikatu Nagara Maricha Pippali	Zingiberofficinalis Piper nigrum Piper longum	Q. S. for bhavana 3 times
15	Chitrakamoola		Q. S. for bhavana 3 times
16	Bhringaraja	Eclipta alba	Q. S. for bhavana 3 times
17	Kushta	Saussurealappa	Q. S. for bhavana 3 times
18	Nirgundi	Vitexnegundo	Q. S. for bhavana 3 times
19	Arkadugdha	Calotropisprocera	Q. S. for bhavana 3 times
20	Amalaki	Emblicaofficinalis	Q. S. for bhavana 3 times
21	Ardra	Zingiberofficinalis	Q. S. for bhavana 3 times
22	NimbuSwarasa	Citrus Limon	Q. S. for bhavana 3 times

Table 9: Showing ingredients of Ekangaveera Rasa (Brihat Rasarajasundara).

1	ShuddhaGandhaka	purified Sulphur	1 part
2	ShuddhaParada	purified Mercury	1 part
3	KantalohaBhasma	Manganese	1 part
4	Vangabhasma	Tin	1 part
5	Naga bhasma	lead	1 part
6	TamraBhasma	Copper	1 part
7	AbhrakaBhasma	Mica	1 part
8	TikshnaLohaBhasma	Iron	1 part
9	Nagara	Zingiberofficinalis	1 part
10	Maricha	Piper nigrum	1 part
11	Pippali	Piper longum	1 part
12	Triphala Haritaki Vibhitaki Amalaki	Terminaliachebula Terminaliabellirica Emblicaofficinalis	Q.S. bhavana
13	Trikatu Nagara Maricha Pippali	Zingiberofficinalis Piper nigrum Piper longum	Q.S. bhavana
14	Nirgundi	Vitexnegundo	Q.S. bhavana
15	Chitraka	Plumbagozeylanica	Q.S. bhavana
16	Bhringaraja	Eclipta alba	Q.S. bhavana
17	Shigru	Moringaoleifera	Q.S. bhavana
18	Kushta	Saussurealappa	Q.S. bhavana
19	Amalaki	Emblicaofficinalis	Q.S. bhavana
20	Vishamushti	Purified Strychnosnux vomica	Q.S. bhavana

21	Arka	Calotropisprocera	Q.S. bhavana
22	Dhattura	Daturametel	Q.S. bhavana
23	Ardaka	Zingiberofficinalis	Q.S. bhavana

Q. S.-Quantum satis

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