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## Research Article

### MANAGEMENT OF ARDITA (BELL'S PALSYP) THROUGH AYURVEDA- A CASE STUDY

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#### ABSTRACT

*Ardita* (Bell's palsy) is considered as one among the eighty *Vata Nanatmaja Vyadhis* in Ayurveda. 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 affects the movement of facial muscles and shows similar symptoms. A 40 years old male patient approached to Panchakarma OPD who was suffering from complaints of deviated face on left side, unable to chew from right side, improper blinking of right eyes and slurred speech since 20 days. He was clinically diagnosed as Bell's palsy and managed through Panchakarma & palliative treatment for 14 days. The patient got complete relief in all symptoms with appreciable changes. 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.

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#### INTRODUCTION

*Ardita* is considered as one among the eighty *Vata Nanatmaja Vyadhis* in our *Ayurvedic* classics.[1] It is also considered as also as a "*Shiro Roga* since *Shiras* is the *Adhistana* in this entity. Hence also considered as *Shiro roga*. *Charaka Acharya* opines that this disease is localized in half of the face with or without the involvement of the body [2]. While *Sushruta* has considered as the face is only affected in *Ardita*. He further added that auxiliary points that, following *Rakta Kshaya*, (depletion of blood) in specific group of patients get afflicted by *Ardita*:

*Ardita* is also explained as *Ekayaam* by *Ashtang Hrudaya*. *Acharya Arunadatta* has clarified that *Ardita* is the disease of the body mostly affecting half of the face [3], 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 [4].

Bell's palsy has an incidence of 23 cases per 100,000 population/year, or about 1 in 60 to 70 people in a lifetime [5].

#### Case Study

Table 1 Chief complaint of the patient

SN	Chief Complaints	Duration
1	Deviation of mouth on left side	
2	Unable to chew from right side	since 20 days
3	Inability to blink right eye completely	
4	Slurred speech	
5	Dribbling of saliva on right angle of mouth.	
<b>Associated complaints</b>		since 2
1	Constipation	Months
2	General debility	

#### History of Present Illness

A 40 years old male patient was apparently normal before 20 days but after post dinner sleep of two hours, when he woke up; noticed slight deviation of mouth to left side. At morning on next day gradually he was suffered from symptoms such as

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deviation of face on left side, unable to chew from right side, inability to blink right eyes.

**Table 2** History of past illness

Past medical history	K/C/O HTN since 5 years, No H/o DM, fall of trauma No any surgical history
Personal history	Diet : Mixed, No addiction Sleep :Irregular due to night duty Occupation : Watchman
Drug History	Anti hypertensive medicines since 5 years
Family history	Not Significant

**On Examination**

Systemic examinations of Respiratory system, observed no significant abnormality.

**Table 3** General examination

GC	Fair, Patient conscious, alert, oriented to time, place and Person.
Temp.	A febrile
Pulse	74/min
BP	130/70mmhg
P/A	Slightly hard , Non tender, No organomegaly
Lymphadenopathy	Absent
Oedema	Absent
Icterus	Absent
Cyanosis	Not seen
Pallor	Absent
Nourishment	Moderate
Built	Moderate

**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 - Slow and words are mumbled

**Cranial Nerve Examinations**

Neurological exam noting functions of all other cranial nerves, aside from the facial nerve, are intact. Cerebellar examination is also normal.

- Forehead frowning - not possible on right side
- Eye brow 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 eyelid. (Bells phenomenon)
- Teeth showing - not possible in right side denture
- Blowing of cheek - not Possible in right side
- Nasolabial fold - Naso labial fold loss on Right side.
- Taste perception - not affected
- Dribbling of saliva – Dribbling of saliva on Right angle of mouth and Spilling of food contents during eating from right side
- Bells phenomenon – present on right side
- Deviation of mouth 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 Brain (Date-18/11/17) -Demonstrates a neoplasm compressing the facial nerve

**Diagnosis -Ardita (Bell’s palsy)**

**Table 4** Plan of external treatment

SN	Type of Panchkarma treatment	Drugs
1	Whole body massage	Masha oil
2	Face massage	Masha oil
3	Kukuntanda sweda + Ksheerdhooma over face	Bala (Sida cordifolia)+Dashmool (ten roots of certain medicinal plants) for Ksheerdhooma (steam of medicated milk)
4	Nasya (Erhine therapy)	Panchedriya Vardhana oil
5	Jivha pratisarana (tongue brushing)	Trikatu (Black Pepper, Long Pepper, rhizomes of Ginger powder) +Vacha (sweet flag) +yastimadhu (Licorice) powder with honey

**Table 5** Plan of internal medication

SN	Palliative treatment	Drug	Anupana (Vehicle)	Duration
1	Maharasnadi kashaya	15ml twice a day	Luke warm water	5days
2	Cap.Palsineuron	1 cap twice a day	Luke warm water	5days
3	Cap.Ksheerbala 101	1 cap twice a day	Luke warm water	5days
4	Gandharvaharitaki powder	10gm at bed time	Luke warm water	5days

**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 [8].

**Table 6** 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 Percent. Turning to Normal symmetry of face was able to wrinkle the forehead and raise the Eyebrows.
Unable to chew from right side and trapping of food between gum 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 – occasionally blinks controlled	Easily blink right eyelid and complete closure of eyelid
Slurred speech Complete slurring	Grade-3	Mild improved Pronouncing with less efforts	Moderately Improved Normal speech
Dribbling of saliva	Constant but mild dribbling	Dribbling Intermittent Dribbling	Dribbling Absent NOW able to hold water in mouth and there was no dribbling of saliva.
Widening of palpebral aperture	Severely wide (cornea & ½ of upper sclera visible)	Moderately wide (cornea & 1/3 of upper sclera visible)	Slightly wide (Whole cornea visible)
Nasolabial fold	Absence of Nasolabial fold	Nasolabial fold seen while attempting to smile.	Nasolabial fold not present on left side. Nasolabial fold present normally
Smiling sign	Smiling sign present with upward	Smiling sign present without upward	--

	movement of left angle of mouth	movement of left angle of mouth	
Constipation	Moderate	No constipation	No constipation

100% relief was found in slurred speech, dribbling of saliva from right corner of mouth, 75% relief was found in trapping of food between gums and cheek. 50% relief was found in widening of palpebral aperture, absence of Nasolabial fold and in smiling sign. Before starting the treatment the House Brackmann's grading of facial nerve was Grade 4 and after commencement of 14 days treatment; it was Grade 2. There was no side effect observed during and after the treatment.



Before treatment



After treatment

## 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*. *Nadi swedna* (Tubal sudation) and *Nasya* (Errhine therapy) is explained in classics like *Charaka* and *Sushruta* for treatment of *Ardita*. *Sushruta* described medication for *Ardita* in his *Sutrasthana* giving special emphasis on *Nasya* (Errhine therapy).

As per *Vagbhata* and *Charaka*, *Ardita* requires a nourishing type of therapy [9]. *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), *Upanaha Sweda* (application of poultice) are included in the treatment principle of *Ardita*.

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

**Sarvang abhyanga & Mukhabhyanga with Masha taila** (Whole body & facial massage with black gram oil) [10] –

Black gram oil has pacify *Vata-Kapha*, strengthen and anabolic nutritive properties. So it provides very good effect on aggravated *Vata*. The massage and sudation will help to loosen the adhesive *doshas* thereby facilitating the subsequent treatment.

Facial massage improved the motor function by stimulating and strengthening the facial nerves and muscles. The internal medicines were also selected for the pacification of *Vata*. Massage with *Ksheerbala* oil nourishes the *Shleshaka Kapha* (*Kapha* placed at the point of each joint) stimulate the sensory nerve endings and provide strength to the facial muscles [11]. *Ksheer Dhomma Swedana* (medicated milk steam) liquefied the deranged *Doshas* and facilitate their expulsion by subsequent Panchakarma procedures.

**Kukuntanda sweda** (Table no.7) – Egg sudation is practiced mainly by Kerala vaidya. It comes under the variety of *Ushma sweda* (wet sudation) [12]. Following materials required for one day:

Table 7 Comparison of subjective parameters

SN	Drug	Content	Quantity
1	Kolakulathadi powder	Kola (Zizyphus jujube Lam.), Kulattha – Horse gram (Dolichos biflorus Linn.), Suradaru – Devadaru – (Cedrus deodara), Rasna (Vanda roxburghi / Pluchea lanceolata), Masha – Black gram (Phaseolus radiatus L.), Atasi (Linum usitatissimum Linn.), Kushta– Saussurealappa Vacha – Acorus calamus, Shatahva – Indian Dill – Anethum sowa, Yava – Barley – Hordeum vulgare, Tailaphala – castor fruit (Eranda)]	400 gm
2	Methika (fenugreek)	-	100 gm
3	Haridra (turmeric powder)	-	100 gm
4	Lemon	-	One
5	Egg Yolk	-	10
6	Cotton cloth	-	2 meter

Mild sudation before the Errhine therapy, and after facial massage enhance local microcirculation by dilation of blood vessels and increasing blood flow to the peripheral arterioles which accelerates the drug absorption and fast improvement. It also stimulates the local nerves [13].

**Errhine therapy with panchedriyewardhana oil-** The Errhine therapy is indicated in speaking difficulty. Oil has mainly *Vata* pacifying properties, which relieves *Vata* obstruction specially the flow of *Vyana* (one of the variety of *Vata*). Blinking is function of eyelids which was the hampered due to *Chala* property of aggravated *Vata*, and is relieved by *Sthira* property of oil. Errhine therapy due to its therapeutic effect as well as pharmacological effect of Panchedriyavardhana oil helps to combat it by its purifying as well as nutritive properties. The relief in the Bell's palsy may be due to the decreased inflammatory response by relieving compression and ischaemia of the nerve in the narrowest part of the fallopian canal, which is the collective effect of therapy. Dribbling of saliva is though due to dropping of corner of mouth. It may be improved as affected side of mouth restores its normal position.

Errhine therapy with *Panchedriya Vardhana* oil- relieves the obstruction of vitiated *Vata* in the *Murdha* (head) and it restores the natural functionality of affected nerves and improves blood circulation to concerned areas of the brain [14]. It also provides nourishment to the nervous system by neural, diffusion and vascular pathway [15].

**Maharasnadi kashaya** pacify the *Vata* and corrected there flow in the body. **Cap.Palsineuron- Ekangaveera Rasa** used orally act as anabolic, revitalize, detoxifier which helps in enhancing the speed of recovery in the patients of Bell's palsy [16].

**Cap.Ksheerbala 101-** it restores the natural functionality of affected nerves and improves blood circulation to concerned areas of the brain [17].

**Gandharva haritaki powder** – Mild purgative which induces *Vatanuloman* (downward flow of *Vata*) and relieves constipation. It helps to relieved a *pakvshayagata vata* has a laxative properties pacify *vata* from the *pakvashaya*.

#### Probable Combined Mode of Action of Treatment

Sudation and Errhine therapy was found to be highly effect in management of Bell's palsy. The treatment provides strength to facial muscles, strengthens the nerves, improve the blood circulation and there will not be any recurrence of the disease since 10 month. It improved the motor function by stimulating and strengthening the facial nerves and muscles.

#### CONCLUSION

*Ardita* (Bell's palsy) can be managed with comprehensive application of *Kukuntanda sweda*, *Ksheer Dhooma*, *Nasya* and palliative treatment such as *Cap.Palsineuron*, *Maharasnadi Kashaya*, *Cap.Ksheerbala101*, *Gandharvaharitaki* powder. Combined treatments pacify 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. However as this is a single case study, similar studies needed to be done on larger sample size to establish statistical significance of present line of treatment.

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