A COMPARATIVE STUDY OF VISHNU TAILA NASYA AND EKANGAVEERA RAS IN ARDITAVATA W.S.R TO BELL’S PALSY

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ABSTRACT
Arditavata is one among Vatamanatmaja vyadhis, characterized by Mukhavakrata, Ekakshi nimeelana, Ashrusrava, Lalaatavakrata, Ruja in Jatrurdvapradesha, Vaksanga, HasitaVakrata are the symptoms leading to disfigurement of face in one lateral side. And it is well correlated with Bell’s palsy and its incidence rate is 23 cases/1 Lakh/year population. It affects in all the age groups and in both sexes. It is mainly precipitated by fast life style, irregular food habits, lack of sleep and some of viral infections which are the common events of modern life style. It is more prevalent in known cases of Hypertension and Diabetes. The facial nerves controls many functions, such as blinking and closing the eyes, smiling, frowning lacrimation, salivation, flaring nostrils and raising eyebrows, sensation of taste in the anterior two third of the tongue which affected in Bell’s Palsy. In contemporary system of medicine there is no proved medical management for Bell’s palsy. And available medicines are also having its own limitations and side effects. In Ayurvedic classics there is specific line of treatment for Arditavata such as Nasyakarma, Moordnatai, Tarpana and Shamanoushadhi like Ekangaveeraras and other drugs. Hence comparative clinical study on Nasya Karma with Vishnu Taila and Ekangaveeraras as shamanoushadhi in Arditavata is planned for study.

Keywords: Arditavata, Ekangaveerras, Vatavyadhi, Bell’s palsy.

INTRODUCTION
Ayurveda is the rich store house of time tested and effective method for the treatment of several obstinate and other wise diseases which are difficult to treat. One unique method is “Panchakarma.” Which mainly aims at internal purification of the body including the gross channels up to cells level and ‘Nasyakarma’ is among it.

Arditavata is one among the eighty types of Nanatmaja Vata Vyadhis which is caused by vitiation and aggravation of Vata, as mentioned in almost all Ayurvedic classics. Acharya charaka has included shareerardha in Arditavata while Sushruta has considered as only face is affected in Arditavata and Ekatayama by Ashtanga Hrudaya. Ardita can be correlated
with Bell’s palsy on the basis of its signs and symptoms in texts. Here temporary suspension or permanent loss of function, especially loss of sensation or Voluntary motion of unilateral side of face is considered. It occurs due to any injury or inflammation to facial 7th cranial nerve, this leads to partial or total loss of movement of unilateral face. Actually Bell’s palsy leads to disability of interaction by loss of facial expression which is a major part of human communication. It may recur or leave synkinesis. Modern science found drugs like steroids and antivirals etc. for it, also surgical and other treatments are available for Bell’s Palsy. Yet its recurrence and synkinesis are also reported. Due to recurrence of Arditavata and multi therapeutic indications for it in Ayurvedic a classic, the diseases was selected to find a measure that could help in restoring quality in life of Bell’s palsy Patients. 

Navana, MurdniTaila, Tarpana are the specific line of management in Arditavata. Shamanoushadhis like Ekangaveeraras and etc. are also choice of Treatment which has its own effect on Arditavata. Nasal route of a drug administration is used for the treatment of certain types of disorders. Nose is a gateway of cranial cavity. And it also said that all diseases of supraclavicular part can be managed by Nasya karma. Ekangaveeraras is a Herbo-Mineral medicine with Nano Particles of Bhasmas which acts on CNS. Hence A comparative clinical study with Snehana, Swedana and Ekangaveeraras as a Shamanoushadhi and Nasya Karma with Vishnutaila is taken as a clinical study in Arditavata w.s.r to Bell’s palsy Patients.

INCLUSION CRITERIA
- Patients presenting classical signs and symptoms of Arditavata like Mukhavakrata, Vaksanga, Stabdanetrata, Shirashoola, Shrutihami (loss of hearing), along with clinical features of Bell’s palsy are included.
- Patients between the age group of 15- 65 years, irrespective of Religion, Sex, Socio-Economic status, Occupation will be included.
- Patients Yogya for Nasya Karma will be selected.

EXCLUSION CRITERIA
- Patients of age group of less than 15 and more than 65 years are excluded.
- Patients presenting with other systemic disorders like Diabetes Mellitus, Hypertension and traumatic origin.
- Subjects of Arditavata associated with pakshaghata
- Disease chronicity more than one year.
- Pregnant woman and lactating mother.
- Patients Ayogya for Nasya Karma are excluded for the study.

DIAGNOSTIC CRITERIA
As per clinical features of Arditavata mentioned in classics, cases are diagnosed. The Lakshanas considered are -

MUKHAVAKRATA ASHRUSRAVA
VAKSANGA LALASRAVA
JATROORDHAVEDANA NETRAVIKRUTI
STABDANETRATA SHIRASHOOLA
SHRUTIHANI LALATAVAKRATA

Along with above lakshanas of Arditavata, Signs and Symptoms and Clinical features of Bell’s palsy are selected for study.

STUDY DESIGN:
A Comparative clinical study to evaluate the efficacy of Vishnu Taila Nasya and Ekangaveeraras in Arditavata w.s.r. to Bell’s palsy.
COMPOSITION OF TRIAL DRUGS:
As per classics EKANGAVEERARAS is prepared keeping in view of Dosage and other Aspects.

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Main Contents</th>
<th>Proportion</th>
<th>Bhavana Dravyas</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Shudhagandhaka</td>
<td>Each</td>
<td>Triphala</td>
</tr>
<tr>
<td>2.</td>
<td>Shudhaparada</td>
<td>Dravya</td>
<td>Trikatu</td>
</tr>
<tr>
<td>3.</td>
<td>Shudhakantaloahbashm</td>
<td>Samabhaga</td>
<td>Nirgundi</td>
</tr>
<tr>
<td>4.</td>
<td>Vanglabhasma</td>
<td>To Be Taken</td>
<td>Chitraka</td>
</tr>
<tr>
<td>5.</td>
<td>Naga Bhasma</td>
<td>And Bhavana Is Done Three Times</td>
<td>Shigru</td>
</tr>
<tr>
<td>6.</td>
<td>Tamrabhasma</td>
<td>With Each Dravya.</td>
<td>Kushtha</td>
</tr>
<tr>
<td>7.</td>
<td>Abhrakabhasma</td>
<td></td>
<td>Amalki</td>
</tr>
<tr>
<td>8.</td>
<td>Tikshnalohbashasna</td>
<td></td>
<td>Kupilu</td>
</tr>
<tr>
<td>9.</td>
<td>Nagaram</td>
<td></td>
<td>Arka</td>
</tr>
<tr>
<td>10.</td>
<td>Marich</td>
<td></td>
<td>Guduchi</td>
</tr>
<tr>
<td>11.</td>
<td>Pippali</td>
<td></td>
<td>Ardraka</td>
</tr>
</tbody>
</table>

VISHNU TAILA (Swalpa):

Kalka Dravya: Shalaparni, Prushniparni, Bala, Shatavari, Erandamoola, Bruhatimoola, Vachamoola, Nagabalamaool, Sahacharamoola.

Sneha Dravya TilaTaila

Drava Dravya GoDugdha

Procedure VishnuTaila is prepared as per Classics.

DATA COLLECTION AND ANALYSING RESULT:

PROCEDURE:

Total 120 Patients will be selected randomly excluding drop outs these are divided into two equal groups A and B. Each group of 60 Patients.

Group-A- Ekangaveeraras Group –B –Vishnu Taila will be taken for study.

<table>
<thead>
<tr>
<th>Groups</th>
<th>Purvakarma</th>
<th>Pradhana Karma</th>
<th>Paschat Karma</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group-A</td>
<td>Snehana Swedana Mukha And Shiobhyanga Ekangaveeraras Is Given Orally With Ushna Jala 125 Mg Tid Is Given For 21 Days</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group-B</td>
<td>Sthanik Abhyanga With Vishnu Taila Followed By Bhashpaswedana</td>
<td>Nasyakarma Done 8 Drops Of Vishnu Taila</td>
<td>Gandusha With Ushnajala And Mukha Prakshalana</td>
</tr>
</tbody>
</table>

TOTAL STUDY DURATION - 21 DAYS.....FOLLOW UP.....14th, and 21st DAYS.

ASSESSMENTS OF STUDY TAKEN ON........................ 1st, 7th, 14th, 21st, DAYS.

1. ASSESSMENT OF RESULTS: Depending upon Subjective and Objective criteria Assessment will be done based on the response to the treatment.

<table>
<thead>
<tr>
<th>SL No.</th>
<th>SUBJECTIVE</th>
<th>OBJECTIVE</th>
<th>B.T</th>
<th>AT</th>
<th>F-1</th>
<th>F-2</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Mukhavakra</td>
<td>Whistling</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Vakasanga</td>
<td>Mouth inflation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Stabdanetrata</td>
<td>Wrinkles on forehead</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>4</td>
<td>Shrirashoola</td>
<td>Tongue Deviation and Protrusion</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Shrutihi</td>
<td>Unable to close the eye</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Lalatatavakra</td>
<td>Before and After treatments photo</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>
DISCUSSION

Arditavata is a disease occurred due to vitiation of Vata. The properties of ingredients of Ekangveeraras would be instrumental in restoring the Gati (Motor Activities) sand Gandhana (Sensation). Symptoms of aggravated Vata in Vatavahasrotas and Nadi such as Cheshtanasha (Loss of activities), Sandhishaitilya (Loosens of the joints), MukhaVakrata (Deviation of mouth), Vakagraha (Stammering of speech) and Sagnyahani (Loss of Sensation) would be subsided. Ekangveeraras is a Herb mineral medicine which is a constitute of Bhasmas as ingredients are the most superior form of medicine. Bhasma are the most ancient form of administration as the Nano medicine which has been mentioned for treatment of Arditavata. Nasya is line of treatment in Arditavata, which gives significant relief in signs and symptoms of Bell’s palsy. Also therapies like Nasya, Mukha-Shirobhyanga with Vishnu Taila pacifies the vitiated Vata in Shiras, and thus it provides nourishment to the sense organs. Nasya with Vishnu taila nourishes Shlesha Kaptha and stimulates the sensory nerve endings and provide strength to facial muscles. Swedana before Nasya enhances local micro circulation by dilation of blood vessels and increasing blood flow to the peripheral arterioles which accelerates the drug absorption and fast improvement, Nasya in which medicated oil is administered through the nostrils. The Nasya dravya medicine reaches to Shringataka Marma from where it spreads to various srotas and alleviates the vitiated Dosha. Nasya provides nourishment to the nervous system by neural diffusion and vascular pathway also provides strength to eyes and controls watering of eyes by stimulating of nerve endings. It pacifies pain in ear also improves the hearing quality, confers strength to voice, lower jaw and head by rejuvenating the body with elimination mental exhaustion with a control of vitiated doshas which are present in Shiras.

CONCLUSION

It can be concluded that the Ayurvedic pharmacodynamic properties of Ekangveeraras has an ability to pacify vitiated Vatadosha from Shiras due to its Madhurarasa, Snigdhaguna, Ushnaveerya, and Madhuravipaka. It pacifies vitiated Kapha Dosha by Tikta, Katu, Kashaya Rasa, Laghuguna, Rukshaguna, Ushnaveerya and Katuvipaka properties. And also the ingredients and Bhavana Drayvas of Ekangveeraras can be used effectively in the management of Arditavata. Nasya is suitable line of management in Arditavata chikitsa. Vishnutaila Nasya is a choice of treatment which expels vitiated Doshas from Shiras Hence a comparative clinical control study with Snehana, Swedana and Ekangaveeraras as shamanoushadhi i is done. And Nasya Karma with Vishnutaila is taken as a trial study in Arditavata w.s.r to Bell’s palsy.

REFERENCES


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