

AYURVEDIC APPROACH TO MENIERE'S DISEASE – A REVIEW

Sandhya Rani. D¹, Madhusudan B. G²

¹Reader, Dept. of Shalaky Tantra; ²Assistant Professor;
Dept. of Roganidana, JSS Ayurveda Medical College, Mysuru - 570028, Karnataka, India

Email: sandhyaranid30@yahoo.in

ABSTRACT

Shalaky tantra is a branch of *Ayurveda* which deals with disorders of head and neck and all its different organ complexes along with special types of therapies which are concentrated on these parts. Meniere's disease also called as Endolymphatic hydrops is a disorder of the inner ear, characterized by triad of episodes of vertigo, tinnitus and hearing loss. The main pathology in Meniere's disease is the distention of endolymphatic system due to increased volume of endolymph. The symptoms of Meniere's disease can be correlated to *Vataja Karna Roga* along with *Bhrama*. When these symptoms are analysed, there is vitiation of *Vata* and *Pitta dosha* in *Kapha sthana*. Hence an attempt has been herewith made to understand the disease and its management through in *Ayurveda*.

Keywords: *Meniere's disease, Vertigo, Tinnitus, Hearing loss, Shalaky tantra, Vataja Karna Roga, Bhrama.*

INTRODUCTION

Meniere's disease also called as Endolymphatic hydrops is a disorder of the inner ear, characterized by triad of episodes of vertigo, tinnitus and hearing loss. The main pathology in Meniere's disease is the distention of endolymphatic system due to increased volume of endolymph⁽¹⁾.

Meniere's disease was first identified in the early 1800s by Prosper Meniere. It affects between 0.3 and 1.9 per 1,000 people that is 2 persons per 1,000 people approximately. It most often starts in the 40s to 60s. Females are more commonly affected than males⁽²⁾.

OBJECTIVES:

1. An overview of Meniere's disease and its understanding through Ayurveda.
2. Management of Meniere's disease in Ayurveda.

Human Ear consists of 3 parts:

1. External ear
2. Middle ear
3. Inner ear

The inner ear or the Labyrinth is an important organ of hearing and balance. It consists of a bony and a membranous labyrinth.

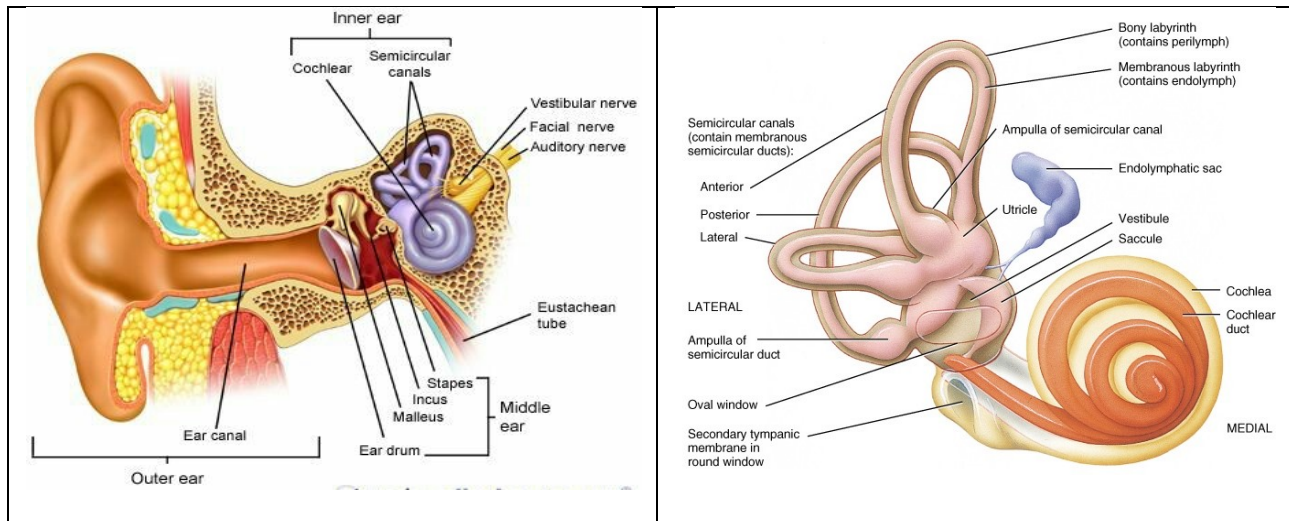
Bony labyrinth consists of

1. Vestibule,
2. Semicircular canals
3. Cochlea

The membranous labyrinth consists of

1. Cochlear duct
2. utricle
3. saccule
4. Three semicircular ducts
5. Endolymphatic duct and sac⁽³⁾

The sensory epithelium of Utricle and Saccule is called Macula and is concerned with linear acceleration and deceleration. The semicircular canals and vestibule maintain the kinetic and static balance respectively, thus maintaining the body balances whereas cochlea is the organ of hearing.



AETIOLOGY:

The exact cause of Meniere's disease is not known but various theories have been postulated as

1. Defective absorption by endolymphatic sac
2. Vasomotor disturbance
3. Allergy
4. Sodium and water retention
5. Hypothyroidism
6. Autoimmune and viral aetiologies⁽⁴⁾

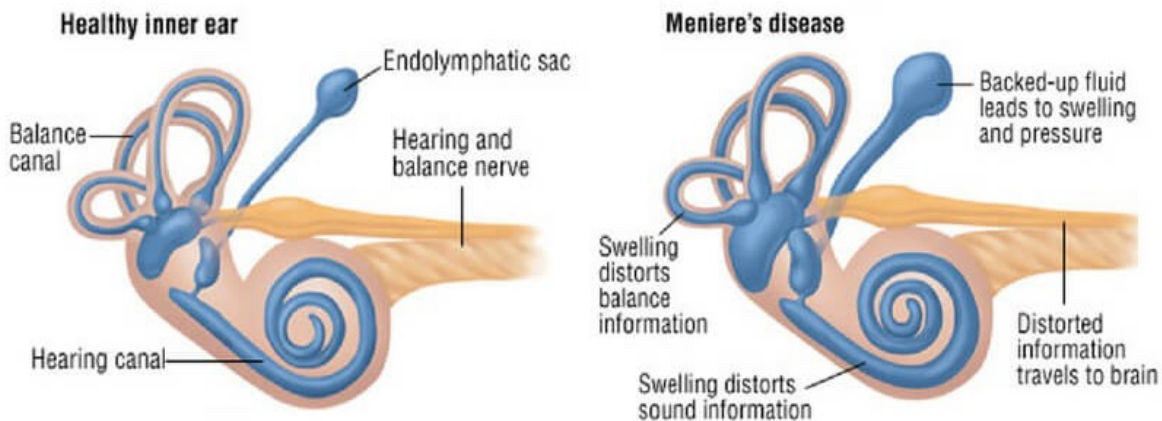
PATHOPHYSIOLOGY:

The membranous Labyrinth is encased by bony Labyrinth, is responsible for hearing and balance of our body. It is filled with a fluid called Endolymph. When there is movement of head, endolymph moves casing nerve recep-

tors in the membranous labyrinth to send the signals to the brain, about the body's motion.

The pressure and volume changes of the endolymph affect the nerve conduction and in turn affect the balance and hearing. The cause for variation of pressure and volume of endolymph is unknown, but it is noted that increased production of endolymph or decreased absorption or both may lead to the distention of endolymphatic system.

The distended endolymphatic system affects the cochlear duct, the saccule and semicircular canals. The dilated cochlear duct may fill completely the Scala Vestibule which interferes with hearing leading to diminished hearing and tinnitus. The distended Utricule, Saccule and Semicircular canals may show disturbance in maintaining the body balance leading to Vertigo. Thus the triad symptoms are experienced by the patients.



CLINICAL FEATURES OF MENIERE'S DISEASE

Meniere's disease is characterized by sudden and recurrent episodes of vertigo, hearing loss and tinnitus, with

episodes often accompanied by deafness, tinnitus, headache and a feeling of fullness in the ears⁽⁵⁾

STAGES OF MENIERE'S DISEASE	SYMPTOMS	EARLY	MIDDLE	LATE
	VERTIGO	Sudden episodes of Vertigo	Less severe Vertigo attacks	Less frequent Vertigo
	HEARING LOSS	Variable	More severe	Hearing loss becomes worst
	TINNITUS	Variable	More severe	Tinnitus becomes worst
	OTHERS	Hearing becomes normal and no tinnitus.	Periods of remission	Problems with balance

AYURVEDIC UNDERSTANDING OF MENIERE'S DISEASE:

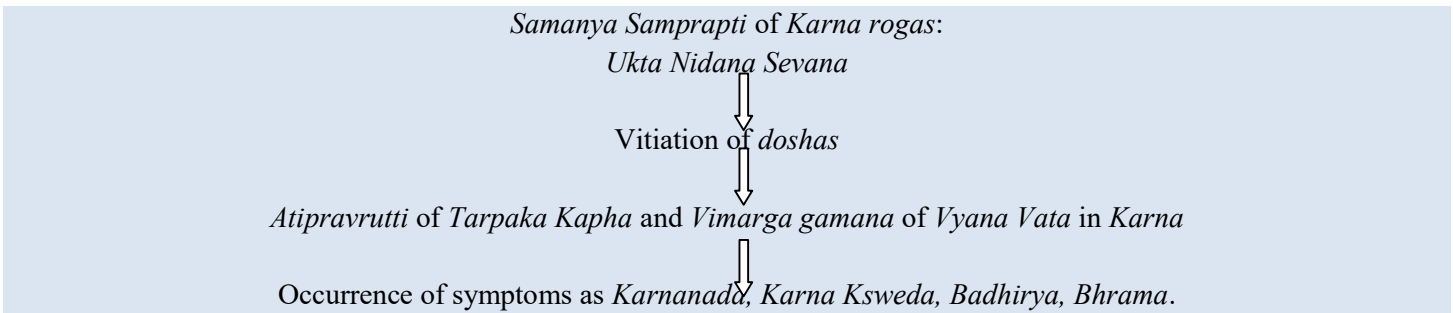
Shalakya tantra is a branch of *Ayurveda* where diseases related with Eyes, Ears, Nose, Oral cavity and Head has been explained⁽⁶⁾. *Karna* or *Sravanendriya* is one of the *pancha gnanendriya* and it is produced by *Akasha Mahabhuta*. The doshas present in *Karna* are *Vyana Vata* and *Tarpaka Kapha*.

Acharya Charaka has explained 4 *karnagatha rogas*⁽⁷⁾ and *Acharya Susruta* has explained 28 *karnagatha rogas*⁽⁸⁾. By analyzing the signs and symptoms of Meniere's disease, it can be correlated to *Bhrama* and *Vataja Karna Roga* explained by *Acharya Charaka*. *Karna Nada*, *Karna*

Ksweda, *Badhirya* and *Bhrama* as explained by *Acharya Susruta* have similar symptomatology.

The general etiological factors for all *karna rogas* as explained by our *Acharyas* are⁽⁹⁾

1. *Avashyaya* – exposure to cold climate, mist, fog
2. *Jalakrida* – indulging in water games continuously
3. *Karna kandu* – repeating itching in ears using any objects
4. *Mitya yoga* of *Shastras* – improper use of instruments while examining the ears
5. Noise pollution
6. Untreated Systemic diseases etc...



Acharya Surutha has quoted that the *Samprapti* and *chikitsa* of *Karnanada*, *Karna Ksweda* and *Badhirya* are same as the *Dosha- Dushya dusti prakara* are same.

Acharya Sushruta opines that *Bhrama* is a condition due to *Rajas*, *Pitta* and *Vata dosha*. *Madhavakara* explains the clinical feature of *Bhrama* as *Chakravat bhramate* – the patient experiences spinning movements in head like a wheel and so he loses his balance and *bhoomou patati sarvada* – keeps falling on the ground repeatedly due to loss of balance as a result of *bhramana* – spinning of head. *Bhrama* is also a *rasa Dhatu kshaya lakshana*⁽¹⁰⁾.

Diseases mentioned as *karna nada* and *karna kshweda* encompass the symptom of Tinnitus. While *Karna nada* is due to *Vata* only, *Vata* along with *Pitta* cause *Karna kshweda*. *Karna nada* produces symptoms like subjective

sensation of hearing of different sounds like of drum beating, percussions, string instruments, blowing of *shankha* – conch shell, sounds of various birds, frog, whistling sound, snake hissing etc.. Different sounds are produced by *Prakupita Vata* in *karna* – ear as a result of various types of *Vata dushti karaka nidana sevana*⁽¹¹⁾.

Karna kshweda is the condition caused by association of *Pitta* with *Vata* which results in sounds that resemble the blowing of wind through the bamboo.

Badhirya is the resultant effect of *Kevala vata* or *Vata* along with *Kapha*. *Badhirya* is a resultant effect of *Dhatu kshaya janya Vata prakopa* and / or *Kapha Avarana janya Vata prakopa*.

The pathogenesis of Meniere's disease can be understood in two ways as *Margavarana janya* and *Dhatu kshaya*

janya. As obstruction to the flow of endolymph and its absorption is one of the prime postulation behind the pathogenesis of Meniere's, this can be understood based on the grounds of *Margavarana*, where *aama* or *dosha* may be the cause for obstruction leading to defective absorption and its flow ending up in distention of membranous labyrinth and the cochlear membranes too.

Chronic *margavarana* leads to *dhatu kshaya* or some other factors leading to *dhatu kshaya* may be the cause for degenerative changes in the vestibulo-cochlear nerve thus causing the symptomatology of the disease. And as it is known, *margavarana janya* conditions are better in prognosis than that of *dhatu kshaya janya* and the same holds good in the Meniere's disease also.

TREATMENT PROTOCOL:

The disease being a *Vata pradhana*, *Pitta anubandhi dosha dushti janya vyadhi* in *Kapha sthana*, all three doshas should be regarded for during treatment. Being a disease of *Kapha sthana* and *shiras*, and being a chronic disorder *shodhana* being a preferred line of treatment, *Nasya* should be the first line of treatment with prior *kaya shodhana*.

Thus treatment may be planned accordingly as below - *Amapachana* which can be achieved with *Agnivardhaka dravyas* like *Chitrakadi Vati*, *Agnitundi vati*, *Jeerakadi churna*, *Trikatu churna*, etc., based on the *dosha pradhanyata* and patient condition.

Proper *shodhana* is advised and *Virechana* may be preferred. *Snehapana* with *Triphala ghruta*, *Sukumara ghruta*, *Guggulu tiktaka ghruta*, etc and *Virechana* with *Trivrut lehya*. If in case proper *shodhana* procedure cannot be followed, *Sadyovirechana* with *Gandharvahastadi Eranda taila* can also be adapted.

Nasya karma with a *shamana bruhmana pradhana taila* like *Ksheerabala 101*, *Dhanvantara 101*, etc may be preferred for 7 days. The same may also be advised in the form of *Pratimarsha nasya* later. If a case of *Margavarana janya*, *Shodhananga nasya* may be administered first and later *shamana* or *pratimarsha* may be favoured.

Shiropichu being a *Indriya tarpana chikitsa* and *balya*, it is advisable to use combinations like *Aswagandhabala lakskadi taila*, *Mahanarayana taila*, *Jatamamsi taila*, etc *Karnapoorana* with *Kshara taila* or any other *teekshna taila* may be advised in case of *Kapha* or other *Dosha margavarana janya dushti samprapti*.

Rasayanas in the form of *Shamanushadhis* like *Drakshadi lehya*, *Narasimha rasayana*, *Jeerakadi lehya*, *Khanda*

kushmanda avalehya, *Sarivadi Vati*. *Rasayana* may be preferred in the form of *Ghruta* as *Sushruta* has clearly stated *ghrutapana* is *rasayana* in all *Karna gata rogas*⁽¹²⁾.

DISCUSSION

Meniere's disease is generally a disease of the middle-aged group and 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* which goes in favour of *Dhatu kshaya janya samprapti*. Erratic life styles, unhealthy eating habits and lack of exercise could contribute towards developing Meniere's disease based on the *Samprapti* of *Margavarana janya dosha dushti*.

The main pathology in Meniere's disease is the distention of endolymphatic system due to increased volume of endolymph in the inner ear. This can be understood as condition of *atipravrutti* of *Tarpaka kapha* and by *Vimargagamana* of *Vyana Vata* leading to the development of Tinnitus, Hearing loss and Vertigo. Hence the management should aim at neutralizing the *Tarpaka Kapha* and *Vyana vata* in *Karna*.

As said *Agni mandya* is the prime cause for all diseases, treatment of all diseases should start with correcting *Agni* and thus *Deepana pachana*. Meniere's being a chronic disease and all dosha involved, *kaya shodhana* should be the preferred line of treatment. Based on the mode of *Samprapti*, *shodhana* or *bruhmana nasya* may be preferred followed by *pratimarsha nasya*. As said *Nasa hi shiraso dwaram* and *Nasya* is the best line of treatment in all disorders of head and neck, *Nasya* should be the preferred line of treatment in Meniere's. *Shiropichu* being *Indriya tarpana* should follow *shodhana* and *nasya* along with *Rasayanas*. Based on the symptomatology and specific *dosha pradhanyata*, *shaman chikitsa* may be administered. *Rasayana* aims at correcting *dhatu kshaya* aided by *shaman chikitsa*.

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 relate with conditions like *Karna nada*, *Badhīrya*, *Karna kshweda*, *Bhrama roga*. *Vata pradhana tridosha* and *Rajo guna* are the prime factors in the causation of Meniere's disease with its *Samprapti* revolving around *margavarana* and *dhatu kshaya*. *Shodhana* being *sroto shodhaka* and *Rasayana* being *dhatu poshaka* and

rejuvenative is a perfect combination in the treatment of chronic disorders like Meniere's disease. Thus timely assessment and proper treatment measures when adopted will surely bring down the sufferings of patients of Meniere's disease.

REFERENCES

1. P L Dhingra, Diseases of Ear, Nose and Throat, Elsevier, Third edition: 2004, Page 129.
2. https://en.wikipedia.org/wiki/M%C3%A9ni%C3%A8re%27s_disease dated 15/12/2018
3. P L Dhingra, Diseases of Ear, Nose and Throat, Elsevier, Third edition: 2004, Page 11-13.
4. P L Dhingra, Diseases of Ear, Nose and Throat, Elsevier, Third edition: 2004, Page 129.
5. Mohammad Maqbool – Textbook of ENT, Jaypee brothers medical publishers pvt ltd, New Delhi, 12th edition: 2013.
6. Sushruta. Sushruta Samhita with the Nibandha Sangraha commentary of Dalhana Acharya and Nyayachandrika Panjika of Sri Gayadasa Acharya on Nidanasthana, Edited by Yadavaji Trikamji Acharya. Varanasi: Chaukambha Orientalia; Reprint 2009. Sutrasthana 1st chapter, Shloka No. 7.
7. Agnivesha. Charaka Samhita, elaborated by Charaka and Drdhabala with Ayurveda dipika commentary of Chakrapani Datta, edited by Yadavaji Trikamji Acharya. Varanasi: Chaukambha Surabharati Prakashana; Reprint 2009. Chikitsa sthana 26th chapter, Shloka No.128.
8. Sushruta. Sushruta Samhita with the Nibandha Sangraha commentary of Dalhana Acharya and Nyayachandrika Panjika of Sri Gayadasa Acharya on Nidanasthana, Edited by Yadavaji Trikamji Acharya. Varanasi: Chaukambha Orientalia; Reprint 2009. Uttarantra 20th chapter, Shloka No.3-5.
9. Sushruta. Sushruta Samhita with the Nibandha Sangraha commentary of Dalhana Acharya and Nyayachandrika Panjika of Sri Gayadasa Acharya on Nidanasthana, Edited by Yadavaji Trikamji Acharya. Varanasi: Chaukambha Orientalia; Reprint 2009. Uttarantra 20th chapter, Shloka No.31-32.
10. Madhavakara. Madhava Nidana with Sanskrit commentary Madhukosha by Vijayarakshita and Srikantha Datta, Edited with Vimala-Madhudhara, Hindi commentary and notes by Dr. Brahmananda Tripathi, Vol 1, Varanasi: Chaukambha Surabharati Prakashana; Reprint 2009. Chapter 17, Shloka 19
11. Madhavakara. Madhava Nidana with Sanskrit commentary Madhukosha by Vijayarakshita and Srikantha Datta, Edited with Vimala-Madhudhara, Hindi commentary and notes by Dr. Brahmananda Tripathi, Vol 1, Varanasi: Chaukambha Surabharati Prakashana. Chapter 57, Shloka 2-4

12. Sushruta. Sushruta Samhita with the Nibandha Sangraha commentary of Dalhana Acharya and Nyayachandrika Panjika of Sri Gayadasa Acharya on Nidanasthana, Edited by Yadavaji Trikamji Acharya. Varanasi: Chaukambha Orientalia; Uttarantra 21st chapter, Shloka No.3

Source of Support: Nil

Conflict Of Interest: None Declared

How to cite this URL: Sandhya Rani. D & Madhusudan B. G: Ayurvedic Approach To Meniere's Disease – A Review. International Ayurvedic Medical Journal {online} 2018 {cited January, 2019} Available from: http://www.iamj.in/posts/images/upload/95_99.pdf