



KHEERABALA TAILA NASYA AND PANASPATRA SWEDA IN ARDITA W.S.R. TO BELL'S PALSY

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Abstract

Ardita (facial paralysis) is considered as a *Vatavyadhi* according to Bruhatrayi. It is also explained as *ekayaam* by Ashtang hrudaya. In modern it is called as facial paralysis. It is caused due to lesion occur at the seventh cranial nerve i.e. facial nerve. This paper highlights about the history of the *Ardita* patient in brief and **ayurvedic** treatment with its results. In this research we are concentrating on '*NETRAVIKRUTI*' (Partial closing of eye/eyes). In modern concept when in facial paralysis eye is involved then it is said to be 'Bell's Palsy'. In this condition orbicularis oculi muscle is get paralyzed

KEY WORDS-- *Panasapatra*(Jack fruit leaves) *swedana* , *Ksheerabala taila*, *Ardita*, **Bell's Palsy**, *Nasya*.

Introduction

Ardita (facial paralysis) is considered as a *Vatavyadhi* according to Bruhatrayi ⁽¹⁾. It is also explained as *ekayaam* by Ashtang hrudaya ⁽²⁾ In modern it is called as facial paralysis. It is caused due to lesion occur at the seventh cranial nerve i.e. facial nerve.

Causative factors for *Ardita*:

Transferring heavy weights on head, Excessive laughing, Loudly talking, Sudden fearing, Improper sneezing, Sleeping on uneven bed, Eating hard food particles, Improper breathing, other *vatavardhaka ahara* as well as *Viharas* ⁽³⁾

The people who are young, emaciated, old age, ladies, pregnant women, women in puerperium, lack of blood (*raktadhatu*) in a person: become victims of *ardita*

Prodromal symptoms:

Horripilation, Tremors, Lacrimation of eyes, Loss of sensation of skin, Pricking pain, Torticollis, and Lock jaw are prodromal symptoms.

Symptoms of *Ardita*:

Bolus of food goes in one side, at the time of speaking nose becomes twist and eye become stable, urges of sneezing commence and stopped, voice becomes weak, slow, irregular, improper, and spread. The patient feels pain in that affected half part, patient should not spit normally; they spit on one side, memory becomes weak.

Examinations in *Ardita*:

The motor function is tested by inspection of facial expression and tests of facial mobility. The patient is asked to raise

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the eye brows, wrinkle the brow, close the eyes, show the teeth and repeating a sentence with several labial consonants, blow out the cheek, and retract the chin. Any asymmetry is noted.

The sensory function to be tested is the taste sensation on the anterior 2/3rd of the tongue. Each half of the tongue should be tested with four fundamental tastes (sweet, sour, bitter, salt) and any asymmetry should be noted. The reflexes to be tested are corneal, conjunctival and jaw jerk.

Pathogenesis:

Due to intake of causative factors *vata dosha* increases, vitiates and moves in upward direction either right or left side. Then this vitiated *vata dosha* dries the *rakta dhatu* (blood/capillaries) of particular side. It contracts extremities and knee joint and produces twisting (*vakrata*) in face, chin, nose, eye, eye brows towards one side and creates a disease known as **Ardita** (facial paralysis).

Prognosis:

Emaciated, fixed eyes, inarticulate, tremors, chronic of three years if these symptoms are present then *Ardita* is said to be non curable.

Treatment principles in *Ardita*:

Navan Nasya (Medicated nasal drops), *Shiro abhyanga* (Head Massage), *Nadi swedana* (Sudation) or *Upanah swedana* (Poultice sudation) with meat of *Anupa desha animals*.

-Charaka.

Navan Nasya (Medicated nasal drops), *Shiro abhyanga* (Head Massage), ear and eyes should be oleated. If edema is there then *Vaman* (Emesis) should be done, if burning sensation and redness is there then do the *Raktamokshan* (Venous puncture/Leech application)- Vagabhata.

Mastishkya (Head Massage, Pouring stream of medicated drugs on head, Medicated gauze piece putting on head), *Shirobasti*, *Nasya* (Medicated nasal drops), *Dhooma* (Medicated smoke), *Upanah* (Poultice sudation), *Snehan* (Oleation), *Nadi swedana* (Sudation) etc. should be done. -Sushruta.

AIM AND OBJECTIVES

- 1) To assess the effect of *Ksheerabala taila* *nasya* (Medicated nasal drops) in *ardita*.
- 2) To assess the effect of *panasapatra* (Jack fruit leaves) *sweda* (Sudation) in *ardita*.
- 3) To assess the combine effect of both the above mentioned therapies in *Ardita* and Bell's palsy.

Orbicularis Occuli Muscle

In this research we are concentrating on 'NETRAVIKRUTI' (Partial closing of eye/eyes). In modern concept when eye is involved in facial palsy then it is said to be 'Bell's Palsy'. In this condition orbicularis oculi muscle is get paralyzed. It gives symptoms like-

- 1) Upward and outward movement of eyeball.
- 2) Partially closing of eye.

MATERIALS AND METHODS

- Random selection of the patients was made irrespective of their age, sex, education, etc. from the O.P.D. & I.P.D. of D.G.M. Ayurvedic Medical College and Hospital, Gadag.
- Single group study.
- Sample size - 06.

Panchakarma Treatment

- *Abhyanga*(Facial Massage) with *Ksheerabalataila*.
- *Panasapatra* (Jack fruit leaves) *swedana* (Sudation).
- *Nasya* (Medicated nasal drops) with *Ksheerabalataila*¹⁰¹.
- Ksheerabala taila is mentioned for *Vatavyadhi* in 'Sahasrayoga'⁽⁴⁾.
- *Panasapatra*(Jack fruit leaves) is having quality like *balya*⁽⁵⁾ and it is use in Kerala especially for *swedana*(Sudation).
- *Nadi swedana*(Sudation) and *Nasya* (Medicated nasal drops) is explained in classics like Charak and Sushruta samhita⁽⁶⁾

B) Followed by Internal medicines

Liq. Dhanadnayanadi kashaya. - 4tsp TDS.

Ingredients- Kuveraksh, shunthi, shigru, rasna, vacha, varun, lashun, pippali, chitrak,

eranda, devdaru, musta, haritaki. Ref- Sahasrayoga.

1) Cap. Palsineuron - 1tab TDS.

Ingredients- Mahavataavidhwansa, Sameerapannag, Ekangveera rasa, Sootshekhar, lajari, khurasani owa all are 60mg.

Procedures conducted for 8days. Internal medicines are given for 16 days. Patient came after 8 days for follow up

Purvakarma (Pre Operative measures)-

Patient is thoroughly examined for vital signs and make sure that patient is fit for the treatment. In the morning when patient passed the motion asked him to sit/lie on a table as per the convenient of patient & physician.

Abhyanga (Massage):-

- At face for 25min.
- At shoulder and neck region. 5min

Swedana(Sudation):-

- After *abhyanga* the *swedana* should be carried out with *Panasapatra* (Jack fruit leaves).
- 8-10 *Panasapatra* (Jack fruit leaves) taken, fry them in pan.
- This should be carried out till *Panasapatra* becomes wasted.

Pradhankarma(Main Operative measures)

Nasya (Medicated nasal drops)

- 8 drops in each nostril for first 3days
- 10 drops in next 2days
- 15 drops in last 2 days

Paschat karma (Post Operative measures)-

- Palm and Sole of the patient slightly rubbed.
- Lie down for 100 matrakala.
- The patient should gargle with Luke warm water after the nasya.

Table No. 1 - Pathya-Apathya (Do's and Don'ts)

APATHYA (Dont's)	PATHYA (Do's)
Sheetala jala pana.(cold water drinking)	Ushana jala.(Lukewarm water)
Sheetala jala snana.(cold water bathing)	Mashenderi. (Medu vada)
Dosha prakopa aahar. (foods aggravates condition)	Rest.
Indriya nigraha.(Controll over sensory organs)	
Rajodhooma. (Exposure to smoke)	
Sneha, Aatapa, Madya(Excess internal oleation, Exposure to Sun, Alcohol)	
Dravapana (Excess liquid intake), Shirasnan (Head bath)	
Atiyanayan(Excess Travelling), Krodha(Excess Anger)	

Table No. 2 - Study Duration....

Treatment	Duration
<i>Abhyanga, Swedana, Nasya</i>	7 days
<i>Shamana Aushadhi</i> (Internal Medicine)	15 days
Follow up	15 days
Total duration	30 days

Table No. 3 - Grading

Symptoms	Gradings	Score
Mukhavakrata. (Twisting of Mouth)	Complete	3
	Half	2
	Mild	1
	Normal	0
Vaksanga. (Aphasia)	Complete	3
	Pronouncing with great efforts	2
	Pronouncing with less efforts	1
	Normal speech (whistling)	0
Netravikriti. (Partial closing of eye.)	Complete upward rolling of eye	3
	Half of the upward rolling of eye	2
	Partial upward rolling of eye	1
	Normal	0
Vedana/Krnashola. (Pain/Ear pain)	Constant <i>Vedana / karnashoola</i> in affected side of face	3
	Intermittent <i>Vedana / karnashoola</i> in affected side of the face	2
	Mild <i>Vedana / karnashoola</i> in affected side of the face	1
	No <i>Vedana / Krnashoola</i>	0
Lalasarava. (Salavation)	Constant (profuse) <i>Lalasarava</i>	3
	Intermittent (moderate) <i>Lalasarava</i>	2
	Partial (mild) <i>Lalasarava</i>	1
	No <i>Lalasarava</i>	0

Table No. 4 - Observed Grading in Patients -

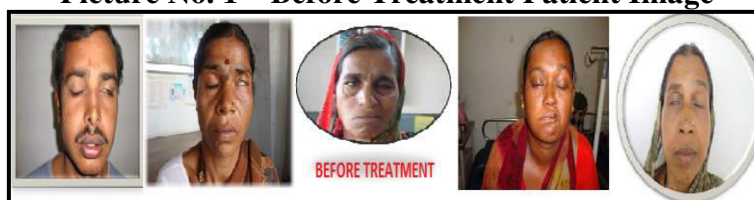
Patient No.	Mukhvkṛta (Twisting of Mouth)		Vaksanga (Aphasia)		Netravikṛiti (Partial closing of eye.)		Karnashola (Pain/Ear pain)		Lalasrava (Salivation)	
	BT	AT	BT	AT	BT	AT	BT	AT	BT	AT
1	3	0	1	0	3	0	2	0	1	0
2	3	0	1	0	3	0	2	0	1	0
3	3	1	2	1	3	0	2	1	0	0
4	3	1	2	0	3	1	2	0	0	0
5	2	0	1	1	3	0	2	0	0	0
6	2	0	1	0	3	0	2	1	1	0

B.T.**-Before Treatment, *A.T.**- After Treatment

On the basis of scoring of cardinal sign, Associated and observed symptoms and *Doshanubandhita lakshanas*.

Table No. 5 - Sign and symptoms Score-

Criteria for assessment	score	Assessment Score	
No alteration after treatment	3	Complete Cure	100%
Mild improvement	2	Marked Relief	>75%, <100%
Moderate improvement	1	Moderate response	>50%, <75%
Completely relieved or absent at presentation	0	Mild improvement	>25%, <50%
	—	Negligible improvement	<25%
		No response	0%

Picture No. 1 – Before Treatment Patient Image**Picture No. 2 – After Treatment Patient Images**

OBSERVATIONS

- *Ardita* is considered as *Vatavyadhi*. In This study patients were of recent origin, *Vata-pitta prakruti*, and found victims in cold season.
- In this study treatment selected for *Ardita* is very effective. Apart from medicine one exercise i.e. blowing of balloon was found to be very useful in *Ardita*.
- Patient shows first response to relieve the pain within 3 days.
- *Netravikruti* shown good improvement within the 5-6 days in all patients.
- *Vaktrardhata* is the symptoms gradually relived. It takes 7-12 days to get maximum relief.

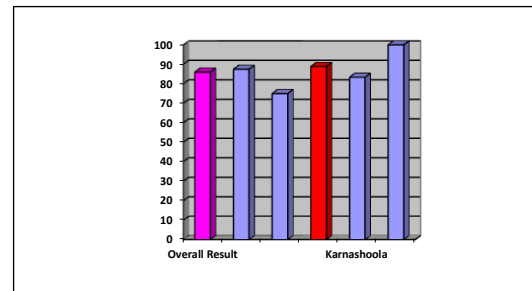
RESULT

Overall 10-15 days duration patient shows maximum result in all the symptoms.

Table No. 6 - Result...

Symptoms	Percentage(%)
Overall result	86%
Mukhavakrata	87.5%
Vakasanga	75%
Netravikruti	88.89%
Vedana / Karnashoola	83.34%.
Lalasrava	100%

Graph No. 1 - Result



DISCUSSION

- *Ardita* is a *Nanatmaja vatavyadhi* explained by Charaka aacharya⁽⁷⁾
- The disease is mostly occurring in winter and hence we considered it as seasonal disease. The persons who have less immunity to tolerate cold atmosphere when they suddenly exposed to cold climate they will become a victim of this disease. In north Karnataka almost all people are habituate to live in hot climate and few days or months in cold season they exposed to cold and became victim of such conditions. *Alpastva* persons especially women were found to more prone to such disorder.

CONCLUSION

- In *ardita* the *vatadosha* predominantly vitiated along with other *doshas*. *Rakta dhatu shosha* seen in affected part of *ardita*⁽⁸⁾
- The classics explained many modalities to get overcome this disease such as....

- *Navan nasya, shiroabhyanga, nadi swedana or upanah with anupa desha animal meat*⁽⁹⁾
- *Navan nasya, shiroabhyanga, karnapurana, akshitarpana, vaman in shotha condition, raktamokshana in burning and redness condition*⁽¹⁰⁾
- *Mastishkya, shirobasti, nasya, dhooma, upanah, sneha, nadisweda etc*⁽¹¹⁾

In this study *Abhyanga* with *Ksheerabala taila*. *Swedan* with *Panasapatra*(Jack fruit leaves). *Nasya* with *Ksheerabala taila*. *Shaman aushadhi* and Exercise has been carried out and we got maximum result.

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