

MENIERE'S DISEASE – EXPLORING ITS TREATMENT THROUGH AYURVEDA

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The Indian system of medicine, *Ayurveda* is the best available health care system. *Ayurveda* delineates there support of life *Ahara*, *Nidra* and *brahmacharya* for maintenance of perfect health.

Now a day's maximum people suffer from common disease like Hypertension, Arthritis, Hearing and vision impairment, Coronary artery diseases, Chronic lung diseases, Diabetes mellitus, Peripheral vascular disease, Cancer, Parkinson's disease, Cerebro vascular disease, Depression and Mood disorders, Dementia etc

Hearing impairment or deafness is most commonly seen in almost all the age groups because of the noise pollution, drug abuses, bad dietary habits, stressful life many of the Neuropsychiatric problems are seen, Meniere's disease being one of them.

Meniere's disease is characterized by episodic vertigo, fluctuating sensor neural hearing loss, tinnitus and aural fullness.

This illness occurs at irregular and unpredictable intervals. Tinnitus and deafness may be absent during the initial phase of attack of vertigo but invariably these symptoms appear as the disease progresses. The annual incidence of Meniere's disease is 5-7 / 10,000 and onset is most frequent in the 5th decade of life it may also occur in young adults rarely. The exact cause of Meniere's disease is unknown.

Meniere's disease is explained in modern classics of medicine, neurology, psychiatry, and E.N.T disorders. This disease is also called as Endolymphatic hydrops. It is a disorder of ear where the endolymphatic system is distended. Treatment in the modern science for this is disease is conservative management only.

In the *Ayurvedic* text *shrotrendriya* (one of the *jnanedriya*) is seat of *Vayu* and *Akashatatwa*, and is nourished by *Tarpakakapha*. After going through the Patho-Physiology and signs and symptoms of Meniere's disease it can be inferred that in this disease there is *vatasthanagatakapha-vikruti* in *shravanedriya*.

The presentations like *Bhrama*, *Karnaskweda*, *Karnanada*, *Karnabadhriya* can be compared with Meniere's disease symptomatically. However it is not possible to exactly compare or co-relate Meniere's diseases with the different clinical entities explained in *Ayurveda*.

There is an accumulation of Endolymph in the membranous labyrinth, thus in the modern pharmacology diuretics are recommended and salt restriction is advised. Hence in the management of Meniere's disease *shothaghna*, *mutraladra-vyaprayoga* if given therapeutically and if *vishyanda-karaka*, *kledajanakadravyas* like *samudralavana* are restricted, clinical improvement will be necessarily noticed.

Amapachana chikitsa followed by *prayoga* of *vatapitta-hara-bhramanashaka aushadhi yogas* along with *mutrala dravyas* is to be recommended in the management of Meniere's disease.

Snehapana with *kalyanaka ghrita* in *alpamatra* followed by *snigdha virechana* is the other step of treatment because the *upakrama* of *vata-dosha* is to be done with *snehana*, *swedana* and then *mrudu virechana*. *Urdwa jatrugata vikaras* are generally managed by *Nasya karma*. *Laxmivilasa taila* mentioned in *Bhaishajyaratnavalli* (Mastishka Rogadhikara 29-36) administered through the nostrils is found to be effective in relieving some symptoms of Meniere's disease. The *Bhrama hara kashaya yoga* comprising of *vata-pitta hara dravya (Kalyanaka kashaya and Shothagna mahakashaya)* which is effective *manodosha hara aushadhi yoga* is found very effective in relieving some symptoms of Meniere's disease according to the expert physicians of *Ayurveda*. *Bruhat Sootashekara Rasa* is an excellent *vata-pittahara, bhrama nashaka nadi uttejaka aushadhi yoga*. The *chikitsa-siddhanta* is planned according to the basic concepts of *Kayachikitsa*.

Here an attempt is made to understand Meniere's disease in light of *Ayurveda* and its management through the basic concepts of *Kayachikitsa*. This study is taken up to confirm and to highlight the scientific, therapeutic approach in relation to the *shareerika dosha – vata and pitta, manasika dosha rajas* and *vatasthanagata kapha*. Further it is also intended to assess the efficacy, potency of *Ayurvedic* formulations in this regard.

In any form of research a critical, analytical work, rational interpretation and useful discussion on the different aspects of the particular research work done is

very essential. In the present study, various aspects of Meniere's disease are dealt.

The rampage of Meniere's disease in the modern era is such that Meniere's disease has acquired the status of social-occupational disorder. The annual incidence of this triode system disorder is 0.5-7.5 / 1000 and the onset is most frequent in the 5th decade of the life, it may also occur in young adults rarely.

Many of the times Meniere's disease is produced due to complication of some psychosomatic disorder like anxiety neurosis etc, and also due to Meniere's disease some complication occurs such as hypertension, tension headache, lack of restoration of intellectual capacity etc. Though in the present clinical study, the complications are excluded, the severe clinical complications of the trial, which are excluded, stimulate to study further on them.

Modern science considers Meniere's disease as endolymphatic hydrops, a disorder of inner ear where the endolymphatic system is distended. It is characterized by classic triad of vertigo, tinnitus and temporary sensori-neural hearing loss where as in *Ayurveda*, vertigo (*Bhrama*) is induced due to either *rasa dhatu dusti* or *kshaya* of *majja dhatu*. Tinnitus (*karna kshweda* or *karna nada*) and hearing loss (*karna badhirya*) are induced due to *dusti* of *asthi* and *majja dhatu*. In these three symptoms all three *doshas* are involved specially subtype *tarpaka kapha, sadhaka pitta* and *prana* and *vyana vayu*.

1. Historical Review:

Vedic texts define *Karna* as sense organ and it is included in the *urdwa-Jatru Pradesha* of the body. *Ayurvedic* texts define symptoms like *Bhrama, Karnakshweda, Karna badhirya* etc. in detail but not

defined any disease that includes these symptoms.

In Modern science, Scientist Meniere defined the disease of trio but did not explain it in detail. Various theories are similar to ones presented in *Ayurveda*, However, this disease have been extensively studied and documented by a battery of investigative procedures after 1900's.

2. Disease Review:

We find similarities in the *Ayurvedic* as well as in the modern text with regards to the following aspects; Definitions, Etio-pathology, Physiological and Anatomical aspect, Clinical features, Complications and Management. Meniere's disease is broadly described above as in modern aspect but in *Ayurveda*, we find many terms like *Bhrama*, *Karna kshweda*, *Karna badhirya*, *Shirashoola*

etc. However, these symptoms would be safe to consider in correlation to Meniere's disease.

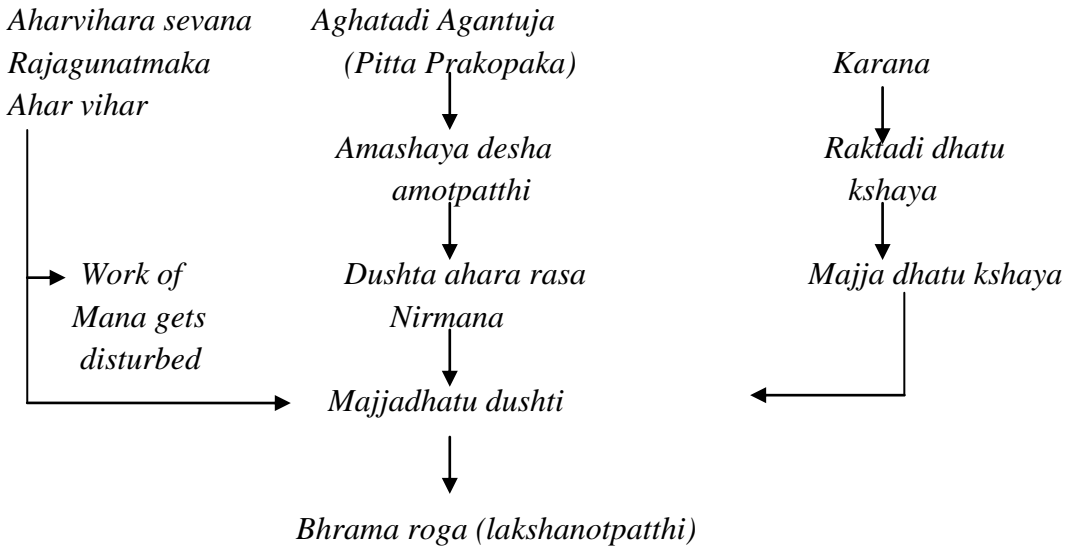
Ayurvedic Review

Nidana:

No *Ayurvedic* texts have mentioned specific *nidanas* of *bhrama roga* but according to *dosha*, *dhatu*, *mala* involved, we can define the suspected *nidanas* as follows. *Vata prakopaka nidanas* like *Ativyayama*, *prajagarana*, *langana ruksha shita ahara sevana*. *Atimaruta-atapa sevana* etc.

Pitta prakopaka ahara, *atapa sevana*, *ati agni sannidyata*, *katu - lavana - amla gunatmaka ahara sevana* etc. *Rajoguna vardhaka cheshta* i.e *lobha*, *moha*, *kama* etc, and *aghatadi agantuja karana* etc.

Samprapti: (Pathophysiology)



Samprapti Ghataka:

1. *Dosha -Pitta*, *vayu*
2. *Dushya -Majja* mainly
3. *Agni -Jatharagni*, *majja dhatwagni*
4. *Ama -Koshtagnimandya janya*
5. *Srotas - majjavaha and manovaha*
6. *Sroto dusti -Sanga,vimarga, gamana*
7. *Sanchar sthana - Rasayani and vatavahini sira*

8. *Adhithana -Sharira and Manas*

9. *Vyakta sthana -Shiras*

10. *Sadhy -asadhyata -Kashtasadhya*

Chikitsa: (Treatment)

Madhura, *balya*, *brumhaniya*, *pitta vata shamaka chikitsa* along with *satwava-jaya* line of treatment

- Intake of *kshira*, which is processed with *shatavari*, *bala* and *draksha*.

- Intake of the *choorna* of *vatyalika bija* with *sita*.
- Intake of a *duralabha kwatha* with *ghruta*.
- *Triphala siddha kshira*.

Important Yogas:

1. *Vasant kusumakara ras*.
2. *Laxmivilasa ras*.
3. *Prameha gajakeshari ras*.
4. *Sootsekhara ras*.
5. *Suvarna makshika bhasma*.
6. *Abhraka bhasma*.
7. *Loha bhasma*.
8. *Mukta pishti*.
9. *Saraswatarista*.
10. *Chyavana prashavaleha*.

Pathya-Apathya:

Pathya:

Madhura rasa pradhana ahara i.e *sita, dugdha, ghruta* etc. *Shiro abhyanga, Mamsa rasa sevana, majja sevana*.

Apathya:

Katu, amla, lavana rasa pradhana ahara, ruksha, shita, bhojana, ativyayama, ativyavaya, maruta- atapa sevana, prajagarana, krodha, chinta, etc.

Sadhya - Asadhyata: *Bhrama* is *Kashta sadhya vyadhi*.

Materials and Methods:

Total of 13 subjects were studied in a single group. They had follow up period of 1 month after the treatment schedule.

Inclusion criteria:

- Subjects between the age of 20 to 65 years presenting with the clinical features of **Meniere's disease** described in modern medical texts and fulfilling the diagnostic index scoring system for suspected **Meniere's disease**.
- Subjects of either sex who are fit for the *Nasya* therapy.
- Subjects willing to receive Ayurvedic treatment.

Exclusion Criteria:

- Subjects suffering from uncontrolled Diabetes mellitus, uncontrolled Hypertension etc.
- Subjects with Cardiac abnormalities and with vertebro bacillary syndrome.
- Subjects who are unfit for *Nasya*.
- Subjects with Cerebellar ataxia, Focal fits (Epilepsy).
- Subjects suffering from any infectious disorders.

Study Design: Clinical Trial

Materials

The following materials were utilized for the clinical trial

- *Shaddharana Churna* for *Amapachana*.
- *Kalyanaka Ghrita* for *snehapana*.
- *Gandharva Haritaki* for *Mrudu Virechana*.
- *Lakshmivilas Taila* for *Nasya*.
- *Bruhat Soota Shekhara* and *Bhramahara kashaya* as *Shamanaushadhi*.

Trial Group:

- *Amapachana* with *Shaddharana choorna* – 5g thrice/day for 3-5 days (till *nirama lakshanas* attained)
- *Snehapana* with *Kalyanaka ghrita*
- (*Avara sneha schedule*) for 1-3 days
 - First day - 25 ml
 - Second day - 50 ml
 - Third day -75 ml at morning time
 - *Anupana* - Luke warm water
- *Mrudu Virechana* with *Gandarva Haritaki* – 6 to 12 g; *Anupana* - Luke warm water

Shamanoushadhi:

- *Bruhat Soota Shekhar rasa* – 125mg twice a day with *Madhu*. *Anupana* – Luke warm water
- *Bhrama hara kashaya yoga* – 30 to 45ml twice a day with Luke warm water
- *Nasya* with *Lakshmi vilasa taila*: 4 drops (2 ml) into each nostril for 7 days.

Subjects of trial group were given *Amapachana* with *Shaddharana Churna* for 3 to 5 days followed by *Snehapana* with *Kalyanaka Ghrita* in *avara matra* for 1 to 3 days. Then *Swedana* was given for one day followed by *mrudu virechana* with *Gandharva Haritaki* for one day. *samsarjana karma* and *vishranthi* were advised for 1 to 3 days. After this, *Nasya* with *Lakshmi vilas Taila* was given for 7 days.

Shamanaushadhi were given for 3 months and *Nasya karma* was repeated once in every 30 days in *pratimarsha* schedule during the course of *shamanau-shadhi*.

DISCUSSION

Shad dharana choorna was selected for purpose of *Amapachana* and *Agni vardharna* action. *Kalyanaka ghrita* selected for *snehana* in *avara matra*. *Gandharva Haritaki choorna* was preferred for its *mrudu virechaka* action (i.e. oil based soft laxative). *Laxmi vilasa taila* was selected for *nasya* because of its efficacy of *sarva mastishika gata roga hara* and *karnaroga hara* property. *Bruhat sootashekhara rasa* and *Bhrama hara kashaya* were selected as *shamanoushadhi* based on their action on *vata*, *pitta* and *kapha*.

CONCLUSION

- Meniere's disease is one of the chronic diseases, which is critically diagnosed and poorly treated with increasing incidences even in the Indian Society.
- Symptoms mentioned in *Ayurveda* related with conditions like *Karna nada*, *Badhirya*, *Karna kshweda*, *Bhrama roga* resembles to Meniere's disease in different degrees.
- *Vata pradhana tridosha* and *Rajo guna* are the prime factors in the causation of Meniere's disease. The *Manas* is also provoked by these factors.

- Meniere's disease is generally related to the middle-aged group and in the elderly population where it could be due to the normal physiological process of ageing and because of the predominance of *vata dosha* in this *avastha*.
- Incidence of manifestation of Meniere's disease is equal in both sexes.
- Erratic life styles, unhealthy eating habits and lack of exercise could contribute towards developing Meniere's disease.
- *Nasya* and *Shamanoushadhi* provided highly significant relief on both the Objective and Subjective parameters of Meniere's disease.
- *Nasya* could exert its action on multiple levels of *dosha*, *dhatu*, *srotas*, *manas indriyas*, *marma* and *Ajna chakra*. It could also influence its action on the nervous system by possibly being absorbed by the micro circulation in inner nose. The *Gandhapaka vidhi* of *taila* is probably necessary to treat *vataja* disorders as aromatic substances have a *shamana* effect on *vata* as well as on the *manas*.
- Following *Pathya Apathya* and Counseling shows an important role in the management of Meniere's disease.
- To sum up, it can be said that, Meniere's disease is a condition that needs to be assessed correctly and proper measures should be adopted in its management. Symptomatic treatment is not the answer to these problems.

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